



# RAPID

Reporting Assistance and Process  
Improvement Discussion

## Session 4

**Vision: Healthy Communities, Healthy People**



# Agenda

1. Takeaways from SME Session 2 on Aug. 8th.
2. Review action work
  - a. Selected interventions
  - b. SMARTIE goals
  - c. Consider how these will evolve
3. Takeaways from across the sessions and across the cohorts
  - a. Validation
  - b. Piloting
4. Action work following the series
  - a. Go forth with your intervention
  - b. Monitor progress on your SMARTIE goal
5. Preparing for success session in 3 months!



# Recap of Action Work from Prior Session



## Action Work Before Session 4

1

Select an improvement that you will try out to improve your performance on this measure

- Clearly define the improvement you'll try
- Explain how this improvement addresses the problems laid out in your problem statement and process review.
- Explain how the improvement takes into account the external environment.



2

### Draft Your SMARTIE Goal

- Your SMARTIE goal will spell out the goal of the improvement outlined.
- It should tie directly to the other work you have done so far.
  - Meaning, you want to set a goal related to the problem statement you wrote, areas where patients are not meeting the measure, and improvement selected.



In your health center, discuss possible improvements to address problems/ challenges identified.



Decide what improvement you'll try



Work through SMARTIE goal action plan worksheet with your team.



Document selected improvement and related SMARTIE goal in SMARTIE goal worksheet. Complete the rest of the worksheet.



Email your SMARTIE Goal Action Worksheet.



## How did it go?

Drop an emoji on the diamond to the left, indicating how you did deciding on an improvement to address problems identified.



Then, drop an emoji on the shape to the left, indicating how creating your SMARTIE goal for your improvement went.



Then, share why you selected what you did– share the details of what went well, what didn't, and what was stormy!

# What did you select for an intervention?

What change did you decide to test? Why did you choose that; what part of the problems you have identified does that change address?

What intervention did you choose to make?	Why this change; what problem does it address?	
<div data-bbox="138 542 473 886">DON will create a workflow to have nurse and MA review reason for visit 48 hours prior and flag anyone needing CCS screening. Discuss offering same day pap at office visits with providers</div> <div data-bbox="657 554 939 839">We will be changing the way we document both on paper and electronically, as well as increasing/improving education with patients. Also creating a call campaign.</div> <div data-bbox="637 925 826 1118">We will be leveraging population health tools to implement outreach campaigns to remind patients due for screening and educate</div> <div data-bbox="113 1062 302 1256">Increase awareness and provider comfort level and have provider training to document correctly in EPIC; reconciling outside records to verify cervical CA screening has been completed.</div> <div data-bbox="400 1039 589 1232">Increase primary care provider comfort level with CCS</div> <div data-bbox="841 1075 1030 1268">We chose to create a workflow that improves documentation of both internal and external screenings, and improves culturally sensitive education.</div>	<div data-bbox="1088 549 1277 742">Our documentation needed some "clean up" and modifications to accurately capture our CCS.</div> <div data-bbox="1592 554 1869 839">Provide CCS procedure review Developed handouts for discussion with pts, Improve documentation All steps will increase screening and scheduling of screening</div> <div data-bbox="1081 1085 1270 1278">To accurately identify those clients who are eligible for a cervical CA screening and accurately report those who have received a screening.</div> <div data-bbox="1345 1062 1534 1256">Will help resolve issue with manual outreach calls due to lack of dedicated staffing</div> <div data-bbox="1738 1075 1927 1268">Our workflow will address two parts of the problem: lack of documentation and lack of culturally sensitive and inclusive education at the time of service.</div>	<div data-bbox="2003 365 2192 558"></div> <div data-bbox="2003 601 2192 793"></div> <div data-bbox="2225 601 2414 793"></div> <div data-bbox="2003 836 2192 1029"></div> <div data-bbox="2225 836 2414 1029"></div> <div data-bbox="2003 1072 2192 1265"></div> <div data-bbox="2225 1072 2414 1265"></div>
Rapid Session 4		

