RATIONALE FOR A NEW APPROACH

It is not uncommon for improvement efforts to take months, or even years, only to not fully realize the desired outcomes from the effort.   Nothing is more frustrating or diminishing to a culture and good will among colleagues than a change effort that fails. The barriers to a successful implementation of change may be structural, cultural, or even interpersonal.   How we can more efficiently adopt an improvement and realize the outcomes we seek? It is a vexing problem that could use a new approach incorporating time-tested methods.

Shifts in Mindset

To successfully adopt a new approach the following challenges might be in play:

☐ The application of an improvement model is inconsistent at best

☐ Leaders of change efforts struggle with finding an effective change management strategy

☐ A primary reason for failure is a deficit in "hard-wiring" process and practices at the front-line

☐ Meeting time is often spent by focusing on "Who" and "What" resulting in little time for "How"

☐ Planning and discussion are considered an improvement effort

To address these challenges two significant shifts in mindset are required:

1) Making an improvement cannot occur in a meeting, but only in the clinical/operational areas

2) Not making progress on action items between meetings is <u>unacceptable</u>.

In summary the goal of this approach is to identify and work through issues rapidly to progress toward implementation using 6 structured one-hour meetings.   The emphasis is the timely completion of tasks between the meetings.

Meeting Series

The series of one-hour pre-scheduled meeting is as follows:

1) Stakeholder Meeting

2) Action Planning Meeting

3) Small Test of Change Design Meeting

4) Progress Check Meeting

5) Implementation Planning Meeting

6) Implementation Follow-up Meeting

ESTABLISHING THE MEETING SERIES

To begin, two elements must be known in advance:

- What the gaps are, and what data supports that conclusion
- Whom the key stakeholders are, and their commitment to support the change.

Establish Two Key Roles

Before the meetings can be put on calendars, it is vital to assign two key roles:

Senior Leader – This person should have decision-making authority in the organization and is able to commit to working with the meeting Facilitator and other key stakeholders in an oversight capacity. They are involved to champion the importance of the effort, to support the Facilitator, to witness key discussions and to assist in the problem solving and removing barriers as needed by the team. The title of this person isn't important as long as they can meet these requirements.

Meeting Facilitator – This person should be somewhat familiar with the topic, have the time and ability to organize the meetings, and be committed to serving the team. They may or may not have a managerial role in the organization. They must have the support of the clinical or operational managers of functions impacted by change resulting from this effort.
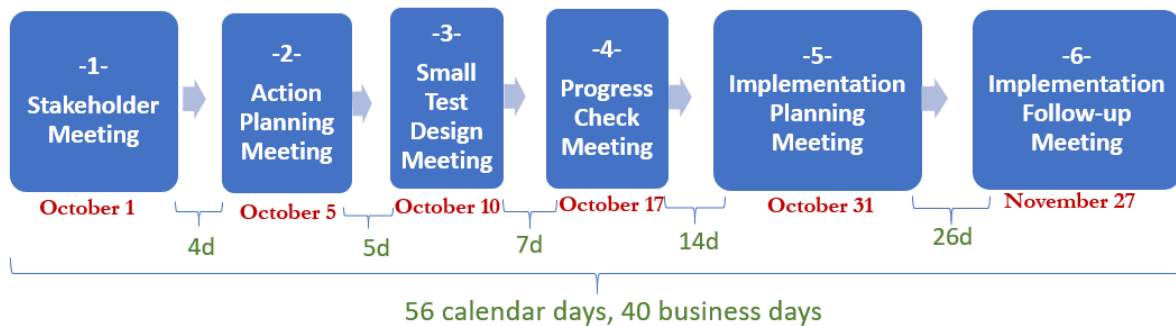
Schedule the Meetings

Precious time is lost when putting a meeting on calendars is delayed by lack of availability, space, or a cultural tendency to easily cancel meetings.   In the Six Meetings or Less method, scheduled well in advance.

- ➢ The time between meetings is variable and depends on the complexity and scope of the issue.
- ➢ The more quickly the group can work through major steps and complete the work between meetings, the more efficient the process
- ➢ The emphasis is on completion of work between meetings.

