

DIFFUSION PLAYBOOK





A Message from Blake Henderson, Director of VHA Diffusion of Excellence



Dear Innovator,

Thank you for picking up the Veterans Health Administration (VHA) Diffusion of Excellence (Diffusion) Playbook. It is exciting to share the work we do in an easy-to-use workbook. The content reflects years of experiences supporting frontline innovation and the foundational elements we uncovered in the process.

The playbook is divided into two parts. Part one spotlights the Diffusion principles and provides

space to assemble your innovation's business case. Part two boasts the Diffusion programming we all know and love. Whether you are just beginning or further investing in your innovation journey, there is something for everyone.

While the playbook is not an accountability tool, anticipate working and reworking activities. Iterations are normal and expected throughout the process. I also encourage you to get and stay involved with the Diffusion of Excellence Community's Teams channel.

We are so honored to be along this journey with you. If you have questions or feedback about the playbook, please reach out to Diffusion@VA.gov.

Cheers,

Blake Henderson,

Director of VHA Diffusion of Excellence

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About the Diffusion of Excellence Playbook

The Diffusion of Excellence Playbook (Diffusion Playbook) is a practical and informational resource for building or growing an innovation. The playbook's underlying foundation is built on the Diffusion principles. These themes and corresponding activities are essential to the innovation's lifecycle and business case.

The playbook sets up a plan of action for moving forward through local and national paths. Local activities are meant for facility-level guidance and national activities are allocated for widespread programs. After exploring the Diffusion principles in Part one, Part two outlines Diffusion's programming and engagement opportunities. To learn more about Diffusion lingo used throughout the playbook, see Appendix A.

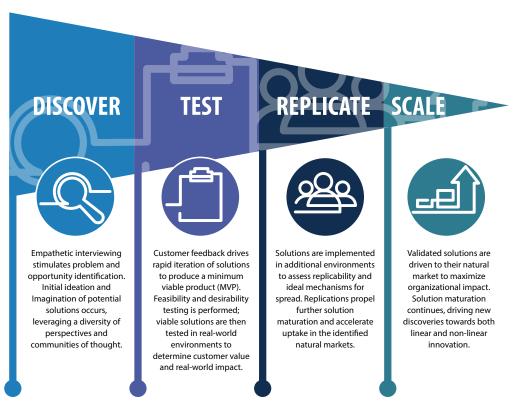
The Diffusion Playbook is regularly reviewed and updated. Contact VADiffusionSupport@VA.gov at your convenience with questions, concerns, and feedback.



Diffusion of Excellence sits within Veterans Health Administration's Innovation Ecosystem (VHA IE). VHA IE is the catalyst for enabling the discovery and spread of mission-driven health care innovation that exceeds expectations, restores hope, and builds trust within the Veteran community. VHA IE leverages the collective power of innovation champions from across VA, academia, other government agencies, and industry to operationalize innovation and scale promising practices. Through these collaborations, VHA IE identifies, tests, replicates, and scales innovations to drive operational stability for the enterprise.

VHA IE Operational Model

VHA IE developed the innovation operational model to address potential disparities in outcomes among facilities. This structured approach allows VHA IE to pinpoint challenges and assess solutions then replicate and scale them.



(Vega & Kizer, 2020)

Diffusion of Excellence functions in the replicate and scale stages of the VHA IE operational model and seeks to establish standardized healthcare initiatives. In the next section, its background and impact brings this to life.





Diffusion of Excellence's vision is to create a culture where every VHA employee is empowered to readily disseminate and implement innovative practices. Diffusion identifies, replicates, and scales emerging employee-developed innovations across VHA. They sponsor the annual VHA Shark Tank Competition and build capacity for diffusion activities through training, education, and tooling delivered to the country's largest health care workforce.

Impact

Diffusion impacts over 300,000 VHA employees who serve more than nine million Veterans across approximately 1,250 facilities. Since 2016, VHA Shark Tank Competition received 3,860 submissions and identified 99 Promising Practices. The practices replicated over 1,000 times and have a 52% sustainment rate after working with Diffusion. These efforts foster countless relationships and knowledge sharing, summarized now in this playbook and contribute to Diffusion's mission of providing frontline VHA innovators, Veteran Integrated Service Networks (VISNs), and national program offices with the education, tools, and autonomy to replicate innovations across VHA's nationwide system. They foster continuous learning, collaboration, and support to ensure every innovation reaches its optimal point of diffusion based on evolving Veteran needs and organizational priorities.





Priority Alignment

Diffusion harmonizes itself with the VA health care priorities. These priorities are top-level strategic and operational advancements intended to be clear and actionable achievements deserving top performance, focused commitment, and the best use of available resources.



Learn more about the Under Secretary for Health's priorities by visiting https://www.va.gov/health/priorities/index.asp

VA Health Care Priorities:

- Hire faster and more competitively
- Connect Veterans to the soonest and best care
- Serve Veterans with military environmental exposures
- Accelerate VA's journey to a High Reliability Organization
- Support Veterans' whole health, their caregivers, and survivors
- Prevent Veteran suicide

By aligning with the Under Secretary for Health's (USH) priorities and promoting the standardization of healthcare processes, Diffusion is a change catalyst. Diffusion stimulates innovation, fosters problem-solving capabilities with employees and plays a pivotal role in delivering VHA's commitment to transforming Veterans' lives.

Setting the Stage

Diffusion operates a unique landscape that is vital to innovative work. The team holds strong relationships with VHA senior leadership and the robust research community that enthusiastically applauds innovations and provides bottom-up opportunities for all VHA employees to contribute through VHA Shark Tank Competition.

VHA is a vertically integrated health care system and operates as a comprehensive health care provider for Veterans. For Diffusion, this means costs generated can be compared in one service line (e.g., time spent deprescribing potentially inappropriate medications by primary care clinicians) alongside gains in another (e.g., annualized reductions in national pharmacy spend). These return on investment (ROI) incentives support a more comprehensive Veteran-centric approach.





Quality Management, Systems Redesign, and Innovation

VHA significantly invests in improvement methods such as Quality Management (QM), Systems Redesign (SR), and innovation to ensure the continuous improvement of Veteran care. These concepts, while interrelated, have distinct characteristics and methodologies.

Quality Management (QM) supports the ongoing assessment and improvement of healthcare outcomes and delivery processes. QM helps identify evidence-based practices, screens for deviations from standards of care, and keeps facilities in a continuous state of readiness and compliance with industry standards.

Systems Redesign and Improvement (SR) supports VHA's journey to become a high reliability organization by promoting a culture of continuous process improvement. SR provides the tools, principles, and education to improve health care delivery. This is achieved through national improvement initiatives and offerings (Veterans Health Administration, 2023).

Innovation often starts as a novel idea or practice that needs to be tested and piloted. The focus is on the feasibility of the innovation, using both quantitative and qualitative data. The intention is to find novel ways to improve service delivery, patient experience, and overall care outcomes.



Innovation Business Case

In Part one, the Diffusion Playbook is built around creating an innovation business case, with local and national applicability. As the innovator, identify the best approach for the solution's present scope, anticipated results, and future goals. The local activities will be most useful to early-stage innovations but are worth revisiting for innovations actively replicating. The national activities are for more advanced innovations, especially those in enterprise-wide diffusion.





Building a Business Case

Building a strong business case is crucial for any innovative endeavor. A business case identifies essential components of the innovation, allows an evaluation of potential benefits and risks, bridges the transition from existing state to an envisioned future, and offers the needed validation to both scale and sustain.



Drafting and redrafting business case components is okay and expected. It is all part of the innovation's journey.

A business case is an excellent communication tool that can be used internally and externally. Consider the following information and activities centered around the Diffusion principles and record your answers in the space provided. Several forms of a business case exist. Verbal discussions, written documents, and PowerPoints are all ways to present a business case. As an innovation matures, the business case evolves too. A business case should be tailored to fit a specific innovation and present the best information for that innovation. For customizable business case templates, Diffusion recommends using templates available on the web-based project management tool Mural, as VA has a universal license for this platform. Please visit the yourIT Service Portal to start a Mural account with a VA email address or see templates readily available in Appendix B.

To work through this workbook, provide the innovation's name you will be using for the following activities.

Select the innovation's applicable VA health care priorities.

Hire faster and more competitively

Connect Veterans to the soonest and best care

Serve Veterans with military environmental exposures

Accelerate VA's journey to a High Reliability Organization

Support Veterans' whole health, their caregivers, and survivors

Prevent Veteran suicide



What makes your innovation unique? Why is this innovation needed now? What's your why?



PART ONE: DIFFUSION PRINCIPLES

Diffusion of Excellence's secret sauce is a blend of widely applied concepts from the start-up world, implementation science, and human psychology. These principles are a lens to constantly examine how to best support innovators from the facility level to a broader national scale.

The Diffusion principles are key fundamentals that inform all diffusion efforts.







DIFFUSION PRINCIPLE #1:

Build a Bold Vision and Mission



Forming the strategic vision and mission is often overlooked or deprived of meaningful thought even though it is an important place to start a business case. The innovation's vision is bold and inspiring. The mission is actionable and tells stakeholders how the innovation intends to deliver on its promise. Invest time and thought into the development of the vision and mission. Refer to them often when speaking about the innovation.

Before explaining the necessary components of an innovation's vision and mission, there are other factors that first need to be aligned. These are the target audience and market dynamics, problem statement, value proposition, service description, and pain killers.



Target Audience and Market Dynamics

First, identify and understand the target audience. The target audience is also known as the customer segment or consumer of the practice or program. These people can be divided based on their demographics, care preferences, and location. The target audience will come up again in Diffusion Principle #3: Rally the Stakeholders.

1. Who are you solving a problem for? Select the innovation's customer(s).

Here's a guiding question to get started:

All Veterans
LGBTQ+ Veterans
Veterans aged 65+
Post-9/11 Veterans
Pre-9/11 Veterans
Rural Veterans
Women Veterans
Veterans struggling with mental health of PTSD (Post-Traumatic Stress Disorder)
Veterans at risk of suicide
Veterans with chronic or complex illnesses
Minority Veterans
VA Employees (please specify)
Caregivers, families, and survivors
Other



Market dynamics are considerations like customer trends, market size, current solution providers, technology, industry, and regulatory trends. These are factors that change the innovation's supply and demand curves for the target audience. They help determine if the innovation is going to succeed. For example, are there customers who would benefit from your innovation outside of your facility or are you addressing a local problem?

Is your innovation unique or are there other, competing innovations that address the same issue? Does your facility budget allow for resources needed to try a new innovation?

Six main market dynamics are:





Consider these market dynamics questions to understand the supply and demand of your innovation. 1. What considerations above apply to your innovation? 2. How do they impact your innovation?



Problem Statement

The problem statement defines the primary issue Veterans or other beneficiaries encounter that your innovation aims to address. The problem statement does not include the value proposition, or solution.

Use the questions below to start the innovation's problem statement.

1. What 's the problem?2. Why is it a problem?

3. What led to the identification of the problem (i.e., research, patient feedback)?



4. Where is the problem occurring?	
5. When is the problem occurring?	
6. Who is experiencing the problem?	
7. How is the problem observed?	





