

CARE LEADS HERE

INNOVATION AND STAKEHOLDER BUY- IN: A CONSORTIUM'S EXPERIENCE

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Heritage College of Osteopathic Medicine



To provide an illustration on how innovation and buy- in from multiple and diverse stakeholders can be achieved using many quality improvement tools and techniques.

Specifically, the following will be discussed: Process Mapping and Needs Assessment, Voice of Customer, Strategic Vision, Evaluation.



Doctor of Osteopathy: Community Hospital-based Training Model

Characteristic	Allopathic	Osteopathic
Degree	M.D.	D.O.
Training	Medical school + Residency	Medical School + Residency
Medical License?	Yes	Yes
Training Characteristic	Traditional	Traditional + Manipulation
Training Site	College owns Hospital	College partners with Community Hospitals



CORE Medical Education Consortium

Affiliate Colleges in Kansas and Iowa (Deans, Faculty, Trainees)

CORE

27 Community Hospitals in Ohio (CEOs, Trainees and Volunteer Clinical Faculty) Ohio University Heritage College of Osteopathic Medicine (Deans, Faculty, Trainees)

Case–Increase Research Activity

- Research is not popular
- No one wants to do it but they are required to do it.
- But it is critical for evidence-based practice.



Buy- In from Stakeholders

"How does this benefit me and my organization?"



Buy- In is Tough for an

Unpopular Initiative!!



What is Involved?

- Voice of Customer
- Process Mapping
- Needs Assessment
- Innovation
- Strategic Vision
- Continuous Evaluation
 - Surveys, Focus Groups, Dashboard, etc.

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Voice of Customer

• What is it our customers Want and Need!

- Customer segmentation
 - Medical Students, Residents, Physicians
- Method: Interviews



	Medical Students	Residents	Faculty/ Attendings
Profile	Age 20-30 Some research	Age 25-40 Very little research	Age 30-65 No research
Research Attitude	Can be Motivated	Motivated by Requirements	Extremely Not Motivated
Needs	Case Report; Competitive for Residency	Research Requirements	Mentor Residents
Challenges	Some protected time	No protected time	No protected time

Process Mapping

Medical Students



CARE LEADS HERE Residents and Physicians

Survey of Resident Research Capabilities

REPORTED RESEARCH ABILITIE

3

	N	Mean	Std. Deviation
Can Perform Lit. Review	54	2.31	.543
Can Evaluate an Article	54	2.22	.502
Can Write a Proposal	54	1.61	.656
Can Navigate IRB	54	1.57	.662
Can Write a Case Report	54	2.13	.616
Can Design Retrospective	54	1.87	.551
Can Design Prospective	54	1.70	.633
Can Design Poster	54	1.93	.578
Can Total	54	1.85	.596
Valid N (listwise)	54		

Scale: Completely Agree=3, Somewhat Agree=2, Disagree=1



Survey of Resident Research Needs

	Ν	Mean	Std. Deviation
Need Help w/Protocol	54	2.41	.714
Need Help w/Lit Review	54	1.89	.769
Need Help w/IRB Process	53	2.68	.547
Need Help w/Statistics	53	2.72	.495
Need Editorial Support	54	2.37	.681
Need Poster Support	53	2.49	.608
Need to Critically Evaluate Articles	53	2.17	.672
Need Total	54	2.63	.487
Valid N (listwise)	52		

Scale: Completely Agree=3, Somewhat Agree=2, Disagree=1



Building Relationships

- Work with stakeholders at different levels
 - College faculty, dean, and administrators
 - Hospital faculty, CEOs, and administrators
 - Students and Residents
- Takes Time
- Meet different needs