Example Meeting Structure

Schedule all 6 meetings in advance – avoid rescheduling

-1- Stakeholder Meeting	-2- Action Planning Meeting	-3- Small Test Design Meeting	-4- Progress Check Meeting	-5- Implementation Planning Meeting	-6- Implementation Follow-up Meeting
October 1	October 5	October 10	October 17	October 31	November 27
	4d	5d	7d	14d	26d

56 calendar days, 40 business days

The length of time between meetings should vary to allow for task completion

USING OUTCOME-BASED AGENDAS

The design of meeting agendas in this method is intentional. An Outcome-Based Agenda format better utilizes the expertise in the room by clearly defining HOW those attending will engage in the work. This type of agenda cannot be pulled together at the last minute, so we build a framework for each meeting in advance.

The test of a good agenda are these two questions:

1) By looking at the agenda can you understand easily what will be addressed and accomplished?
2) Next, do you have a clear idea how to be prepared to participate in the meeting?

By using a format where each topic has a specific outcome accompanied by a set of process steps to achieve that outcome, we can ensure these two questions are answered. For example:

Note start time and how much time will be used.

OUTCOME: Why the topic is on the agenda and What is accomplished at the end of the meeting

Ensure TOPIC detail is included enough so all understand

Check for a variety of participants as leads

Ensure there is a clear owner for each assignment

PROCESS: Describe How a series of steps will facilitate achieving the outcome AND let people know what they will be asked to do in the meeting.

Leave this Notes column blank for attendees to use

AGENDA TOPICS

Start Time	Topic (Lead)	Outcome	Process	Notes
11:00 am (5 min)	Welcome (Jane)	Introduce our guest	Individuals introduce themselves round robin, including role	
11:05 am (10 min)	Brief Action Item Review (Kerri)	Record current statuses of action items	Action item owners will report out as called. Record changed statuses.	
11:15 am (30 min)	Referral Process – Gap Analysis Results (Tanisha)	Identify major concerns from the assessment	1. List findings 2. All dot vote on top 5 concerns 3. Vote on final list	
11:45 am (20 min)	Hear Questions from IT on Modifications (Brian)	Document Key Questions	1. Write Key Questions on White Board 2. Determine who will follow-up for next meeting	
12:05 pm (15 min)	Priorities for Next Month (Jane)	Ensure the team is clear on upcoming priorities	1. Present slides 2. Inquiry: What might we need to modify? 3. Revise task owners if needed	
12:20 pm (5 min)	Assign Action Items (Adam)	Clarify work to be done before next meeting	Action item owners will report out as called. Update statuses.	
12:25 pm	Adjourn			

Documenting Action Items

The Outcome Based Agenda ensures that Action Items are captured at the end of each meeting and reviewed at the beginning of the next meeting.   This is the discipline required to make progress on the work.

Always record ACTION ITEMS; document each as clearly as possible

Clear accountability (caution with more than one name for each action item)

NEW
Scheduled
In Process
On Hold
Cancelled
Complete

ACTION ITEMS

ITEM	OWNER	TARGET DATE	STATUS
Analyze Gap Analysis and prepare for prioritization	Tanisha Thompson	7/6/2020	In process
Contact Brian Braun to attend next meeting	Kerri Kettle	6/29/2020	Complete
Gather information from other clinics about referral process	Adam Able	7/6/2020	In process

Keep track of changed dates

'Next month' or Next week' are not DATES

USING A STANDARD IMPROVEMENT METHOD

The Improve Anything in 6 Meetings or Less method relies upon a standard approach to improvement. Which standard approach applied is not at all important. The method works well with PDCA, PDSA, FOCUS-PDCA, Model for Improvement or DMAIC.

One key is that the Facilitator and Leader are not new to the method used. Key Stakeholders should also be familiar with the method used. Participants and Front-Line staff may have little exposure to the improvement process to start. With consistent involvement they will become familiar with the process.

LEVERAGING SMALL TESTS OF CHANGE

A familiar concept, Small Tests of Change are a component of most improvement approaches. Seemingly simple, the execution of small tests is often where change efforts fall apart. The "DO" component of a change model is not intended to be one step, but a series of carefully designed mini "experiments" done in a manner that starts very small and increases in scope and involvement with each successful trial.