Problem Statement Activity

Goal: To write your innovation's primary issue through a problem statement.

Instructions: Review your previous responses to the target audience and problem statement guiding questions. Draft the innovation problem statement for your business case below.

	PROBLEM STATEMENT	
Value Proposition		
With the problem statement d	rafted, now comes the solution. The value prop	oosition, or solution statement,

outlines the innovation and its benefits. The questions below help define the value proposition statement. Answer the questions below to assist writing the value proposition.

•	the questions below to assist withing the value proposition.
	1. How does the innovation solve the customer's problem identified in the problem statement?
	2. What is the value the innovation delivers to the target audience?
	3. What is the innovation's promise to the target audience?

4. Why should VHA devote resources now toward solving this problem across facilities? Give use cases.



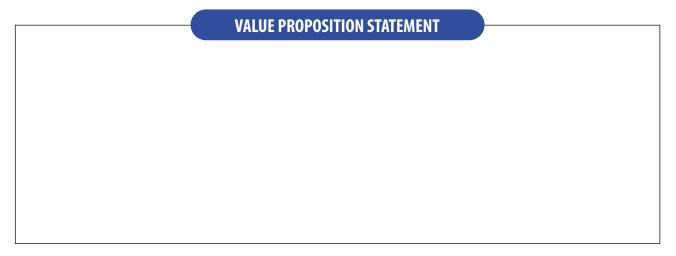




Value Proposition Activity

Goal: To draw up your innovation and its benefits with a value proposition statement.

Instructions: Use your value proposition responses above and circle back to your innovation's target audience and problem statement. Set your innovation's value proposition to add to your business case.



Products and Services

A clear description of the main product or service that an innovation offers is a contributing detail leading up to the development of the mission. Whether tangible or intangible, this description should ideally be a single sentence.

Consider the questions below and record the description in the activity.

- 1.ls your primary product or service tangible or intangible?
- 2.Is the product or service easy enough to explain to someone in one sentence? Please craft your explanation message here.



Products and Services Activity

Goal: To have a single-sentence description of the main product or service.

Instructions: Identify your innovation's tangible and intangible products or services and explain them in the space below. Remember, try to describe the products or services in one sentence.

PRODUCTS AND SERVICES

Pain Killers

A pain killer standouts amongst other products or services as an "essential need-to-have" rather than a "nice-to-have". This type of innovation solves customers' unmet needs rather than simply improving on already existing solutions. By being a painkiller, your innovation may be more appealing to the stakeholders necessary to assist in scaling and sustainment.

Consider the following questions and enter your pain killer(s) in the activity below. You may refer to your problem statement on page 19 and your value proposition on page 20 for questions 1 and 2.

1. What exactly is the customer's pain point? What is causing it?

2. What is your solution to the customer's problem?

3. What makes your product or service a need-to-have versus nice-to-have at a facility?







Pain Killers Activity

Goal: To highlight why this innovation is essential to alleviating customers' issues.

	LOCAL PAIN KILLERS
Pain killers also activity below.	exist at the national level. Use these questions to help you enter your pain killer(s) in the
1.What i	is causing your customer's pre-existing pain point at the health system level?
2.How is	s your solution to the customer's problem perceived by VISN and VA medical center directors?
3.What ı	makes your product or service a need-to-have versus a nice-to-have for VHA?
	NATIONAL PAIN KILLERS
	NATIONAL LAIN RIELLIS



Crafting the Vision and Mission Statements

Being the champion for an innovation in the nation's largest integrated health system is hard work. Innovators and collaborators constantly confront organizational, interpersonal, procedural, and technical hurdles. A vision and mission shared by peers and other stakeholders are fundamentally important to overcome these barriers and compel people to act.

Vision and mission statements are one aspect of broader strategic thinking for innovative practices, and therefore, support the creation of a business case. Strategic visions and missions help innovators think about the future of the innovation and how to get there. They also enhance local and national stakeholder commitment and aid in decision making. Without them, innovations risk implementing differently in new locations and derailing efforts to standardize processes.

Vision

A vision statement ensures the innovation inspires action and showcases the end goal to existing and potential stakeholders. It reflects the aspirations and long-term direction of an innovation. The guidelines below will guide you in creating the vision statement for both local and national implementation.





Read the VA vision and take a moment to reflect on how innovative work can fulfill this vision.

The Veterans Affairs Vision



"To provide Veterans the world-class benefits and services they have earned –and to do so by adhering to the highest standards of compassion, commitment, excellence, professionalism, integrity, accountability, and stewardship."

The below visions are highlights from other innovators that are challenging, engaging, and inspiring other employees and the status quo.

Innovation Visions



"FLOW3 will transform the timely delivery of prosthetic limb care for Veterans with amputations"

 Enterprise Prosthetic Limb Workflow Management System

INNOVATION

The White Noise Project

BRIEF - The Specialty Optical Lab

CREW: Carbohydrate Reduction Empowering Wellness

VISION STATEMENT

Promoting recovery, health, and wellbeing for Veterans

To provide best corrected prescription glasses to Veterans who are visually impaired within a timeframe needed for training and for quality of life

To be the gold standard comprehensive lifestyle intervention improving Veterans health and well-being through carbohydrate reduction



Mission

Mission statements define the action that will achieve the vision. Where the vision is future, the mission is present. This is why the mission statement may change as the product or service adapts to changing environments and technologies to meet the vision. While equally important, mission statements are the road map to a vision's end goal. Keep in mind the guidelines below when creating your innovation's mission statement.

WHAT Defines objectives, purpose, and goals Describes aims and values of an innovation Provides an overview on how to achieve the vision statement WHY Outlines the purpose so teams can stay focused Ensures consistent goals and methods Communicates the innovation to key stakeholders



"A well-crafted mission statement can provide the focus and motivation one needs to take one's business to the next level"

-James Ike Schaap, PhD and Joshua Lawrence Schaap

When crafting a mission statement:

- Use present tense
- Make it inspiring, motivating, and compelling to the target audience
- Keep it brief and no more than a few sentences
- Don't be overly specific with values, percentages, numbers, goals, or strategies



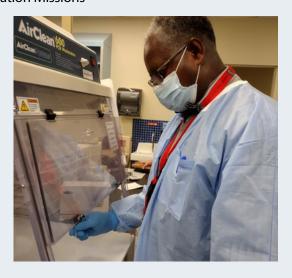
Read the VA mission statement and the mission statements of featured innovations.

The Veterans Affairs Mission



"To fulfill President Lincoln's promise "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's Veterans. VA's five core values underscore the obligations inherent in VA's mission: Integrity, Commitment, Advocacy, Respect, and Excellence."

Innovation Missions



"Utilize early identification, appropriate testing, and patient-centered treatment plans to reduce the harmful effects of C.diff infections"

- 2 Step Solution to Fixing the C.diff Problem

INNOVATION

The White Noise Project

BRIEF - The Specialty Optical Lab

CREW: Carbohydrate Reduction Empowering Wellness

MISSION STATEMENT

To facilitate quality rest by empowering Veterans with impactful tools and accessibility to holistic care

To optimize turnaround time by manufacturing prescription glasses in-house to improve the lives of Veterans with visual impairments

To improve health outcomes and reduce medication burden for Veterans with type 2 diabetes and other metabolic conditions through an inter-disciplinary team using therapeutic carbohydrate reduction and a whole health approach







Vision and Mission Activity

You may also reference back to your responses during the problem activities on pages $\underline{17-19}$.

Goals: To inspire action to showcase the innovation's end goal through the vision statement. To craft the innovation's road map to the vision's end goal through the mission statement.

Instructions: In this activity, you will define your innovation's vision and mission statements. Begin by using the vision guiding questions below to brainstorm different elements of the statement. Use your thoughts from the questions to craft your vision statement in the space underneath. Once you complete your vision statement, use the mission guiding questions to brainstorm and craft your mission statement.

Vision Guiding Questions
1. What is your core focus? What makes this innovation special?

2.What need	are you	targeting?
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3. Who benefits from your innovation?

4. Does your vision support the VA's vision statement and health care priorities?



VISION STATEMENT
Mission Guiding Questions
1. Why do you care about this innovation?
2. What does your innovation do? How does it satisfy customers' needs?
3. Does your mission align with VA's mission statement and health care priorities?
MISSION STATEMENT
MISSION STATEMENT



Your innovation's vision and mission will be and should be redrafted and reconsidered as it matures and spreads. Use the activity below to craft your national vision and mission.



TIP

Revisit the vision and mission guiding questions from the local vision and mission activity above to inspire your considerations for your statements' evolution.

Goals: To redraft your evolved vision statement now that your innovation matured. To consider your evolved mission statement since your innovation matured.

Instructions: First, write your current vision and mission guiding the innovation. Consider how your innovation will grow from local implementation to national implementation and refresh the vision and mission as needed.

CURRENT VISION	
CORRECT VISION	
NEWVICION	
NEW VISION	



CURRENT MISSION	
NEW MISSION	

DIFFUSION PRINCIPLE #2:

Shape Goals and Frame Fidelity



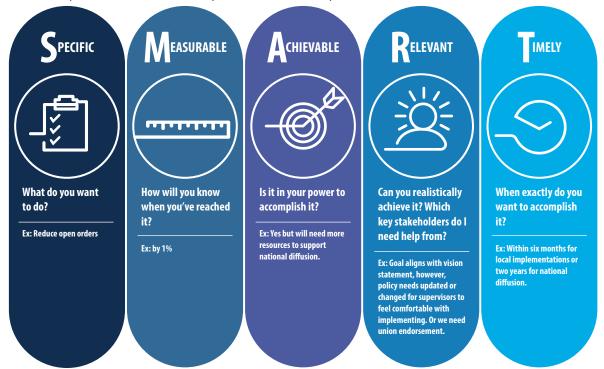
In Diffusion Principle #1: Build a Bold Vision and Mission, you laid your innovation's vision and mission groundwork with help from the target audience, problem statement, and value proposition activities to tee up the next principle, Diffusion Principle #2: Shape Goals and Frame Fidelity.

Setting SMART goals and defining or refining an innovation's fidelity involves also identifying the innovation's key advantages and activities to spread it. SMART goals help evaluate the innovation's local and national success while the core and adaptable components help an innovation be delivered as intended and achieve the expected results. Key activities preserve fidelity and an innovation's key advantages use fidelity to highlight the unique attributes that set it apart.



SMART Goals

The purpose of making SMART goals is to set measurable goals for implementing your innovation locally and nationally. Goals should be clearly defined so a facility can evaluate success.



SMART Goal Activity



Goal: To create SMART goals for your innovation that align with your vision statement.

Instructions: In this activity, list goals for your innovation. Next, convert them into specific, measurable, achievable, relevant, and timely (SMART) goals.

GOALS	CONVERT GOAL INTO A SMART GOAL
Ex: Implement the Surgical Pause at all VAMCs	Ex: By the end of FY23, at least 55 VHA surgical sites of care will measure Veteran frailty for elective surgeries by utilizing the National RAI Frailty Tool.

