# Brief Review Checklist for Practice Stories

This checklist is intended to guide the development of practice stories. Exemplar practice stories have a higher bar, but all practices should learn how to take their work and articulate the value they add. The faculty will use this checklist to review practice stories and suggest opportunities for improvement.

We will continue to update these tools as we receive further guidance from our national partners and learn from our experience.

# Brief Checklist for Practice Stories

**Practice Name: PF: Date Reviewed:**

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| **Criteria****(order as desired)** | **Description** | **Comments** |
| Summary statement | Pulls the highlights into one “wow” statement about performance and results (recommended) | Include what is exemplary. Improving in and of itself is insufficientto be exemplary! |
| Practice name, description and services offered | Practice name, location(s), # clinicians, # patients seen annually. Summary of the scope, depth or breadth of services. | As an example: Include total procedures annually even if the work involved a subset of procedures to provide a context of theimpact at the practice level. |
| Patient characteristics of note | Complexity, payer mix, patient segment if applicable to help the reader understand the data | If the work impacted a segment of the overall population, fully describe that segment. Include the number of patients andsegmentation criteria. |
| Results: quality metrics\* | Compare to benchmarks when available. If no benchmarks, include improvement to date and a “bold” aim. Include number of patients impacted. These should be actual data, not just descriptors. Considersummarizing in a table. | If the performance is not benchmark, include what additional work you will do to get there including a time bound aim. |
| Results: cost and utilization\* | Include number of patients impacted. Consider summarizing in a table. Theseshould be actual data, not just descriptors. | Describe the segment of the population impactedby cost and utilization. |

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| Results: PFE\* | Include how patients are engaged andhow it has impacted the practice. Include data if possible. | Are they engaged crossthe whole practice or just a segment? |
| High level, high leverage changes | What were core changes that transformed the practice and achieved the results they have | What does the practice think made a difference? |
| Systems to sustain and spread | What systems are in place to sustain the changes? | If you segmented the population, what are you doing to spread or design interventions to achieve results across the rest ofthe population? |
| Supporting graphics | Emphasize impact or improve understanding. Compare to benchmark as appropriate | Share results and impact, not just improvement. |
| Readability | The story reads well. |
| Comprehensiveness | Strengths articulated are supported by data for exemplar practices ordata gathering in progress for practice stories. |
| General Comments | Anything suggestions that might add to the story’s readability orimpact. |

\* All required for Exemplar Practice stories. Other practice stories should include all available but not required.