Holding Your Gains: Strategies for Sustaining Improvements

Ruth S. Gubemick, MPH and Michael L. Rinke, MD PhD
Learning Session 2
November 9, 2013
Disclosure Slide

• We have no relevant financial relationships with the manufacturers of any commercial products and/or provider of commercial services discussed in this CME activity.

• We do not intend to discuss an unapproved/investigative use of a commercial product/device in our presentation.
Agenda

1. Holding the gains – Lessons Learned
2. Strategies to hold your gains
   - Documentation, Monitoring and Prevention
3. Team work time on Control Plans
4. Share Control Plans
Breakthrough Series (6-12 Months Time Frame)

Select Topic
↓
Expert Meeting
↓
Planning Group

Develop Framework & Changes

Participants

Prework

Strategy:
- test
- implement
- hold the gain
- spread

LS 1 → LS 2

How well do successful teams “hold the gains” after LS2?

Beyond LS 2
2003 IHI Survey on “Holding the Gains”

Brief History—surveyed 33 successful teams from different collaboratives.

Objective: To determine how well successful teams involved in IHI’s Breakthrough Series Collaboratives (i.e. teams with gains to hold) have sustained their progress after the end of the final learning session.
Question: What is your current level of performance compared to the end of the final learning session for the key outcome measure?

<table>
<thead>
<tr>
<th>BTS Successful Teams</th>
<th>Much Better</th>
<th>Better</th>
<th>Same</th>
<th>Worse</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 initial responders</td>
<td>3</td>
<td>8</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>20 follow-up responders</td>
<td>7</td>
<td>4</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>33 Total Teams</td>
<td>10 (30.3%)</td>
<td>12 (36.4%)</td>
<td>10 (30.3%)</td>
<td>1 (3.0%)</td>
</tr>
</tbody>
</table>

Summary

97% of teams at least “held the gains” from the BTS
67% of teams are now performing better than at end of BTS
<table>
<thead>
<tr>
<th>Question</th>
<th>% Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you still tracking your performance?</td>
<td>85%</td>
</tr>
<tr>
<td>Is there periodic reporting to leadership regarding performance?</td>
<td>88%</td>
</tr>
<tr>
<td>Were other residual benefits gained in the improvement process that took hold?</td>
<td>91%</td>
</tr>
<tr>
<td>Do you and your colleagues continue to use improvement methodology in your work?</td>
<td>91%</td>
</tr>
</tbody>
</table>
## Additional Survey Findings (strategies for holding the gains)

<table>
<thead>
<tr>
<th>Question</th>
<th>%Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the team begin to plan how to sustain its progress early on in the improvement process?</td>
<td>78%</td>
</tr>
<tr>
<td>Did you document the improvement process?</td>
<td>81%</td>
</tr>
<tr>
<td>Did you document the process of holding performance at your new level?</td>
<td>66%</td>
</tr>
<tr>
<td>Was a financial return on investment tied to the improvement that occurred?</td>
<td>16%</td>
</tr>
<tr>
<td>Has the team taken specific action in order to make the improvement process more permanent?</td>
<td>70%</td>
</tr>
</tbody>
</table>
# Additional Survey Findings (spread)

<table>
<thead>
<tr>
<th>Question</th>
<th>%Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has your organization pursued a spread plan?</td>
<td>97%</td>
</tr>
<tr>
<td>Was the same level of performance spread to other areas?</td>
<td>55%</td>
</tr>
</tbody>
</table>
General Impressions

• The power of internal publicity (establish the high-water mark)
• Commitment to real sustainability versus “quick hits” (leadership, resources, ambition)
• Understanding that the end of the formal collaborative is only the beginning (and that success is only a step in the right direction)
## After Implementation
### Some Inhibitors

<table>
<thead>
<tr>
<th>Old System</th>
<th>New System</th>
</tr>
</thead>
<tbody>
<tr>
<td>• “We met our goals”</td>
<td>• “We assumed the improvement would hold”</td>
</tr>
<tr>
<td>• “We assumed the improvement would hold”</td>
<td>• Other priorities took all resources away</td>
</tr>
<tr>
<td>• Other priorities took all resources away</td>
<td>(not on senior management’s radar screen)</td>
</tr>
<tr>
<td>• Did not learn how to hold the gains</td>
<td>• Did not learn how to hold the gains</td>
</tr>
<tr>
<td>• Infrastructure not in place</td>
<td>• Infrastructure not in place</td>
</tr>
</tbody>
</table>
Food for Thought

1. Think about all the changes you have implemented during this collaborative and the hard work you have put into these changes.

