

Task Inventory Activity

The purpose of this task list is to help you begin thinking about your tasks, responsibilities, and priorities. Remember, the overarching goal is to help you determine where your focus has been and **where it should be to target the right patients and have the capacity to conduct Longitudinal CM for your population.**

Instructions:

1. For each item listed, designate the CURRENT level of priority for tasks you do at least once a week (*use '0' in this column for items you aren't accountable to complete*).
2. For each item listed, designate the IDEAL level of priority for these same tasks (*use '0' in this column for items that are not typically considered a CM responsibility in your practice*).
3. For tasks that are not typically your responsibility (e.g. things you get asked to do sometimes, especially if a team member is out sick or on vacation), place an 'X' in the column corresponding with the role in the practice that is typically accountable to the task.
4. If there is a task missing from this list that you are accountable to, write it down on one of the blank lines and note the current and ideal priority levels.

Important note regarding 'Ideal' priority: An 'ideal' priority is a task that is based on the typical CM role.

A task can be considered ideal if it's something that meets the overall Care Management needs of the population, if it's a commonly accepted part of a Care manager's role. Ideal tasks are ones that are focused on the management and support of patients to help them achieve the best outcomes possible.

For example:

- Filling in for an MA when the practice is short staffed might meet the immediate needs of the practice; however, this does not meet the overall Care Management needs of the population and therefore would not be considered an 'ideal priority'.
- Leading a bi-weekly care team conference for high risk patients is considered an 'ideal priority', because it meets the overall Care Management needs of the population

1. Designate the current level of priority for each task 2. Designate the IDEAL level of priority for each task <i>Priority level key: H=High; M=Medium; L=Low</i> 3. Designate the average amount of time you spend each week on each task				Place an 'X' in the column corresponding with who in the practice typically performs each task								
Task List	Current Priority (H, M, L, 0) <i>0 = don't do at all</i>	Ideal Priority (H, M, L, 0) <i>0 = not typically a CM task</i>	Average amount of time spent per week	Self (CM)	Front Desk	MA	SW	Provider	Other CM	Dietitian	No One	Other List title
<i>EXAMPLE: Fill-in for MA when MA is out on PTO or sick</i>	H	0				X						
Episodic CM:												
Inpatient Follow up: LOW risk												
Inpatient Follow up: MEDIUM risk												
Inpatient Follow up: HIGH risk												
ED Follow up: LOW risk												
ED Follow up: MEDIUM risk												
ED Follow up: HIGH risk												
Other Episodic CM Referrals: LOW risk												
Other Episodic CM Referrals: MEDIUM risk												
Other Episodic CM Referrals: HIGH risk												

Task List	Current Priority (H, M, L, O) <i>0 = don't do at all</i>	Ideal Priority (H, M, L, O) <i>0 = not typically a CM task</i>	Average amount of time spent per week	Self (CM)	Front Desk	MA	SW	Provider	Other CM	Dietitian	No One	Other List title
Longitudinal CM												
Identify patients, enrollment, initial assessment												
Longitudinal CM follow-up calls (e.g. check in on care plan goal progress, self-tracking glucose logs)												
Self-Management support												
Personalized care planning												
Assess & address social needs												
Complete medication reconciliation												
Contact pharmacist												
Follow up on lab results												
Follow up with ancillary partners (e.g. home care, PT)												
Coordinate with mental/behavioral health												
Face to face follow up												
Warm hand off												
Initial meet and greet in office												

