



NATIONAL QUALITY CENTER

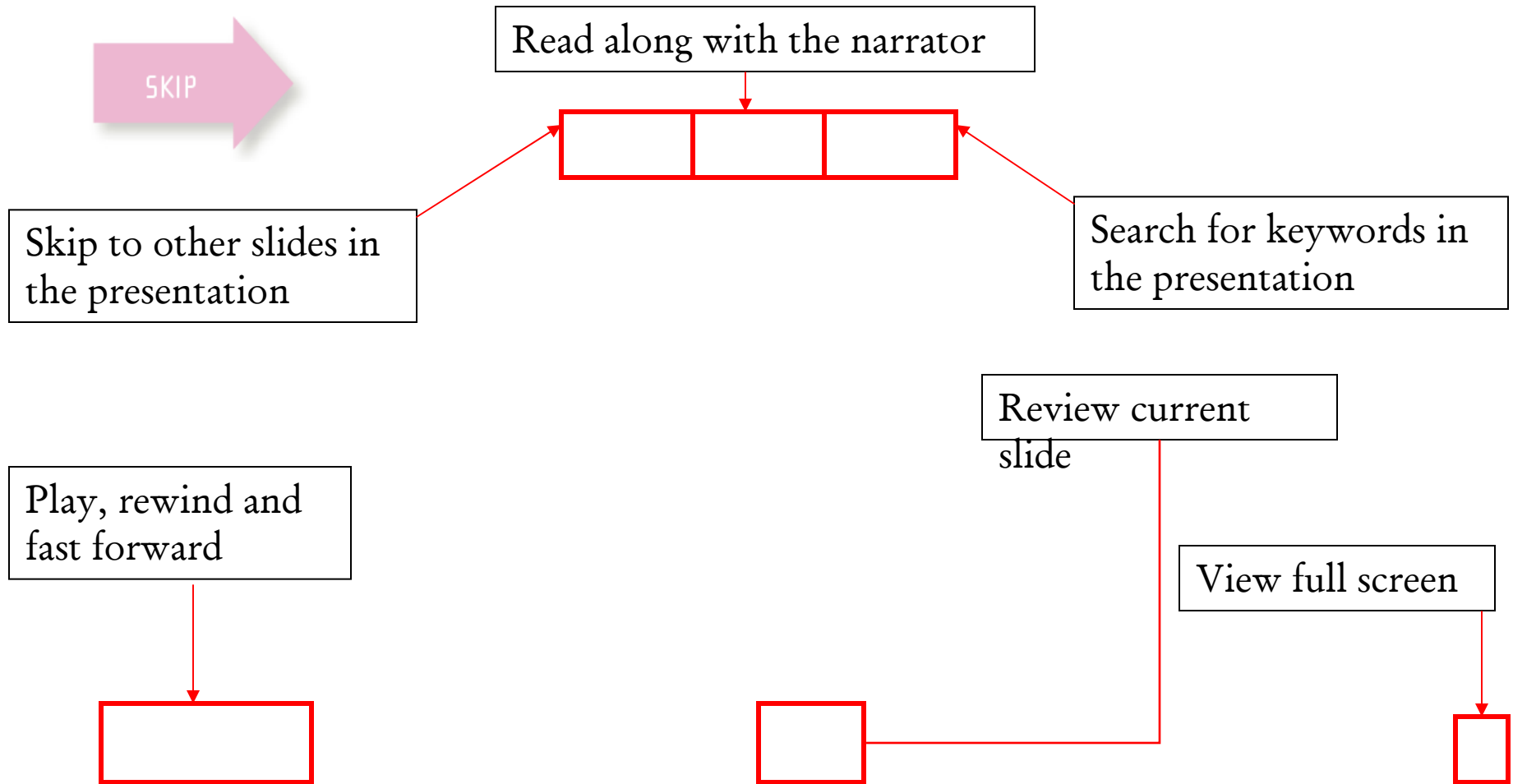
Spreading Good Ideas for Change

The Quality Academy Tutorial 20

Learning Objectives: You Will Learn About...

- How innovation works
- The theory behind innovation and the spread of innovation
- How to support openness to innovation in your HIV program

Tips for Viewing This Presentation



Creating A New Order



“There is nothing more difficult to plan, more doubtful of success, nor more dangerous to manage than the creation of a new order of things....”