Core and Adaptable Components

Core and adaptable components, jointly known as an innovation's fidelity, are fundamental implementation science concepts. These factors examine if an innovation was delivered as intended and achieved the expected results. Whether building a business case or process map, setting this framework early with associated metrics for an implementation team to follow, helps seamlessly advance the innovation.



Business cases and process maps are living documents and change regularly. Follow this playbook to ensure consistency and sustainability.

Core components are essential to an innovation's effectiveness and remain consistent across all adoptions. They provide guard rails to new implementers to achieve consistent clinical or operational outcomes. On the other hand, adaptable components change based on the needs and circumstances of individual sites. These components grant innovators important latitude to tailor the implementation to their unique environment.

Core and adaptable components help shape support materials such as:

- A list of pre-implementation requirements at a new facility.
- Toolkits guiding core and adaptable implementation steps.
- A suggested timeline of implementation milestones for putting core components in place and making adaptations.



Fidelity starts with vision and mission statements. If you have not already defined your vision and mission statements, please refer to Diffusion Principle #1: Build a Bold Vision and Mission.





Defining Core and Adaptable Components Activity

Goals: To describe the core components across all your innovation's adoptions. To detail the adaptable components that can change during the innovation's implementation.



Instructions: Use the core and adaptable components questions below to define the core and adaptable components for your innovation. List the components in the space below each of the two categories.

Core Components

2	. How	do	these	com	pone	nts	align	ı with	the	inno	ovatio	on's	bold	vision	and	miss	ion?
_		au	CIICSC	COIII	00110		ungi				, vaci	9119	2010	V 131011	alla	111133	

Adaptable Components

3. What can be different from one implementation to another site adoption?

4. What makes these components nonessential to achieving your innovation's desired outcome?

As an innovation matures for a national audience, core and adaptable components ensure the necessary elements are upheld and executed at new locations and fungible elements are adapted to the new location's specific needs. Core and adaptable components inform facilities what they must have in place for successful implementation, and what they should have in place, but can adjust to suit their specific needs. Explaining the people, processes, and tools necessary for components can be helpful for implementation growth and sustainability.

Goals: To identify the core people, process, and tools to scale your innovation. To classify the adaptable people, process, and tools to scale your innovation.



Instructions: Fill out the tables below to determine the people, processes, and tools that make up your innovation's core and adaptable components. Be sure to reference your vision and mission statements from the previous section so they align with the components you define.

CORE COMPONENTS					
People	Determine what people are necessary.				
Process	Explain the required processes.				
Tools	Specify the tools that are critical.				



ADAPTABLE COMPONENTS					
People	List what personnel needs are acceptable.				
Process	Describe processes that are flexible.				
Tools	See what tools can change.				



Key Activities

Key activities are most important for innovations to mature and sustain while preserving fidelity. They support communication campaigns, gain visibility, track impact, and help educate new people on the innovation.

Review the example activities below. Use a check mark to select the key activities already being used and use an exclamation point for key activities to start using to support the innovation.



Identifying Your Key Activities Activity



Consider the questions below and record the key activities below.

- 1. What actions are imperative for your innovation to be a success?
- 2. What does it take for a facility to put this innovation into place? How will they do it?



Goal: To identify key activities that are imperative for your innovation's success and sustainment.

Instructions: Using the selections made above, list your innovation's key activities below. Consider how these activities help your innovation grow and sustain.

Key Activity	How does the activity grow and/or sustain your innovation?

What are the risks if your key activities are not implemented or utilized?





Key Advantages

Key advantages are the unique attributes that set an innovation apart from competitors or the status quo. This may include factors like patients, relationships, expertise, and experience.

the following questions to highlight the innovation's key advantages for a facility in the activity below
1. What does the innovation offer that others do not in a facility?
2. Why would the target audience use this service over other services?
3. What does the innovation offer at its core that is difficult to imitate?
4. Do people trust the innovation more than others? Why?
the key activities selected above meet the innovation's key advantages?

Do







Identifying Key Advantages

Goal: To recognize the unique attributes of your innovation.

Instructions: Explain your innovation's key advantages for facility-level replication using the responses from

the questions above.
LOCAL KEY ADVANTAGES
There are also key advantages at the national level. These questions help you respond in the activity below.
1. What does the innovation offer that others do not in VHA?
2. Why would the target audience use this service over other services across VHA?
3. What does the innovation offer at the health system level that is difficult to imitate?

ey Advantages Activity	y				
sing the questions above,	draft your innovation	n's key advantages	at the national le	vel.	
	NATIONA	AL KEY ADVANTAG	GES		

4. Do people trust the innovation more than others in VHA?



DIFFUSION PRINCIPLE #3:

Rally the Stakeholders



In this section, identifying important stakeholders starts with building the implementation team and compiling a stakeholder coalition. Stakeholders differ between innovation needs and vary in type, dedicated time, and responsibility.



Building and Engaging the Team

The implementation team contains people who are experienced in the solution's space with the leadership, energy, knowledge, and commitment to lead to success. A prosperous implementation team has various skillsets, experiences, and responsibilities. Communicating roles, expectations, and time commitments is imperative to a team's dynamic. Regular-cadenced meetings, task follow-ups, and the overall meeting environment keeps an engaged team.

Effective Meetings:

Are well organized with a meeting leader, agenda, and shared goal.

Promote psychological safety and active listening.

Run efficiently and collaboratively.



Use the activity below to create a written record of team roles, responsibilities, and dynamics. Like other aspects of this playbook, it is recommended to revisit team roles and responsibilities ideally quarterly, and at least annually.



Building Your Team Activity





Instructions: Complete the table on the next page and identify your team members, responsibilities, training needs, and meeting type/frequency for your innovation.

Responsibilities (Subject to Change)	Full Time or Part Time on Team	Training/Education Needed
Ex: Upload practice templates into CPRS for clinician documentation; pull data	Ex: Part time; initial comments and needs to address' monthly monitoring of adherence to templates	Ex: Training of team members to implement the note template; education on data pulls
	(Subject to Change) Ex: Upload practice templates into CPRS for clinician documentation;	(Subject to Change) Ex: Upload practice templates into CPRS for clinician documentation; Full Time or Part Time on Team Ex: Part time; initial comments and needs to address' monthly monitoring

Team Member & Position	Responsibilities (Subject to Change)	Full Time or Part Time on Team	Training/Education Needed	Meeting Type and Frequency





Engaging Your Team Activity

Goal: To a draft communications plan for your innovation to determine how your team will engage with each other.

Instructions: Spend time considering team contributions. Team members are assigned tasks and should be prepared to give updates in the regular-cadence meeting or through email communication. Work through the activity below and record how your team will engage together to get work done. Identify the purpose and methods of communication, the lead person responsible, and frequency of the communication or meeting for different audiences.

Audience	Purpose of Communication	Method of Communication	Person Responsible	Frequency
Ex: Project Team	Ex: Status Updates	Ex: Email	Ex: Project Lead	Ex: Weekly

Building a Stakeholder Coalition

In addition to a core team, overcoming health care delivery challenges requires deliberate coalition building. Stakeholders are any individual or group who can affect or are affected by the innovation. Having key stakeholders at the decision-making table enables long-term success and sustainment.

Securing stakeholder relationships and buy-in are crucial to an innovation's success. Both local and national stakeholders can be categorized and prioritized differently based on their influence and level of engagement. Invested stakeholders help acquire more resources, obtain required approvals, and spread the word about the innovation.

STAKEHOLDER ENGAGEMENT

Stakeholder engagement is broken down into four stages, depicted below







Stakeholders are people affected by an innovation, both locally and nationally. These can include:



Another way of thinking about an innovation's customers is to consider internal versus external stakeholders. For the purposes of this playbook, internal stakeholders are other VA employees, staff, or volunteers while external stakeholders do not work for VA.

INTERNAL

Leadership
Administrators
Clinicians
Researchers
Support Staff
Volunteers

EXTERNAL

Veterans and Caregivers
Industry
Academia
Non-profit Organizations
State Agencies
Other Government Agencies
International

An established network of change agents can use their influence to advocate, connect, and recruit more following for an innovation. After thinking about what people or groups are affected by or can affect the innovation, categorize the effects of those stakeholders. The four categories are:

SPONSORSHIP STAKEHOLDERS

The stakeholders set program office policies and priorities and co-own the innovation.

ECONOMIC STAKEHOLDERS

The stakeholders provide funding for the innovation.

END USER STAKEHOLDERS

The stakeholders are the intended recipients of the innovation and include Veterans, families, caregivers, and fellow employees.

INFLUENCER STAKEHOLDERS

The stakeholders spread news about your innovation, network on the innovation's behalf, and influence opinions of other leaders.





Identify Key Stakeholders for Widespread Diffusion Activity

Goals: To identify the various stakeholders necessary for local implementation. To dissect these stakeholders into sponsorship, economic, end user, and influencer stakeholders.

Instructions: Use the following questions to identify key stakeholders necessary to implement your innovation at the local level.

1. Who is your target audience? Refer back to your answer on page 14.
2. Who would you consider to be "owners" of your innovation?
3. Do you have a marketing plan? Who at your facility is best equipped to spread news or network on your innovation's behalf?
4. Who will provide funding for your innovation?
5. Do you have any stakeholders who are external to VA? If so, please list them.

Identify Key Stakeholders for Widespread Diffusion Activity



Goals: To expand your perspective on stakeholders outside of local implementation. To dissect national and external stakeholders into sponsorship, economic, end user, and influencer stakeholders.

Instructions: Consider the different categories and list key stakeholders who are instrumental in scaling your innovation beyond local implementation.

SPONSORSHIP STAKEHOLDERS	ECONOMIC STAKEHOLDERS	END USER STAKEHOLDERS	INFLUENCER STAKEHOLDERS
Ex: Office of Mental Health and Suicide Prevention and other groups can help sponsor your efforts through proposal submission	Ex: HSR&D and other groups to help with funding. HSR&D supports research that encompasses all aspects of Veteran healthcare and focuses on patient care, cost, and quality. They can provide resources in the form of grants for evaluations of innovations.	Ex: Veterans and VA staff who will use your practice.	Ex: Local leadership or others who are familiar with your practice and can advocate for you at a higher level. Public Affairs Officer-market locally and throughout the VISN to garner support.





After the stakeholders are identified and categorized, the next step is to understand whether they are primary or secondary stakeholders. This distinction helps prioritize conversations and resources.

Primary stakeholders engage directly with the innovation, either through providing resources or receiving benefits.

Primary stakeholders include:

Implementation team

Veterans receiving the care

Facility leadership providing resources

Service line leadership benefiting from the innovation

VHA setting agency priorities

Secondary stakeholders may have influence but are not directly involved or affected by the innovation.

Secondary stakeholders include:

Advocacy groups providing lobby support or spreading awareness

Suppliers providing required goods for innovation

Medical Center staff not directly involved

Media groups spreading awareness and affecting public opinion

Taxpayers affecting which policymakers are in office

Policymakers making and enacting laws affecting funding and priorities





Identifying and Engaging Stakeholder Groups Activity

Goals: To take the previously identified stakeholders and analyze them. To choose stakeholder engagement methods.