An important change in mindset is that a failure of a test does not end the implementation. It is merely a step in the learning process. At the end of each planned test a decision is made: Adopt the change, Adapt it, or Abandon it.

A Design Plan for Small Tests of Change tool will be used to intentionally involve people outside of the meetings, and in the clinic/operations to test the changes prior to implementation.

DESIGN PLAN FOR SMALL TESTS OF CHANGE

Initiative: *Improve intake information from residential care*		Intervention: *Test shared intake form*		
Smallest Unit of Change: *1 patient, 1 RN*		Scope: *RN with transfer from residential care*	Total # of Staff Impacted: *36 RNs in ED*	
Planned Testing Timeframe: *4 Weeks: August 20 – September 25*			Est. # of Staff in Testing: *12 RNs in ED*	

	Test Description	Test Plan	Testers	Lesson(s) Learned	Decision	Adaptation
1	Conduct two phone tests by contacting care facility and asking for intake form by e-mail – check for completeness	2 night RNs to do phone contact test of process either Mon or Tues	Julie K Marc C		☐ Adapt ☐ Adopt ☐ Abandon	
2	Confirm red folders are in hand; next 3 night admissions to "Red Folder" intake form. Notify night staff in huddle.	Night RNs Wed – Sat should receive Red Folder intake with admissions	Julie K, Marc C, Jon F, Keisha M		☐ Adapt ☐ Adopt ☐ Abandon	
3	Implement on Days including PMs, next admissions to receive Red Folder; document SBAR with information	Tues – Friday – any ED admission form care facility; all shifts	Keisha M, Sue P, Marlys Z, Joe J, Jack B		☐ Adapt ☐ Adopt ☐ Abandon	
4					☐ Adapt ☐ Adopt ☐ Abandon	

TOOLS AND TEMPLATES

To review, Improve Anything in 6 Meetings or Less method has four primary components:

➢ Schedule Meetings in Advance
➢ Use Outcome Based Agenda formats
➢ Apply Improvement tools
➢ Design Small Tests of Change

There are two tools provided for each meeting. These are intended to be customized to the topic and context and

1) Meeting Checklist
2) Meeting Agenda Template

By following the checklist steps and implementing the content in the agenda formats, a group can proceed through the change process and implementation of changes efficiently.

Before meeting with other stakeholders, the Facilitator and Senior Leader have a few tasks to complete:

Facilitator Pre-Work:

☐ Gather evidence about the topic: Standard Practice or Policies, any Gap Analysis, any Process or Outcome data

☐ Meet with the Senior Leader

☐ Summarize and document any known work done on this topic to-date; send in advance

☐ Schedule the 6 meetings at pre-determined intervals

☐ Determine, by consensus, who will be included at the first meeting

Senior Leader Pre-Work:

☐ Assign an accountable clinical or operational leader for the effort

☐ Assist with identifying a physician champion, if useful to the effort

☐ Meet with the Facilitator

☐ Ensure there is a clear, measurable goal for the effort

☐ Endorse the effort by communicating the goal and importance of success to key managers

☐ Plan to attend the first meeting

Now the process can begin.

MEETING 1 – STAKEHOLDERS MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 1

- Identify who will be impacted by the change
- Invite them to a 1-hour meeting
- Provide any evidence, data, or background material in advance
- Send the agenda
- _____

Senior Leader Checklist for Meeting 1

- ☐ Attend this meeting and listen to the discussion
- ☐ Ensure the team has identified any barriers to success
- ☐ Reinforce the importance of closing the gaps and achieving better outcomes
- ☐ _____

Meeting 1 – Stakeholder Meeting – Agenda Components

- ➢ Brief introductions (if needed) and review agenda
- ➢ Review purpose of the meeting
- ➢ Identify gaps in practices – use an existing checklist/assessment, or brainstorm
- ➢ Determine any issues that cannot be easily resolved: "Why aren't we doing _____?"
- ➢ Set Action Items, Owners and Dates for follow-up

