

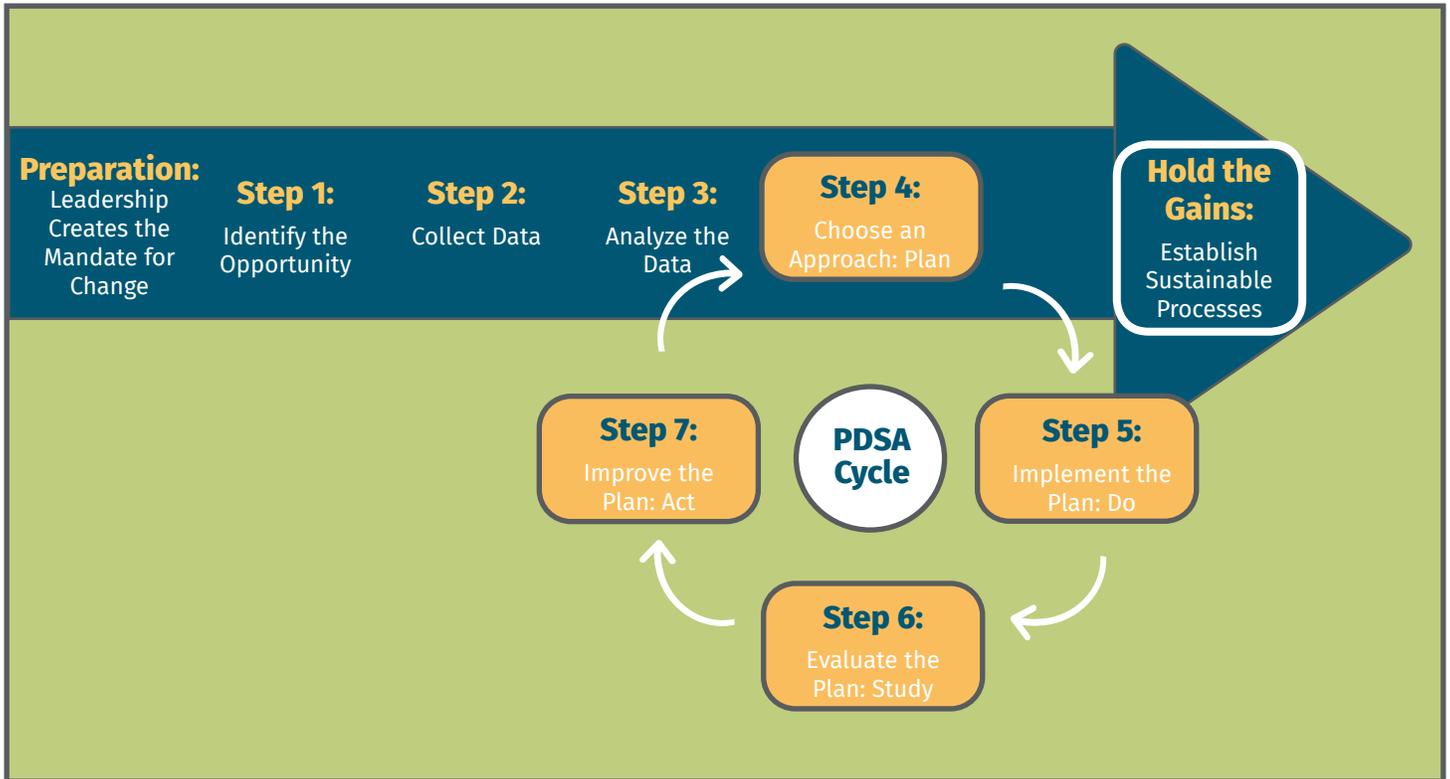


HOLD THE GAINS: ESTABLISH SUSTAINABLE PROCESSES



THE QI APPROACH:

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About this Step

Purpose

It is time to celebrate! It is always important to celebrate success and acknowledge those who did the work. The feeling of accomplishment and recognition for the work will go a long way in keeping the momentum going. This team can become a group of champions for further improvement efforts in the future.

Now that you have achieved your goal, you want to maintain it. The true test of system change is whether it can be sustained over time. Too often teams assume that once an improvement has been successfully implemented, nothing more needs to be done. It will be important to make QI a continuous process and ongoing pursuit in your organization. QI should become a standard operating procedure, incorporating it as a way of moving forward, expanding to other areas of opportunity, and holding your gains.

