

Practice Progress Notes Template

Practice Contact Information

Practice ID:

Practice Name:

Date of Contact:

Support Type:

Support Provider:

Support Type Options

- Admin/paperwork
- Practice observation
- Academic detailing
- Quality feedback
- Benchmarking
- Practice facilitation
- Learning/information
- Information technology/tech support
- Resource sharing
- Peer-to-peer support

Goals & Targets

Fill out what goals you are working on, what the target is for those goals, the date the goal was set, and notes on the goal.

Example

Goals	Target	Date	Notes
Aspirin	85%	8/1/18	Easy to fix with med management
Blood Pressure	85%	8/1/18	Complex intervention; need more patient education
Emergency Department (ED) Use	10%	8/1/18	Very complicated – hard
Joy in Practice	100%	8/1/18	Focus mainly on teamwork in the practice

Goals	Target	Date	Notes

Instructions for Encounter Notes

Fill out the blue highlighted boxes on the first table by copying and pasting your choices from the second table. Fill out the third table immediately after the encounter, with the exception of the time spent in follow-up. Fill that out just before the next encounter.

Plans & Outcomes for Encounter 1

Plan:		Support Provided:
Quality Improvement (QI) Stage:		
Practice Response:		

Plan	QI Stage	Practice Response	Support Provided
<input type="checkbox"/> Aspirin <input type="checkbox"/> Statin <input type="checkbox"/> Blood pressure <input type="checkbox"/> Smoking <input type="checkbox"/> ED use <input type="checkbox"/> Hospital use	<input type="checkbox"/> Define <input type="checkbox"/> Measure <input type="checkbox"/> Analyze <input type="checkbox"/> Improve Plan-Do- Study-Act <input type="checkbox"/> Control	<input type="checkbox"/> Very responsive <input type="checkbox"/> Responsive <input type="checkbox"/> Minimally unresponsive <input type="checkbox"/> Very unresponsive <input type="checkbox"/> Unknown	<input type="checkbox"/> Build awareness <input type="checkbox"/> Communicate evidence <input type="checkbox"/> Chart review <input type="checkbox"/> Patient survey <input type="checkbox"/> Brainstorm ideas <input type="checkbox"/> Fishbone root cause analysis <input type="checkbox"/> Electronic health record (EHR) template <input type="checkbox"/> Registry <input type="checkbox"/> Train staff <input type="checkbox"/> Standardize process

Contact notes:				
Encounter objectives accomplished?			Objectives for next encounter:	
Interval objectives accomplished?				
Prep time	Travel time	Primary care provider face time	Total time	Follow-up time
H:MM	H:MM	H:MM	H:MM	H:MM

Plans & Outcomes for Encounter 2

Plan:		Support Provided:
Quality Improvement (QI) Stage:		
Practice Response:		

Support Provided		
<input type="checkbox"/> Build awareness <input type="checkbox"/> Communicate <input type="checkbox"/> Contextualize evidence <input type="checkbox"/> County health report <input type="checkbox"/> Educate staff <input type="checkbox"/> Identify guidelines <input type="checkbox"/> Review report <input type="checkbox"/> ABCS report <input type="checkbox"/> Chart review <input type="checkbox"/> Data collection form <input type="checkbox"/> Focus group	<input type="checkbox"/> Patient survey <input type="checkbox"/> Public survey <input type="checkbox"/> Process flowchart <input type="checkbox"/> QI dashboard <input type="checkbox"/> Staff survey <input type="checkbox"/> Observation <input type="checkbox"/> Value stream map <input type="checkbox"/> Analyze QI data <input type="checkbox"/> Analyze root cause <input type="checkbox"/> Brainstorm ideas <input type="checkbox"/> Fishbone root cause analysis	<input type="checkbox"/> Graph measures <input type="checkbox"/> Prioritize ideas <input type="checkbox"/> Provide feedback <input type="checkbox"/> Review QI reports <input type="checkbox"/> Use tableau <input type="checkbox"/> Assessment template <input type="checkbox"/> Care coordination plan <input type="checkbox"/> Celebrate success <input type="checkbox"/> Chief Health Informatics Officer participation <input type="checkbox"/> Clinician protocols <input type="checkbox"/> Community programs

Contact notes:				
Encounter objectives accomplished?			Objectives for next encounter:	
Interval objectives accomplished?				
Prep time	Travel time	Primary care provider face time	Total time	Follow-up time
H:MM	H:MM	H:MM	H:MM	H:MM

Plans & Outcomes for Encounter 3

Plan:		Support Provided:
Quality Improvement (QI) Stage:		
Practice Response:		

Support Provided		
<input type="checkbox"/> Community referral <input type="checkbox"/> Decision algorithm <input type="checkbox"/> Document & code <input type="checkbox"/> EHR prompt/reminder <input type="checkbox"/> EHR template <input type="checkbox"/> Home monitoring log <input type="checkbox"/> Link to service <input type="checkbox"/> Medication management <input type="checkbox"/> Motivational interviewing training <input type="checkbox"/> Patient action plan <input type="checkbox"/> Patient education	<input type="checkbox"/> Patient portal <input type="checkbox"/> Public outreach <input type="checkbox"/> Registry <input type="checkbox"/> Risk stratification <input type="checkbox"/> Risk assessment tool <input type="checkbox"/> Reflex lab orders <input type="checkbox"/> Screening vital sign <input type="checkbox"/> Staff protocols <input type="checkbox"/> Standing orders <input type="checkbox"/> Team huddles <input type="checkbox"/> TOC notification	<input type="checkbox"/> Tracking flowsheet <input type="checkbox"/> Workflow change <input type="checkbox"/> Define policies <input type="checkbox"/> Define roles/response <input type="checkbox"/> Measure adherence <input type="checkbox"/> Reward adherence <input type="checkbox"/> Standard process <input type="checkbox"/> Train clinician <input type="checkbox"/> Train staff

Contact notes:				
Encounter objectives accomplished?			Objectives for next encounter:	
Interval objectives accomplished?				
Prep time	Travel time	Primary care provider face time	Total time	Follow-up time
H:MM	H:MM	H:MM	H:MM	H:MM