Niccolo Machiavelli, *The Prince*

Key Question



How can my HIV care program become more open to innovative ideas?

Now What?



OK, my improvement works, now what?

What's the Sequence?



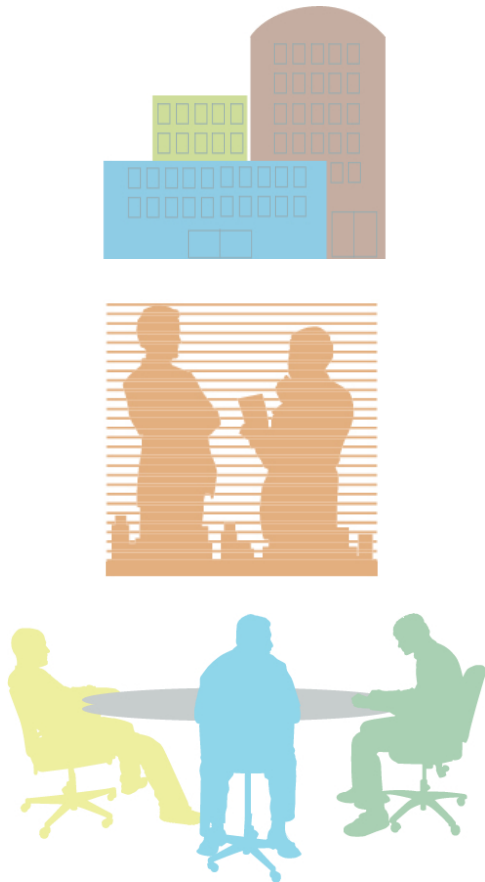
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more like ...



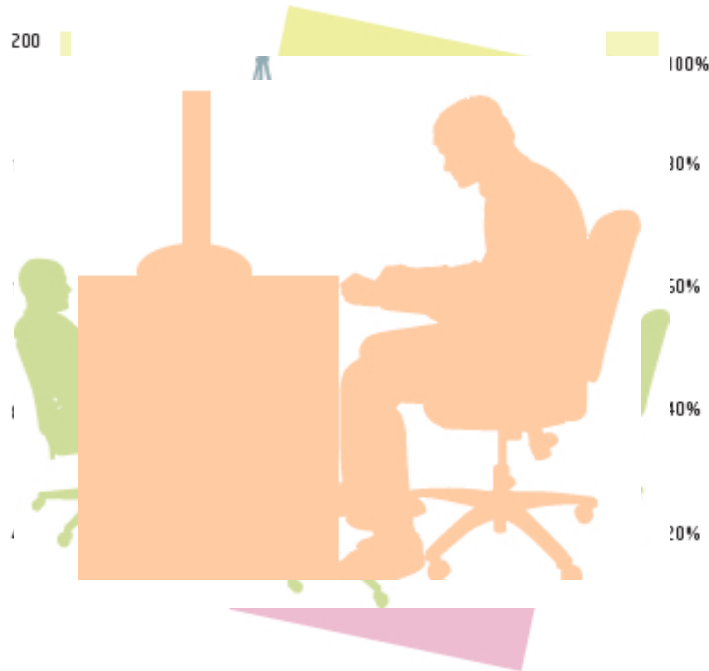
Source: Institute for Healthcare Improvement

