Clinical Data Collection

Clinical data should be collected separately for each service/division/site.

Utilization Rates

Utilization of the Schedule

Defined Capacity is Number of Appointment Slots in 1 week:

(# appointment slots per provider per session) x (# provider sessions)

Number of Encounters in 1 week

(appointments made) - (no shows) + walk-ins/same day)

Divide the Encounters by the Defined Capacity = ***Schedule Based Utilization Rate***

Utilization of the Facility

Number of minutes an exam room is available per week:

(60) x (hours per week the site/service is open) x (total number of exam rooms)

Determine your average Room Turn Around Time:

Time between Patient A exiting a room to Patient B exiting the same room

Defined Capacity:

(# Minutes Room is Available)/ (Room Turn Around Time)

Divide the Encounters by the Defined Capacity = ***Facility Based Utilization Rate***

Utilization of the Provider Staff

Determine the optimal number of providers accommodated at any given time: If this is unclear, ask front line staff "Which day works best for staff and for patients?"

The percentage of hours the site is open that the optimal number of providers are scheduled to "see patients" = ***Provider Utilization Rate***

Referral Patterns

1. Rates for referrals made and referrals completed by specialty/service/age/demographic

2. Financial Risk/Commitment of the Organization related to referrals

3. Referral graphic organized by number of referrals and distance from referring site to referral site. To be organized in concentric circles of applicable distances.

Staffing Patterns

1. Provider to Clinical Support Staff Ratios (actual and preferred)

2. Provider to Enabling/Enhanced Services Staff Ratios (actual and preferred)

3. Provider Activity (average encounters per session or day)

Program and Operational Model Definition

Answers may vary depending on the site or service type.

1. Who is your "Community" in Community Health Center?

2. What are the possible points of entry to your center? How can one become a patient?

3. How do your patients define their care when talking with friends and family?

4. How would you describe your daily flow patterns?

5. Which best describes your services?   All for Some   Some for All   All for Some and Some for All

6. How does your health center define the Patient Care Team? Multiple disciplines or multiple skill levels? Virtually United or Physically Collocated?

Current Program Evaluation Exercise

List each program or service the health center provides. Be specific! For each, answer the following four questions:

1. Why did we start this?

2. Is Our Reason Still Relevant?

3. How effective are we being?

4. Can the cost be supported?