

## INTRODUCTION

- The ECU Family Medicine Outpatient Clinic sees over 7000 patients monthly, and the Gold Module sees 1000 of those patients among 17 providers.
- Nearly 60% of physicians felt that their work environment had inefficient processes, contributing to dissatisfaction and increased burnout rates. (1)
- Current clinic workflow requires providers to verbally communicate labs, orders, and patient updates to their medical assistant. If the medical assistant is in the room, they must wait for them, ultimately delaying them from seeing their next patient.
- Door flag systems can contribute to more efficient clinic operations, improved communication, and enhanced provider and patient satisfaction.
- A door flag system notifies clinical staff that something needs to be done without requiring the verbal communication between provider and medical assistant.
- Clinics using door flag systems improved their room turnover efficiency by 25%, helping providers move between patients faster and reducing bottlenecks in clinic schedules. (2)
- Clinics with door flags saw a 30% reduction in communication-related errors, such as missed patient information or confusion about patient readiness for exams. (3)
- The purpose of this study is to evaluate the effects of a door flag system in Gold Module ECU Family Medicine Outpatient clinic on communication and workflow processes, and workplace satisfaction.

## METHODOLOGY

- A six question pre-survey was sent out to providers and medical staff on Gold Module regarding their satisfaction in workplace flow and efficiency. module as a survey to assess workflow prior to implementing the flag system.
- Education was given for providers and staff in Gold Module regarding the door flag system, appropriate use of flags, and the door lamination system regarding ordering specific tests and labs, patient rooming status, and other alerts.
- A one month door flag pilot study was conducted in August 2024 where providers were encouraged to utilize the door flags.
- After 1 pilot month, providers and staff completed an 8 question post-survey to determine if they feel workplace flow improved with the implementation of the door flag system.

**Gold Pilot Flag Workflow Color Chart**

Gray	Integrated Team (Behavioral Health, Nutrition, Health Coach, Pharmacy, etc)
Yellow	FYI (caution – communicate before visit)
Green	Patient is ready to leave
Orange	N/A
Blue	N/A
Red	Provider Assistance Needed

Green: Can be used with other flags. Ex: Use of gray flag for BH with green to let clinical staff know that patient can leave after BH has completed the visit

Red: Use laminated form to check off what provider needs if clinical staff not readily available for communication

Yellow: someone needs to give a heads up about something prior to entering room.

## REFERENCES

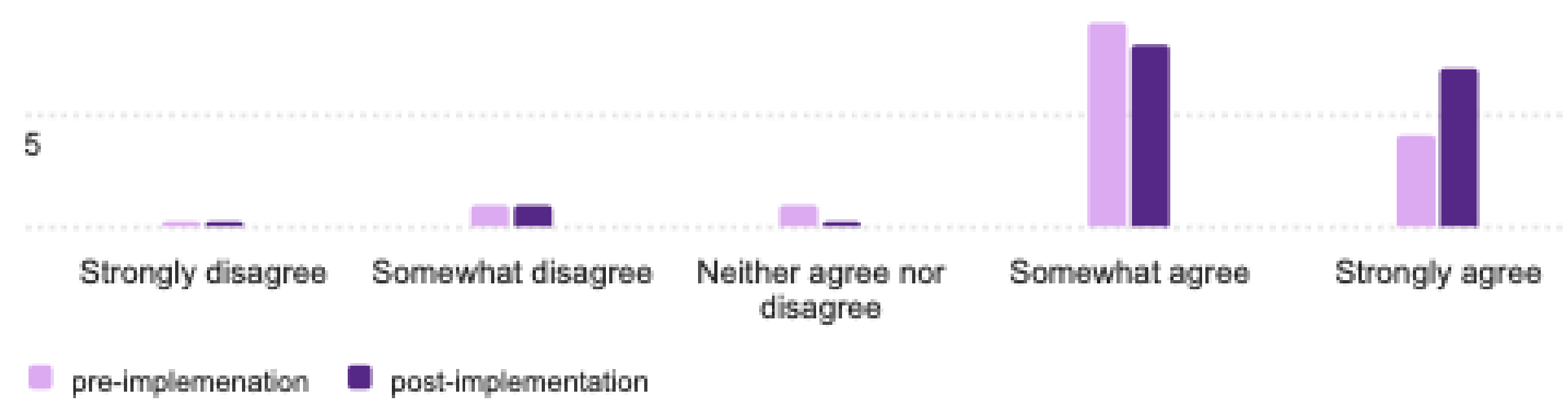
1. American Medical Association. (2019). Physician Satisfaction and Workflow Efficiency Survey. Retrieved from [AMA website](#).
2. BMJ Open Quality. (2020). Improving room turnover efficiency in outpatient clinics with door flag systems. BMJ Open Quality.
3. Family Practice Management. (2018). Reducing communication errors in clinic settings using door flag systems. Family Practice Management.

