



Background

In 2019, the Gynecologic Oncology Patient Experience Committee identified a negative trend in patient responses from the Press Ganey surveys. The patients' appointment schedule did not accurately reflect the provider who would conduct the visit. All patients were scheduled on the primary faculty's template, even if their visit was conducted independently by an Advanced Practice Provider (APP). Additionally, the Press Ganey survey results were inaccurately routed to the primary faculty, as opposed to the APP who conducted the visit. As a result, an Independent APP Practice workgroup was formed to improve patient experience and support APP Independent Practice.

Project Goals

- To optimize existing template scheduling processes.
- To increase the patient awareness regarding which provider they will see during their clinic appointments.
- To improve the accuracy of Press Ganey comment routing.

Project Scope

The Independent APP Practice workgroup is a multidisciplinary team that includes representation from nursing, informatics, scheduling (PSCs), APPs, faculty, patient access, and Gynecologic Oncology Center leadership. The workgroup identified the project aim, potential barriers, developed a process workflow map, education and communication plan, and determined outcome measurement.

The overall goal was to develop a sustainable process that can be carried out across all provider clinic templates. The project was piloted in 3 faculty clinics within the Gyn Center from October 1, 2021 to January 28, 2022.

Inclusion Criteria: Patients presenting for routine surveillance and/or standard of care chemotherapy/biotherapy/hormonal therapy treatment clearance.

Exclusion Criteria: Patients presenting for visits that require presence of the faculty, including new patients, consults, treatment planning/concern for recurrence, research protocol therapy, and patient request.

Process

Optimize the scheduling process

- Creation of a new *APP Follow Up* visit type for in-person surveillance and chemotherapy clearance visits.
- The existing *Follow Up* visit type was designated for MD Follow Up visits.
- No change to current telemedicine Follow-Up ordering/scheduling process.
- PSCs can easily identify patients who are eligible for an APP Follow Up visit when a faculty is unexpectedly out.

Increase patient awareness

- The Patient Appointment Letter and MyChart schedule will accurately reflect the provider who will conduct the visit.
- Increase utilization of current patient education materials: Chemotherapy Clearance Appointments and Follow-Up visits
- Waiting Room TV monitors were set to educate patients on the APP Independent Practice initiative.

Measures

Outcome Measure: Evaluate qualitative data received from Press Ganey survey patient comments

