



Job Aid: Helping Practices Scale Improvements

Once a practice has tested and refined a change using plan-do-study-act (PDSA) cycles, they are ready to implement. Strategies you and a practice can use to support adoption of a change practice-wide include:

- Educational emails aimed at supporting adoption of the change
- Training sessions
- Job aids
- "Elbow support" coaching
- Audit and feedback

Create key messages to motivate change to use with all strategies

Key messages are concise, compelling pieces of information that encourage buy-in and behavior change around the issue you are coaching on.

Example: The quality improvement team tested this simple change in our workflow, and it increased our screening rate from 20% to over 80%.

Educational emails

Include:

- Description of the change
- Reasons for the change
- Benefits of the change for clinicians, staff, and patients
- An attachment with the job aid
- A list of available resources, e.g., trainings, one-on-one elbow support coaching sessions

Training sessions

Align design with these principles:

- Co-design and co-deliver training with clinicians and staff who tested the improvement.
- Be succinct; aim for 15-60 minute sessions.
- Provide a clear statement of the goal for the training.
- Be practical; avoid conceptual and non-relevant information.
- Spell out the benefits of the change - why change is important and benefits to clinicians, staff, patients, and practice.



- Be interactive; draw on learners' experience and knowledge.
- Use visual aids that reinforce your message.
- Use experiential learning approach, e.g., role playing.
- Provide reminders like job aids as take-aways.

Job aids

Job aids provide "need to know" information that clinicians or staff can refer to when they are completing a task to make sure they're doing it properly.

Job aids come in a variety of formats:

- Step-by-step guides (commonly used)
- Process maps
- Checklists
- Decision aids
- Online calculators
- Reference sheets and e-resources

Steps for creating a job aid

1. Collaborate with practice members on content and design.
2. Determine content to:
 - a. Include only necessary steps and information.
 - b. Be clear who performs a task and when.
 - c. Include details on where to find and enter data in the electronic health record or other information system.
3. Language and organization
 - a. Use short simple words and sentences.
 - b. Begin sentences with action verbs whenever possible.
 - c. If the process is long, break the job aid into short sections.
 - d. Sequence the tasks in a logical order.
4. Add visuals
 - a. Use visuals to reinforce the content.
 - b. Keep visuals simple and easy to interpret.
 - c. Make visuals consistent.
 - d. Use visual cues (e.g., arrows, boxes, bullets) to draw attention to key points.
5. Test the job aid using the PDSA process before using.
 - a. Test with few staff or clinicians.
 - b. Obtain and incorporate feedback.



- c. Continue tests until there are no more suggestions for improving the job aid.
- d. Consider laminating the job aid.

“Elbow support” coaching

Elbow support is delivered "at the elbow" of staff and clinicians as they are going about their work. This assures that the support is directly relevant and responsive to the dynamic processes of care and care environments. Practice members who helped design and test the change are the ideal coaches. Practice facilitators can also be very effective at delivering elbow support.

Steps

1. Develop the content and training packet. Work closely with the early adopters to develop the content for the elbow support sessions.
2. Have practice leadership announce that there will be elbow support sessions.
3. Find good times to deliver the sessions. Elbow support sessions should take place as the trainee goes about their work, but sometimes this isn't possible so be flexible.
4. Introduce yourself and the content.
5. Review the improvement using the job aid or similar tool.
6. Leave visual reminders behind, such as a job aid.