Three Prerequisites for Spreading Changes



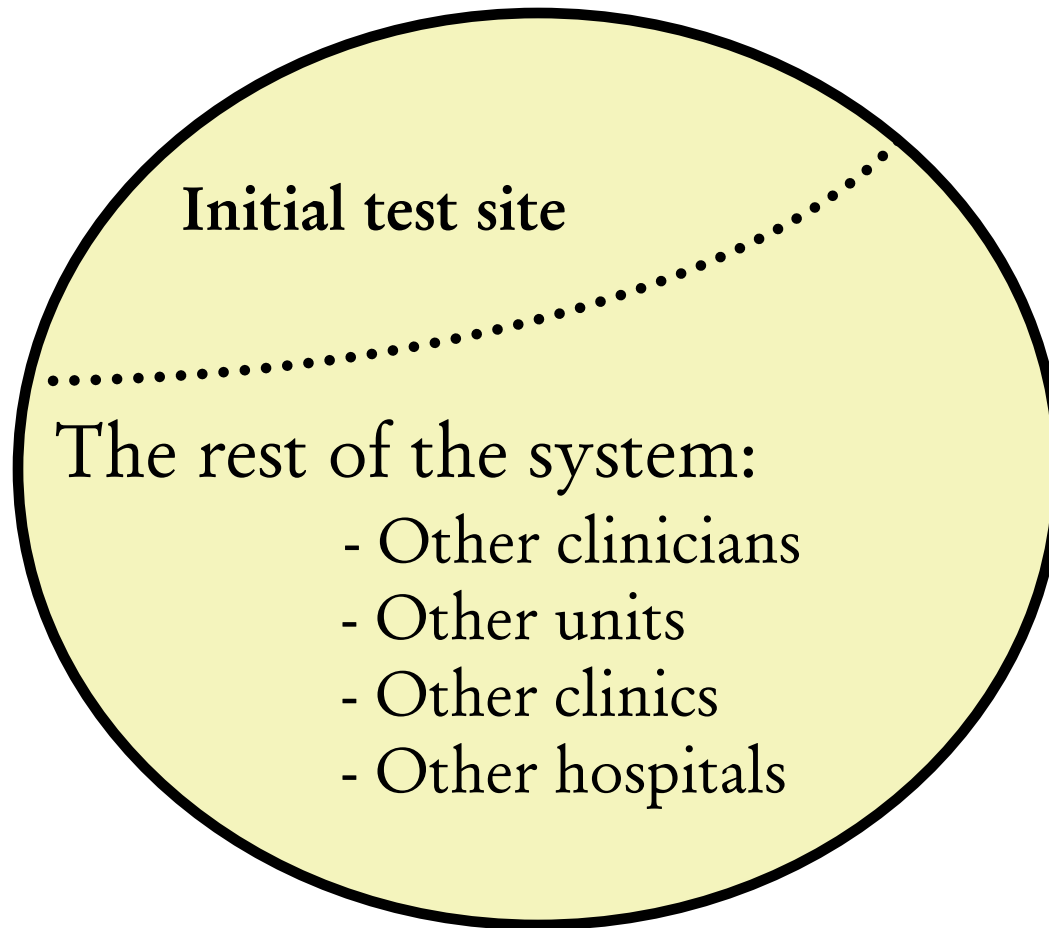
- Improved HIV care is a strategic initiative within the organization
- An executive is responsible for spread
- An improvement team has been successful

Getting Improvements to “Stick”



- Document processes
- Continue to measure
- Write new job descriptions
- Train staff
- Assign ownership

Getting Improvement to “Spread”



Test Question

Here's a description of a quality improvement effort:

- Physicians inconsistent in their prescription refill practices, sometimes giving up to 6 refills for the convenience of the patient.
- Patients then put off their medical exams until they need a new prescription.
- Team created a “Safe Ordering Practice” policy, with guidelines for refill frequency, medical visits and lab monitoring frequency.
- Guidelines published in patient education brochures; patients also told about the change in process when they called in for refills.
- Staff educated, new process monitored.
- Physician and pharmacist designated “gatekeeper.”

Do you think the improvements from this project will
"stick"?

