

Local Clinical Innovation Case Study Workshop

This Toolkit is presented as a basis for ideas but should certainly be tailored to your institution; contact the AMSA-PCP NPCW field team at aaron.cook@primarycareprogress.org for help adapting this to your school.

Format: Workshop

Target audience: Medical students, pre-meds, and residents with less experience in clinical innovation as participants; residents, faculty, and community providers who are working on clinical innovation projects as presenters.

Target Audience size: Since there will be breakouts into small groups based on what clinical innovation projects are presented, this event would be best run for 2-4 clinical innovators with 4-8 participants in each group.

Duration of event: 90 minutes

Short description: This event will provide participants the opportunity to try out strategies for innovation planning. Local clinicians will present a challenge that their clinic is working on (including the process they want to change, who is affected, and why it is being changed) without revealing the solution they are implementing (if any so far). Participants will then breakout into groups to discuss the problem and potential solutions, including what measurements need to be taken to assess the problem, what a successful outcome would look like, and the nuts and bolts of how the solutions would be implemented. Afterwards, delegates from each group will present a summary of their suggestions to the full group of participants. To conclude, clinicians will explain what their own clinic/practice has done or plans to do to address the issue, report any results if found, and open the floor to discussion.

Anticipated budget: \$50-150 for food, \$10-25 for flyers advertising the event and handouts

Learning objectives:

After this event, participants will be able to:

1. Understand what “clinical innovation” means through learning about challenges and discussing potential innovations
2. Understand the basic steps of clinical innovation
3. Identify local clinician innovators, clinics that work on innovation, and innovation projects in place that they could contact to work with

Challenges to primary care that it targets/benefits: This event addresses the lack of exposure during medical training to new models of primary care delivery. The event gives participants the opportunity to ask questions and learn hands-on about the process of developing practical solutions to problems facing high quality, coordinated, continuous, and comprehensive care delivery. This event also addresses the dearth of mentorship by giving students, residents, and clinicians the opportunity to collaborate further.

Format of event (breakdown by time and activity):

0:00-0:10

- Event leaders introduce themselves

- Event leaders put the event into context of National Primary Care Week and its theme, “Innovations in Primary Care”
- Event leaders explain the format of the event
- Event leaders introduce clinical innovators

0:10-0:30

- Each clinical innovator presents the problem they are working to address. Each one should make sure to discuss (if they have already assessed/worked on these issues)
 - Who they are and what their background is (ex. have they done clinical innovation before)
 - General overview of clinic: What type of clinic it is (ex. safety net, family practice), patient population demographics and most common health problems, panel size, staff organization
 - What the challenge in their clinic is that they are trying to address (ex. long patient waiting times, no-shows, inefficient patient flow, poor outcomes in diabetes patients)
 - What the current situation is of that challenge (ex. what the average patient waiting time is and range, % no-shows, process map of patient flow, average HbA1c measurements)
 - What solutions (if any) they have tried in the past
 - What collaborators or stakeholders are involved
 - What the goal is (ex. make 90% of patients wait <5 minutes, halve % of no-shows, eliminate waste in patient flow, decrease HbA1c to a certain level)

0:30-0:50

- Event leaders coordinate breakout into small groups, each with one clinical innovator and one event leader (if enough)
- Clinical innovator/event leader should facilitate a discussion.
- At this point, the clinical innovator should be asking questions and answering questions posed by participants about the clinic and problem, but not discuss the current solution they are working in.
- Discussion prompts could include:
 - What might be causing these challenges to occur?
 - What other (secondary) factors might be contributing to the current metrics?
 - What are some changes that might improve these current outcomes?
 - If discussion is limited, facilitator could prompt with things like group visits, changing staff duties, eliminating or changing a certain piece of the process, hanging the work environment, safeguards to avoid mistakes
 - What might be the first step in implementing these changes?
 - If discussion doesn't address these, facilitators should mention the first steps to implementing solutions, how to measure outcomes, buy-in from staff and key stakeholders, creating a change implementation team, Plan Do Study Act (PDSA) cycle
 - If there is time, group members can begin forming the “plan” part of the PDSA cycle.
- Group selects one delegate to present to larger group

0:50-1:10

- Event leaders coordinate everyone coming together to the big group
- Each group presents.
 - Delegates present their group's hypotheses about why the challenge might be happening, what are some potential changes, and what the first step might be

- The clinical innovator presents (if applicable) what the clinic's own hypothesis is, what solutions they are working on, what outcomes they may have gathered so far, and what next steps are

1:10-1:20

- Event leaders facilitate large group discussion about common themes that might have come up. Some prompts:
 - Were there any patterns in the challenges the clinical innovators presented?
 - Were there any patterns in the solutions implemented?
 - What information or tools do clinicians still need in order to continue working on these clinical innovations

1:20-1:30

- Event leaders facilitate discussion/present on potential next steps
 - Clinical innovators (if possible) will stick around to answer questions
 - Clinical innovators will give contact information if participants want to reach out to them
 - Tips for finding clinical innovators to work with (ex. contacting clinics directly, participating in clubs or AMSA or PCP chapters)
 - Primary Care Innovation Collaborative (<http://primarycareprogress.org/programs/primary-care-innovation-collaborative/>)
- Event leaders thank everyone for their time and discuss other NPCW events going on at their school
- Sign-up sheet if want to get involved in PCIC or other clinical innovation collaboratives; AMSA chapter or PCP chapter if applicable.

Prep work for event:

The PCP-AMSA NPCW field team can help with any of these steps. Contact aaron.cook@primarycareprogress.org for more information.