## RESULTS

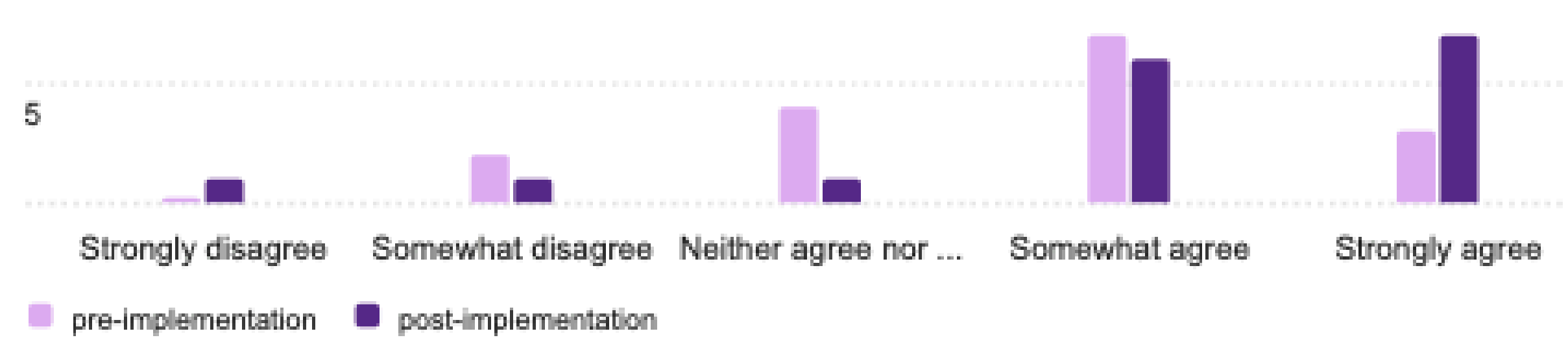
There were 16 responses for the pre-implementation and 16 responses for the post-implementation survey. Following the implementation of the flag system, physicians and staff reported:

- Increase in satisfaction with the overall workflow of the Gold Module clinic.
- Increase in the perception that the current patient rooming system in Gold Module is effective and efficient.
- Increase in the perception that communication between providers and clinic staff is effective and efficient in the Gold Module.

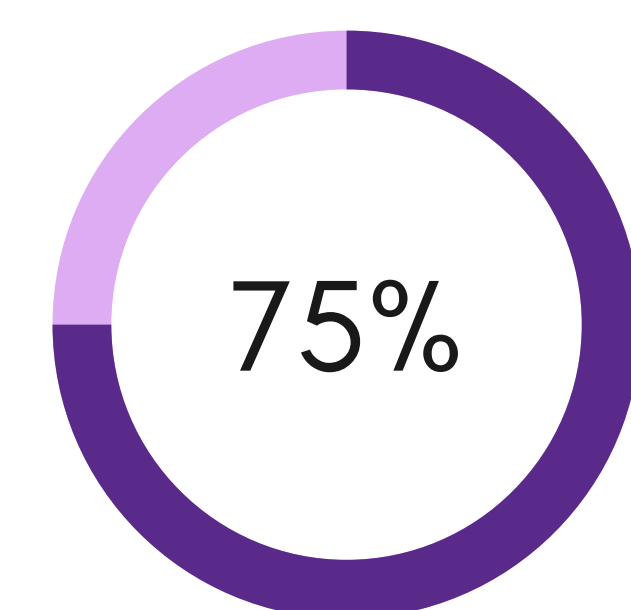
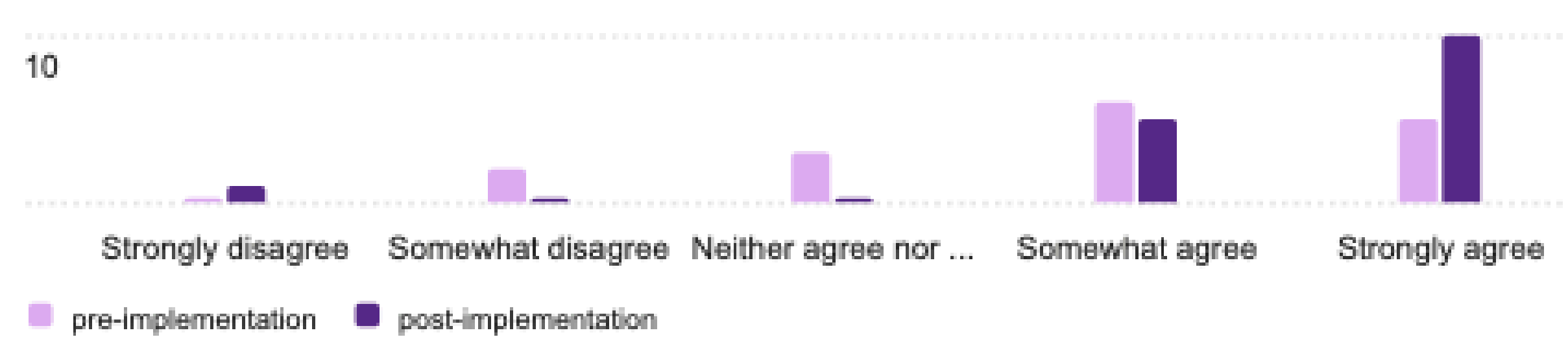
**Q4 - I am satisfied with the overall workflow of the Gold Module clinic.**



