

ARD Project Huddle Talking Points

October 19, 2022

Summary

The Ambulatory Role Delineation (ARD) Project seeks to review and define clinical roles within Ambulatory Operations to create scope and competency standards across all clinics. This work is intended to enhance patient care and team member job satisfaction.

What is changing?

- **Day-to-day duties will be clarified:** Team members should expect greater clarity around their job duties with clearly delineated onboarding competency assessment forms (OCA) for each role. Roles will be supported to advance their skillsets to work at top of scope and where applicable, eliminate tasks not in line with their practice license or certification in Virginia.
- **Clinic staffing decisions will be clearer** with updated job roles and competencies as a foundation, managers will be better informed to make staffing decisions that optimize efficiency and safety.
- **The most common change at the individual level will be a broadening of competency assessments for a limited number of roles** to better reflect the scope of practice. For a small number of people, the *name* of your job role may be updated to a new name that remains consistent with your skills and training.
- **No one will lose their job as a result of this project.** This initiative is an investment in our people as we seek to empower team members with more effective tools and frameworks for doing your job.

Why are we changing?

- The future envisioned in our new strategic plan and the goal of achieving best-in-class ambulatory care can only be realized with satisfied, engaged team members working safely and with clear expectations.
- We need to enhance patient care and increase job satisfaction by empowering team members to do more of the work they're trained to do.
- We need to ensure team members are working within their scope of practice. This is in the best interest of patients and protects team members' license and/or certification.
- We must optimize our clinic staffing structure to enable greater patient access and best-in-class care.

How will I be impacted?

- Again, no one will lose their job as a result of this project. Every team member is vital to achieving our vision for best-in-class care.
- While we do not anticipate impact to current pay, in the rare event that a question arises, decisions will be guided by existing HR salary ranges. Salaries will continue to be reviewed on an annual basis to ensure alignment with market rates.
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- The competency assessment for your role *may* broaden in scope. The name of your job role *may* change (list of in-scope roles below). Managers will discuss any such changes with impacted team members.
- Your day-to-day work may change. You will be empowered to do more of the work you have been trained to do and eliminate tasks beyond your license and/or certification. The project team is ensuring that each new or redefined role has a meaningful portfolio of work attached to it.

When is change happening?

- Job roles are grouped into five categories and implementation will occur on a phased schedule by category, starting with Clinic Support roles in November and continuing through 2024. Impacted groups will be engaged in advance of scheduled go-live dates.
 - See list of categories and roles below.

Who's leading this work?

- The project is sponsored by John Bennett, Chief Ambulatory Operations Officer, and is led by Rachel Nauman, Administrator, Ambulatory Nursing. A wide range of stakeholders and experts, including representatives from each of the job role categories, have been enlisted to inform the work.

How can I learn more?

- Visit the ARD Project intranet page at <https://ambulatoryops.uvahs.org/ambulatory-role-delineation/>
- Watch your email for details and plan to attend one of the upcoming virtual ARD Town Halls.

Inclusion/Exclusions Summary

Locations	
INCLUDED	EXCLUDED
All 137 UVA Health Ambulatory Clinics inclusive of: <ul style="list-style-type: none"> - UPG Clinics - Dialysis 	Inpatient
Community Health locations (the last phase of project implementation)	Perioperative services
Occupational and Employee Health	

Roles (grouped by implementation category)	
INCLUDED (but not limited to)	EXCLUDED
Clinic Support Staff (CMA, CMA Supervisor, CNA, MA, CCMA, PCT, AAPC)	Scribes
Administrative (Administrative Support, Business Coordinator roles, Data Analyst, Medical Office Assistant, Office Supervisor, Medical Office Assistant, Program and Project Management)	Clinic Leadership
Nursing (RN, LPN, LPN Supervisor, RN Care Coordinator, RN Supervisor, RN Travelers)	Inpatient Roles
Healthcare Specialist (Athletic Trainer, Cardiology Tech, Clinical SW/Supervisor, Dental Assistant, Dental Hygienist, Dialysis Asst, ECG Supervisor, Electrodiagnostic Tech, Endoscopy Tech/Supervisor, Exercise Physiologist, Health Educator, Imaging Tech, Licensed Prof Counselor, Massage Therapist, Medical Technologist, Neuropsychology Test Tech Supervisor, Neuropsychometrician, Nuclear Medicine Technologist, Ophthalmic Asst, Ophthalmic Photographer/Tech, Ophthalmic Tech, Orthopedic Tech, OT, OT Supervisor, Phlebotomist, Polysomnograph Tech, PT, PT/OT, SLP Pool, Radiation Tech, Radiologic Tech, Rehab Services Tech, Rehabilitation Services Supervisor, Respiratory Therapist, SLP, Sonographer, Sonographer Supervisor, Technician – Endoscopy, Transplant Coordinator), Travelers, Pharmacist, Pharmacy Techs	Contingent workers, except for clinic-based travelers
	APP –coordinated by Chartis
	MD
Quality (Quality Analyst, Quality Coordinator, Quality Improvement Coordinator, Quality Manager) Need to determine if any of these roles fall under access	Patient Access, coordinated by One Team
	Revenue Cycle, coordinated by One Team