The purpose of this tool is to help you define your goals for quality improvement and to help you target which features of the EHR will be critical to your quality improvement efforts. If you can define your goals, you can define your needs. If you can define your needs, you can select an EHR system that will meet your needs.

**Getting Started:** Start with a workflow analysis and identify the bottlenecks and inefficiencies that exist today. Decide which bottlenecks and inefficiencies you want to improve and assign them a priority. It doesn't matter so much where you start—as long as you start somewhere.

In setting priorities, you may want to consider the following:
- In what areas is our performance far from ideal?
- What improvements do we think our patients will notice most?
- Where do we think we can be successful in making change?
- What groups of clinicians and staff should we involve in each item, and what is their readiness for change?

**Goal Definition:** Set clear, measurable goals for what can be done to improve the existing conditions. You may want to state some of your goals in a patient focused manner—such as decreasing the time patients wait for prescription refills or increasing the number of patients who receive preventative health reminders. Tell your patients about these goals. Let them know that you are trying to make their experience in your office better.

Have some fun with goal setting. Involve everyone in the office by asking for creative suggestions on ways to eliminate inefficiency.

**Action Plan:** For each goal, define a plan of action for achieving the goal. What specific steps do you need to take to reach your goal?

**Measuring Success:** Determine how you will measure the success of your action plan. Keep it simple! Don’t get hung up on statistics, sample size and complicating factors.

Incorporate your baseline measurements from the workflow analysis. You’ll need something to compare your quality improvement efforts to.

If you don’t meet your measurement for success the first time, re-evaluate, and try again. Quality improvement is a never-ending task.
### Examples:

<table>
<thead>
<tr>
<th>Goal</th>
<th>Action Plan</th>
<th>Measure of Success</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decrease the number of pharmacy phone calls regarding</td>
<td>Use the e-prescribing feature in the EHR to eliminate paper and handwritten prescriptions. Utilize the drug interaction checking feature of the EHR to guard against drug interactions.</td>
<td>In two months, have an 85% reduction in pharmacy phone calls.</td>
</tr>
<tr>
<td>prescriptions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decrease transcription turnaround time and reduce</td>
<td>Use clinical charting within the EHR to eliminate the need for transcription services.</td>
<td>Within two months of EHR live, reduce the cost of transcription by 80%.</td>
</tr>
<tr>
<td>transcription cost.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improve the quality of patient care for CAD patients.</td>
<td>Use the EHR’s health maintenance tracking to monitor antiplatelet therapy.</td>
<td>95% of patients with CAD have been prescribed antiplatelet therapy.</td>
</tr>
<tr>
<td>Decrease waiting room time for patients.</td>
<td>Encourage patients to use the PC’s in the waiting room to update their demographics and insurance information.</td>
<td>Within one month, 75% of patients wait no longer than 10 minutes in the waiting room.</td>
</tr>
</tbody>
</table>

### More sample goals to consider:
- Improve patient access to the physician
- Decrease the number of times the physician leaves the exam room during a visit
- Increase the quantity/quality of patient education materials given to the patient
- Decrease the number of calls to the lab for results/follow up
- Increase the number of patients who receive reminders for age/sex appropriate preventative health measures.
- Increase the number of patients who actually receive preventative health exams/procedures

### References: