HRET HIIN Virtual Event
Accelerating Improvement Fellowship

Spreading and Scaling-Up Improvement

Wednesday, September 13, 2017
12:30 – 1:30 p.m. CT
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenter(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:30-12:35</td>
<td>Welcome and Introduction</td>
<td>Mallory Bender, HRET</td>
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<tr>
<td>12:35-12:45</td>
<td>Action Period Discussion</td>
<td>Lauren Macy, IHI</td>
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<tr>
<td></td>
<td>• Watch What’s the Secret to Change Implementation?</td>
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<td></td>
<td>• Build a PDSA ramp around one change idea OR categorize your change ideas by testing, implementing, or spreading</td>
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<td></td>
<td>• Complete QI 201: Planning for Spread: from Local Improvements to System-Wide Change</td>
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<tr>
<td>12:45-12:55</td>
<td>Key Concepts for Spreading Improvement</td>
<td>Lauren Macy, IHI</td>
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<tr>
<td></td>
<td>• Understand essential steps for adoption of improvements</td>
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<td></td>
<td>• Identify ‘spread destroyers’</td>
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<td>12:55-1:15</td>
<td>Scaling Up Improvements</td>
<td>Kathy Duncan, IHI</td>
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<td></td>
<td>• Develop a plan for taking improvement work to scale</td>
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<td>• Utilize a sequence of activities that guide the development, testing and implementation of an improvement</td>
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<tr>
<td>1:15-1:25</td>
<td>Action Period Assignments</td>
<td>Lauren Macy, IHI</td>
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<tr>
<td></td>
<td>• Watch: Is There a Secret to Sustaining Improvements?</td>
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<td>• Read IHI’s Sustaining Improvement White Paper</td>
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<td>• Review: Seven Spreadly Sins</td>
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<td>1:25-1:30</td>
<td>Bring It Home</td>
<td>Mallory Bender, HRET</td>
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Fellowship Curriculum Checkpoint

- January 18 – Why do Improvement Projects Fail?
- February 1 – Engaging Stakeholders in Improvement
- February 15 – Generating Ideas for Change
- March 15 – Getting Improvement Work Done!
- April 12 – Diving Deep into Data and Measurement
- May 10 – How to Design Reliable Processes in Health Care
- June 14 – Coaching Core Leaders in Quality
- July 12 – A Comprehensive Framework for Patient Safety, Reliability and Clinical Excellence
- August 9 – Moving from Testing to Implementation
  - September 13 – Spreading and Scaling Up Improvements
  - October 11 – Sustainability: Making Your Improvements Stick
  - November 8 – Celebration!
### Action Period Assignments

#### PDSA Comparison: Pilot vs. Implementation

(To learn more, see [QI 104: The Life Cycle of a Quality Improvement Project](http://www.ihi.org/education/IHIOpenSchool/resources/Pages/Activities/Provost-WhatsTheSecretToChangeImplementation.aspx))

<table>
<thead>
<tr>
<th>Pilot Phase</th>
<th>Implementation Phase</th>
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<tbody>
<tr>
<td><strong>PEOPLE: FEW</strong></td>
<td><strong>PEOPLE: MANY</strong></td>
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<tr>
<td>The number of people affected by a pilot test is relatively small. Thus, the resistance to the change is often relatively low.</td>
<td>The number of people affected during implementation is relatively large. There may be stronger resistance to the change that improvement teams must overcome.</td>
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<td><strong>SUPPORT NEEDED: LOW</strong></td>
<td><strong>SUPPORT NEEDED: HIGH</strong></td>
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<td>Testers do not yet intend changes to be permanent and therefore do not need processes to maintain changes beyond the test period.</td>
<td>Testers expect the change to become part of the routine operations of the system; supporting processes to maintain the change — feedback and measurement systems, job descriptions, training, etc. — must be in place.</td>
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<td><strong>TIME: SHORTER</strong></td>
<td><strong>TIME: LONGER</strong></td>
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<td>Cycles for testing changes can be rapid.</td>
<td>Test cycles, which are larger in scale and more diverse in scope, generally require more time than in the pilot.</td>
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<td><strong>TOLERANCE FOR FAILURE: HIGH</strong></td>
<td><strong>TOLERANCE FOR FAILURE: LOW</strong></td>
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<td>It’s OK (in fact, it’s encouraged!) for testers to learn from mistakes. Between 25–50 percent of tests may not produce the desired results; these “failures” are important opportunities to learn.</td>
<td>Due to all of the above (i.e., the people, resources, and time involved) the tolerance for failure is relatively low during implementation. Testers should have a high degree of confidence that the changes they’re implementing will result in improvement.</td>
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How are you getting ready for implementation? What PDSAs will you run?
Post on the Discussion Group Page!

