Gather information on the current workflow. Observe providers and staff involved in collecting, documenting, and assessing family history information. During the observation process, ask the following questions:

• Where are potential problems or delays likely to occur in the current process?
• Where in the process are opportunities to achieve more benefits from family history collection?
• Where could patient handouts or resources help the process?

Organize the information into the basic processes of: (a) collection, (b) documentation, and (c) risk assessment.

Summarize the sequence of tasks in a workflow diagram. A workflow is the set of sequenced tasks used to reach a specific goal, such as identifying patients at increased risk of disease based on family history. The workflow may include factors that affect the completion of the task, such as the staff involved, materials and equipment needed, methods used, and physical environment (e.g., the layout of the site where the process occurs). See the example workflows Patient Collection (Figure 3) and Nurse Collection (Figure 4) as a starting point for how you might develop your practice’s family history workflow, with more or less detail as needed.

As you assess your workflow, consider possible improvements to processes, needs for staff training and streamlining of tasks, and points where using a family history tool may help.

PARTICIPANTS
Implementation lead, staff involved in family history processes

BARRIERS
Competing priorities, time, infrastructure

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AHRQ Workflow Assessment for Health IT Toolkit

ASSESSING YOUR EXISTING WORKFLOW

Review and describe your existing workflow to identify potential improvements.

Understanding your current workflow will enable you to examine what is happening in your office, diagnose any workflow problems from the perspectives of those involved or impacted, and develop an updated process that will work successfully with available staff, space, and resources. In general, there are three main processes involved in assessing a family history: (a) collection and updating over time, (b) documentation, and (c) risk assessment. Practices are likely to have different workflows for family history processes, with specific people carrying out tasks, such as eliciting the family history, transcribing the data in the medical record, and analyzing the data for risk assessment. Regardless of the specific system established at your clinic, your workflow should address the three processes above.

Steps

1. Gather information on the current workflow. Observe providers and staff involved in collecting, documenting, and assessing family history information. During the observation process, ask the following questions:
   • Where are potential problems or delays likely to occur in the current process?
   • Where in the process are opportunities to achieve more benefits from family history collection?
   • Where could patient handouts or resources help the process?

2. Organize the information into the basic processes of: (a) collection, (b) documentation, and (c) risk assessment.

3. Summarize the sequence of tasks in a workflow diagram. A workflow is the set of sequenced tasks used to reach a specific goal, such as identifying patients at increased risk of disease based on family history. The workflow may include factors that affect the completion of the task, such as the staff involved, materials and equipment needed, methods used, and physical environment (e.g., the layout of the site where the process occurs). See the example workflows Patient Collection (Figure 3) and Nurse Collection (Figure 4) as a starting point for how you might develop your practice’s family history workflow, with more or less detail as needed.

4. You may learn you have multiple workflows depending on the visit type, such as annual preventative health vs. sick visit, or other variables, new patient vs. established patient. Sketch out workflows for each of the different ways family history is collected in your practice.