Top Ten Strategies for Sustaining the Change

1. Identify Developmental Screening Office Champion

2. Continue To Prioritize Developmental Screening Work
   - Making screening a standing agenda item for practice meetings
   - Make aims, successes, learnings, and benefits to all staff clear
   - Document and publicize the improvement efforts and learning

3. Established Standardized Workflow for Developmental Screening
   - Make workflow an office policy
   - Have a standardized referral and feedback process
   - Establish referral relationship
   - Assign an office person to update referral list

4. Develop a Control Plan to hold gains
   - Outline key measures and documentation to be maintained to ensure project gains are sustained
   - Provide plan to monitor key measures
   - Identify person to notify if gains slip
   - Create plan to take corrective action
     o Use Plan, Do, Study, Act (PDSA) cycles

5. Monitoring
   - Continue to use data and graphs
     o QIDA still available
   - Provide feedback data to physicians and office staff
     o Initially blinded data
   - Once screening process is established, switch to “unblinded” data
   - Meet periodically to check in on progress

6. Address Barriers and Solutions
   - Inform why the change is made
   - Address the issue of time
   - Address how the change will affect people
   - Understand and address the causes of resistance
   - Publicize the results and learning

7. Provide Incentives
   - By Individual, Team, or Module
     o Lunch for team or module with completion rate
     o Small amount gift cards
• Physician Bonus

8. Communicate Improvement With Patients
• Ask patients to provide feedback on the process
• Consider a patient survey
• Keep in contact with your team, other teams and your patients
• Share good stories
  o How developmental screening helped a child and family receive needed services

9. Celebrate Successes!! (100 Days, Above Goals, Etc.)
• Show appreciation for people’s efforts
• Lunch-time party is always good

10. Utilize the PMAR Approach
• Policy/Procedure (P/P)
  o “How we do it around here” with specific policy and procedures describing the new workflow
    • P/P includes the measures that will be followed
      ▪ Who is accountable
      ▪ Training processes for new staff
• Measurement
  o Systematic approach to gathering data regularly either through an audit process that involves all the data or a sampling process that is designed as part of the P/P
• Accountability
  o Establishes who is accountable for process performance and the frequency of meetings
• Repair
  o Contingency plans for specific changes in performance
  o If performance begins to trend downward by a certain percentage or if the metric reaches a critical level
  o Practice initiates a predetermined contingency plan to improve the measure
3-Step Approach for Spreading the Change

1. **Phase One: Start with Pilot Program**
   - Allow early adopters to finalize the workflow and address issues quickly
   - Develop a timeline for implementation of screening and workflow
   - Hold an office meeting to discuss new workflow with all the staff including:
     - Physicians, nurses, and other clinicians
     - Front and back office staff

2. **Phase Two: Recruit A Willing Group Of Physicians, Other Clinicians, And Office Staff**
   - Scale up the workflow to identify any additional issues
   - Rectify any issues uncovered and update workflow policy appropriately
   - Hold another office meeting to update all practice staff prior to practice-wide implementation

3. **Final Phase: Implement Practice-wide**
   - Provide extra support to staff throughout the process
   - Assign the most proficient staff as “mentors” to staff having the most difficulty with new workflow
   - Listen and document any concerns about screening process
     - Address any concerns
     - Have a timetable to address concerns
   - Continue to hold office meetings to provide updates, successes, and challenges