

# Clinical Team Performance & Quality Audit

Practitioner Name: \_\_\_\_\_ Reviewer: \_\_\_\_\_

Date of Audit: \_\_\_\_\_ Review Period: [ ] Monthly [ ] Quarterly

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## Section 1: R.O.O.T.S. Method™ Quality Control

*Use this checklist during weekly clinical rounds or random case audits to ensure the clinic's "Operating System" is being followed accurately.*

- [ ] **REVEAL:** Does the intake timeline clearly identify Antecedents, Triggers, and Mediators (ATMs)?
- [ ] **REVEAL:** Is there evidence of "Clinical Empathy" and deep listening in the session notes?
- [ ] **ORGANIZE:** Is the Functional Medicine Matrix fully mapped and updated?
- [ ] **OPTIMIZE:** Was a foundational lifestyle protocol delivered before moving to advanced testing?
- [ ] **OPTIMIZE:** Is the client's "Readiness to Change" score documented and \$ge\$ 7?
- [ ] **TARGET:** Is there a clear, documented rationale for every lab test ordered?
- [ ] **TARGET:** Are supplement protocols targeted specifically to Matrix gaps?

## Section 2: Clinical Performance KPIs

*Track the practitioner's efficiency and efficacy over the last 30-90 days.*

Metric	Goal	Current Score	Notes
Patient Retention Rate (PRR)	\$>85\%\$	____ %	% of clients completing 6-month protocol
Outcome Success Score (OSS)	\$>50\%\$	____ %	Avg. MSQ symptom reduction across cases
Billable Efficiency	\$>70\%\$	____ %	Ratio of billable hours to total hours

Metric	Goal	Current Score	Notes
<b>Case Presentation</b>	Weekly	[ ] Yes [ ] No	Consistent attendance at Friday Rounds

## Section 3: Mentorship & Growth Reflection

**Current Ladder Level:** [ ] Level 1 (Associate) [ ] Level 2 (Practitioner) [ ] Level 3 (Senior)

**Clinical Strengths:**

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**Growth Opportunities (Knowledge gaps or efficiency bottlenecks):**

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**Mentorship Action Plan:** - [ ] Assigned specific research topic for next Grand Rounds. - [ ] Shadowing Lead Practitioner on complex "Target" phase cases. - [ ] Review of state-specific telehealth compliance/scope of practice.

## Section 4: Final Assessment

**Overall Performance Rating:** [ ] **Exceeds Standards** (Ready for Ladder advancement/Profit sharing) [ ] **Meets Standards** (Maintain current caseload) [ ] **Needs Improvement** (Requires 30-day intensive supervision)

**Next Review Date:** \_\_\_\_\_

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**Practitioner Signature:** \_\_\_\_\_ **Lead Signature:** \_\_\_\_\_

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