- Build event leadership team
- Consider reading resources on clinical innovation such as :
http://clinicalmicrosystem.org/assets/materials/workbooks/outpatient_primary_care.doc
- Recruit clinical innovators
 - *Note*: A "clinical innovator" is someone who is thinking about or is trying a new way to organize their clinic to provide better, safer, more efficient, and more patient-centered care. This could include practicing in teams composed of medical doctors and other allied health professionals; providing enhanced patient access, including email and phone consultations and after hours care; using information technology; and more. When you try to recruit clinical innovators, try not only asking about "clinical innovators" but also phrases like "anyone who's trying to change something in the clinic, like the way patients are scheduled or test results are communicated."
 - Use the Find a Mentor feature at IHI: <http://www.ihf.org/communities/Pages/default.aspx>.
 - Contact AMSA leaders to see if they have recommendations.
 - Contact PCP (aaron.cook@primarycareprogress.org) to see if they have any recommendations.
 - Contact leaders of FM, IM, Peds, and other departments to ask about anyone working on clinical innovation projects.
 - Some teaching hospitals have people designated for clinical innovation. Search your local hospitals to see if anyone holds that position.

- Clinical innovators don't need to be MDs or Dos – they can be NPs, PAs, MAs, or anyone else. Make sure you don't limit your search to doctors.

But what if I can't find any clinical innovators?

That's ok – you can still run an event like this! First, try making sure to ask faculty or other health professionals not only if they know of any "clinical innovators" but also about anyone thinking about our trying out a change in the way their clinic is run. If you still can't find anyone, ask a faculty member if they can think of anything in their clinic that they think *could* be run better. Run the event as before, asking them to explain the problem. The only difference is that they won't present on the solutions they have implemented at the end. And they might be inspired and see participants' ideas!

- Get food, sign-up sheets, name tags, blank paper and pens for the event

Promotion for event:

- Flyers in classes, posted at clinics
- Email blasts
- Ask faculty to include a slide promoting the event before lectures
- Ask your friends to tell their friends, to tell their friends...
- Facebook event page
- Twitter

How to involve other constituents:

- Ask clinical innovators to invite their colleagues to contribute to their presentation
- Ask everyone at the clinic – MDs, Dos, PAs, NPs, RNs, MAs, etc. - to reach out to their colleagues to invite
- Contact head of student groups at allied health schools to invite to participate
- Contact chief residents at local teaching hospitals to invite their residents

Potential post-event activities:

- Primary Care Innovation Collaborative: <http://primarycareprogress.org/programs/primary-care-innovation-collaborative/>
- Host another event such as the Evaluating Clinical Microsystems Workshop: <http://primarycareprogress.org/programs/npcw/event-ideas/clinical-microsystems/>
- Ask clinical innovators to take a few trainees one day to shadow not just their practice but their work on clinical innovations

Evaluation:

- If you are receiving funding from AMSA or PCP, contact them to find out what evaluation guidelines will be for this event.
- Potential evaluation questions to handout to participants are:
 - Do you feel more connected to the [institution] primary care community? (Not at all, a little bit, very much)
 - How much has your understanding of clinical innovation improved due to this event? (Not at all, a little bit, very much)
 - Do you feel like you know how to find clinical innovation mentors better as a result of this event? (Not at all, a little bit, very much)

National Primary Care Week Toolkit

Prepared by Susan Putnins

Brought to you by the PCP-AMSA NPCW Visionary Team

For questions, please email ceh.education@amsa.org or susan.putnins@primarycareprogress.org

Clinical Innovator Handout

Thank you for participating in our Local Clinical Innovation Case Study Workshop. This handout is to get you thinking about some aspects of your clinical innovation work that would be helpful to discuss with students throughout the event.

First, we will ask you to introduce yourself and the background of the project you are working on.

Introductions:

- Short bio and what your background is (ex. have you done clinical innovation before)
- What is the clinic you are working in? What type of clinic is it (ex. safety net, family practice)? What are patient population demographics and most common health problems, panel size, staff organization, etc.?
- What is the challenge in your clinic that you are trying to address (ex. long patient waiting times, no-shows, inefficient patient flow, poor outcomes in diabetes patients)?
- What is the current situation of that challenge (ex. what the average patient waiting time is and range, % no-shows, process map of patient flow, average HbA1c measurements)?
- What solutions (if any) have you tried in the past?
- What collaborators or stakeholders are involved?
- What is your goal? (if known) (ex. make 90% of patients wait <5 minutes, halve % of no-shows, eliminate waste in patient flow, decrease HbA1c to a certain level).

Before you present your own hypotheses and solutions, we will break out into small groups to have participants present their own hypotheses and potential solutions. We will ask you to help guide the discussion. Some questions you could ask participants are:

- What are hypotheses about why these challenges might be happening in the clinic?
- What other factors might be contributing to the current metrics?
- What are some changes that might improve these current outcomes?
 - If discussion is limited, you could prompt with things like group visits, changing staff duties, eliminating or changing a certain piece of the process, hanging the work environment, safeguards to avoid mistakes
- What might be the first step in implementing these changes?
 - If discussion doesn't address these, you could mention the first steps to implementing solutions, the first steps to measuring solutions, buy-in from staff and key stakeholders, creating a change implementation team, PDSA cycle

If there is time, group members can begin forming the "plan" part of the PDSA cycle.

Group decides one delegate to present to larger group

After this small group discussion, event leaders will coordinate everyone coming together to the big group. Your group delegate will present your group's hypotheses about why the challenge might be happening, what are some potential changes, and what the first step might be.

We will ask you to present (if applicable)

- What your own hypothesis is
- What solutions you are working on
- What outcomes they may have gathered so far
- What next steps are

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We ask you to bring some business cards to hand out to students who might be interested in contacting you for follow-up. Thank you again for participating in this event!