Instructions: In the first part of the activity, list your innovation's key partners and stakeholders. Consider your sponsorship stakeholders, economic stakeholders, end user stakeholders, and influencer stakeholders and reflect on engaging existing, new, and past stakeholders.



WHO ARE YOUR CURRENT KEY PARTNERS AND STAKEHOLDERS			
Consider primary and secondary stakeholder such as Veterans, facility leadership, service line-level leadership, VHA employees, suppliers, advocacy groups, taxpayers policymakers, media groups, etc.			
	AKEHOLDERS		
What strategies worked in the past? NEW STAK What stakeholders do you need to engage as you scale?	What strategies didn't work? EHOLDERS How can you build from past strategies to engage new stakeholders?		
DACT CTAV	EHOLDERS		
Who are your disengaged stakeholders?	What can you do to reengage?		



In the sections above, the focus is identifying stakeholders and determining how to engage with them on a local level. As the innovation grows on to national diffusion, the stakeholder perspective will expand to stakeholders relevant to widespread diffusion.



Remember that you do not have to work with every person or group who knocks on your door. Be strategic about the stakeholders you choose to work with and make sure they will help you on your national diffusion journey.

1. If there is already a strong stakeholder group at the facility level, what stakeholders will you need to engage as you scale? How can you build from past strategies to engage new stakeholders?

2. Once the innovation's stakeholders are identified, categorized, and distinguished as primary or secondary, next analyze their influence to help determine the relationship approach.

The graph below reflects four different customer relationship approaches based on the level of influence and interest in the innovation.

HIGH INFLUENCE, LOW INTEREST

Maintain stakeholder satisfaction since they strongly impact the innovation.

Meet these stakeholders' requirements. They have many varied, simultaneous priorities and responsibilities.

Example: VA medical center director

HIGH INFLUENCE, HIGH INTEREST

Manage the stakeholder relationship closely as they have the largest effect on the innovation.

Fully engage these stakeholders and make the strongest efforts to meet their requirements.

Example: Direct supervisor

LOW INFLUENCE, LOW INTEREST

Monitor the stakeholder relationship to ensure there is no change in status.

Keep this stakeholder group on your radar for potential change in influence or interest.

Example: Colleagues from different departments

LOW INFLUENCE, HIGH INTEREST

Keep these stakeholders informed since they may not strongly affect the work but can be affected by the innovation.

Adequately work with the stakeholders to ensure no major issues arise.

Example: Veterans

Adapted from Mendelow, A.L. (1981). 'Environmental Scanning - The Impact of the Stakeholder Concept', ICIS 1981 Proceedings, 20. [online].





Finally, it is time to engage the stakeholders to cultivate meaningful and beneficial relationships to bring the greatest benefits to those affected by the innovation.

To best plan the communications and engagement strategy, take time to reflect on the questions below:

• the questions below:
1. Who influences the stakeholders' opinions or actions?
2. Who else do the stakeholders influence?
3. What motivates the stakeholders most of all?
4. What VA health care priority are my stakeholders most interested in or aligned with?
5. What is the best way to communicate with these stakeholders?



6. How do the customers feel about this innovation?
7. What is my key message?
8. What is my ask?
9. How will I manage opposition from stakeholders who do not support the innovation?
10. Do I have any disengaged customers? If so, what can I do to reengage them?
With these answers, craft specific messaging, decide on communication methods, and select communication frequency to make necessary contact with stakeholders in the next section.





Building a strategy to best engage with each customer promotes transparent conversations and trustworthy partnerships. Consider the following strategies for the communication plan.

- Communicate with stakeholders regularly to keep them updated and informed.
- Keep stakeholders involved and create a system for incorporating feedback. Report back with updates.
- Ensure empathetic listening so stakeholders feel heard, understood, and valued.
- Give stakeholders public credit. Showcase and celebrate the team's achievements.

Whether replicating or scaling an innovation, there are engagement methods to consider. These approaches bring the communication strategy to life.

COLLABORATION Shared accountability and responsibility Part of the team and engages in tasks and **PARTICIPATION** responsibilities for a particular area/activity Involved but not responsible – the team broadcasts CONSULTATION information to all or target stakeholders choose whether to engage with it One-way engagement where the team broadcasts **PUSH COMMUNICATIONS** information to all or target stakeholders via various platforms One-way engagement where information is made **PULL COMMUNICATIONS** available, and stakeholders choose whether to engage with it

After the engagement strategy and approach for each stakeholder is decided, ascertain the best communication method with each stakeholder. Working through the Diffusion Playbook will help curate information about an innovation, distill it into a business case to share with stakeholders and increase understanding of the innovation's process, goals, and achievements. However, it is important to consider what channels to use.

Communication channels used to deliver the value proposition to customers is vital. These can include word of mouth, blogs, publications, interviews, and media. It is important to plan how customers will learn about the innovation, how it will be explained and advertised, and how to maintain customer relationships after delivery.

SURVEYS



Gain feedback and insight from stakeholders into what matters most to them, their preferred methods of contact, and other information they can provide.

ONE PAGERS



Informative documents that give brief but important information and background. They are good for busy stakeholders who do not have a lot of time for in-depth reading.

EMAILS



Information-only or for back-and-forth communication. Allows for the recipients to read and respond at their convenience.

Be careful! Inbox overload can cause some emails to be lost or ignored.

Best not to overuse or rely on for urgent communications

BRIEF INTERVIEWS



A good way to talk to stakeholders one-on-one and to get better back-and-forth dialogue than from email.

Try to keep meetings between 15 to 30 minutes, especially for busier stakeholders.

FLYERS



More visual than one pagers.

Meant to raise quick awareness for your practice or for related events and resources.

GROUP MEETINGS



A forum for multiple stakeholders to come together and provide diverse feedback.

Collaboration among the team and stakeholders through events like Community of Practices or Advisory Panels.

DIFFUSION MARKETPLACE

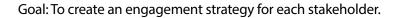


A marketing tool for a program, process, or tool designed and imple mented within VA that brings a unique value toward addressing a clinical operational, or strategic problem.

OTHER



Building Relationships with Stakeholders Activity





Instructions: Choose one stakeholder from each of the categories and create an engagement strategy for each based on their impact, influence and interest levels, and priorities.

Stakeholder Category	Stakeholder	Desired Action/Impact for Practice	Influence an Interest Level (L/H)	Priorities & Incentives	Engagement Strategy
Ex: SMART goals	John Smith, Medical Center Director	Implementation approval Resource acquiring support	High Power, High Interest	Metric improvements Alignment to VHA/VA Mission	Push: Updates via Quarterly CallPull: One-pagers
Sponsorship Stakeholder					
Economic Stakeholder					
End User Stakeholder					
Influencer Stakeholder					



Stakeholder Coalition Channels Activity

Goal: To identify and define channels for national stakeholder engagement.

Instructions: Use the following guiding questions to help determine how to achieve awareness of your innovation, how to deliver your innovation, and how you will continue to support and collaborate with stakeholders after your initial connection.

Stakeholder Coalition Guiding Questions:

Awareness:

1. How will the customers become aware of the innovative solution in a medica	l center	or
across VA?		

- 2. How will the solution be explained and advertised locally versus nationally?
- 3. Will the solution change how the end user performs their current job? If so, explain how.

Delivery:

1. How will the solution be delivered day-to-day?

Support:

1. What will the relationship with the customer look like after the value proposition is delivered?



DIFFUSION PRINCIPLE #4:

Cultivate Growth Resources



VHA is fortunate to be comprised of creative team members that can formulate and implement new innovations at relatively low cost. Still, scaling an innovation across a nationwide network requires a thoughtful resourcing strategy to avoid burnout and achieve full potential.



Has your innovation received funding?

- 1. Name of funding source
- 2. Total funding amount
- 3. Duration of funding

Resource plans identify, organize, and list the resources required to complete an implementation or other project. Use a resource plan to see how and when resources will be used.



To Build a Resource Plan:

- 1. Identify required, support, and optional resources.
- 2. Prioritize the resource list.
- 3. Determine how to acquire these resources.
- 4. Determine a timeline to acquire the resources.
- 5. Identify and address barriers to acquiring resources.

Resources are needed to implement an innovation both locally and nationally. The table below shares some examples of resources.

RESOURCE TYPE	EXAMPLES	
Services	Outsourcing	
Labor	Staff	
Equipment	Hardware, medical supplies	
Technology	Software, dashboards	
Materials	Manufacturing supplies	
Money	Facility funding, grants	
Space	More space may be needed if adding new staff	
Time	Timescales affected by other resources	



Next, think about who and what resources are needed and why. An estimation is needed for each resource. Use these estimation techniques for guidance.

ESTIMATION TECHNIQUE	DEFINITION	EXAMPLES
Analogous estimating	Estimate based off similar project	In a previous project, a laboratory ordered five centrifuges. It is estimated that in a new project with a similar budget, the analogous estimate would be to order five centrifuges.
Parametric estimating	Estimate based off historical data or experience	A year-long project requires 4,000 hours of staffing. If it took one person roughly two years to complete, then two people are needed to complete it in one year.
Three-point estimating	Choosing a most likely value once you have defined an upper (optimistic) and lower (pessimistic) value	Estimate the time it takes to complete an activity. The optimistic estimate may be 8 days to create a one-pager; the pessimistic estimate may be 30 days; and a duration of 12 days may be deemed most likely.





Resource Planning Activity

Resourcing comes from a variety of places. While it can start locally or regionally, there are opportunities for diffusing nationally. Connecting to applicable program offices or research groups may not always result in immediate investments but can lead to resources in the future.

Goal: To plan for the necessary resources for successful implementation.

Instructions: For each resource, use selection criteria to determine the need and its priority. To identify which items to prioritize first, use the guiding questions below. Then, continue on to list the optimal personnel and material resources to replicate the innovation.

For each resource, use selection criteria to determine the need and its priority. To identify which items to prioritize first, consider:



1. What resources are needed to begin certain activities?
2. When would each resource be available? Where are the resources located?
3. What resources will take the most time to secure?
4. What are the costs associated with the resources?
5. Do you need certain resources to move beyond a step in your process? If you lack the resource, will certain activities grind to a halt? Which resources are "must haves" and "nice to haves" for the innovation?



List the optimal personnel resources needed to replicate your innovation and the amount of time required by each of them. -Example: Registered Nurse - 15 hours/week for 6 months, Business Analyst 40 hours/week; Biomedical Engineer- 5 hours/week during contracting; 10 hours per week during installation **OPTIMAL PERSONNEL RESOURCES** List the optimal material resources needed to replicate your innovation. -Example: Equipment, information technology (IT) support, storage space **OPTIMAL MATERIAL RESOURCES**



Acquiring resources is the process of securing team members, equipment, materials, and other resources to deliver the innovation at the implementation site. Keep the priorities in mind when acquiring resources in the event not all resources can be acquired at once.

