

Optimizing Data Collection
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I. Why collect data

- a. Research
- b. Monitor patient improvement
- c. Patient feedback

II. How to collect it

- a. The the 1st 20 years, we used mail
- b. Internet
- c. In the office with iPad
- d. Use a commercial system or build your own

III. Make data important to physicians

- a. Data provides documentation to the clinical record
 - i. MRI data provides early read
 - ii. Preview scores prior to appointment
 - iii. Weekly patient report cards

IV. What we collect

- a. Make sure it is applicable to the patient injury
- b. Make sure it is 8th grade reading level
- c. Be aware of special populations (don't ask minors about sexual activity)
- d. Adequate data for scoring systems and patient satisfaction
- e. Include a quality of life measurement

V. Getting the patient to participate

- a. Make requirement prior to appointment (patient portal)
- b. Provide patient multiple ways to complete questionnaires
 - i. Be prepared for patients with disabilities
 - ii. Not everyone has a computer or knows how to use an iPad
- c. Have physicians reinforce that patient outcomes are the culture of the clinic and it is critical to overall success

- d. Keep track of patients annually so they don't lose interest
- e. Every patient has the right to refuse to participate, don't argue with them
- f. Make forms dynamic. If a patient says they don't do sports, make sure the questionnaire skips that section

VI. Tips to the trade

- a. Make sure on first visit that data on patient email and phone is correct
- b. Design the solicitation letter for follow-up so patient feels we are doing this for them
- c. Don't send out questionnaires too often. Patients will get overload and feel bothered
- d. Have a process that everyone follows so all patients get the same message