

Research Summary: How can Federally Qualified Health Centers (FQHCs) measure staff time use without using much staff time?

- In healthcare planning, costs, including the cost of personnel time, are always important, especially in places with limited resources like federally qualified health centers (FQHCs).
- Institutions with limited resources struggle to find practical guidance for collecting high-quality time-use data for equity-focused program evaluation and planning.
- This study aimed to develop simple methods for gathering data on personnel time devoted to implementation and intervention activities in FQHC settings.



Scan QR code to read the full paper!

WHO PARTICIPATED

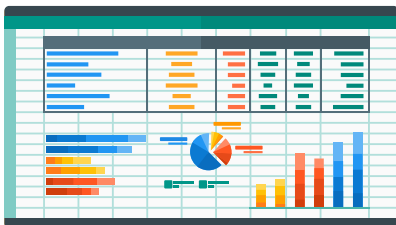
Leadership and staff at community health centers in Boston, such as clinicians, population health staff and community health workers.



WHAT WE DID

- Pilot study: Evaluated time-use data collection within a separate study combining social determinants of health and colorectal cancer screening.
- Collected data on personnel costs for implementation and intervention activities by:
 - Using passive (automatic) and active (non-automatic, requiring staff time and effort) data collection
 - Evaluating CHC staff interviews and assessments of data completeness

WHAT WE FOUND



- Passive data collection was simple and resulted in no missing data on activities that were assessed, but missed some activities altogether when they took place outside planned meetings.
- Active cost data collection with spreadsheets worked well for tracked care processes, but was challenging for non-typical tasks or tasks split up over multiple sessions.
- Questions asking about typical time use for typical patients gave the most reliable data, but there was still variability.
- Participants noted that tasks took more time for patients with limited English proficiency, adverse social determinants of health, or issues related to poverty or mental health.