- A) Yes

The Tipping Point

The
TIPPING POINT

*How Little Things Can
Make a Big Difference*

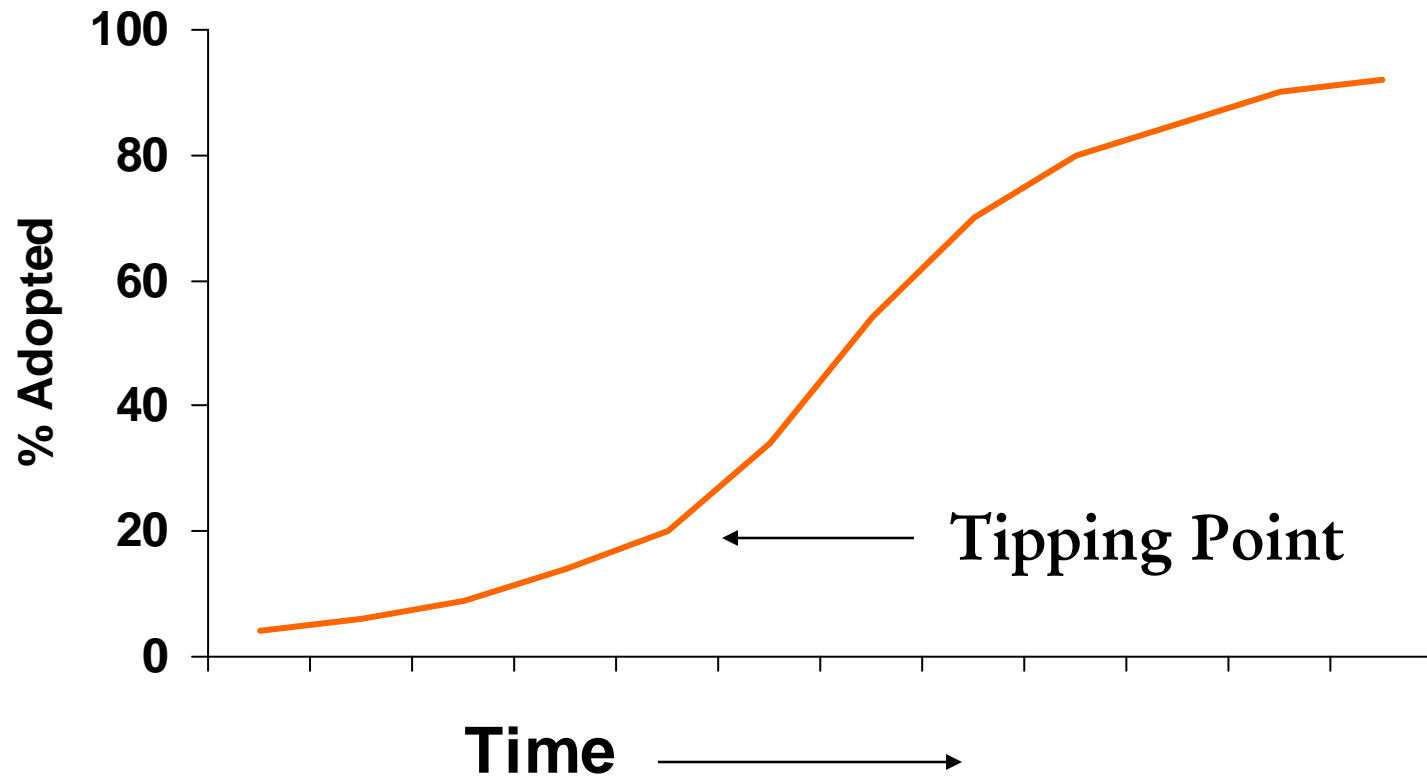


MALCOLM
GLADWELL

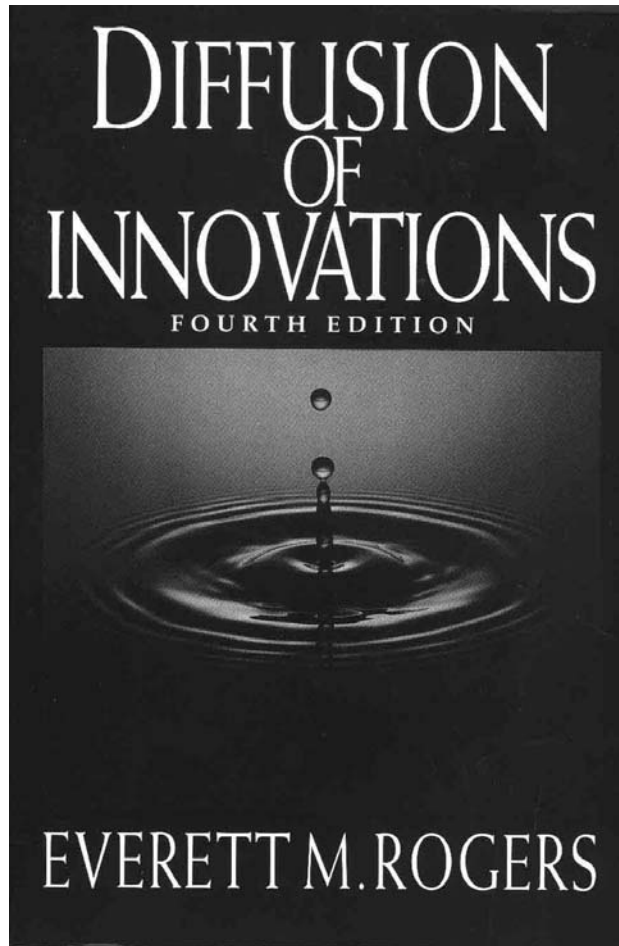
‘The Tipping Point: How
Little Things Can Make a
Big Difference’

