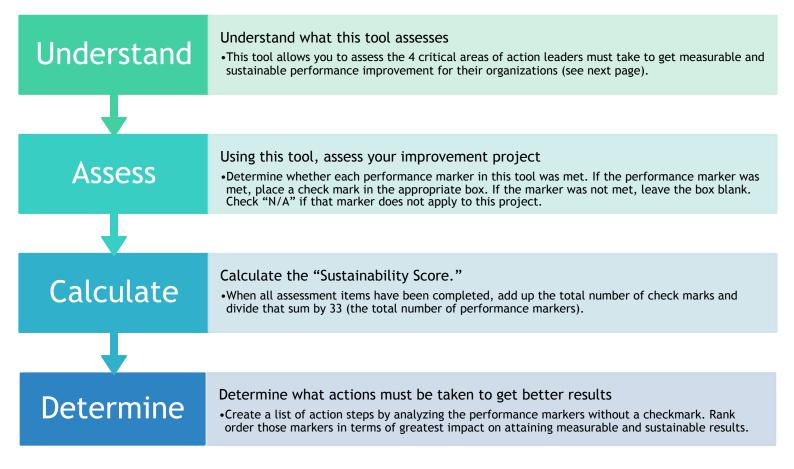


Improvement Initiative Assessment Tool

A tool to calculate an "Effectiveness Score" and to understand why an improvement project has succeeded or failed

How to use this Tool





Roadmap to Getting Measurable & Sustainable Results

Process (Standard Work)

Culture Accountability

Measurement

Leading Change



Leading Change

ltem	Action	Met	Not Met	N/A
1	Identified desired Key Results and quantified them (Answered, "How do we know we won?)			
2	Created an interdisciplinary leadership change team of key stakeholders			
3	Recruited and effectively created engagement and alignment with key physician champions			
4	Identified likely barriers and developed a plan to overcome them			
5	Revised appropriate Policies & Procedures mandating the use of new processes (Codifying our work)			
6	Determined the culture needed to support our change and in the process of prescriptively creating that culture with a written action plan (e.g. Results Accelerator and/or Table of Experiences			
7	Coached low performers (if needed) & imposed consequences where needed			
8	Created & followed a systematic communications plan explaining the "why" and "how"			
9	Created & followed a systematic leadership rounding program to support the change			
10	Revised annual performance reviews & job descriptions to support use of new processes			



Measurement

ltem	Action	Met	Not Met	N/A
1	Selected metrics for this project that are consistent with, and contribute to, overarching hospital (or clinic, or practice group) strategic goals			
2	Selected key results that energize and motivate front line staff $\&$ physicians			
3	Created and implemented a data collection and analysis system to measure results, to include leading and lagging measures			
4	Collected and analyzed "leading" data (e.g. behaviors) to predict success on "lagging" data (e.g. results)			
5	Transparently shared leading and lagging data with the frontlines			
6	Posted data (scorecards) that comply with the "10 feet - 3 seconds" rule			
7	Systematically and frequently updated the transparently shared data (scorecards)			



Culture of Accountability

ltem	Action	Met	Not Met	N/A
1	Provided (or previously provided) teamwork and communications training to support the change initiative			
2	Provided experiential, interdisciplinary training on cross-checking & speaking up when a problem with the patient care processes resulting from this project is perceived			
3	Implemented (or have already) a 'No-retribution" policy			
4	Implemented (or have already) an "Escalation Policy"			
5	Implemented (or have already) & systematically used a Recognition & Reward Program			
6	Implemented (or have already) and systematically used a Good Catch Program			
7	Revised appropriate Policies & Procedures with verbiage supporting/requiring cross-checking and speaking up when a problem with patient care is perceived			
8	Created a system to train new hires on cross-checking and speaking up			



Process

ltem	Action	Met	Not Met	N/A
1	Used scientific process improvement tools (A3, VSM, PDCA, etc.) to create new processes			
2	Used frontline staff to create & implement new processes			
3	Used frontline physicians, where appropriate, to create & implement new processes			
4	Codified new process(es) with standard work chart, Job Instruction Breakdown Sheet, Checklist, or Algorithm, etc.			
5	Provided training and education to all team members on the use of new processes			
6	Implemented Leader Standard Work to support ongoing improvements and refinements of new processes			
7	Assigned a specific owner of each new process so staff know who to approach with suggested improvements			
8	Created a system to train new staff on the use of the standard work or processes resulting from this project			



Determine Your Effectiveness Score

- Add up the number of checkmarks in the "Accomplished" column
- Divide by 33 (minus the number of checkmarks in the "N/A" column).
- The resulting percentage represents your "Effectiveness Score."
- Enter this score on item #5 of the Executive Summary.
- Determine what actions must be taken to get better results by analyzing the performance markers without a checkmark. Rank order those markers in terms of greatest impact on attaining measurable and sustainable results. Enter the results of your analysis on item #6 of the Executive Summary.



Executive Summary

- 1. Name of unit or service line assessed:
- 2. Name of performance improvement initiative:
- 3. Purpose/goal/desired result of the initiative:
- 4. Name(s) of unit leader(s) responsible for the initiative that were interviewed/consulted as part of this assessment:
- 5. Effectiveness Score:
- 6. Remediation/Action Plan:

Assessment prepared by: _____





For a free 60-minute consultation or assistance with this Assessment Tool

Contact Steve Harden

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Schedule your call <u>here</u>