## Share the Care: Assessment of Team Roles and Task Distribution



This is an example of a planning tool, to assess who is currently doing what tasks in your practice and then who should be doing each task, based on how we learned that LEAP sites define clear roles and responsibilities. There is no "right answer"; task distribution will vary from practice to practice, based on contextual and internal factors. The tool is in the discussion about roles that this worksheet can stimulate. Your practice may be able to redistribute the tasks in a way that better fits your workforce and patients.

## Instructions:

- 1. Modify the worksheet so that the columns reflect all care team roles and the rows contain the most important tasks in your practice. (Note: we use the term "lay person" to mean someone without medical background, so this may include lay caregivers such as Community Health Workers or administrative staff members such as Front Desk staff).
- 2. Gather a group of staff members who are engaged in redesigning care roles, representing all the roles on the care team.
- 3. Assess your practice at the current time, for each task. The tasks are organized by categories, such as "communications with patients, outside of the patient office visit." Check boxes to indicate "Who does it now?"
- 4. Next, use the worksheet to think about "Who Should Do It?" Discuss which roles are capable of doing each task and how well the work is distributed across roles. Use a different color to check boxes where you think that tasks can be redistributed for improvements to everyone's workload.

	MA	RN	Lay	PharmD	ВН	No	Other	
			person		specialist	one		
Communication with patients, outside of patient office visit								
Answer phones, triage calls								
Help manage/triage provider electronic inbox								
Serve as primary point of contact for patients								
Conduct patient outreach for outstanding labs, etc.								
Follow-up by phone or email after visits to make sure that patient								
understood instructions								
Follow-up with patients after hospital discharge								
Follow-up with patients after Emergency Department visit								
Respond to patient calls requiring clinical assessment and decision-making								
Community-based efforts to connect new patients to the practice								
Notify patients about normal lab results								
Notify patients about abnormal lab results								

Preparation for patient visits and proactive population management			
Pre-visit planning/chart scrubbing			
Conduct patient outreach for outstanding labs, etc.			
Independent visit to prepare patients for a provider visit			
Participate in care team huddles to review the plan for the day			
Participate in regular meetings to review outcomes for patients who have			
not yet reached chronic disease-related clinical goals			
Participate in regular meetings to review outcomes for patients who have			
not yet reached chronic mental health-related clinical goals			
Patient visit tasks			
Perform injections			
Reconcile medications			
Scribe for providers			
EKGs			
Spirometry			
Assist with basic procedures			
Conduct well visits (with provider oversight)			
Conduct preventive care visits (with provider oversight)			
Patient education, coaching, and care management			
Perform "teach-back" with patient at end of visit			
Orient new patients to the practice			
Develop care plans with patient			
Help address barriers to patient goals			
Health coaching and motivational interviewing			
Patient health education			
Conduct group visits			
Conduct home visits			
Complex care management			
Medication titration, by protocol			
Run patient support groups			
Meet with patients about concerns or resistance with taking medications			
Conduct thorough medication reviews with patients			
Provide self-management support to patients			
Screen patients for depression and other chronic mental health disorders			

Screen patients for substance use disorders							
Administrative and Quality Improvement							
Participate in quality improvement and practice improvement activities							
Lead quality and practice improvement activities							
Coordinate/track outgoing referrals							
Close the loop on referrals (consult notes from the specialist have been							
received and added to our EHR)							
Administrative tasks around medication refills, labs, imaging							
Pre-authorizations							
Check patients in							
Check patients out							
Generate exception reports or registries in order to conduct population							
management/outreach							
Generate team-level QI reports							
Supervise and support MAs							
Lead the care team							
Other services	<u> </u>						
Run specialized care services, such as programs for obstetric patients or							
Coumadin patients							
Connect patients to resources in the community							
Help patients navigate the health care system							
Consult providers and clinical staff on medication use and dosing							
Provide brief or short-term counseling for patients coping with an episodic							
behavioral health concern							
Consult with providers on evidence-based treatment for depression,							
anxiety, or bi-polar disorders							
Other tasks:							
Other tasks:							
Other tasks:		1					
Other tasks:							
Other tasks:							