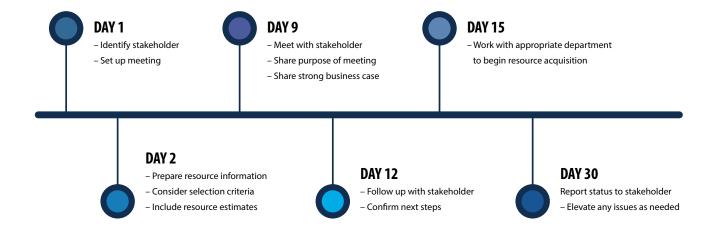
Work with the local implementation team to establish:

·
1. Which resources are already procured or currently available at the implementing facility?
2. Which resources need to be sourced?
3. Who is potentially supplying the remaining resources?
4. Will your innovation need any external licensing or contracting work to successfully implement in
a new facility?



It is key to prepare a timeline before seeking resources from stakeholders. Prior to meeting with identified stakeholders, prepare them with the purpose of the meeting and the information for the needed resources.

Below is a sample timeline for seeking resources from stakeholders. You can reference a timeline template in Appendix B.





Things to Consider When Creating a Resource Timeline

- When do you need each resource? When can those resources be relieved?
- Is this resource a short-term or long-term investment?
- What resource limitations would slow progression or cause delays?
- How long does it take to acquire each resource?





Identifying and Securing Resources Activity

Goal: To catalog local and national resources and how to acquire them for widespread diffusion.

Instructions: First, respond to the securing national resources guiding questions. Then, complete the chart with the resources needed to implement the innovation across a VISN or enterprise wide.

Once the innovation is ready for more widespread diffusion, expand the scope of resources to a national level. Use the guiding questions below to brainstorm what new resources may be needed for an innovation's national diffusion.

Securing National Resources Guiding Questions:

1. What are the next steps for you to seek out more resource opportunities?

2. What resource barriers do you anticipate facing?

3. How can you further leverage your local, VISN, and national network to address these implementation challenges?





Identifying and Securing Resources Activity

Goal: To catalog national resources and how to acquire them for widespread diffusion.

Instructions: Complete the chart with the resources needed to implement the innovation across a VISN or enterprise wide.

RESOURCE	HOW TO ACQUIRE



Risk Management

There may be barriers to securing resources that are out of the implementation team's control or need a different approach than planned. Barriers to resources are considered risks and solutions are mitigation strategies.



Helpful Tips:

- Start elsewhere and complete other activities while waiting for resources.
- Check-in. Routinely check resource status and process.
- Be patient. Understand that getting resources may be slower than expected.
- Be understanding. Have empathy for stakeholders and competing priorities.

Risk management is an ongoing process that involves assessing and monitoring threats that may delay or halt an innovation. Many internal or external factors could negatively impact an innovation. The most common risks are related to schedule, cost, quality, technology, and resources.

TYPE OF RISK	EXAMPLES	
Schedule Risk	Implementation will not complete on time.	
Cost Risk	Total implementation cost will exceed the budget.	
Quality Risk	Implementation will not meet the defined standards.	
Technology Risk Technology might not perform as required.		
Resource Risk	Delays in procurement of resources or onboarding of necessary personnel	

To understand overall risk level, the three factors to consider when evaluating risks are probability, impact, and vulnerability.

TYPE OF RISK	EXAMPLES
Risk Probability Likelihood of a risk event occurring	
Risk Impact	Consequences of a risk event occurring
Risk Vulnerability Extent to which a risk event can be controlled	



All innovations face some sort of risk. Please select all types of risk that apply to your innovation.

Schedule	Cost/Resources
Technology	Quality
Other	

The next step is to develop a response plan and decide what to do about those risks. Based on the implementation team's risk tolerance, the potential risks can be transferred, reduced, avoided, or accepted. By selecting risk reduction, mitigation strategies need to be developed and put into action.

RISK ACCEPTANCE

When you accept the identified risk and do not take any other action to reduce it because you can accept its impact and possible consequences

RISK REDUCTION

When you take actions to reduce risk to an acceptable level

RISK TRANSFER

When you hand over the risk to another person or department

RISK AVOIDANCE

When you decide to change the plan so the risk disappears

EXAMPLE RISKS AND MITIGATION STRATEGIES

FACTOR	RISK(S)	MITIGATION STRATEGY
Human Resources	Staff recruitmentAbility to hire staffShort staffing	 Cross-train staff until replacement is available Develop job share plan to better utilize existing staff Allow video conferencing into meetings for those unable to attend in-person
Infrastructure Capability	Purchasing and contractingChallenge of obtaining supplies	 Borrow supplies/equipment from different departments until acquiring needed supplies Determine best purchasing method (i.e., obtain a credit card) for ordering supplies Develop policy change to be more inclusive of who can purchase supplies
Technology	Ideal software solution is not approved within the Technical Reference Model (TRM)	 Request Enterprise Architecture Assessment for official approval to be added to TRM Source use case applications for local OI&T to utilize for potential local implementation



RAID Logs

RAID logs are another way to identify and track risks as well as actions, issues, and decisions. Learn more about RAID logs in <u>Appendix B: Templates and Tools</u>.

RISKS

Risks are events that might happen, but it is uncertain when or if they will happen.

ACTIONS

Actions are what you or any other team members must do for the innovation. Tracking action status (i.e., in progress, on hold, complete) is an easy way to manage tasks and complete them on time.

ISSUES

Issues arise during implementation that may create a timing delay or other problem that impedes success. Issues are events you know you will have to deal with, and you may have an idea of when they will occur.

DECISIONS

Decisions are conclusions or judgments made on how to move forward with the innovation.







Risk Management Plan Activity

Goal: To recognize implementation plan risks (i.e., schedule, technology, cost and resources, and quality) and establish mitigation strategies and responsibilities.

Instructions: Fill in the chart below with your implementation risks, the respective mitigation strategies, and who is responsible for each.

IDENTIFIED RISK	MITIGATION STRATEGY	WHO IS RESPONSIBLE
Local Ex: If upgrades to drug files are dependent on a pharmacist informaticist then they need the experience and time to complete these duties.	Coordinate a standard operating procedure that reduces mistakes and is timebound; engage VISN Pharmacy Executive (VPE) or local pharmacy leadership.	Pharmacy Representative on project team
If leadership does not keep tabs on all the innovative quality improvement initiatives taking place then the proper recognition is not given and momentum can decrease.	Levels of implementation have been developed to track each sites progress. As sites meet milestones, the national diffusion team will alert facility leadership to inform them of the progress, outcomes, and notable recognition of the team members.	Project manager and practice owner



DIFFUSION PRINCIPLE #5:

Measure the Impact



Key performance indicators (KPIs) should be developed, tracked closely, and regularly shared with stakeholders. The health care industry understandably places a heavy emphasis on evidence-based innovations and successful diffusion requires a data-driven approach. Innovations must clearly define KPIs that drive their success. KPIs should assess the innovation's fidelity. More about fidelity can be found in Diffusion Principle #2: Shape Goals and Frame Fidelity. Of all Diffusion's principles, measuring impact serves as the linchpin to the ability to succeed in acquiring stakeholders, obtaining resources, and celebrating achievements. Most importantly, Veterans deserve this laser focus on outcomes and results.

Before diving into KPI specifics, it is important to start by learning about metrics and data systems. A metric is a quantitative or qualitative measure used to track and assess an innovation's status. Establishing and measuring metrics is key for an innovation's success. Metrics are an excellent source of feedback, which can help improve the innovation. They can tell the story of how well the innovation meets the need of stakeholders and determines which services the innovation impacts the most.



Metrics align with the VA health care priorities

- Hire faster and more competitively
- Connect Veterans to the soonest and best care
- Serve Veterans with military environmental exposures
- Accelerate VA's journey to a High Reliability Organization
- Support Veterans' whole health, their caregivers, and survivors
- Prevent Veteran suicide

Metrics address key stakeholders

- Veterans
- Caregivers
- VHA employees
- Community members

The two types of metrics are process and outcome metrics. Process metrics indicate what is being done to maintain or improve the current state. They measure the specific steps in a process that lead to a particular outcome. Outcome metrics reflect the impact of the innovation. They are the Veteran, clinical, operational, and financial outcomes that an innovation addresses.

Sample Process Metrics

Efficiency (ratio of output to input)
Productivity
Turnaround time
Error rate

Sample Outcome Metrics

Mortality rate Readmission rate Veteran experience Safety of care Length of stay Cost effectiveness

What critical metrics does your innovation use to measure its impact statement (e.g., reduced infection rates, improved patient/employee satisfaction, demonstrated cost savings or avoidance)?

Quantitative and qualitative data are the two main types of data to collect and work with.

Quantitative
Data

Deals with quantities, values, or numbers
Perceived as more reliable and objective
Example: Height, weight, age

Observational and descriptive rather than numerical in nature
Usually not measurable
Perceived as more subjective
Example: The room is dark, damp, and has maroon wallpaper



Before data collection starts, identify the proper metrics for the innovation using the guiding questions below.

The innovation mee	ets the needs	Ot:
--------------------	---------------	-----

Veteran patients	VHA employees
Veterans not directly served by VHA	Community members
Caregivers	Other

As a reminder, what VA health care priority does this innovation pertain to?

What process and outcome metrics are relevant to track for your innovation?

PROCESS METRICS	OUTCOME METRICS



With the appropriate metrics selected, now it is time to collect the data and analyze it. Take time to reflect and respond below to help navigate the data collection process.

1. What measures are required?
2. What is the data type?
3. How will data be collected?
4. Who will collect or compile the data?
5. What data will they be collecting?

6. What is the reference period?
7. How often should the data be collected?
8. How often do these reports get published?
9. Can you rely on the data accuracy and timeliness that forms this report?
10. Can you reasonably expect that your innovation will impact the measure?



When collecting data, consider what data is already routinely tracked and reported at a facility. Data already being collected saves considerable time and effort.

11. At what level of the organization will you possibly see a change (e.g., facility, individual, clinic)?



EXAMPLES OF ROUTINELY REPORTED DATA

- Reports available in sources such as VHA Support Service Center (VSSC)
 - Reports available through the External Peer Review Program (EPRP)
 - All Employees Survey Data for specific organizational units
 - Survey of Health Experiences of Patients (SHEP) data
 - · Readmission measures

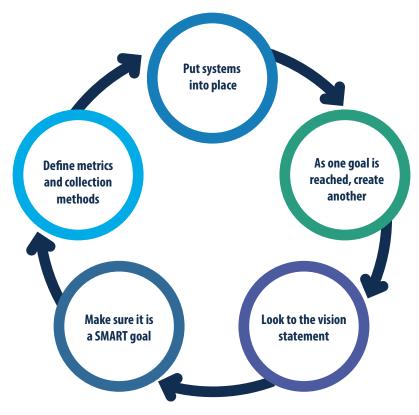
To effectively execute the data collection and analysis, create a functional data system that works for the implementation team. The questions below offer considerations to keep in mind while building out these systems.

WHAT ITEMS CAN BE ASSIGNED TO TEAM MEMBERS?

IS THIS REALISTIC WITH CURRENT WORK/LIFE SCENARIO?

HOW CAN YOU MAKE THIS A HABIT?

Goal creation and data collection are all part of an iterative process. There is no end to the workflow as the cycle adapts to the needs and changes of an innovation.





Now that the metrics and measurement basics are complete, look at additional resources to use.