Can be accessed through the LMS page here: [http://app.ihi.org/lmsspa/#/5b5c79b8-f019-442c-a199-de2041cdfbf5](http://app.ihi.org/lmsspa/#/5b5c79b8-f019-442c-a199-de2041cdfbf5)
"My goal for picking a project was to work on something that was in line with my organization's goal for the year. The aha moment came when one of the Leaders was speaking about the org. goal that I chose for my project and she stated a different measure of success than what I had. It truly boiled down to the April 12th call where we learned how best to word your aim statements. Lesson learned: ask questions - to the right people - and ensure your project goal and measure of success is accurate and correctly reflects your organization's goal."

**Take-Aways:**
1. Picking a project in line with organizational priorities
2. Talking through different ways to measure the outcome or process
3. Disseminating your work; listening to others working
From the Discussion Group: What Has Been Your Greatest “Aha” Moment?

- “Feedback from stakeholders, including staff and patients, when drilling down on the problem, as they truly have a different perspective”
- “When we began drilling deeper into VAEs, we conducted extensive RCAs and found a surprising # of our patients with VAE's had experienced >3 transports to/from procedures. This finding helped direct our initial interventions. A great reminder to start with the data/facts BEFORE incremental change and planning.”
- “The value of small/rapid tests of change to either get momentum going or keep momentum going when other PDSA cycles have longer time frames. Also, last week I used the "coin spinning" exercise with a multidisciplinary group of clinicians and there was an overwhelmingly positive response!”

Take-Aways:
1. Getting feedback- continuous mechanisms
2. Ensuring you have the necessary data to know where to test
3. Coin Spinning Exercise and more live on IHI.org
From the Discussion Group: What is one area you would like more information about?

“...ideas for simplifying data to make it more meaningful to the stakeholders and the end users, in order to use the data to drive improvement”

– Use existing measures when you can
  • Use data folks are comfortable with, already collecting, and reporting on
  • If you are adding PDSA measures/data, remind them that it’s only for a short period

– Simplify and select the “vital few” measures

– Remember! The data **BELONG TO** the stakeholders... they should to feel ownership of it – as improvement experts we often steward it.
From the Discussion Group: What is one area you would like more information about?

- One measure per run chart; one run chart per slide
- Annotate, annotate, annotate
- Run chart reminders:
  - Need 10-12 data points
  - Determine if a change is leading to improvement (refer to run chart rules white board [here](#))
  - Determine if we are holding the gains
- Control/Shewhart charts:
  - Once you have over 20 data points in your run chart
  - More sensitive
- Make the process visible- decorate your walls!

“Continue my education on the various data collection systems and analysis.”

“Continuing to learn more about graphing and interpreting data.”
From the Discussion Group: What is one area you would like more information about?

“More information on use of Gantt charts and other tools to help organize projects.”

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<tr>
<th>Activity</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Qtr</th>
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<th>4&lt;sup&gt;th&lt;/sup&gt; Qtr</th>
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<tbody>
<tr>
<td>What do we want to accomplish</td>
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<td>Who will be involved?</td>
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<td>Where will we focus?</td>
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<td>How will we measure success?</td>
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<td>What changes will we make?</td>
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<td>How will we test our ideas (PDSA)?</td>
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Source: Phyllis M. Virgil
From the Discussion Group: What is one area you would like more information about?

“More information on use of Gantt charts and other tools to help organize projects.”