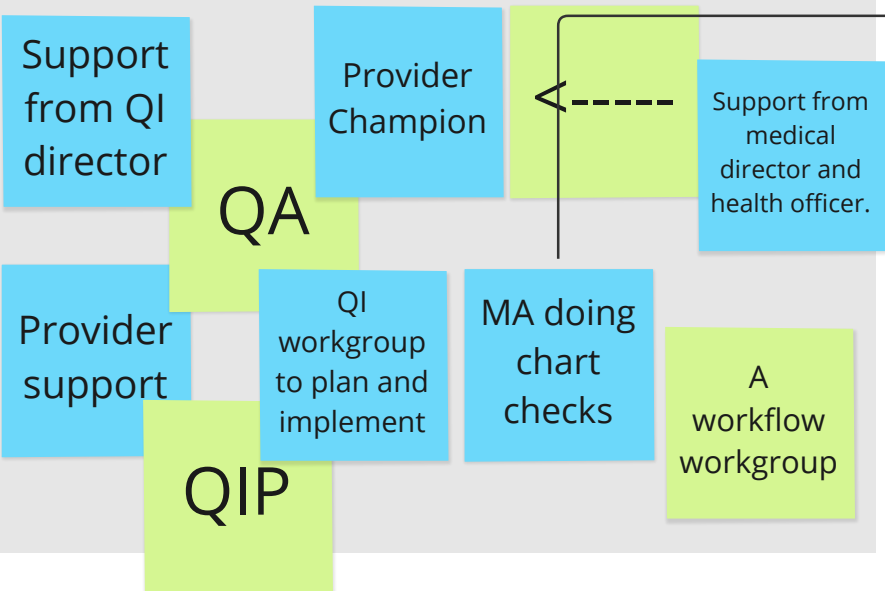


# Forces for Change



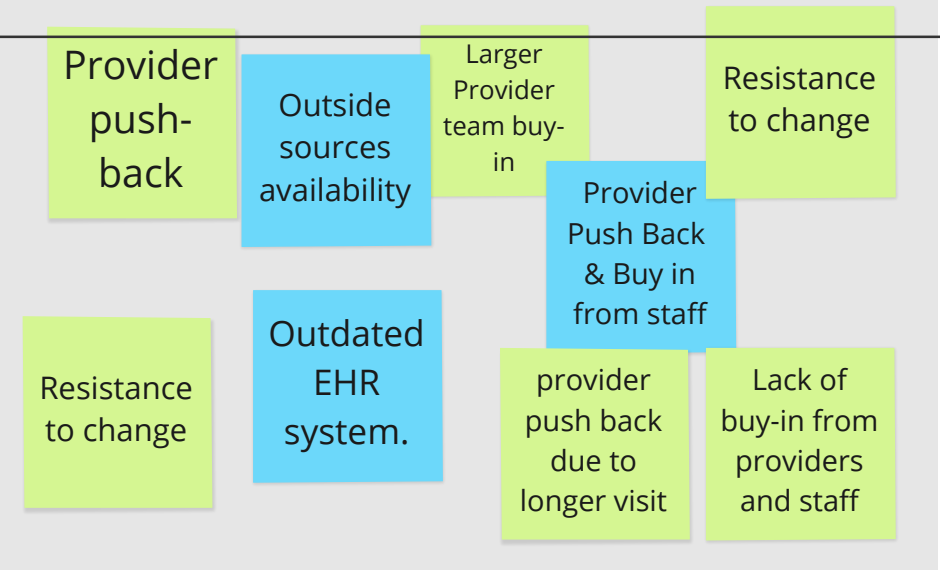
## Driving Forces

What forces support or encourage this particular change?