INTERNAL TO VA

- · Dashboards that already exist: VHA RAMP Search
- Data alread collected and available for analysis: VHA Data Portal

PUBLICLY AVAILABLE DATA

- · Access and Quality in VA Health Care / Veteran Affairs
- VA API Platform
- Shining Light on VA Hospitals Maps of 40 Hospitals
- National Center for Veterans Analysis and Statistics (va.gov)

DATA YOU GATHER

- Surveys (Vsignals, eScreening, Qualtrics)
- · Observation, time mapping, etc.



Data Sourcing and Accessing Activity

Goals: To brainstorm data sources and access methods for new implementations. To tailor data for different audiences across a facility.

Instructions: Conceptualize how your innovation uses data. Answer the questions below to help think through data, its sources, and ethical uses.

What data sources would be useful for the implementation?

How might you obtain these data sources?



What steps would you take to ensure an ethical use of data?
Which stakeholders can help you access data and metrics?
How will you tailor your metrics and data reporting for different stakeholders?

Goals and Systems Creation Activity



Goal: To arrange your SMART goals from Diffusion Principle #2 with the data sources to locate the information.

Instructions: Copy your SMART goals list from Diffusion Principle #2 in the following table. Work with your team to locate data sources for implementation success.

SMART Goals	Data Source/Measure of Success
Ex: Implement the RAI Frailty Tool in 55 VHA Surgical Sites of care by the end of FY23	Ex: National Surgery Office Surgical Pause Dashboard map view to see the number of implementing facilities and level of implementation.

Data Storytelling

Storytelling with data tells the innovation's story and impact. It is an integral part of local or national diffusion strategies and makes a business case more legitimate and compelling.

When storytelling with data, think from the customer's perspective. Visualizing data in an easy-to-digest fashion helps share the true value of an innovation.



- Instead of, "Our innovation increased cost savings for our facility."
- Try, "Our innovation increased cost savings by 25% over the 2023 fiscal year."

Reflect and describe how your innovation tracks and collects metric data. Summarize the innovation's impact on your target audience. Your customer details can be found in Diffusion Principle #1 on page 14.



Data Storytelling Activity

Goals: To coordinate data to tell a compelling story for specific audiences. To explain why certain data is compelling to tell your innovation's story.

Instructions: Tell us a story about a time your solution worked (e.g., a time when your solution changed a Veteran's life, a time when it improved how VA employees do their work and deliver care). Please provide a quote from this experience if possible.

Identify the data to tell your innovation story and record your ideas below. Also, consider the audiences to tell your story to. Finally, explain why this data makes a compelling story. Please provide a quote from this experience if possible.



STORYTELLING DATA	AUDIENCE	WHY IS THIS DATA COMPELLING?



STORYTELLING DATA	AUDIENCE	WHY IS THIS DATA COMPELLING?



DIFFUSION PRINCIPLE #6:

Select an Implementation Strategy



An implementation plan is a project management tool that facilitates the execution of a strategic plan for a project. The plan breaks down the implementation process into smaller steps. It hosts the resources, team information, risks, timeline, and metrics for success.



The implementation plan helps define actions and constraints to success and analyzes the current state. The future state illustrates the improved outcome and aligns with the innovation's vision and mission.

The difference between the current and future states is the gap. It is what is needed to attain and move into the desired state. When determining how to bridge the gap, think about why the gap exists and address underlying causes.



Leading Change

Change management is the process of helping individuals understand and accept change. One notable change management model is the ADKAR TM model (Hiatt, 2006). This outcome-oriented method aims to limit resistance to organizational change and hypothesizes that change success depends on a human-centered approach in the design of the new process.



The ADKAR states of change are the building blocks to help conceptualize the model. At first, there is awareness and desire to move out of the current state. This state exists in the enablement zone. Then, the transition state focuses on knowledge and ability which tilts into the engagement zone. Finally, the future concentrates on reinforcement.



Use this checklist to provide clear explanations about why the innovative change is needed.



Step 1: Awareness

Awareness's goal is to draw attention to the need for the innovative change.

Announce the innovative change to employees well ahead of time. The announcement should be clearly communicated, and employees should have access to the information after the announcement.

Explain the reason, pain points, and return on investment of the new solution.

Give employees opportunities to ask questions and make suggestions in a public or private forum.



Step 2: Desire

Next, the goal is to foster the desire to make the innovative change.

The list below are actions to help gauge employee's reactions to change.

Identify and engage a diverse coalition of change leaders impacted by the change.

How do you make the need for change relevant and important to your key stakeholders?

What are the benefits of change to them?

Involve employees in solution development. Understanding their core reasons for resistance helps proactively overcome them.



Step 3: Knowledge

The knowledge goal demonstrates how to change.

The knowledge checklist addresses training and coaching needs.

Identify specific education gaps for each role involved in the innovation. Formal training materials, job aides, and individual and group coaching will help the employees feel supported.

Offer resources like process flowcharts that employees can reference later.



Step 4: Ability

The goal here is to ensure employees can make the innovative change.

The ability list enters the engagement zone to monitor performance of the change.

Allow hands-on training and testing to build employee confidence and ability.

Monitor progress immediately following implementation launch. Utilize change leaders for coaching and feedback collection.

Identify reasonable metrics at the beginning and adjust processes as necessary.



Step 5

Step 5: Reinforcement

The final goal is to reinforce the change.

The reinforcement checklist recognizes that sustaining a change can be more difficult than making the initial change.

Monitor the change over time to confirm it fulfills the desired outcome.

Continue collecting feedback to make improvements and provide support.

Encourage and celebrate success with positive feedback, rewards, and leadership recognition to foster continued employee participation.

It is critical to understand an innovation's process from inception through maintenance.

	IMPLEMENTATION PLAN CONSIDERATIONS
What	 What are we implementing? What is the change? What are the steps to get there? What resources and tools may an end user need? What VA health care priorities are impacted by this innovation?
When	 When are these changes being implemented? Will these changes be completed in phases? How long do you anticipate it will take to replicate your innovation in another VHA facility?
Where	Where will this implementation occur?
Who	 Who is involved? Who will be impacted by this change?
How	 How is this change going to impact users and/or participants? Is there a role change? Is there new technology to use? How will you provide staff with the guidance, training, coaching, and on-the-job support they will need?
Why	Why is this project significant and what is the purpose of this implementation?



Describe, in narrative form, the optimal process for implementing and maintaining the innovation, in 3-5 sentences.
Once the components of the innovation are ready, next is the process map. Process maps are visual
representations of the actions, steps, and tasks to achieve a certain goal. Process maps draw a picture of the facility's existing process, identify ideas to improve it, and outline how things will happen in the future. Process maps help ensure the innovation's fidelity by providing a clear and consistent road map for anyone implementing.

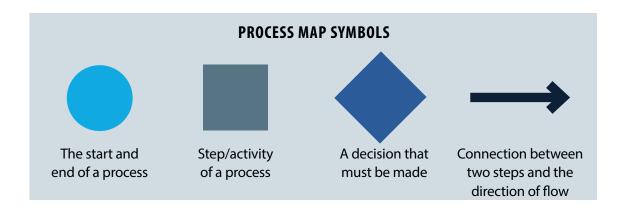


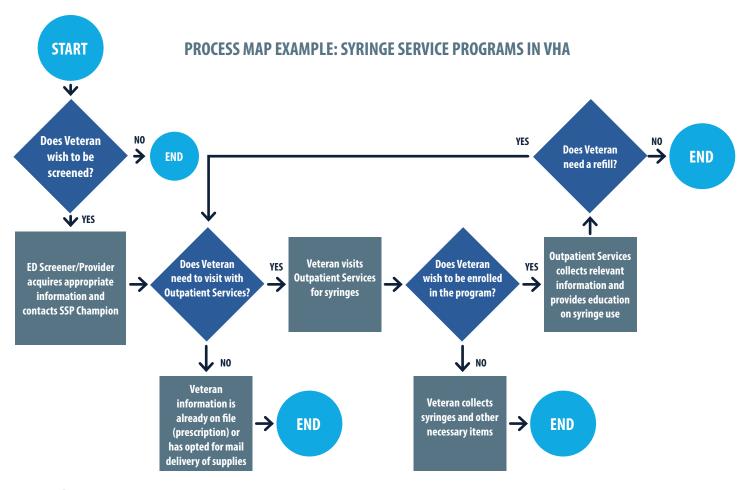


Mapping Your Process Activity

Goal: To create a visual representation of the actions, steps, and tasks for the implementation process.

Instructions: Using the process map symbols below, create a process map for your innovation. Think through each step and the resulting process. Consider where deviations or roadblocks may occur throughout the process. Use the example process map below as a guide as you build out your own process map. If you are completing this activity via the PDF version of the playbook, we recommend using Microsoft Visio, PowerPoint, or Mural to complete your process map.











Highlight any bright spots or challenges you discovered when you implemented your innovation. If you would change your implementation process going forward, please explain why.





Process Map Reflection

As you continue to grow your innovation, you can reflect on your process map and note areas for improvement.

Goal: To deep dive into your current process map to find pain points and room for improvement for greater implementation spread.

Instructions: Review your current process map prior to this activity or return to the local mapping your process activity above to complete a process map.

QUESTION	ANSWER
Are there any complaints about this process from implementing teams? Are there possible resolutions to address these complaints?	
Are there any unnecessary redundancies in the process? Is there any risk if those redundancies are removed?	
Are there any bottlenecks in the process? If so, how can they be relieved?	
Are there any steps missing from this process map that need to be added in?	
Are there any other areas for improvement in this process?	

Implementation Tools and Templates

There is a variety of project implementation tools that can be used throughout the planning, execution, monitoring and controlling of an innovation. Tools that exist at your fingertips include Mural, Excel, and PowerPoint. Refer to Appendix B to view different tools and templates for an innovation's implementation.



Implementation Plan Activity

Goal: To list all necessary steps involved in implementing your innovation and sequence the implementation steps into chronological order.

Instructions: Fill out the chart below with actions for implementation. List owners, timeline, and communication and training needed for each action.

WHAT	WHEN	WHERE	WHO (STAKEHOLDER)	COMMUNICATION	TRAINING/ COACHING
Ex: Determine process flow/managing Veteran referrals	Ex: 3-4 weeks	Ex: Local facility	Ex: Local CCC lead	Ex: Update team as needed	Ex: TBD



National diffusion requires strategy beyond the initial implementation plan. The four common diffusion strategies are basic, cohort, big bang, and hybrid implementation.

Basic implementation is completed through organic adoption and growth. There is no leadership mandate and is 100% opt-in.



BASIC IMPLEMENTATION MAKES SENSE WHEN:

- The project is in high demand,
- · There is little-to-no funding, and
- The knowledge base is already well-packaged.

Next, cohort implementation spreads through cohorts of new adopters. There is strong leadership support, but it is not the highest priority.



COHORT IMPLEMENTATION MAKES SENSE WHEN:

- · Fewer resources are readily available,
- · The knowledge base is still being refined,
- The product is not finalized (e.g., software, progressive clinical protocol), and
- Awareness and demand are still maturing.