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<tr>
<td>Aim and Goals</td>
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<td>Team Infrastructure</td>
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<td>Develop Measures</td>
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<td>Initiate 1st PDSA</td>
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<td>ID High Priority Areas</td>
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<td>ID Change Strategy &amp; Ideas</td>
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<td>Run PDSA Projects</td>
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Source: Phyllis M. Virgil for Contra Costa Regional Medical Center, BH-PC Collaborative
Key Concepts for Spreading Improvement

Lauren Macy
Sequence for Improvement and Spread

Developing a change

Testing a change

Implementing a change

Make part of routine operations

Spreading a change in your community

Theory and Prediction

Test under a variety of conditions

Act

Plan

Study

Do

American Hospital Association
Improvement Sequence

- **Testing:** Trying and adapting ideas to learn what works in your system
- **Implementation:** Making a change a permanent part of the day-to-day operation of the system
- **Spread:** Having individuals adopt the changes
- **Scale-up:** Overcoming the structural issues that arise during spread

Your Project

- **Spread**: Having individuals adopt the changes

- **Scale-Up**: Overcoming the structural issues that arise during spread

Most projects will have both, but weights might be different – how are these at play in your projects?
Innovation Series 2006

A Framework for Spread

From Local Improvements to System-Wide Change
“Pockets of excellence exist in our health care systems, but knowledge of these better ideas and practices often remains isolated and unknown to others.... Too often these improvements remain unknown and unused by others within the organization.”

-- A Framework for Spread, IHI, 2006
Planning for Spread

- The responsibilities of leadership (including set-up)
- Identification of better ideas
- Communication
- Strengthen the social system
- Measurement and feedback
- Knowledge management
A Framework for Spread

Leadership
- Topic is a key strategic initiative
- Goals and incentives aligned
- Executive sponsor assigned
- Day-to-day managers identified

Social System
- Key messengers
- Communities
- Technical support
- Transition issues

Communication Strategies (awareness & technical)

Better Ideas
- Develop the case
- Describe the ideas

Set-up
- Target population
- Adopter audiences
- Successful sites
- Key partners
- Initial spread strategy

Measurement and Feedback

Knowledge Management

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Measurement and Feedback

Knowledge Management
Leadership’s Role in Spread

• Send message that topic is a key strategic initiative
• Align goals and incentives – set a “spread” Aim
• Commit funding and staff time
• Assign responsibility at multiple levels
  – Executive to front line leaders
• Develop initial strategy to reach all sites
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Communication Strategies (awareness & technical)
Better Ideas: Where do they come from?

- The ideas that benefit more adopters will be more likely to spread faster
- Consider the assembly and “packaging” of the ideas
Where did you find better ideas for your project?
A Framework for Spread

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Better Ideas
- Develop the case
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Knowledge Management

Measurement and Feedback

Communication Strategies (awareness & technical)
Set Up

Once...
✓ Better ideas are documented
✓ Successful sites are identified

Then...
☐ Determine the target population
  – Who is your target audience? (Nurses, patients, technicians, etc.)

☐ Consider key partners
  – Who else will be impacted?

☐ Develop an initial spread strategy
  – Where to start? Why?
What do you know to be true about early adopters?
Early Adopters

- Often the key to successful change
- More socially integrated than innovators
- Thoughtful risk takers
- Often opinion leaders in the community
- Local missionary for change

*The innovator finds or creates the idea, and the early adopter makes it happen!*
A Framework for Spread

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Knowledge Management

Communication Strategies (awareness & technical)

Measurement and Feedback
Understand the Social System

Five variables affecting the rate of adoption of new ideas (Rogers):

1. Attributes of the change
2. Type of adoption decision
3. Communication channels
4. Understanding of the social system
5. Promotion efforts (leadership)
Successful Spread Programs Include:

Attributes of an Idea that Facilitate Adoption

- **Relative Advantage**: (evidence from testing that idea is better)
- **Simple**: (how easy to understand idea; less than 5 steps)
- **Trial-able**: (how easy to test the idea)
- **Compatible**: (reflects values of adopter, structure, and practices)
- **Observable**: (how visible is the change and results)

Spread Fundamentals: The Innovation-Decision Process

Awareness: Individual learns about the Innovation – broad marketing and communication

Persuasion - form a favorable attitude toward the innovation (Data Feedback)

Decision - activities that lead to making a choice to adopt (Case studies, individualized communication)

Implementation - put the innovation into use (Tools, resources and access to technical experience)

Confirmation - seek reinforcement of the decision about innovation (Feedback from leaders, data on performance)

Information - broad marketing and communication
Poll: When your expectation is a change in behavior, What is your ‘go to’ communication strategy?

