## **Measuring CDI Productivity**

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By Tammy Combs

When calculating the productivity guidelines for a clinical documentation improvement (CDI) program it is important to remember both quantitative and qualitative perspectives. Sometimes it is very easy to focus solely on the quantity of reviews that are performed. If the quality of those reviews is not optimized, however, then the opportunity to improve documentation may be missed. To support the importance of both perspectives, expectations can be put in place to measure both quantitative and qualitative productivity.

## **Measuring Quantitative Productivity**

A quantitative productivity measurement looks at the quantity of something. In CDI this is usually measured by the number of reviews completed, which is typically reported in a percentage of the records reviewed. The equation for this measurement would be the total number of records reviewed divided by the total volume that should have been reviewed.

It is important to look at all of the impacting variables such acuity level, location, equipment, and workflow when setting up quantitative measurements. A description of each of these variables is listed below:

- The acuity level can have a major impact on the number of reviews a CDI specialist can review in a day. If the CDI specialist reviews only intensive care unit (ICU) patients, he/she will have numerous notes to look through each day. If the CDI specialist is assigned a floor in the hospital that only deals with short length of stay patients, there will not be as many notes to review. Therefore, it may be realistic for the ICU CDI specialist to only review two cases per hour while the specialist on the floor with fewer notes may be able to review three or four cases per hour.
- The location of the reviews will also impact the number of reviews per day. If the CDI specialist is reviewing all records within the CDI office, they may have the ability to review more cases since they will not have travel time to their assigned units. By not traveling to the assigned units, however, the CDI specialist may miss out on conversations between the physician and nurse that give valuable insight into the care being provided.
- Equipment may also result in challenges or enhance the number of reviews completed. If the CDI specialist has all the equipment needed to perform reviews and communicate with other members of the team, then the review process will flow more smoothly thus resulting in a higher number of reviews being completed.
- Workflow can have a major impact on the quantity of reviews performed each day. The assigned workflow should take
  into consideration all of the aforementioned variables to support a streamlined process. An example would be a CDI
  specialist who is assigned to review records on the hospital units and has three different units to travel to during a
  typical day. Adjusting the workflow of the entire CDI specialist team to minimize such obstacles should result in a
  higher number of reviews and less frustration among the staff.

## **Measuring Qualitative Productivity**

There are also variables that need to be taken into consideration when setting up the qualitative measures. Some of these variables include education, experience, workflow, and the quantitative productivity standards.

- It is imperative that a thorough orientation and continuing education process is in place for a CDI specialist to understand how to perform a quality review. They must understand the documentation requirements and the structure of the health records. Understanding the structure of the health record will ensure they review all of the impacting documentation, and by having a thorough understanding of the documentation requirements, they can easily identify query opportunities.
- The experience of the CDI specialist is also an important factor when looking at the quality of reviews. When developing policies for the CDI specialists, time on the job should be taken into consideration to give them time to learn

how to perform a quality review. The expectation should have a progression of improvement as the CDI specialist gains experience. This is also true of the quantitative expectations.

- A streamlined workflow is also an important factor in the quality of reviews. Just as the CDI specialist needs enough time to meet the quantitative expectations, they also need time to perform a qualitative review.
- Lastly, the quantitative productivity goals will have a direct impact on the quality of the reviews. If the quantity expectations are too high, then there may not be enough time available to perform a quality review.

Every organization will be different when determining productivity guidelines depending on their specific circumstances, such as patient population, number of staff, resources, and support. Leaders will need to look at the entire workflow of the CDI team to assess if the expectations are realistic. Once the expectations are set, the leader(s) should look for feedback from the team. If the goals are too easily met, then they may be set too low. But if the majority of the team is struggling to meet the goals, then the expectations may be too high.

How do you decide productivity measurements at your facility? Please feel free to share your successes and opportunities in the comments section below. Sharing information is a great way to learn from each other.

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