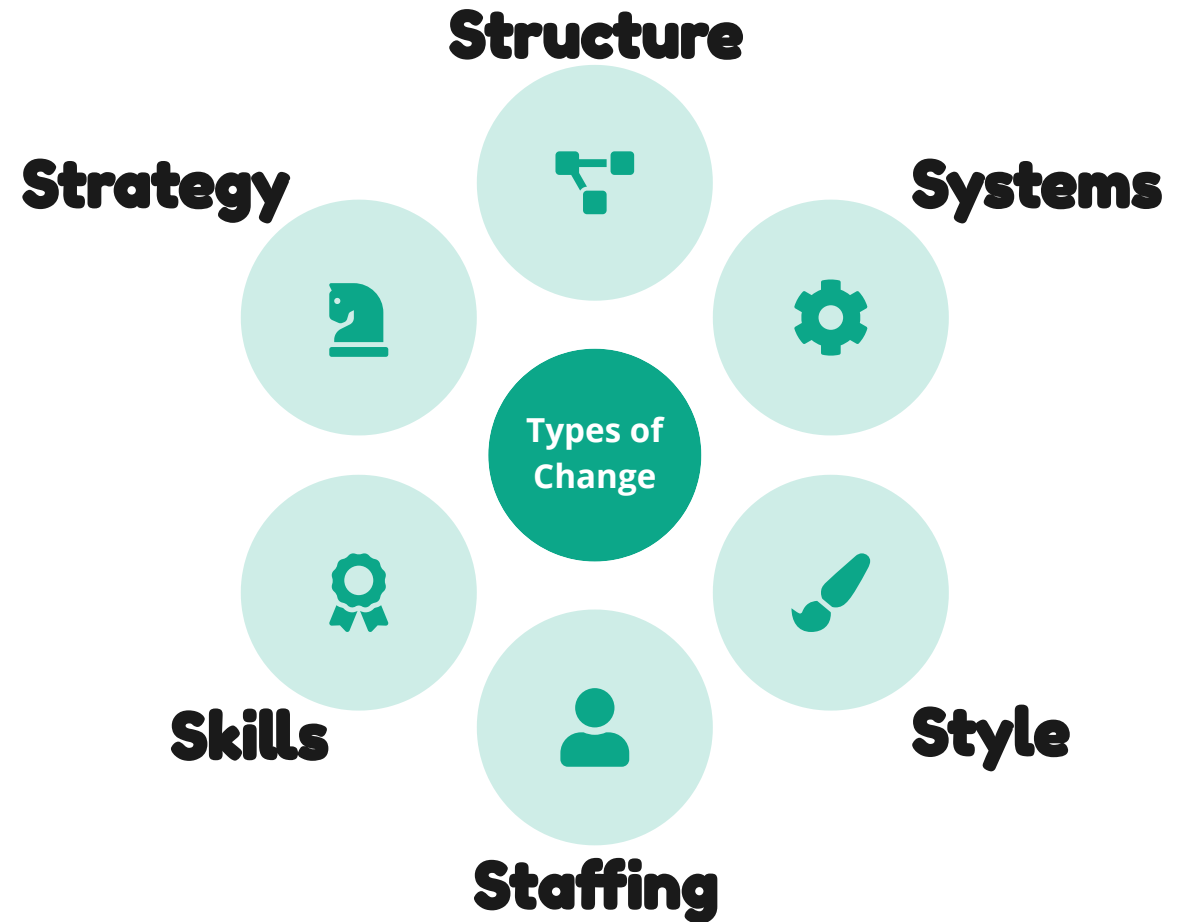
## Restraining Forces

What are the headwinds or challenges that you will face?



# What trends do you see in the changes shared?

From what your colleagues shared on the last slide, and what you considered in your own organization-- what trends or commonalities do you see?



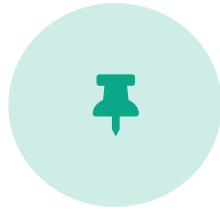
# Key Takeaways & Risk Mitigation Strategies

## Communication



It is important to communicate about the change that you are testing and why, including how broad the test will be and how it will be determined if the test works.

## Validation



All data and information used to determine change to be made or to monitor on an ongoing basis must be validated-- simply trusting that data reflects the work being done is not enough!

## Piloting



If you are familiar with PDSA cycles, you know that the focus is small tests of change. This ensures that you don't retrain or make other big investments before ensuring the change works as expected.

## Storytelling



Many people don't love data, and especially don't love when data is used to tell them how well or not well they are doing. Using patient and staff stories to reflect the importance of this work is much more meaningful!

# Reminder of SMARTIE Goal

<b>Strategic</b>	Reflects an important dimension of what your organization seeks to accomplish.
<b>Measurable</b>	Includes standards by which reasonable people can agree on whether the goal has been met (by numbers or defined qualities).
<b>Ambitious</b>	Challenging enough that achievement would mean significant progress; a “stretch” for the organization.
<b>Realistic</b>	Not so challenging as to indicate lack of thought about resources or execution; possible to track and worth the time and energy to do so.
<b>Time-Bound</b>	Includes a clear deadline.
<b>Inclusive</b>	Brings traditionally excluded individuals and/or groups into processes, activities, and decision/policy making in a way that shares power.
<b>Equitable</b>	Includes an element of fairness or justice that seeks to address systemic injustice, inequity, or oppression.



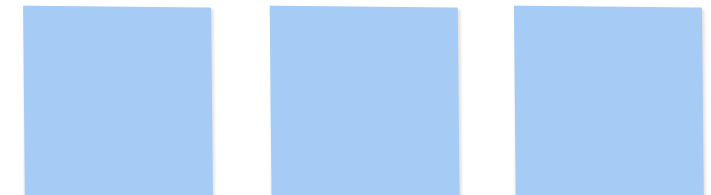
# How will your measure change against your SMARTIE goal?



- What will you measure?

## How will you measure it?

- When will you measure it?
- Who will be responsible for that?

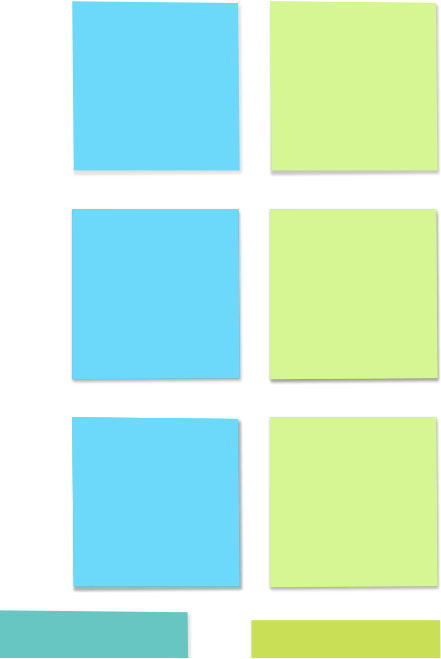


# How do you see successful change impacting your work?

Roles

Teamwork

Duties



# What comes next?



## Step 1

Implement your change!  
Be sure to include communication, validation, piloting, and storytelling!



## Step 2

Monitor and measure, particularly against your SMARTIE goal.



## Step 3

Review progress with your team regularly.



## Step 4

Iterate as needed based on team response and monitoring results



## Step 5

Join the Success Session, three months from now to share how it is going!



# Final Session: December 5th 2-3pm ET



- Action work between now and then is to go forth with your change!
- At our success session:
  - Share how your change and progress on your SMARTIE goal is going.
  - Strategize on how to *sustain* change.





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**Thank  
you!**

**Talk to you  
in 3 months!**