The big bang implementation strategy implements all at once on a national scale and is the most uncommon strategy. It is generally required or expected to be adopted by senior leadership.



BIG BANG IMPLEMENTATION MAKES SENSE WHEN:

- There is strong senior-level VA support, and the project is a leadership imperative,
- · The solution is lightweight to implement,
- Resourcing is plentiful (funding or FTE), and
- There is a sense of urgency.



Finally, hybrid implementation combines multiple implementation approaches. The combination of methods makes the most sense for sustaining impact.



HYBRID IMPLEMENTATION MAKES SENSE WHEN:

- The innovation knowledge base is well-packaged,
- The solution is lightweight to implement, and
- Awareness and demand are varied throughout the enterprise.

National Implementation Strategy Guiding Questions:

1. Which strategy might be right for your innovation?

2. Why do you think the strategy is right for your innovation?



DIFFUSION PRINCIPLE #7:

Celebrate Now and Later



"Strive for progress not perfection"

-Unknown

Take pride in the steps made to further develop an innovation's impact. Taking the time to acknowledge these achievements allows the source of success to replicate in the future. Celebrations can come in different forms like certificates, a showcase of innovations, seeking out exposure opportunities like getting published in a local or national newsletter, VA communication, and so on. Track the progress of the innovation's goals and celebrate milestones regularly with stakeholders and the implementation team.







Celebrate Now and Later Activity

Goal: To name ways to celebrate team achievements and implementation milestones.

Instructions: Craft your celebrations for your innovation's achievements. Get creative with your ideas!



Celebrate innovatively!

Think outside the box and consider ways to celebrate that are specific to the innovation.

TYPE OF CELEBRATION	STEPS TO CREATE CELEBRATION



DIFFUSION PRINCIPLE #8:

Pave the Way for Sustainment



An innovation's sustainment requires a thoughtful approach to a healthcare system's policy, data, budgetary, and performance evaluation frameworks. It requires determining long-term feasibility and upholding appropriate resource allocation. Stakeholder involvement is crucial in the planning and sustainment for implementation and scalability.

As part of sustainable development, innovations must define metrics and anticipate outcomes all while refining and adapting their organizational management. Effective application of sustainability includes continuous measurement of impact and improvement through evaluation and accountability. Integrating sustainability requires being compliant, engaging, innovative, and transformative. Diffusion of Excellence works closely with their fellows and organizational stakeholders to drive a successful and sustainable community into the VHA foundation.



Key Factors for Sustainment

Having a validated business case for scaling and sustainment is crucial for an innovation's success. When assessing nationally diffused innovations, key characteristics contribute to their success.

Principle #1: Build a Bold Vision and Mission	The innovations have a confident vision and mission, and they seamlessly align with national priorities, becoming indispensable.
Principle #2: Shape Goals and Frame Fidelity	SMART goals reflect enterprise-wide spread, and the core components of adoption are solidified.
Principle #3: Rally the Stakeholders	Strategically selected national stakeholders are engaged and invested, operationally or financially, in the innovation.
Principle #4: Cultivate Growth Resources	Implementation relies on readily available resources and the pathway to obtain them is clear.
Principle #5: Measure the Impact	Data is routinely tracked and provides visualization of the innovation's story and impact.
Principle #6: Select an Implementation Strategy	Continuous feedback loops, process enhancements, and employee recognition sustain policy modifications.
Principle #7: Celebrate Now and Later	A plan has been routinely executed to celebrate implementation milestones locally and nationally.
Principle #8: Pave the Way for Sustainment	The innovation's business case is validated, and the future state is formalized.

If your innovation's team does not have full confidence yet in a specific Diffusion Principle, revisit its activities. Drafting and redrafting business case components is okay and expected. It is a normal part of the innovation's journey.

Example of a Sustained Innovation:

Innovation Name	Key Factor #1	Key Factor #2	Key Factor #3
HAPPEN – Hospital Acquired Pneumonia Prevention by Engaging Nurses	Evident painkiller that became an unconscious practice and easily embedded itself into the system	Few required resources reduces risk and is easily sustainable	Clear expectations set with primary stakeholder (Office of Nursing Services)



Common Pitfalls

Conversely, Diffusion has noted key features of innovations that were unsuccessful at maintaining long-term sustainment.



TIP

Periodically review the Diffusion principles to ensure your innovation is not falling into any of the below pitfalls.

Principle #1: Build a Bold Vision and Mission	The innovation fails to transition its vision and mission for wider spread, and teams may have conflicting priorities.
Principle #2: Shape Goals and Frame Fidelity	Unclear goals and core components lead to a lack of fidelity in the innovation.
Principle #3: Rally the Stakeholders	Stakeholders are unengaged or inconsistently engaged and do not prioritize the innovation.
Principle #4: Cultivate Growth Resources	Resource requirements are unattainable due to factors such as lack of staffing or funding shortages.
Principle #5: Measure the Impact	Data does not provide sufficient impact storytelling to warrant sustainment efforts.
Principle #6: Select an Implementation Strategy	Employees are not set up with an ability to make the change or positive reinforcement to sustain the change.
Principle #7: Celebrate Now and Later	No steps exist to celebrate team achievements or implementation milestones.
Principle #8: Pave the Way for Sustainment	Major business case decisions are still taking place so finalizing sustainment efforts is on hold.

Example of an Unsustained Innovation:

Innovation Name	Pitfall #1	Pitfall #2	Pitfall #3
TeleWound Care Practice – No Wound Left Behind	Lack of resources (labor) made innovation unsustainable	Too many required stakeholders to keep properly engaged	Variability in field staffing levels and current practice



With the innovation's business case in hand, other complementary documents can help formalize sustainment efforts. Appendix B includes examples of <u>National Diffusion Agreements</u> and <u>Memorandums</u> of Understanding (MOUs) to help your team collaborate with future business owners and prepare for sustainment.





Sustainment Activity

Goals: To envision your innovation's future state and expected steps.

Inst

tructions: Use the guiding questions below to pave the way for your innovation's sustainment.
1. In a perfect world, what would your innovation look like two years from now? Five years? Ten years? What is your or your team's role in the innovation at each of these steps?
2. Does a program office oversee the innovation? Is it embedded in the work we do every day?
3. Do you foresee the innovation being totally different than how it began or saw it going?
4 Is your innovation something Veterans and caregivers ask for? Is it a household name?
4. Is your innovation something Veterans and caregivers ask for? Is it a household name?





Sustainment Activity

Goals: To create a national diffusion agreement, or project charter, to share with future process owners.

Instructions: Complete the national diffusion agreement below. Refer to your guiding questions and other principles as needed when completing each box.

This agreement is intended to define the goals, workgroup members, roles, responsibilities, and timeline for national diffusion of your innovation. It also formally documents the shared commitment of stakeholders to support the innovation's national diffusion effort.

Innovation Name:	Program Office Alignment:
National Diffusion Agreement Start Date:	Program Office Process Owner(s):
Target Completion Date:	Innovation Champion(s):
Revision Date (if applicable):	
Agreement Purpose	
Innovation Background	

National Diffusion Priorities and Performance Metrics
Priorities:
Performance Metrics:
National Diffusion Team Responsibilities
National Diffusion Team Reporting Responsibilities



National Diffusion Goal and Timeline	
Implementation Goal:	
Implementation Strategy: Year 1- Year 2- Year 3-	
National Diffusion Ir	nplementation Team
Team Member Name	Title/Role on Team
Program Offic	e Stakeholders
Key Stakeholder	Program Office
Арр	roval
	Date:
	Date:
	Date:
	Date:





Sustainment Activity

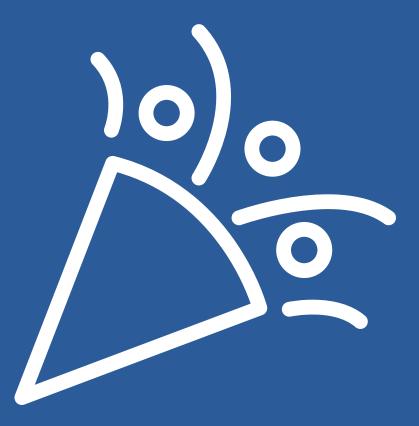
Goals: To create a Memorandum of Understanding (MOU) between the current process owners and future owners.

Instructions: Complete the MOU below. If you do not yet have a future owner identified, leave their sections blank for now. You may find word document templates in Appendix B to copy and paste your answers into when you are ready to officially submit.

, , , , ,
1. Innovation Background:
2. Purpose: This Memo is intended to memorialize the transition of the innovation from (current owner) to the long-term stewardship of (new owner)
This change will be effective on (date) Your signature is requested to acknowledge this transition. Please accept our thanks for your steadfast support of frontline, employee-led innovation at the Veterans Health Administration (VHA).
3. Impact:
4. Lessons learned:

VHA Diffusion of Excellence

- · · · · · · · · · · · · · · · · · · ·	ponsibilities of (new owner) name)
• (Current team)	Responsibilities
• (New team)	Responsibilities
	bles: Remaining activities and deliverables that will to (new team)
	regarding resource transitions and budget reallocation.
7. Please direct any questions regardi	ng this memo to:



Congratulations, you have successfully completed Part one of the Diffusion Playbook. Thank you for investing your time, thought, and effort into your innovation's business case. This document and its corresponding activities are living entities and not only can, but should, be regularly revisited and updated. If you have any questions, please contact VADiffusionSupport@va.gov.

Part Two:

Diffusion of Excellence Programs

Part two of the Diffusion of Excellence Playbook showcases the various programs Diffusion offers. The annual cycle helps Diffusion identify, replicate, and scale innovations.



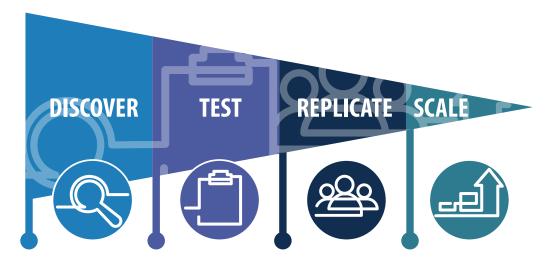
Diffusion of Excellence Overview

Diffusion of Excellence provides a robust platform to spread and integrate Promising Practices across VHA. The dynamic process requires inspiring an entire healthcare workforce to set-up a larger, transformative organizational change. Over time, the methods have been meticulously refined with valuable input from stakeholders across all organizational levels.

At the 10,000-foot view, Diffusion of Excellence:

Reinforces VA Health Care Priorities	Empowers Employees	Acts as a Change Catalyst for Coalition Building	Standardizes Process and Outcome Improvements		
Health care priorities focus the organization's commitment. Diffusion programming aligns with the USH's priorities.	Employee-driven problem solving is necessary for success. Diffusion invests in workforce training and development.	Local and national stakeholders seek out innovative ideas. Diffusion provides a safe space for these conversations.	Standardized health care raises the Veteran and employee experience. Diffusion develops innovations' knowledge base materials.		

As a reminder, Diffusion primarily operates in the replicate and scale stages of the VHA IE operational model. However, Diffusion programming is flexible to accommodate practices at any stage of the model.



