

10 steps to pre-visit planning that can produce big savings

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Inbox work, calls, letters and other communications and administrative tasks can be expensive for your practice. Learn how to save time and money by instituting pre-visit planning.



Pre-visit planning includes scheduling patients for future appointments at the conclusion of each visit, arranging for pre-visit lab testing, gathering the necessary information for upcoming visits and spending a few minutes to huddle and hand off patients.



Pre-visit planning can increase efficiency often saving 30 minutes of both physician and staff time per day. In a practice with 220 clinic days a year where a physician’s time costs about \$3 a minute and staff time costs about \$1 a minute—that’s about \$26,400 a year.

The AMA’s STEPS Forward collection shows you how to take steps to pre-visit planning. Visit the module to calculate what your practice could save.

Following are the 10 steps for successful pre-visit planning:

During the current visit

- **Set up the next appointment at the conclusion of each visit.** Schedule patients for their next visit and any other follow-up appointments at the end of each visit to save time, reduce the number of staff touch points and support follow-up adherence. The module includes answers to questions you may have about how to adopt this specific tactic in your practice.
- **Use a visit planner checklist to arrange the patient's next appointment.** The checklist allows a physician to indicate the interval until the next appointment and any associated labs required before the visit. It's quick and convenient to use, requiring only seconds of the physician's time. Get the sample visit planner checklist and more details in the module.
- **Arrange for lab tests to be completed before the next visit.** This way, the physician and patient can discuss results and management decisions at the visit. Your practice can take a few different approaches to this tactic. Learn more in the STEPS Forward module that focuses solely on pre-visit lab testing.

Before the next visit

- **Perform visit preparations.** These can be done by a nurse or medical assistant the day before or just prior to the appointment. Whoever is doing the preparations should review the physician's notes from the patient's last visit and ensure any notes from other physicians who delivered interval care are in the patient's record. They also should print copies of lab results, X-rays or other tests to share with the patient, or make these results available through a patient portal.
- **Use a visit prep checklist to identify gaps in care.** Another checklist in the module provides an overview of preventive and chronic care needs, such as testing for patients with diabetes. This helps the clinical team address any patient needs during upcoming visits. Get the sample visit prep checklist and more details in the module.
- **Send appointment reminders to patients.** Many practices send patients automated reminder letters, emails, phone calls or text messages to reduce no-show rates. If you don't have an automated option, practice staff can send reminders.
- **Consider a pre-visit phone call or email.** Nurses or medical assistants in some practices also make a pre-visit phone call to more complex patients, performing tasks such as medication reconciliation and agenda-setting on the phone and pre-populating the next day's visit notes with this information. Other practices email a link for the patient to complete a pre-appointment questionnaire—the patient's responses flow into the next day's visit note. Get a

sample pre-appointment questionnaire in the module.

During the next visit

- **Hold a pre-clinic care team huddle.** A five- to 15-minute pre-clinic huddle brings the team together to review and share knowledge about the day ahead. In addition to alerting the team to last-minute changes or special patient needs, the care team can use this time to determine how to best share the day's work. This also is when the person who completed the patient's visit prep can tell the physician what to expect. Learn more by using a specific STEPS Forward module that focuses on team-building.
- **Use a pre-appointment questionnaire.** If the patient didn't fill out an electronic questionnaire as outlined in Step 7, give them one to fill out on paper at check-in. This allows the team to quickly see what is most important to the patient and include questions that typically would be asked during rooming, such as depression screens, pain assessment or smoking status. Shifting these questions to the questionnaire gives the nurses and medical assistants much of the information they would otherwise need to obtain during the visit, freeing up more time to actively engage with the patient.
- **Hand off patients to the physician.** The nurse or medical assistant will often learn important information about the patient during the rooming process. A brief, one-minute handoff to the physician can save 10 minutes in the exam room by helping the physician focus the appointment to best meet the patient's needs and expectations. Get answers to questions you may have about the handoff process in the module.

Read real-world stories in the module from physicians who implemented these improvements in their practices and saw big results. You also can find information about how to get support for intervention implementation. The module offers continuing medical education credit.