INNOVATION



CHECKLIST

RESEARCH CHECKLIST for CORE Family Practice Residents

PG	Quarter	Deliverable	Completion	
Year			Status	
PGY 1	Fall	Attend CORE PGY1 Orientation (will include basic info about the research process)		
		Complete CITI or NIH Training (depends on hospital requirement)		
		Submit CITI/NIH certificate to (<u>core_research@ohio.edu</u>)		
	Winter	Consult with Program Director and CORE Research regarding research ideas (e-mail dogbey@ohio.edu)		
		Register project at: <u>http://research.ohiocore.org/index.do</u>		
		Identify potential topics for research		
		Conduct literature search to refine ideas		
		Review ACOFP scientific paper guidelines at:		
		http://www.acofp.org/membership/downloads/pds/sc_ppr_guide.pdf		
	Spring	Begin proposal writing (Introduction, Methods, References)		
		Work with CORE Statistician and Editor on proposal		
	Summer	Review the ACOFP-recommended JAOA Manuscript Checklist. http://www.jaoa.org/misc/chklst.shtml		
		Complete Institutional Review Board (IRB) application (cut and paste from final proposal)		
		Submit IRB application/Revise as needed		
PGY 2	Fall	Apply for seed funding if needed		
		Collect data		
	Winter	Collect data		
		Analyze and interpret results (work with Statistician)		
	Spring	Complete final paper		
		1. Change grammatical tense of proposal from future to past		
		 Add Results, Discussion, Recommendation/Summary to initial proposal 		
		Work with CORE Statistician and Editor to finalize paper		
		SUBMIT FINAL PAPER TO PROGRAM DIRECTOR FOR APPROVAL BY JUNE		
	Check if IRB and CITI renewals are needed.			
		NOTE: do not let approval lapse!		
	Summer	Receive program director approval on final paper		
		SUBMIT TO CEE WITH PROGRAM DIRECTOR'S AUGUST ANNUAL REPORT FOR APPROVAL		
PGY 3	Fall	Submit manuscript to target journal		
	Winter	Submit abstract to CORE Research for OOA Poster Exhibition		
		Create poster or final Power Point Presentation (contact CORE Research)		
		Poster templates are at: http://www.ohiocore.org/research/frequently_used_forms.htm		
		Submit abstract to ACOFP for poster presentation at ACOFP Annual		
		Convention in January		
	Spring	Apply for CORE travel funding to present research at conference		
		Present at ACOFP Annual Conference in March		
		Present at OOA in late April or early May		
	Summer	Complete final requirements as needed by Program Director		
		Graduation		



TEMPLATES



The Title Of Your Poster Goes Here, Use Title Case, Do not use all CAPS (all CAPS makes title hard to read).

Author One, Degree, Author Two, Degree. Institution Name, Dept., City, State. Make sure you list this information!

Co-authorship should be given to collaborators such as aStatistician, who have made intellectual contribution in terms of

witting, research design, study implementation, and data analysis and interpretation

(E-mail address and web pages can be isted here, or as contact information under 'References' below) Adjust text point size as needed.

(Affiliate hospital and organizational karoshere.) (Logo) shown ary EXAMPLESDNLY but can be used when needed) Conclusions

Grant Medical

Center

OhicHealth

Abstract

Helpful hirts:

Body text: Calibri, 32point. To resize text blocks use the text box corner handles. Using top and middle handles can distort text. Re-siging with corner handles is the better choice.

A 12 or 34 pt font size is easy to read at a 4 to 5 foot vineing distance. You can use a smalles pt font size if your poster is text heavy.

- Remember that posters are much more readable if you
- use tex blocks that are not wide or cross more than two columns. width [bis is a 4 column template]

· limit your text content, make it read quickly, total poster viewing time averages between 7-10 minutes

- use visuals [graphs, tables and photos], and number or letter in LEQUERCE.
- add figure legends(f) to all photos, diagrams, graphs and tables number or letter in sequence

Introduction or Methods

More helpful hints:

- 1. When using bullets (or numbers), adjust the 'text and bullet distance' using the blue indext slide barlocated in the ruler displayed above the text block that you are working in. Look at the 'split' indent narkers, use the botton marker to adjust the distance between bullet and not. This will also 'line up your test' without using the 'space bar'. Never use the space for to center or position text
- 2. Learn to use tab markers and the align text tools ()cans for left, centerand justified) these are located in the test tool bar and formatting paletts). These tools will save you test editing headathea later!
- There are 2 styles of text in the template, bold and regular. Examples are for you to choose. Remember a san serif font is easier to read on a large poster than a serif font (Times Romania a seriffonti.
- 4. Turn off 'snap to' guides under View/Guides. They will drive you crazy, Scally, Turnon Dynamic Guides, These are very helpful in lining up EVERYTHING. Learnito use them - you will learn to love them. Really,