A. Flyers, Newsletters, videos, articles, posters
B. Letters, Cards,
C. Telephone, email, learning sets, modeling,
D. Road shows, conferences, exhibitions, mass meetings
E. One-to-one mentoring, shadowing
The WAY We Communicate is Important

SHARE INFORMATION

- General Publications
  - Flyers
  - Newsletters
  - Videos
  - Articles
  - Posters

- Personal Touch
  - Letters
  - Cards
  - Postcards

- Interactive Activities
  - Telephone
  - Email
  - Visits
  - Seminars
  - Learning sets
  - Modeling

SHAPE BEHAVIOR

- Public Events
  - Road shows
  - Fairs
  - Conferences
  - Exhibitions
  - Mass meetings

- Face-to-face
  - One-to-one
  - Mentoring
  - Seconding
  - Shadowing

Adapted from Ashkenas (1995) by Sarah W. Fraser
A Framework for Spread

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Better Ideas
- Develop the case
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Knowledge Management

Communication Strategies (awareness & technical)
Two useful measures of spread:

1. Measures that demonstrate the *extent of the spread* of the recommended changes – *how far did we spread this?*

2. A set of measures that demonstrate the *outcome of the changes* implemented – *what impact did the spread have?*
A Framework for Spread

Leadership
- Topic is a key strategic initiative
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Communication Strategies (awareness & technical)

Better Ideas
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- Key partners
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Measurement and Feedback

Knowledge Management
Knowledge Management

- Do not underestimate the importance of KM
- Responsibility of the day-to-day manager
- Every encounter, event, and relationship
Scaling-up Improvements

Kathy Duncan
New Framework for Scale

DOI 10.1186/s13012-016-0374-x

Implementation Science

METHODOLOGY Open Access

A framework for scaling up health interventions: lessons from large-scale improvement initiatives in Africa

Pierre M. Barker¹,²*, Amy Reid¹ and Marie W. Schall¹

Abstract

Background: Scaling up complex health interventions to large populations is not a straightforward task. Without intentional, guided efforts to scale up, it can take many years for a new evidence-based intervention to be broadly implemented. For the past decade, researchers and implementers have developed models of scale-up that move...
Core Elements Included in the Design:

- “Spread” – *the leadership, social, and environmental factors that promote adoption and replication, with little modification, of an intervention within a health system*

- “Scale-up” - *overcoming the system/infrastructure issues that arise during efforts to scale-up implementation*
Phases of Scale-up

- Introduction of a new evidence based intervention for system-wide scale-up
  OR
- Adaptation and scale-up of a successful innovation in one part of the system to the rest of the system
Phases of Scale-up: Set Up

- Answer key questions: clear aim, what is full scale, define scalable unit
- Analyze the existing programming strategies and protocols
- Assemble best practices, build change package (expert group)
- Select a baseline data collection method
Phases of Scale-up

- Administrative unit includes core activities and support systems that need to be replicated in the larger health system
- Intensively test local ideas, generate a set of context-sensitive interventions for the scale-up “change package
Local Site Improvement

- What is the evidence? Is there a case?
- How will this make care better? Work better?
- Ensure it aligns with the larger organizational goals
- Understand and account for the Nature of the Social System
- Decide who ‘Leads the charge”
- What do you need? (content, resources, experts, site visits, Business case, etc.)
Large Scale Improvement

• Make the Case
• Set a “what by when” aim
• Ask yourself: How is the heart of this work reflected in the aim?
• Identify three of four stories that support your overall aim and bring a face to the work
• Set milestones along the way; what’s the trajectory of the work?
• What do you need? (content, resources, experts, site visits, business case, etc.)
The Scalable Unit

- The smallest representation of full scale that supports the patient journey, and includes components of a self-contained functional unit
  - (i.e., the people, processes and structures) that produces an output that is representative of the whole.

- Questions to consider: Does it include all the elements that need scaling up? Is it representative enough of the whole system? Can it be scaled up?