Overview of Suggested Activities

1. Integrate changes into routine practice
2. Communicate your accomplishments
3. Expand the improvements

Suggested Activity Details

1. Integrate the changes into routine practice

- Transfer ownership and supervision of the new process from the team to usual operations people. The team should be integral to this transfer by training and coaching them in the beginning to ensure a smooth transition.
- Encourage everyone who works within the process to continue some type of monitoring and evaluation activity.
- Ensure that the new process is incorporated into the new employee trainings, job descriptions and employee performance appraisals.
- Ask clinic management to reinforce people's attention to cardiovascular disease by hosting in-services and other events.
- Replicate the team's QI approach by making improvements in other care processes.
- Setting facility-wide QI policies can be a way to institutionalize QI efforts and ensure sustainability. See [Appendix F](#) for examples of policies and processes from South Dakota healthcare facilities.

2. Communicate your accomplishments

- Communication has been an important task at every step of the improvement process. At this point it is especially crucial to:
 - **Maintain strong leadership support for the QI process**
 - **Continue to build awareness and reinforce the improvements**
 - **Take the next process improvement steps**
- This is also a time to emphasize clinic-wide ownership of the new care process and to downplay any alienation that people may feel as the result of not having been a member of the team.
- There are a number of ways to publicize the accomplishments and instill a sense of ownership:
 - **Celebrate and promote the accomplishments as a practice by publishing a newsletter to all stakeholders, or by displaying a storyboard of the activities. Storyboards used as a presentation tool have been shown to be strongly correlated with perceptions of the improvement.**
 - **Hold a milestone celebration to kick-off implementation. See [Appendix G](#) for more information on milestone celebrations.**
 - **Look for opportunities to present the results of the improvement efforts at internal and external forums.**
 - **Document the improvement methodology, observations and results and consider publishing them.**
 - **Encourage those involved in the improvement effort to share their views and anecdotes of their experiences. Consider writing a handbook or guide for future team efforts.**
 - **Recognize and thank everyone for their efforts and support of the improvement process.**
- **Expand the improvements**
- Process improvement is a repeating, continuous cycle. To begin a new cycle of improvements, have the team review their mission and ask themselves:
 - **Has the team met all of their objectives?**
 - **Has the team fulfilled its mission?**
 - **Are there other parts of the care system that need attention?**

- If other parts of the system need improvement, review what you have learned in the root cause analysis you performed and determine your next area of focus. Then move quickly through Step 4 – Step 7.
- If you are unsure whether additional parts of the system need improving – that is, you can't answer the questions above – you may need to collect more data first.
- If you have satisfied your cardiovascular disease care process mission and objectives, then consider expanding the improvement process to include other chronic conditions or processes that need improvement. This may involve cycling through all or part of the improvement steps once again.
- There are a number of benefits to repeating this experience:
 - **The process will be easier**
 - **The team will have greater confidence and credibility**
 - **There will be less resistance to the changes**
 - **Opportunities for improvements will be more obvious**
 - **By building on previous solutions, you will likely improve the efficiency of the work as well as the quality of care**

You now have the skills to improve any process in your system, and there is always room for improvement. Train others in these skills by involving more of them in continued, team driven improvement efforts.

ACCELERATED QI OPTION

Rapid cycling through the QI process requires immediate evaluation of every change that is made. However, this doesn't eliminate the need for a thorough data collection to assess overall improvement from baseline. You will still need to prove that the small changes contributing to a new approach have indeed resulted in improved care.

Therefore, the actions described above will apply. The only difference is that you will already be reasonably confident that the changes are working; you will need only demonstrate the outcomes.

Remember, you are not only changing the process, but also the behaviors of many people, including patients. Look at short term outcome indicators, such as patient and care giver satisfaction, and continue monitoring the progress of changes while you wait an appropriate interval before measuring longer-term outcomes, like the provision of cardiovascular disease services which can be measured within 6-12 months, or patient outcomes which may take 1-3 years to see population and system-level changes.

RESOURCES

Holding the Gains in Quality Improvement

From the American Academy of Family Practice

<https://www.aafp.org/fpm/1999/0500/p29.html>

This article describes how to keep momentum going and find further needed improvements.