Table 1. This table was inserted from MS Word. To edit a Word table double click on the table and it will reopen in MS Weed so that rou can edit. Resize and make yourformat changes in Word, not FowerPoint, If you resize a Word Table in PowerPoint it will distort. Change the color, resize etc. in MS Word, save changes, return to RowerPoint. You will notice your changes have been made to the table.

Methods or Results

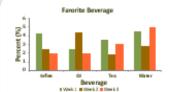
	Week1	Week 2	Week 3	Week 4
Coffee	48902	4883	3#89.5	02938.5
9E	ussenti	y bandis	played.	49805.2
Water	4930	0090	4905.54	5900.1
Cider	59069	50039	5)985	\$3988.6

Table 2. This table was created in power point. Easy to edit using the formatting palette. Consider doing simple tables and graphs in PowerPoint so you don't have to filo between programs to make changes. Tos can use the borders and shading menu in the formatting salette to change table :plors.

	Week 1	Week2	Week 3
Coffee	5.141	26536	8972
OJ	28	8	403
Water	9832	752	0.483
Cider	1843	93	938.02



Figure 1. "his graph vas made inExcel, copied and pasted into-PowerPoint. It is easily edited by double clicking on elements. benember to resize graph holding down the stift or all key at the tarme time as you are daugging to resize.



Results

Figure 2. There are times you may want to use this first line as a 'title' foryour figure. If you make your graph in PowePoint, it is much easier to edit using the formatting palette. This graps was make in Powerfoint.



Figure 3. To resize a photo that you save inserted, Remember(I) to hold the shift key (or all key) down at the same time you are dragging the corner to actual the photo size. This will keep the papert offic of the shoto normal and it will not distori the image Make sureyour image is at least 300 dpi be/one inserting into your postet (This is not as Me presentation where you can use a low res. 72 doi image and assume it will look good after you have enlarged it 200-300%) The output from a large formatprinter requires images to have 300 dpi resolution. The mages you choose for your poster should be used at least 75% of the finished size you are raine to use on your poter and at 360 doi resolution. This shoto has both outline and shadow added after it was inserted into PowerPoint. Check the 'shadow' tool bos in the tormatting palette for settings options. You can change line color for to color) in the line color galette.

EVEN more helpfu information:

Heritage

College of

Medicine

Osteopathic

OHIO

- 1. When insertings graph, photo or diagram from another program (that you have saved as a (peg) remember you will not be alle to editit in Power?oint. In the program you use to create these files, make the text, tont and color as close as possible to your poster template. Inserted file types that PowerPoint accepts are jogs and page.
- 2. Some Sigma Pict and CoreDraw files (mostly graphs) are troublesome (missing axis mostly). Export these graphs as jogs and insert into PowerPoint. Do not use out and peste.
- 1. Try not to use shadow on toot. A deepshadow makes toot hard to read on a poster especially in the main title. Keep it simple.
- 4. If you have problems using this template please contact CORE research office for help.

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References

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Acknowledgements

It is especially important to list any department, organization or grant that sponsored star research



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CUSTOMER-FOCUSED INITIATIVES