by Malcolm Gladwell

The “Diffusion Curve”: Reaching the Tipping Point



Diffusion of Innovations



'Diffusion of Innovations'

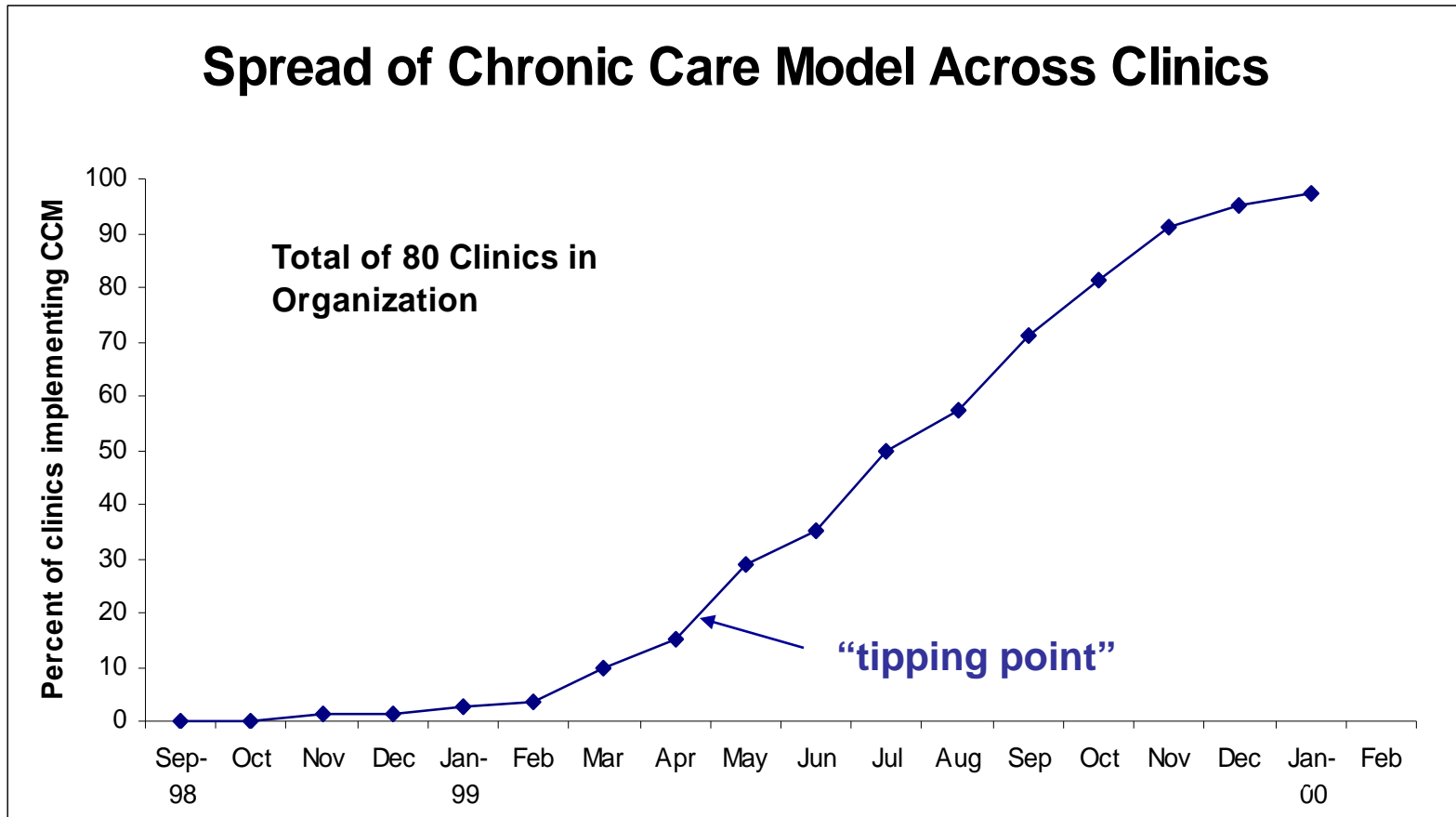
Everett M. Rogers
The Free Press, New York