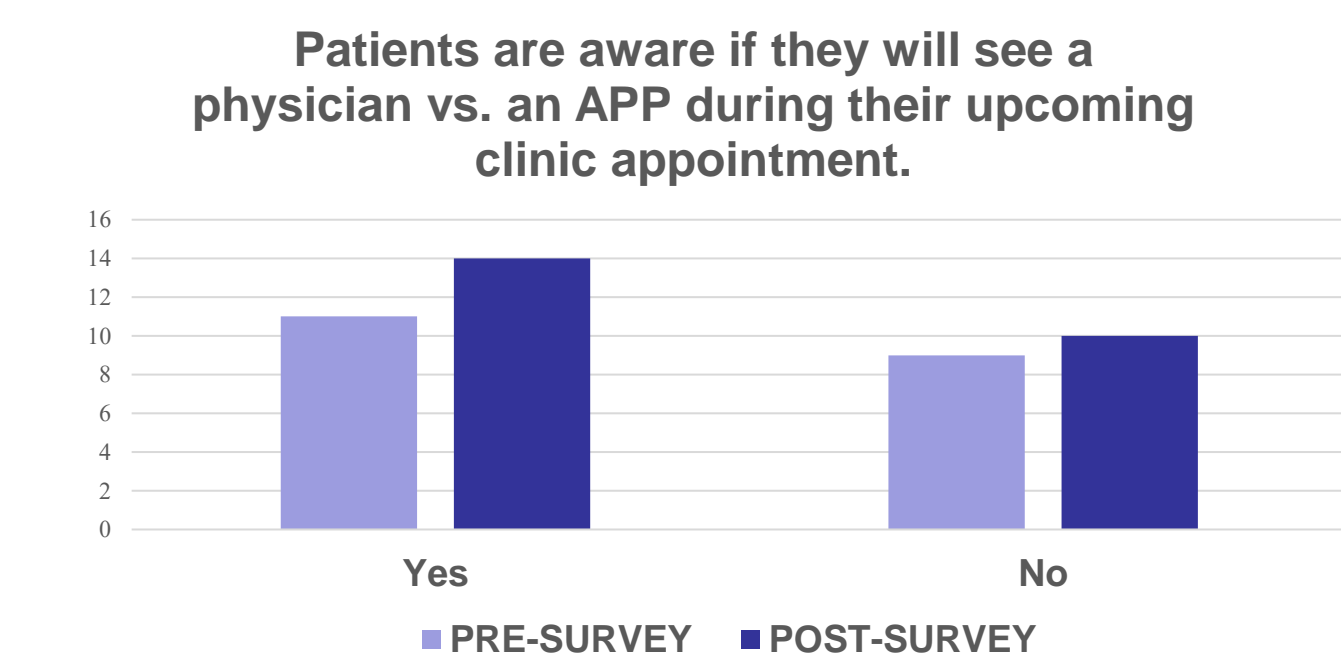
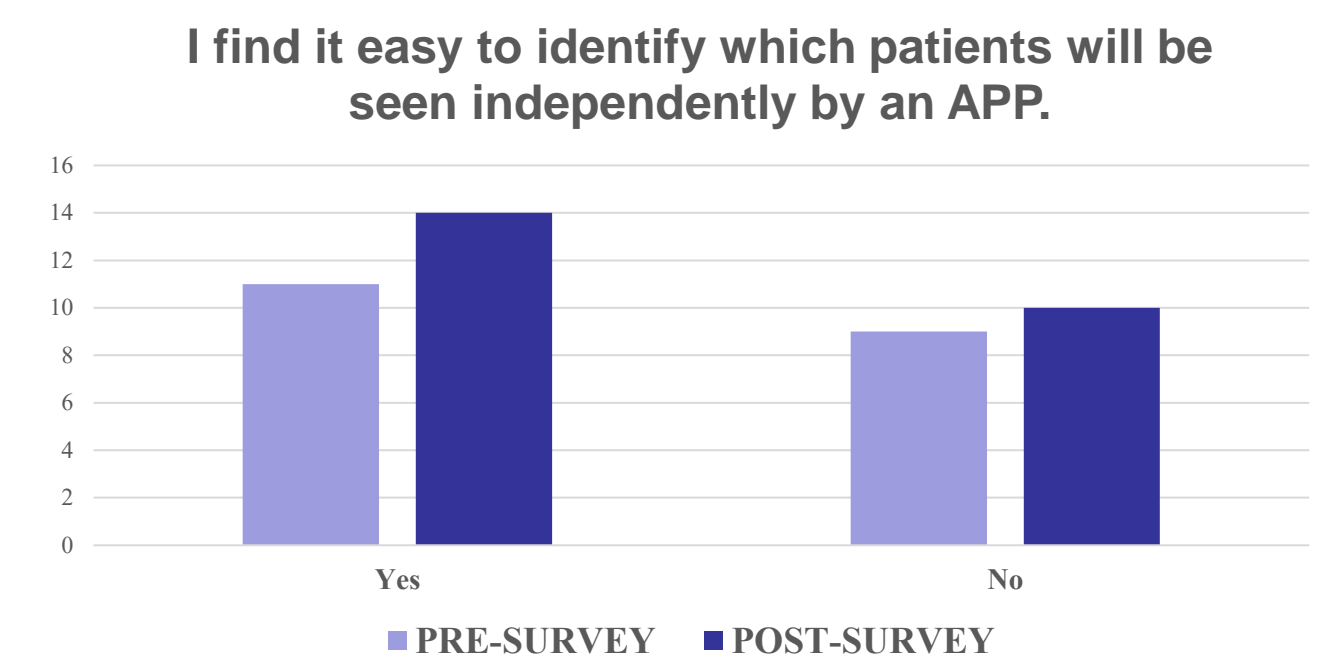
Qualtrics Survey: Pre- and Post- Surveys to assess Gyn Center Staff knowledge and evaluate project success post implementation

Qualtrics Pre/Post Survey
What is your role? Select (MD/APP, RN/MA, PSC)
I find it easy to identify which patients will be seen independently by an APP. (ALL) <input type="checkbox"/> Yes <input type="checkbox"/> No
Patients are aware if they will see a physician vs. an APP during their upcoming clinic appointment. (ALL) <input type="checkbox"/> Yes <input type="checkbox"/> No
My team encourages patients to be seen independently by an APP. (ALL) <input type="checkbox"/> Yes <input type="checkbox"/> No
My clinical team has a good process to identify which patients can be seen by an APP independently. (ALL) <input type="checkbox"/> Yes <input type="checkbox"/> No
Patients are consistently provided a copy of the Gynecologic Oncology Center Follow Up Visit patient education documents. (RN/MA/APP) <input type="checkbox"/> Yes <input type="checkbox"/> No
I feel the APP Independent Template Practice should CONTINUE doing the following: (i.e. What is working well?) (ALL – post survey)
Free Text:

Results

There were 47 pre-survey participants and 39 post-survey participants. Faculty, RN/MAs, PSC, and APPs were equally represented.

Post-survey results indicated a favorable response in the staff's ability to identify which patients would be seen independently by the APP. The Gyn Center staff reported increased patient awareness of which provider they would be seeing based on their MyChart schedule.



Qualitative Data from Press Ganey Survey
 Patient comments were accurately routed to the APP who conducted the visit. Examples:

“(APP) was absolutely wonderful! She addressed all of my questions and was very sensitive to my concerns and fears.”

“My team is wonderful. (APP) is very patient and makes sure to let me talk and answer all my questions.”

“(APP) is very thorough and caring in her patient approach. She is an asset to any team.”

“(APP) was the person who I discussed the most during my visit. She was listening, reassuring and explaining in simple terms the treatment path that the care team would take that same day. She was efficient, human and even funny. She is an exceptional asset to Dr. M's care team.”

Discussions/Conclusions

The pilot was successful in meeting project aims and has been implemented as standard across all oncology clinics in the Gyn Center. The workgroup is now expanding to implement APP Independent Practice in the Benign gynecology clinics as well as incorporate recommendations from the Care Team Transformation Initiative.