Implementation Success Factors

Pat Teske, MHA, RN – Cynosure Health
February 1, 2019
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<td>11:00-11:05</td>
<td>Welcome</td>
<td>Jordan Steiger, HRET HIIN</td>
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<td>11:05-11:15</td>
<td>Setting the stage</td>
<td>Pat Teske, MHA, RN</td>
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<td>11:15-11:25</td>
<td>Thinking and doing things differently</td>
<td>Martha Hayward, PFE SME</td>
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<td>11:25-11:50</td>
<td>Implementation success factors</td>
<td>Pat Teske, MHA, RN</td>
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<td>11:50-11:55</td>
<td>What’s next?</td>
<td>Pat Teske, MHA, RN</td>
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How do we get from here to there?
From project to operations
Will

Ideas ⇔ Execution
Success

...by envisioning a different future
The Tipping Point

The critical point in a situation, process, or system beyond which a significant and often unstoppable effect or change takes place.
The S Curve of Adoption

Where we want to be

Where we are

- Innovators: 2.5%
- Early Adopters: 13.5%
- Early Majority: 34%
- Late Majority: 34%
- Laggards: 16%
When does the tipping point occur?

When roughly 25% of people or organizations adopt the innovation.

In his 1962 book, *The Diffusion of Innovations*, Everett Rogers argued that diffusion is the process by which an innovation is communicated thru channels over time among participants in a social system.
Diffusion of Innovation

According to Rogers, four main elements influence the spread of a new idea:

1. The innovation itself +
2. Communication channels
3. Time
4. A social system
Reducing readmissions for pts. with ≥ 4 admissions /12 months

- Think differently
  - We can make an impact
  - No more non-compliance
  - Whole person care – Not just medical

- Act differently
  - Identify
  - Determine drivers of utilization
  - Do something different
  - Plan for their return

- Implement Successfully
  - AIM
  - Monitor
  - Action periods
Patient/family perspective

• Think differently
• Act differently
What does it take?
How do you know that the changes you are making are making an improvement?
On Death, Dying & Data

DENIAL

ANGER

BARGAINING

DEPRESSION

ACCEPTANCE

DENIAL
Measurement for Improvement

- **Learning** not judgement
- Seek usefulness not perfection
What do we need to measure?

**Outcome**
- Usually down

**Process**
- Usually up
Outcome

- 30 day all-cause readmission rate for patients with 4+ hospitalizations in the past 12 months.
  - Number of patients with 4+ hospitalizations in the past 12 months who were readmitted within 30 days of discharge
  - Number of patients with 4+ hospitalizations in the past 12 months who were discharged

Process Measures

- Number of patients with 4+ hospitalizations in the past 12 months who received your inpatient intervention
  - E.g. pt. interviewed to determine DOU, pt.’s goal established, care plan developed

- Number of patients with 4+ hospitalizations in the past 12 months who received your post discharge intervention
  - E.g. pt. actively linked community health worker, pt. enrolled in substance use treatment program
Implementation dashboard

- Track weekly
- Number of patients
- Number of patients who received your inpatient intervention
- Number of patients who received your post discharge intervention
Tacit Knowledge

Knowledge comes in 2 flavors – “knowledge that” and “knowledge how.” Knowing that a bicycle has 2 wheels, a seat, handlebars, and a foot-pedal crank, for example, stands in sharp contrast to the practical knowledge of how to ride a bike.

Brent James, M.D.
What changes can we make that will result in an improvement? What new idea should we test?
PDSA

Plan
• Objective
• Questions & predictions
• Plan to carry out:
  Who? When? How? Where?

Do
• Carry out plan
• Document problems
• Begin data analysis

Study
• Complete data analysis
• Compare to predictions
• Summarize

Act
• Ready to implement?
• Try something else?
• Next cycle

“Let’s try it!”
“Did it work?”
“What’s next?”
“What will happen if we try something different?”
Test before you implement

- Adapt
- Adopt
- Abandon
The Value of “Failed” Tests

“I did not fail one thousand times; I found one thousand ways how not to make a light bulb.”

Thomas Edison
Common Traps

• Plan Do, Plan Do
• Do Act, Do Act
• No testing, only data collection
• No ramps of tests, random PDSAs
• Undisciplined PDSAs, no documentation
• No prediction
• Beware of Cycles longer than 30 days
Make the right thing to do the easy thing to do
Work with the willing
Find and spread bright spots
Match the DOU(s) with the plan
If DOU is
• Anxiety
• Isolation

Then
• Reassure
• Build trust
• Frequent contact
• Hi touch
You learned from your interview that this patient is returning to the hospital because she is living alone which makes her very anxious, particularly over the weekend when her PCPs office is closed.

You want to test some new ideas that include more frequent contact to provide reassurance. How would you test these ideas?

- Predict – What do you think will happen if you provide more frequent contact and reassurance?
- Who, what, when, where?
- What kind of data will you collect during your test?
- When and how will you evaluate?
- What will you do next?
Applying Lessons Learned – What would you do differently for the next test?
If DOU is
• Chronic instability

Then
• Work to stabilize
• Patient goal setting
• ED care alert
You learned from your interview that this patient is returning to the hospital because he is chronically unstable due to substance use disorder.

You want to test some new ideas. You heard and read what others are doing. You want to try one of these ideas. How would you begin?

- Select an idea. E.g. **SBRIT** (Screening, Brief Intervention, and Referral to Treatment)
- Predict – What do you think will happen if you try SBRIT?
- Who, what, when, where?
- What kind of data will you collect during your test?
- When and how will you evaluate?
- What will you do next?
What are your plans to spread?
How will you disseminate your learnings?
What’s your plan for ongoing monitoring?
How will you know if you are drifting?
What will you do to avoid drift?
How are you celebrating?
Go it alone
March 1, 2019

The New Normal

- Lessons learned from some of our implementing hospitals
Thank You!