

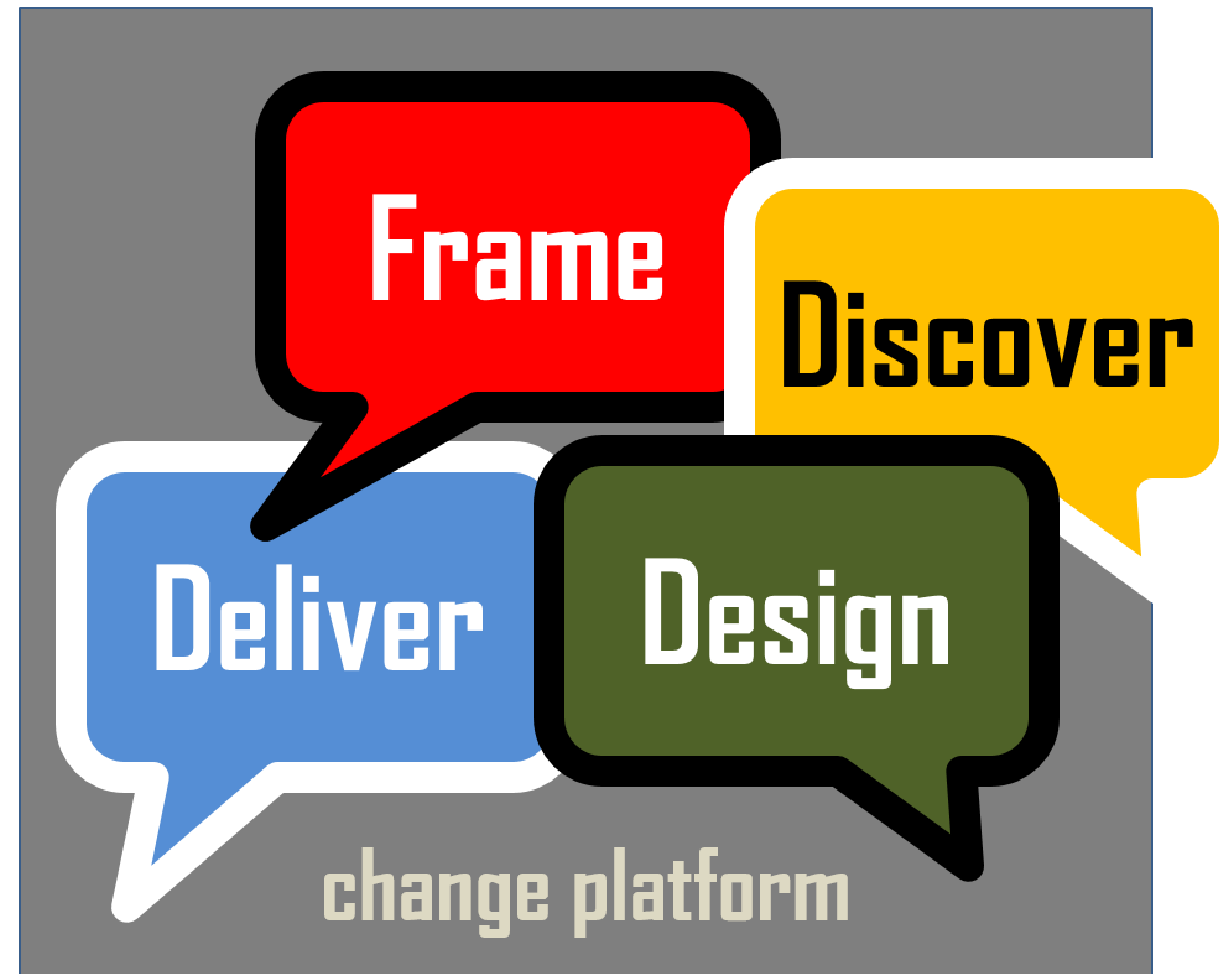
learning how to integrate improvement and change

Richard Banchs, MD; Molly Driscoll, DNP, RN;
University of Illinois Hospital & Health Sciences System. Chicago, IL.

1

BACKGROUND

Despite the urgent need to improve, many QI projects in healthcare fail because they lack an effective strategy to overcome the resistance to change. The success of improvement efforts results not only from the quality of the solution, but from its acceptance at the front-line. We designed an instructional intervention to help QI teams integrate the foundational principles, practices, and tools of patient centered design with a comprehensive strategy to address the unique, change-resistant features associated with healthcare systems.