Stakeholder Action Items from Meeting 1

- ☐ Discuss gaps in practice with other stakeholders – even outside of the group
- ☐ Get feedback about barriers or opportunities for improvement
- ☐ Determine readiness for change through dialogue with others

MEETING 2 – ACTION PLANNING MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 2

- Revise list of attendees, if indicated (add anyone missing)
- Invite all to a 1-hour Action Planning Meeting
- Purpose is to identify next steps to take, or barriers to remove
- Send the agenda
- _____

Senior Leader Checklist for Meeting 2

☐ Check-in with the Facilitator once this meeting has occurred

☐ Ask to see draft PDSA, A3 or other documentation resulting from this meeting

☐ Ensure managers of the involved departments support the effort

☐ _____

Meeting 2 – Action Planning Meeting – Agenda Components

➢ Introduce any new attendees and review agenda

➢ Round Robin Style, report out on discussions anyone had with other stakeholders (use a 2-minute egg timer)

➢ Make two lists

  o Low Hanging Fruit – Identify any quick fixes and who is accountable for the changes

  o Pilots or Small Tests of Change – Identify changes that will need planning

➢ Determine who will be included in a change planning meeting

➢ Review Action Items for follow-up and set Owners and Dates for follow-up

Stakeholder Action Items from Meeting 2

☐ One person drafts a PDSA, A3, or similar to document root causes and next steps

☐ Discuss with others who to involve in planning additional steps

☐ Start discussing the need for volunteers for the trials/tests of change in involved areas

MEETING 3 – SMALL TEST DESIGN MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 3

- Identify the planning group (which should include representatives for anyone doing the work
- Invite them to the 1-hour Small Test Design Meeting
- Send the agenda
- _____

Senior Leader Checklist for Meeting 3

- ☐ Confirm with the Facilitator meetings are happening and have good attendance
- ☐ Round on team members and see if they can describe the planned change to test with staff
- ☐ Does the team need help removing any barriers?
- ☐ Are the involved staff getting direct manager support for their participation?
- ☐ _____

Meeting 3 – Small Test Design Meeting – Agenda Components

- ➢ Introduce any new attendees and review agenda

- ➢ Describe the specific need for testing and what will be tested

- ➢ Work through the Small Test of Change Design tool and document steps

- ➢ Confirm individual assignments before adjourning

- ➢ Review Action Items for follow-up and set Owners and Dates for follow-up

Stakeholder Action Items from Meeting 3

- ☐ Engage others according to the Small Test Design Plan
- ☐ Arrange for frequent and informal feedback gathering
- ☐ Continue spreading the test and growing the involvement of others

MEETING 4 – PROGRESS CHECK MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 4

- Invite the Change Planning attendees to the meeting
- Remind attendees to bring documentation of their work (small test planning document)
- Send the agenda
- _____

Senior Leader Checklist for Meeting 4

- ☐ Attend the meeting -or- After the meeting, ask to see evidence of the work
- ☐ Can the Facilitator articulate what is working well and where the barriers are?
- ☐ If needed, attend the Progress Check meeting, or convene conversations and lead an accountability discussion
- ☐ _____

Meeting 4 – Progress Check Meeting – Agenda Components

➢ Review Agenda

➢ Provide a brief overview of the planned work

➢ Report from stakeholders involved in the pilot/testing

➢ Consensus Decision:

  o Continue testing cycles?
  o Move to implementation?
  o Reconvene stakeholder group?

➢ Set Action Items, Owners and Dates for follow-up

> **If there is no significant progress, or barriers emerge putting the effort at risk – <u>Reconvene the Stakeholder Group</u> for an accountability discussion. Revisit the Action Planning step if needed.**

Stakeholder Action Items from Meeting 4

- ☐ According to the group decision – continue cycles of testing and refinements, OR
- ☐ Stakeholders gather information about incorporating the changes in existing infrastructure and processes: training, policies, work instructions, audits, measurement and reporting, OR
- ☐ Stakeholders meet to discuss barriers to progress

MEETING 5 – IMPLEMENTATION PLANNING MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 5

- Determine who should attend the Implementation Planning Meeting
- Be sure key stakeholders are included: department leaders and staff, education, HR, finance, providers – this is context dependent.
- Provide documentation to any new stakeholders
- Send the agenda
- _____

Senior Leader Checklist for Meeting 5

- ☐ Is the work on pace
- ☐ Round on stakeholders – Can they describe what is needed for implementation?
- ☐ Send a recognition or affirmation of the work, if progress is on pace
- ☐ _____

Meeting 5 – Implementation Planning Meeting – Agenda Components

- ➢ Introduce any new attendees, and review agenda

- ➢ Discuss the steps for implementation – including audit, oversight, measurement a sustainability.