Critical Mass and Momentum

“The part of the diffusion curve from about 10 percent to 20 percent adoption is the heart of the diffusion process. After that point, it is often impossible to stop the further diffusion of a new idea, even if one wished to do so.”

E.M. Rogers, Diffusion of Innovations

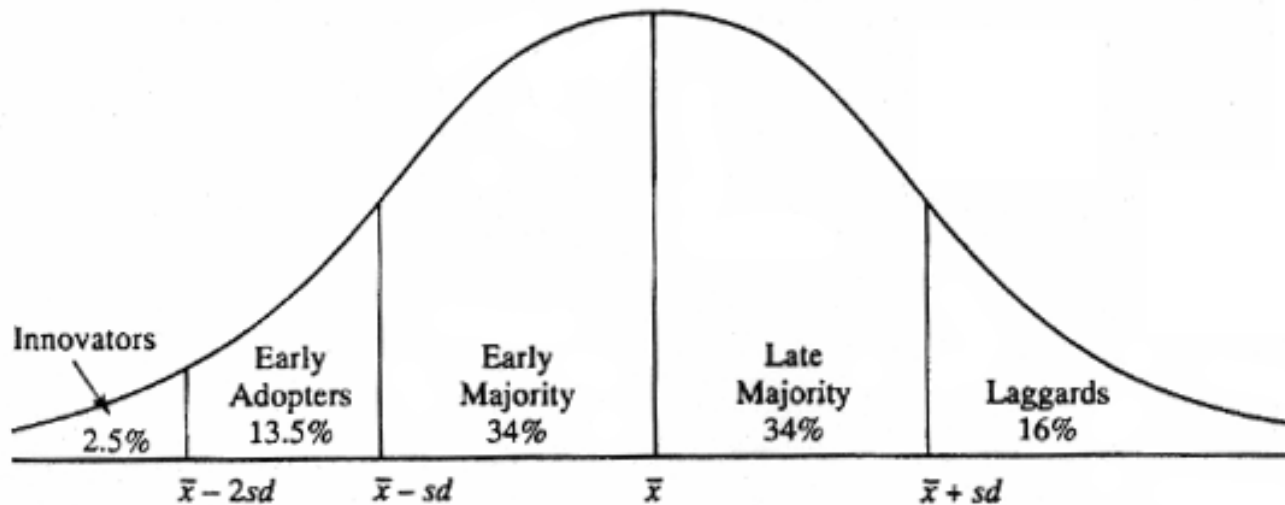
“Diffusion Curve” in Health Care



Source: Institute for Healthcare Improvement

'Diffusion of Innovation'

Adopter Categorization on the Basis of Innovativeness



Continue

Source: Ryan and Gross, "Hybrid Seed Among Iowa Farmers," 1940

Types of Innovators



- Innovators - Venturesome
- Early Adopters - Respected
- Early Majority - Deliberate
- Late Majority - Skeptical
- Laggards - Traditional

