



## Outreach Workflow

### CP3 Toolkit: Planned Care

The following is adapted from a Clinical Family Health presentation on September 21, 2017. The image below is excerpted from a larger discussion of population management. It's an example of how registries that support outreach to patients must be specific in order to be actionable. In addition to the technical components of configuring the registry, it is important to develop criteria that specify the following: who will do the work, when the work will be completed, and how to take action. View the [entire slide presentation](#).

### Action Steps for Population Management

OutReach Registry Workflow	
Aim: To provide quality evidence-based preventive and chronic care to all of our patients with a chronic condition through team based care.	
Aim: To maintain a comprehensive and accurate registry of our patients with a chronic condition in order to perform appropriate and timely care.	
	Action
Operations	For Front Desk Staff: at a minimum monthly, operations management will open the OutReach Registry and run report (by FD role and sorted by dated reviewed) to determine if staff have attempted contact with patients in last 30 days. Additionally, appropriate measures should be reviewed monthly to determine if outreach is occurring (i.e. DM outcome measures). For Case Managers and Behavioral Health Professionals: at a minimum monthly, operations management will review appropriate measures to determine if patients are receiving outreach (i.e. Depression outcome measures, self-management goals).
Front Desk	Actions: At least weekly, run OutReach Registry by Front Desk role. Review patients on OutReach Registry and contact for appointments regarding indicated alerts. Prior to calling patient, determine if patient has an appointment. If patient already has an appointment, do not contact patient, just indicate in "Reason for Appt" that patient has Chronic Disease, Preventive Care, and/or OB alert(s) due. If patient needs information about prep for visit (e.g. fasting for lipids) contact patient and notify them that when they come in for their next appointment they should plan to prep for the specific alert indicated. Document all contact attempts and letters sent in the comments section of the OutReach Registry (make sure to add your initials) and the telephone communication template in NextGen. Send a task to PCP and CM regarding any concerning patients (e.g. patients refusing to come into clinic). Note: Follow MOGE Procedure - Make two attempts over two different days (should be different times of the day) to contact patient. Send a letter if unable to reach patient after two call attempts.
Case Manager	Actions: At least every two week, run the OutReach Registry by Case Manager role. Review patients on OutReach Registry and contact for appointments regarding indicated alerts. Prior to calling patient, determine if patient has an appointment. If patient already has an appointment, determine whether phone contact is necessary to address indicated care or if it can occur during next visit. If you need to see the patient at their next visit, indicate "See CM" in reason for appt. Document all contact attempts and letters sent in the comments section of the OutReach Registry (make sure to add your initials) and the telephone communication template in NextGen. Send a task to PCP regarding any concerning patients (e.g. patients refusing to come into clinic). Note: Follow MOGE Procedure - Make two attempts over two different days (should be different times of the day) to contact patient. Send a letter if unable to reach patient after two call attempts.
BHP	Actions: At least every two week, run the OutReach Registry by BHP role. Review patients on OutReach Registry and contact for appointments regarding indicated alerts. Prior to calling patient, determine if patient has an appointment. If patient already has an appointment, determine whether phone contact is necessary to address indicated care or if it can occur during next visit. If you need to see the patient at their next visit, indicate "See BHP" in reason for appt. Document all contact attempts and letters sent in the comments section of the OutReach Registry (make sure to add your initials) and the telephone communication template in NextGen. Send a task to PCP regarding any concerning patients (e.g. patients refusing to come into clinic). Note: Follow MOGE Procedure - Make two attempts over two different days (should be different times of the day) to contact patient. Send a letter if unable to reach patient after two call attempts.
Provider	Provider will no longer receive a paper copy of their chronic disease registries. Provider will receive communication via tasks from FD, CM or BHP regarding any concerning patients. If Provider would like to review any of their chronic disease registries, they may run the OutReach Registry by PCP and/or Population of Focus.

1438 Webster St., Suite 101  
Oakland, CA 94612

[www.careinnovations.org](http://www.careinnovations.org)