- Poster Events
- Training for Medical Students
- Training for Clinical Faculty







Process Mapping

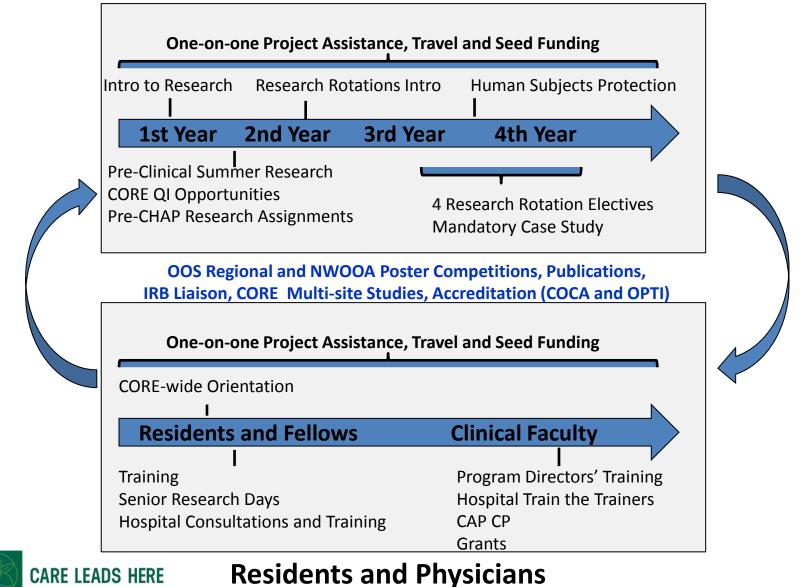
Medical Students



CARE LEADS HERE Residents and Physicians

Process Mapping

Medical Students

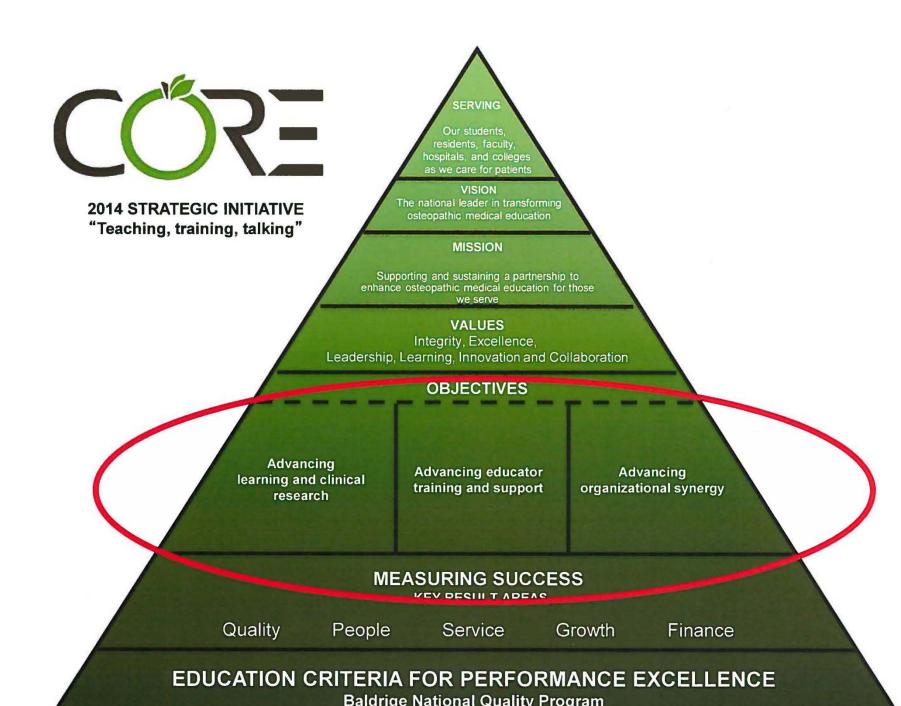


Research Growth

	Year (January to December)				
Research Outcomes	1995-	2001*-	2006-	2011-	
	2000	2005	2010	2012	
Registered Projects***	3	254	720	236	
Posters	0	15	157	61	
Peer-Reviewed	0	0	34	16	
Publications	0	0	54	10	
OOA Poster					
Competition	-	32	120	153	
Participants					

*OFFICE EXPANDED





CRO STRATEGY MAP



UPDATE

- Transitioning into single accreditation with MD programs.
- Re-craft our vision and strategy.



SUMMARY

- Innovation and Stakeholder Buy In requires the use of continuous improvement tools.
- In our case, innovation was a precursor for buy in.
- Landscape is always changing so strategic plan is an ongoing effort.





THANK YOU!