Rogers's Five Attributes of Change



- Relative advantage
- Compatibility
- Complexity
- Trialability
- Observability

-- *E.M. Rogers, Diffusion of Innovations*

Test Question

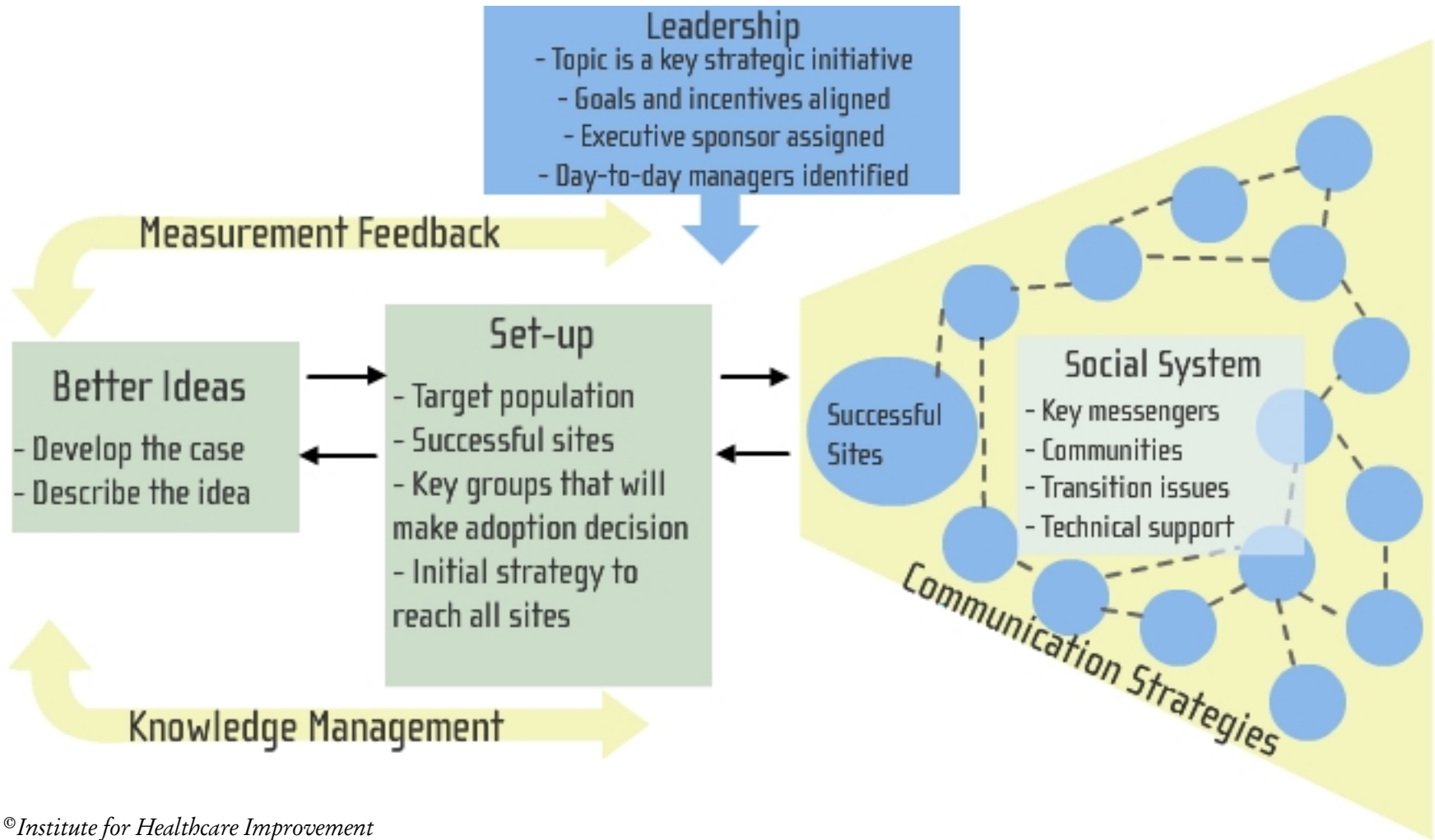
A diffusion curve is S-shaped because:

- A) Enthusiasm about innovation starts slowly
- B) Once about 20% have adopted something, most of the rest come quickly
- C) Once 40% have adopted something, everyone else jumps on board
- D) After 60%, things slow down quickly
- E) There will always be a few who will resist something new, so the curve slows down at the top
- F) a, b and e
- G) a, c and d
- H) a, b and d

Rules of Diffusion (by Donald Berwick)

- Identify changes that are ready to spread
- Find innovators and support them
- Invest in early adopters and allow communication with innovators
- Make early adopters observable
- Allow re-invent innovation
- Trust and enable innovation

IHI's Framework for Spread



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What Improvement Teams Can Do to Help