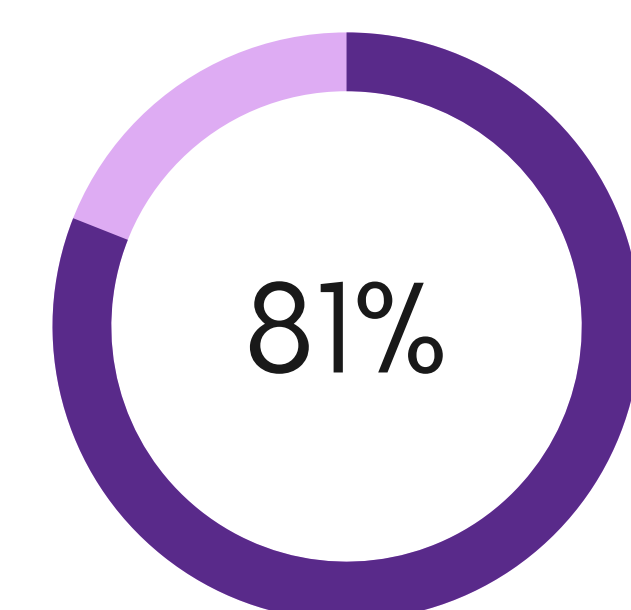
**Q6 - The current patient rooming system in Gold Module is effective and efficient.**



**Q7 - Communication between providers and clinic staff is effective and efficient in the Gold Module.**



of survey participants agreed that the flag system has improved the efficiency of clinic flow



of survey participants agreed that the flag system has improved communication between providers and staff

## AREAS FOR IMPROVEMENT

“Flag system was an improvement. Overall workflows still need tremendous work.”

*I really think the flag system has helped very well, especially if the provider is in another room.*

*Helpful when clinic is full and my assigned MA is not available. Otherwise I just talk directly to my MA.*

*Some providers are struggling to use the flag system as they do not see its value in improving workflow. Im not sure if a quick education session is needed to show examples of how it can be used to make clinic more efficient.*

*I do feel like at least one flag should be open to freely use based on the provider. Workflow for each provide is different and some may need to add in small changes to assure their workflow is consistent and effective. Overall, the system is helpful if it's used.*

## DISCUSSION

- Implementing the door flag system required an adjustment period for both staff and providers. While initial training was provided, a longer training period might have led to a smoother transition. Additionally, resources like video tutorials, instead of just slides, could have further improved understanding and adoption of the system.
- Some providers were resistant to changing from their established workflows. A more gradual rollout, combined with detailed demonstrations and ongoing support, could have alleviated this resistance. This highlights the need for strategic planning when introducing new processes in clinical settings to ensure smoother transitions.
- Although provider satisfaction with the new workflow improved, concerns regarding overall clinic efficiency persist. Addressing these concerns may require adding more staff to ensure the full benefits of the door flag system are realized and to further reduce delays in patient flow.
- Ensuring consistent use of the door flag system was a challenge. Increased monitoring and oversight during the pilot phase could have helped ensure that the flags were being used as intended by all staff.
- While feedback on workflow satisfaction was positive, additional research is needed to assess whether the system has truly improved clinic efficiency. This could include examining measurable outcomes such as patient wait times and room turnover to confirm the perceived benefits.
- Provider feedback will be key to refining the flag system. Gathering input on what worked and what did not work can guide adjustments as the system expands to other clinic modules.