- Why build a scalable unit?
  - Generate change package
  - Test-bed the infrastructure capabilities
  - Generate will and interest for spread
Phases of Scale Up: Build Scalable Unit

- Local Site Improvement
  - A unit?
  - A floor?
  - A shift?
  - A process?
  - A provider group?
For your project, what might be your scalable unit?
Phases of Scale Up: Test Scale-Up

Test and further develop preliminary change package in a broader range of contexts representing the predicted full-scale environment.
• Local Site Improvement
  – A unit?
  – A floor?
  – A shift?
Phases of Scale Up: Full Scale and Sustain

- Rapid deployment phase - well-tested set of interventions are deployed at large scale, adopted by frontline staff
- Focus on replication and sustainability
Adoption and Support Systems

Phases of Scale-up
1. Set-up
2. Build Scalable Unit
3. Test Scale-Up
4. Go to Full-Scale

Leadership, communication, social networks, culture of urgency and persistence

Adoption Mechanisms

Support Systems

Learning systems, data systems, infrastructure for scale-up, human capacity for scale-up, capability for scale-up, sustainability
Validate Support Structures

- **Learning system**
  - How people will be connected to learn improvements

- **Data systems**
  - Identify data, collection methods, method for review and accountability

- **Infrastructure**
  - Staffing, resources, communication systems, etc.

- **Capability for scale-up**
  - What improvement skills and training are needed

- **Sustainability**
  - Creating reliable systems (i.e., the train tracks)
Create Adoption Mechanisms

• Engage leadership
• Build a communication plan
• Identify and utilize existing networks and social systems
• Foster a culture of urgency and persistence
Going to Full Scale

Phases of Scale-up

Best Practice exists

New Scale-up Idea

Set-up

Build Scalable Unit

Test Scale-Up

Go to Full-Scale

Adoption Mechanisms

Leadership, communication, social networks, culture of urgency and persistence

Support Systems

Learning systems, data systems, infrastructure for scale-up, human capacity for scale-up, capability for scale-up, sustainability

P Barker, A Reid, M Schall, unpublished paper, April 2015
The Scale-Up Framework

Can you place each of your projects in this framework?

Best Practice exists

New Scale-up Idea

Set-up

Build Scalable Unit

Test Scale-Up

Go to Full-Scale

Leadership, communication, social networks, culture of urgency and persistence

Learning systems, data systems, infrastructure for scale-up, human capacity for scale-up, capability for scale-up, sustainability

Phases of Scale-up

Adoption Mechanisms

Support Systems

Do you have the adoption and support systems necessary for scaling your projects?
What Needs to Be Your Priority in These Support Systems?

- **Best Practice exists**
  - Set-up
  - Build Scalable Unit
  - Test Scale-Up
  - Go to Full-Scale

- **New Scale-up Idea**

**Phases of Scale-up**
- Leadership, communication, social networks, culture of urgency and persistence

**Adoption Mechanisms**
- Learning systems, data systems, infrastructure for scale-up, human capacity for scale-up, capability for scale-up, sustainability

**Support Systems**

Live Chat
The IHI Seven "SPREADLY" Sins

(If you do these things, spread efforts will fail!)

1. Start with large pilots
2. Find one person willing to do it all
3. Expect vigilance and hard work to solve the problem
4. If a pilot works then spread the pilot unchanged
5. Require the person and team who drove the pilot to be responsible for system-wide spread
6. Look at process and outcome measures on a quarterly basis
7. Expect marked improvement in outcomes early on without attention to process reliability
Poll:

Think of the last improvement effort that you have participated that failed to be successful.

What contributed to its failure?

A. Too large a pilot? Or no pilot at all?
B. Single person doing it all?
C. Relying on vigilance and hard work?
D. Scaling a small pilot unchanged?
E. Assigning the person and team who drove the pilot to be responsible for system-wide spread?
F. Reviewing process and outcome measures on a quarterly basis vs daily or weekly
G. Expecting improvement in outcomes without attention to process reliability
Action Period Assignments

- **Watch:** *Is There a Secret to Sustaining Improvements?*
- **Read IHI’s** *Sustaining Improvement White Paper*
- **Review:** *Seven Spreadly Sins*
Bring It Home

Mallory Bender, Program Manager, HRET
THANK YOU!

Next call: Wednesday, October 11, 2017
12:30 – 1:30 pm CT
Submission

• Please submit your project to hiin@aha.org by October 15! And make sure everyone’s name is on the project if you are working as a group.
THANK YOU!

Next call: Wednesday, October 11, 2017
12:30 – 1:30 pm CT