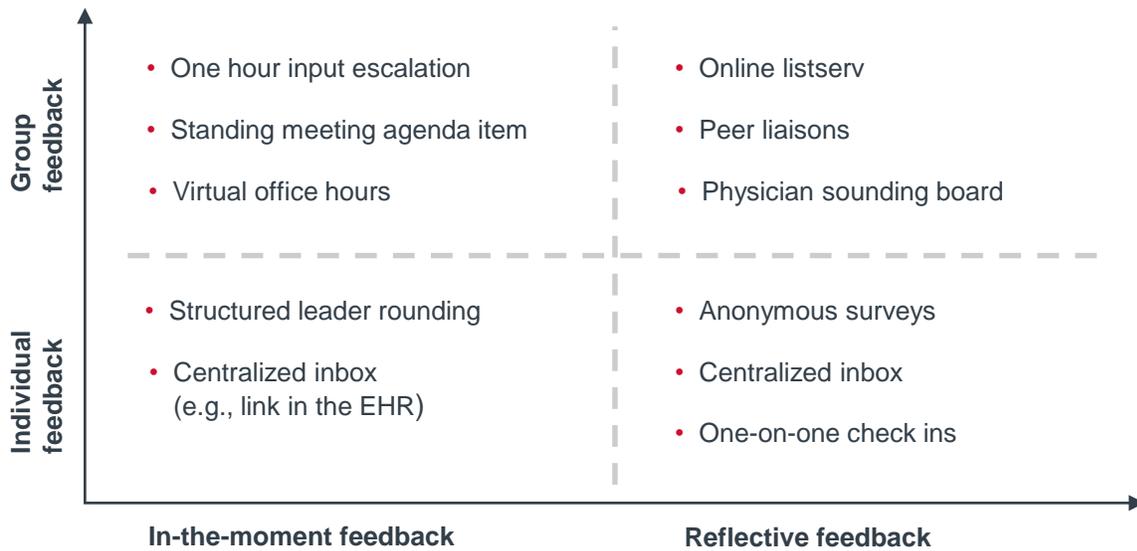


Frontline feedback loop picklist

Changes won't stick if there's not a consistent outlet for physician feedback during and after rollout to identify and address implementation barriers. Review the picklist below and select 2-4 channels to create a consistent frontline feedback loop.

Select channels to solicit frontline feedback

We recommend offering at least one channel in each quadrant below, preferably channels that physicians already use and can be repurposed for feedback. For detailed descriptions of each channel, see page 2.



Regardless of channel, don't forget to close the loop

Once you've identified your feedback channels, make sure that each has an owner responsible for reviewing and following up on physician feedback. While you can't implement every piece of feedback you receive, it's important to be responsive and demonstrate that you're taking feedback into account.

- **Commit to a standard response timeline**, even if it's just a note that the feedback was received.
- **Update physicians as their feedback is elevated**. Consider cc'ing them on emails or shooting them a note when progress is being made on the issue they raised.
- **Start standing meetings with a recap** of the progress made based on physician feedback.
- **Share takeaways via email** after soliciting feedback during a meeting to show participants you've captured their questions and comments.
- **Explicitly link changes made to physician feedback**, e.g., "Based on your feedback..."
- **Say it more than once**. If you've acted on feedback, share that widely and across multiple channels.

Frontline feedback channel picklist

Feedback channel	Most useful for	Keys to success
<p><u>Structured leader rounding</u> Dedicated time for leaders to regularly round on physicians</p>	<ul style="list-style-type: none"> • Sourcing feedback on day-to-day processes and barriers • Seeing how a change is working in practice 	<ul style="list-style-type: none"> • Use a standard set of questions to gather actionable feedback • Prioritize groups with low engagement or frequently absent at department meetings
<p><u>Virtual office hours</u> A recurring time for physicians to share questions and concerns with leadership</p>	<ul style="list-style-type: none"> • Sourcing feedback across multiple sites/facilities at once • Facilitating discussion between frontline physicians and executives 	<ul style="list-style-type: none"> • Set up a recurring time • Proactively share FAQs for those who couldn't join the session
<p><u>Standing meeting agenda item</u> A dedicated section of a regular meeting for physicians to share feedback with leaders</p>	<ul style="list-style-type: none"> • Sourcing group input/feedback • Getting feedback from physicians without adding another meeting to the calendar 	<ul style="list-style-type: none"> • Dedicate 10 minutes of a standing meeting for feedback • Send out prompts or specific questions in advance to make the most of the time
<p><u>Physician sounding board</u> A group of influential physicians across specialties and sites who meet with leaders to give feedback on new initiatives</p>	<ul style="list-style-type: none"> • Getting specialty- or site-specific feedback • Quickly hearing from the non-usual suspects 	<ul style="list-style-type: none"> • Include physicians who aren't already involved in leadership roles • Keep the time commitment scoped (1-3 questions, less than 30 minutes)
<p><u>One-on-one check ins</u> Meeting between an individual physician and leader</p>	<ul style="list-style-type: none"> • Soliciting sensitive and/or candid feedback one-on-one 	<ul style="list-style-type: none"> • Keep the conversation brief, 15-30 minutes • Prioritize an in-person meeting
<p><u>One-hour input escalation</u> Series of four highly structured, 15-minute morning huddles</p>	<ul style="list-style-type: none"> • Sourcing feedback on workflow • Quickly raising feedback from the frontline to executives 	<ul style="list-style-type: none"> • Block calendars to facilitate attendance in a daily huddle • Use a standard form to collect actionable feedback from frontline physicians
<p><u>Centralized inbox</u> Email address physicians can use to submit feedback on any initiative on their own time</p>	<ul style="list-style-type: none"> • Sourcing a wide range of feedback across all initiatives • Providing an easy, consistent mechanism for feedback 	<ul style="list-style-type: none"> • Promote the inbox in multiple places (e.g., newsletters or EHR) • Commit to review and provide a timely response to every email
<p><u>Anonymous survey</u> Short surveys (10 questions or less) to get physicians feedback on a specific initiative</p>	<ul style="list-style-type: none"> • Sourcing candid or sensitive feedback from a broad sample of physicians 	<ul style="list-style-type: none"> • Include survey in newsletters to increase open rates • Only follow up with those who have not completed the survey
<p><u>Online discussion listserv</u> Digital forums where physicians can openly discuss organizational change</p>	<ul style="list-style-type: none"> • Sourcing feedback from physicians who don't come to or speak up in meetings • Providing a forum for peer-to-peer debate and info sharing 	<ul style="list-style-type: none"> • To ensure self-policing of comments, don't allow anonymity • Dedicate leader time to monitor and respond directly to physician comments
<p><u>Peer liaisons</u> Dedicating a physician for each site to collect peer input and relay it to executives</p>	<ul style="list-style-type: none"> • Sourcing feedback on workflow challenges • Facilitating discussion between frontline physicians and executives 	<ul style="list-style-type: none"> • Prioritize physicians who are high-performing, well known and respected by peers • Train liaisons on how effectively solicit feedback