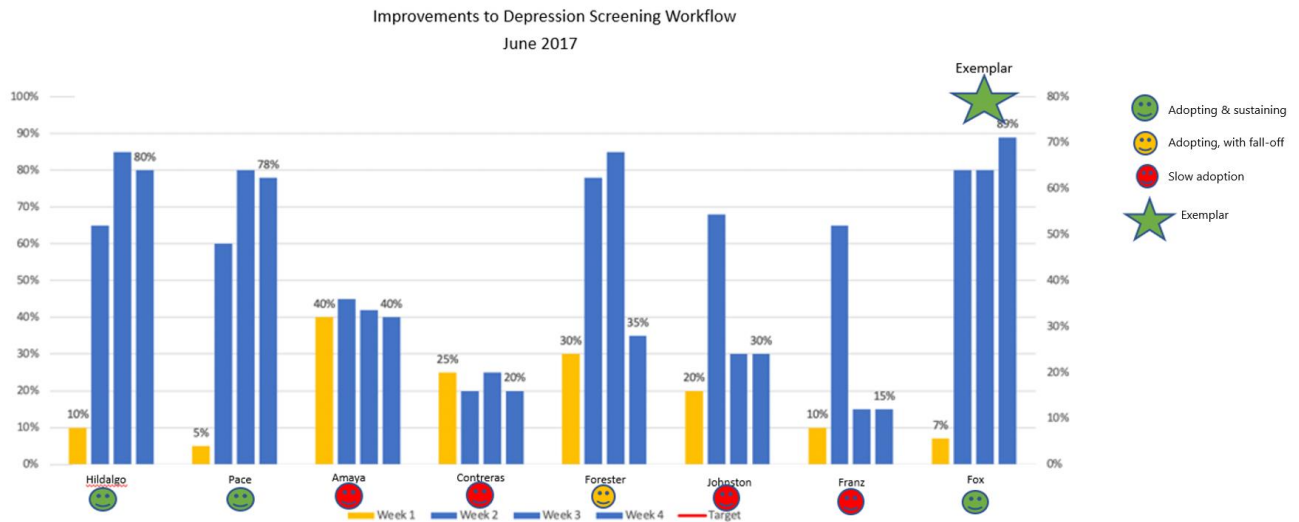
Small-Sample audit and feedback

Feedback sessions are another coaching strategy for supporting adoption of a change by staff and clinicians. With the learner:

1. Review records for the last 2-3 patients whose care is affected by the change.
2. Identify successes in implementing the improvement and celebrate them!
3. Identify instances where change wasn't implemented, and problem solve.
4. Deliver booster training and elbow support sessions if indicated.

Determine whom to coach

- Focus on staff or clinicians who are having difficulty adopting the change.
- Generate weekly performance reports.
- Look at trends over several weeks



Respond to objections

Resistance to change is natural and predictable. Prepare for it by thinking about the ways practice members might push back on making changes and some constructive responses you can make to overcome their resistance.

1. Listen and ask questions to learn more about the objection.
2. Use reflective listening by restating the objection to make sure you understand it correctly.
3. Decide if you are able to respond to the objection, or if you need to gather information and return.
4. If you feel you are ready to respond, provide the relevant information in response to the objection using key messages, educational materials, job aids, or other materials.
5. If you don't feel ready to respond, you should feel comfortable being honest and tell them you don't know and will get back to them.
6. Check to see if you addressed the person's objections adequately. If you didn't, ask them to rephrase their objection and start the process over.



Four types of objections and ways to respond

Objection 1: Refusal. The learner disagrees with the change. Provide data and arrange peer-to-peer education with a successful adopter

Learner: "I don't agree that this change is better than the way we currently do things."

PF: "Let's look at some data from other teams before and after they adopted the change."

Objection 2. Stall. The learner delays making the change. Identify reason for stall and provide additional information to address those reasons.

Learner: "I'll talk to my team later this week and we'll decide then."

PF: "What will you consider when you're making your decision? Perhaps I can provide some additional information that would be helpful."

Objection 3. Doubts. The learner is unsure about making the change. Identify concerns and provide information to address them.

Learner: "I see how this change can help, but I'm not sure we can implement it."

PF: "Tell me more about what your concerns are?" and "What would you need in order to feel comfortable implementing this change with your team?"

Objection 4. Deflects. The learner has competing priorities.

Learner: "Thanks, but we have more important things to focus on." Arrange peer-to-peer session with respected early adopter. Use questions to motivate the learner to care about making the change

PF: "Would you be open to talking with (early successful adopter) about why the practice decided to make this change a priority?" and "Do you wonder if patients who aren't screened might not get the care they need?"

Additional resources

For examples of job aids and other additional resources for this AHRQ Practice Facilitation Training Module, go to <https://www.ahrq.gov/pfmodules/resources>.