2

AIM

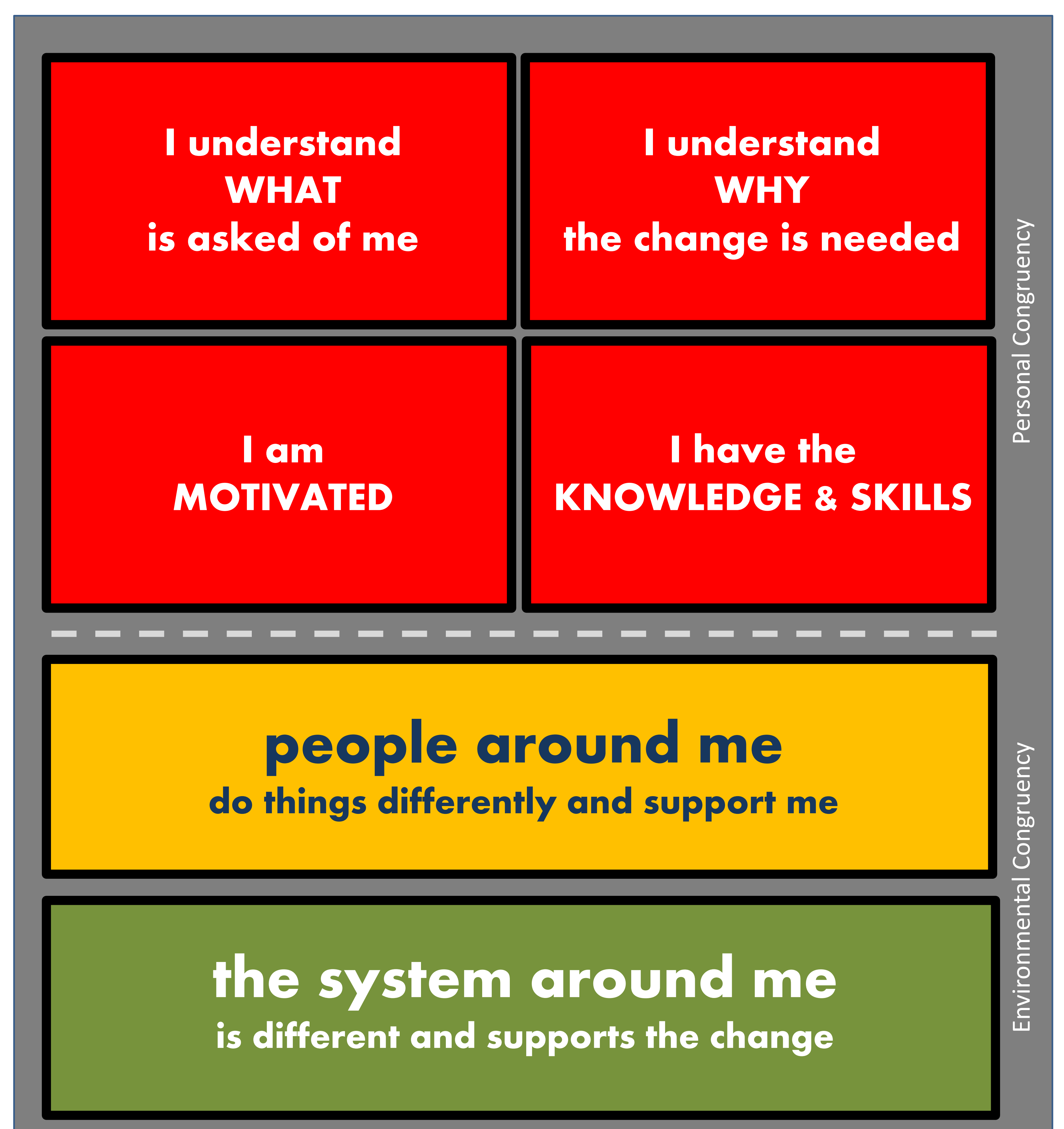
Enable QI teams to increase the success rate of their change and improvement initiatives.

3

ACTIONS TAKEN

We designed an instructional intervention with mini-lectures, videos, group exercises, and case-based discussions. Specific graphs were created and displayed to increase participant's learning. Multiple quizzes were interspersed during the intervention to assess the progress of course participants. A final simulation was used to assess the success of our intervention.

SIX CONDITIONS FOR CHANGE



4

SUMMARY OF RESULTS

We used the model for educational outcomes proposed by Barr to assess the success of our intervention. At the end of our session, participants had modified their perception of and attitude towards resistance to change; acquired new knowledge; and were using change tools in their approach to quality improvement projects.