2. Assume your collaborative team members all retire TOMORROW:
   - What changes will continue to be used?
   - What could make your organization revert to the old system?
   - What would have to be in place to prevent your organization from reverting to the old system?
Key Components of Strategy to Sustain Gains

- Communication
- Infrastructure
- Design effective Control System
Communication for Sustainability

- Make aim, success, learning, and benefits to all stakeholders clear
- Document and publicize the improvement efforts and learning
- Keep in contact with your team, other teams **AND YOUR PATIENTS**
- **CELEBRATE SUCCESSES!!** (100 days, above goals, etc)
Infrastructure: Redesign support processes

- Change job descriptions
- Train on the new process
  - Chance to explain the “why” of the change
  - New skills may be needed
  - Include method of maintenance
- Map out the flow of the new process
Strategies to Hold the Gains

I. During testing
II. During implementation
III. After implementation
How do we Sustain Change?

Prevention
Elimination, Mistake Proofing

Monitoring
Audits, Control Charts, Inspection & Test

Documentation
Policies, Work Instructions, Operational Method Sheet

GOOD

BETTER

BEST
Documentation (Good)

- Policies: Necessary but not sufficient
- Who has policies to sustain their gains?
Documentation (Good)

- **Operational Method Sheet**: A visual format for work instructions

<table>
<thead>
<tr>
<th>Obtain medication from shelf</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review labels and verify correct solutions present</td>
</tr>
<tr>
<td>Compound medication under the hood</td>
</tr>
</tbody>
</table>
Monitoring (Better)

- Continue to use data and run charts
- Feedback data to frontline staff
- Meet periodically to check in on progress
- Audit, audit, audit!
Monitoring: Collect Data When Conditions Are Expected To Change

Baseline
Testing
Successful Testing
New EMR

Evidence of Sustained Improvement
Prevention (Best)

- **Elimination**: Eliminate the possibility of error by eliminating the task or part
- **Mistake-Proofing**: Engineer the process so that mistakes are impossible
  – Poka-Yoke
Prevention (Best)

- **Mistake Proofing:**
  - **Home:** automated thermostats controls, ground fault circuit breakers in bathroom, coffee maker shutoff switches
  - **Medical:** Sharps containers that won’t open, needle-less devices, oxygen versus air connections at bedside
Prevention (Best)

• What mistake proofing can you do with some of the changes you have made?
Control Plans

- **Control Plans:**
  - Outlines key measures and documentation to be maintained to ensure project gains are sustained
  - Provides plan to monitor key measures
  - Identifies person to notify if gains slip
  - Creates plan to take corrective action if needed
## Control Plans

<table>
<thead>
<tr>
<th>Measure</th>
<th>Goal</th>
<th>Documentation</th>
<th>Monitoring</th>
<th>Prevention</th>
<th>Process Owner</th>
<th>Reaction Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Control Plans

<table>
<thead>
<tr>
<th>Measure</th>
<th>Goal</th>
<th>Documentation</th>
<th>Monitoring</th>
<th>Prevention</th>
<th>Process Owner</th>
<th>Reaction Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family History created/updated at health supervision visits</td>
<td>90%</td>
<td>1. Policy #23, last updated 6/2/2013; 2. OMS for front desk staff family history taking</td>
<td>Quarterly audits of 5 charts for all physicians by Marie RN</td>
<td>Patient portal sends automatic email to parents before visit</td>
<td>Notify Dr. Thomas if &lt; 90%</td>
<td>Switch to paper family history forms for 1 week, audit weekly for 1 month, discuss at staff meeting</td>
</tr>
</tbody>
</table>
Repeated use of the cycle over a broad range of conditions builds a robust design.

1. Early tests are simple designed to succeed.
2. Test over a wide variety of conditions to identify weaknesses.
3. Later tests designed to predict and prevent failures.

Full, Sustained Implementation.
Teams who hold the gains:

- Use data and continue with run charts
- Continue to report and create accountability and celebrate SUC ESSES
- Have leadership’s support
- Meet often enough
- Train and orient, make policy
- Assign responsibility for key tasks
- Focus on Mistake Proofing!
- Expect changing conditions and are prepared (new EMRs, new staff hired, etc)
6 Month Follow-Up

IRB Handout describes changes to the project protocol

QIDA Data
• In March 2014, all practices will be asked to submit a final round of data via QIDA

Interviews
• Brief telephone interviews will be conducted with each practice
• Questions discuss sustainability of maintaining project goals, any challenges encountered
• Teams may select the person who will be interviewed; practices are encouraged to discuss discussion guide with the core improvement team
From Charles Darwin:

“It is not the strongest of the species that survive, nor the most intelligent, but the one most responsive to change.”
Questions/Comments?
Team Work on Control Plans

• Complete Control Plan for at least 3 Changes you have successfully tested

• Be prepared to share one of your control plans with the group