



Appendix 5.12

Accessible MDE Monitoring Progress and Adaptations

In this plan, include a space to describe what changes or adaptations were made to the original implementation plan and the reason for the adjustment. Below are a few examples of adaptations that could be tracked.

WHO is responsible for reviewing this monitoring plan and HOW often will it be reviewed?

HAVE practice leaders proactively removed organizational barriers to procuring or using accessible medical diagnostic equipment (MDE)?

- Not started
- Just beginning
- Actively addressing
- Completed

WHAT stage is the organization or each clinic/unit/department at in the compliance plan?

- Not started
- Just beginning
- Actively addressing
- Completed

WHAT stage is the organization in meeting accessible MDE scoping requirements? If multiple locations, what stage is each clinic at?

- 0%
- Up to 25%
- 26-50%
- 51-75%
- 76-99%
- Full scoping met

ARE there standardized protocols within the practice workflow to schedule patients where accessible MDE is located?

- Not started
- Just beginning
- Actively addressing
- Completed

HOW often do patients receive care via accessible MDE when needed (best estimate)?

- Never
- Up to 25% of the time
- 26-50% of the time
- 51-75% of the time
- 76% of the time or more

When accessible MDE is not used or there are significant delays in availability, what are the most common reasons?

- Lack of awareness
- Workflow barriers
- Staffing limitations
- Technology issues
- Budget constraints
- Other:

WHAT modifications have been made to the original implementation plan across your organization and at each site?

- When?
- Why?
- Who requested the modification? Who executed the modification?
- How has this improved implementation?