- Help to make the case for change
- Make it easier for others to do the work
- Identify the messengers

Make the Case for Change

- Clarify the benefits
- Demonstrate that your changes provide these benefits
 - Evidence supporting the changes (literature and experience)
 - Data – especially annotated run charts
- Promote your work

Make it Easier for Others to Do the Work

- Describe the change
- Coach how to start doing improvement work
- Highlight where management needs to help

Identify the Messengers

- Choose the right messengers
 - Opinion leaders
 - Connectors
- Educate the messengers to deliver the message
- Include peer-to-peer communication

Channels of Communication Are Important

SHARE
INFORMATION

SHAPE
BEHAVIOR



General
Publications
flyers
newsletters
videos
articles
posters

Personal
Touch
letters
cards
postcards

Interactive
Activities
telephone
email
visits
seminars
learning sets
modeling

Public
Events
Road shows
Fairs
Conferences
Exhibitions
Mass mtgs

Face-to-face
one-to-one
mentoring
shadowing

2002, Sarah W. Fraser

Test Question

What is the best communication method to engage physicians in a change?

- A) General publications
- B) Personal touch
- C) Interactive activities
- D) Public events
- E) Face-to-face with other physicians

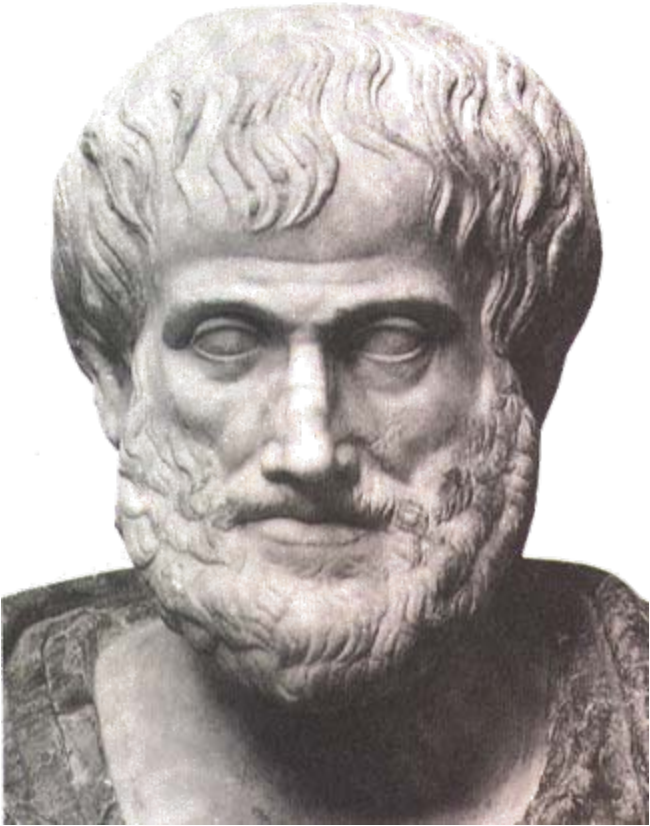
Key Points

- A successful improvement project is the basis for spreading a new idea
- Organization-wide dissemination of new ideas requires strong and consistent support from leadership
- Innovation theory helps explain how to go about spreading change
- Pay attention to the messengers: choose the right people and methods

Resources

- Rogers, Everett M., *Diffusion of Innovation*, New York: Free Press.
- Gladwell, Malcolm, *The Tipping Point*, Boston and New York: Little, Brown, 2002.
- For more information about the IHI's Framework for Spread, see www.ihl.org/IHI/Topics/Improvement/SpreadingChanges/Changes/ or download their white paper on this topic at www.ihl.org/IHI/Results/WhitePapers/AFrameworkforSpreadWhitePaper.htm
- The IHI's: *Improving HIV Care: A Modular Quality Improvement Curriculum*, available on the National Quality Center's website at <http://www.nationalqualitycenter.org/index.cfm/5659>

Closing Thoughts



“We are what we repeatedly do; excellence is not an act, but a habit.”

–Aristotle

Related Tutorials

- To learn more about leadership, study Tutorial 17
- To learn more about aligning quality and strategy, study Tutorial 19
- To learn more about systems thinking, study Tutorial 18



The Quality Academy



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