- ➢ Ensure each step of the implementation has ownership

- ➢ Set Action Items, Owners and Dates for follow-up

Stakeholder Action Items from Meeting 5

- ☐ Carry out the Implementation tasks
- ☐ Document accordingly
- ☐ Ensure the next meeting provides enough time to do this work

MEETING 6 – IMPLEMENTATION FOLLOW-UP MEETING

Meeting Date:

Meeting Time:

Meeting Location: ☐ In person   ☐ Virtual

Facilitators Pre-Meeting Task List 6

- Gather any updated data, such as process measures
- Develop a method to review the 'current state' of the implementation with stakeholders
- Send the agenda
- _____

Senior Leader Checklist for Meeting 6

- ☐ Attend this meeting and listen to the discussion
- ☐ Ensure the team has identified any barriers to success
- ☐ Reinforce the importance of closing the gaps and achieving better outcomes
- ☐ _____

Meeting 6 – Implementation Follow-up Meeting – Agenda Components

- ➢ Brief introductions (if needed) and review agenda
- ➢ Each stakeholder reports out on each element of the implementation and provide status
- ➢ Develop action plans for any gaps and assign accountabilities.
- ➢ Confirm the sustaining process owner or department accountable for monitoring 'drift' and indicators to revisit as needed (generally this is the clinical/operational area with the most front-line staff involved in the work)
- ➢ Plan to acknowledge participants

Stakeholder Action Items from Meeting 6

- ☐ Document the accountable stakeholders in the primary department to monitor for decline in performance or measures
- ☐ Put processes in place
- ☐ Schedule a review of the process at least annually

SMALL TESTS & SUSTAINABILITY

DESIGN PLAN FOR SMALL TESTS OF CHANGE

Initiative: *Improve intake information from residential care*   Intervention: *Test shared intake form*

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2	Confirm red folders are in hand; next 3 night admissions to "Red Folder" intake form. Notify night staff in huddle.	Night RNs Wed – Sat should receive Red Folder intake with admissions	Julie K, Marc C, Jon F, Keisha M	3 admissions, two had completed form. 1 missing – was a Saturday admission.	☒ Adapt ☒ Adopt ☐ Abandon	Conf call with facility to discuss training materials they may need to cover all shifts
3	Implement on Days including PMs; next admissions to receive Red Folder; document SBAR with information	Tues – Friday – any ED admission form care facility; all shifts	Keisha M, Sue P, Marlys Z, Joe J, Jack B	2 admissions, both had form, SBAR to provider was more complete. 1 form was "lost" temporarily.	☒ Adapt ☐ Adopt ☐ Abandon	Continue testing plan – involve ED Techs
4	Continue to receive Red Folder, involve all shifts, train ED Techs to look for form	Sun – Friday all shifts any admission	Joe J, Marc C, Pam P, Jose A, Ann R, Aimee F, Alex H	5 admissions, form present; all had complete information.	☐ Adapt ☒ Adopt ☐ Abandon	Proceed with developing work instructions, training and incorporate into on-boarding packet

Operational Transition Plan:	Start Date:
Owner(s) of New Process: *Emergency Department Supervisors*	Accountable Leader: *Sam Simon*
Process Measure(s) to Monitor: *Admits from CWC w. Red Folder* Oversight Group: *ED/Acute Care Council*	
Method of Data Collection: *10 CWC admission audit and Safety Incident Reports*	Frequency of Data Collection: *Monthly*
Value to Trigger Process Review: *No Less than 80% CWC Admissions have Red Folder x 3 months*	

ACKNOWLEGEMENTS