(Vega & Kizer, 2020)



Diffusion of Excellence Offerings

Collectively, these events, milestones, and tools proclaim Diffusion's holistic approach to promoting a culture of innovation in healthcare delivery. In the coming sections, the playbook defines these items in greater detail.







VHA Shark Tank Competition (VHA Shark Tank)

Employees are the invaluable resource at the heart of VHA's learning health care system. Since 2015, Diffusion of Excellence has held ten VHA Shark Tank Competitions open to all VHA employees. In total, the competition has received over 3,200 employee-submitted applications across all VISNs. These submissions address all VA health care priorities and go through rounds of review by subject matter experts across the enterprise.

Each year, the competition boasts 15 finalists. Before the marquee event at VHA Innovation Experience (iEX), VISN and medical center directors, known as Sharks, submit bids committing resources to implement a finalist practice in their facility or region. During the VHA Shark Tank main act, finalists pitch their innovation to a nationwide audience and answer questions from an expert panel about their innovation's impact and future goals. Ten winning bids are announced live at iEX. The competition attracts thousands of viewers celebrating the innovative contributions of VHA.

Application eligibility for the annual competition includes:

Successfully Implemented
The practice is successfully imple

The practice is successfully implemented in at least one facility. The employee's home facility fulfills this criterion.

facility fulfills this criterion.

Data Supported

The submission has at least three months of implementation data to support the practice's viability and effectiveness.

Priority Aligned
The practice aligns to one or more VA health care priorities.



2

The six VA health care priorities are the most important strategic and operational advancements that must be achieved by VA. They deserve top performance, focused commitment, and the best use of available resources.

VA Healthcare Priorities:

- Hire faster and more competitively
- Connect Veterans to the soonest and best care
- Serve Veterans with military environmental exposures
- Accelerate VA's journey to a High Reliability Organization
- Support Veterans' whole health, their caregivers, and survivors
- Prevent Veteran Suicide



After applicants self-select their submission's applicable priority, they also choose the Veteran community segment it improves outcomes for. Options include, but are not limited to:

- All Veterans
- LGBTQ+ Veterans
- Older American Veterans
- Post-9/11 Veterans
- Pre-9/11 Veterans

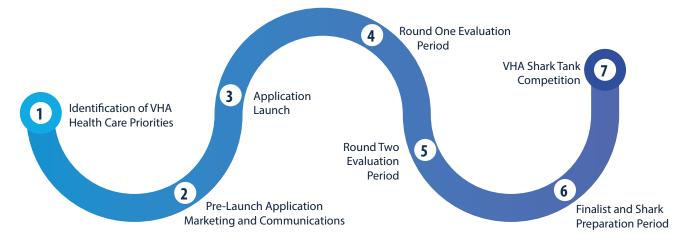
- eterans
- Women Veterans
- VHA Employees
- Veteran Caregivers

Each group possesses unique needs and challenges that require tailored solutions. The competition aims to foster and highlight those solutions.



Competition Stages

VHA Shark Tank Competition unfolds over several months. The competition season commences with the application launch in spring and culminates with the live event every fall.

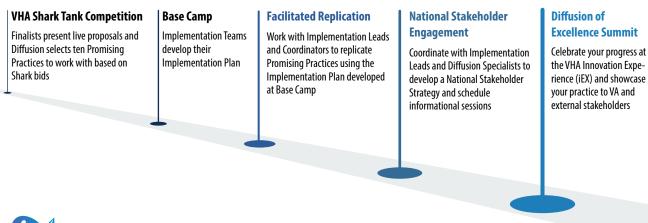


Competition Winners

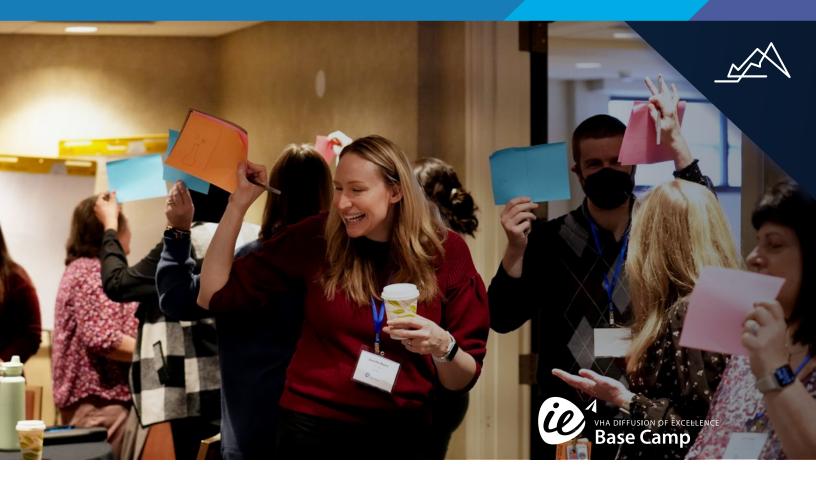
A Promising Practice, as defined by Diffusion, is a distinction granted to VHA Shark Tank winners. These selections are based on a practice's potential viability and replicability, number of bids received, and application evaluation data. Promising Practices work with Diffusion through Facilitated Replication to replicate their practice at the winning Shark's facility or region. For finalist practices that do not gain Promising Practices designation, participation in VHA Shark Tank Competition provides exposure to a broad VHA audience of various organizational levels and invaluable networking opportunities.

Being named a Promising Practice, and the respective team members becoming Diffusion of Excellence Fellows, comes with significant benefits. These include conversations with VA and VHA senior leaders, development of implementation toolkits and marketing materials, and impact validation. Winners also have a continued presence on VHA Diffusion Marketplace and access to future community opportunities.

After VHA Shark Tank, the next opportunity is for Diffusion of Excellence Fellows and Implementing Facility Fellows to attend Diffusion of Excellence Base Camp. They come together in-person to build an implementation plan. This plan is leveraged during facilitated replication, presented to national stakeholders, and reflected on at Diffusion of Excellence Summit.







VHA Diffusion of Excellence Base Camp (Base Camp)

Securing a win at VHA Shark Tank Competition and earning Promising Practice designation is the start of an exciting journey. Winners are invited to Diffusion of Excellence Base Camp (Base Camp). The three-day training event unites the Diffusion of Excellence Fellow (Diffusion Fellow), Implementing Facility Fellow (IFF), and Diffusion Support Team. It creates an environment for exchanging ideas and developing an effective implementation plan.





Implementation teams at Base Camp are dynamic. Learn more about each Base Camp role below.

Facility Fellow (IFF) Facilitator	Documenter	Lead
VHA Shark Tank Winner VHA Shark Tank Winning Facility Representative Innovation Specialist	k Support Team Implementation Plan Recorder	Support Team/Project Manager

The Diffusion Support Team is an essential component of Base Camp to ensure participants derive maximum value. Their support continues throughout facilitated replication.

Expert Presentations

Subject matter experts enrich the learning landscape. Deep insights and practical tips help shape the implementation strategies

Facilitator-Led Project Planning

Experienced facilitators guide implementation project planning. Visualizations and plans lead to impactful Promising Practices

Networking Opportunities

Attendees foster relationships with colleagues and leaders across VHA. Connections and collaborations start here

Base Camp revolves around the Diffusion Fellow and IFF designing an implementation plan. The plan serves as a road map for facilitated replication in the following months. It aligns teams towards a common goal and processes to successfully replicate the Promising Practice at the new facility.

Concluding Base Camp, the plan's real-world execution begins. Implementation teams utilize the strategies and guidelines detailed in the implementation plans to replicate the Promising Practice. This process showcases the power of collaborative innovation and its potential for improving health care practices.





Facilitated Replication

Once Promising Practices complete Base Camp, the next phase launches. Facilitated replication is when Diffusion of Excellence provides project management support to the Diffusion Fellow and IFF. The subsequent months use techniques and knowledge acquired at Base Camp to replicate the practice in a new facility or VISN.

During this phase, Diffusion Fellows, IFFs, and Implementation Leads are charged with:

Using the implementation plan to replicate the Promising Practice.

Creating knowledge-based materials.

Tracking and reporting the practice impact to chart a path forward.

Diffusion Fellows mentor the new facility during facilitated replication. IFFs are selected by the winning Shark to implement the practice at their facility. IFFs are responsible for local implementation and often become key practice champions. Implementation Leads from the Diffusion of Excellence Support Team host weekly meetings, monitor progress, and track risks and mitigations. They also build implementation guides and informational materials to institute a repeatable process for practices.

Three primary goals of facilitated replication are to:

- Package the Knowledge Base: Implementation Leads assist the Diffusion Fellows in developing a comprehensive implementation guide and other support materials (i.e., one-pagers, leadership presentations, and training materials).
- Confirm Impact: Implementation Leads work with the IFFs to design a metrics and measurement plan to verify the practice's desired outcomes.
- Cultivate National Stakeholder Support: Diffusion of Excellence facilitates informational briefings with national stakeholders to supply them practice overviews.

Diffusion Fellows and IFFs receive comprehensive project management and communications support. This prepares them to tackle the next milestone, which is engaging national stakeholders.



National Stakeholder Engagement

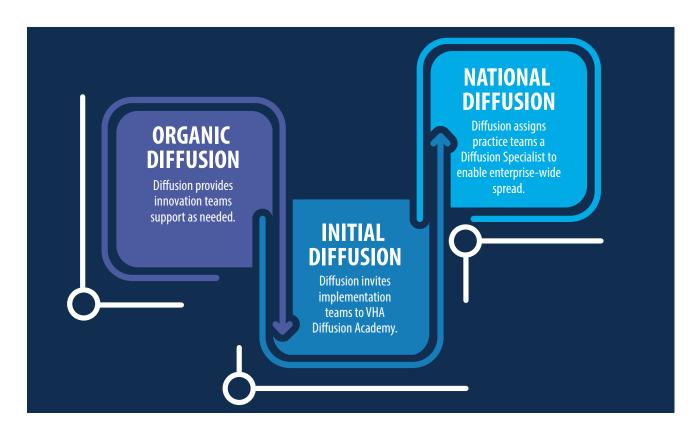
In essence, facilitated replication is a replication study to refine the practice and deepen understanding of its impact. It is critical to engage and educate national stakeholders during facilitated replication. Diffusion Specialists from Diffusion of Excellence facilitate low-risk interactions with at least three national stakeholders for each practice.

Diffusion Fellows provide a brief practice overview, including the practice's impact based on available data. During the discussion, national stakeholders provide a program office priority overview and work with the Diffusion Fellows to message and advocate for the Promising Practice with applicable audiences. The feedback received is critical to assess the best diffusion pathway for the Promising Practice.

Diffusion Pathways

Upon completing facilitated replication and national stakeholder engagement, Diffusion announces each practice's optimal path forward at Diffusion of Excellence Summit. These are known as Diffusion pathways.

There are three Diffusion pathways: Organic Diffusion, Initial Diffusion, and National Diffusion. Each pathway is designed to reflect the practice's impact, replicability, stakeholder support, and cost-effectiveness. Diffusion of Excellence provides varying levels of support for each Diffusion pathway.





Organic Diffusion Practices

Organic Diffusion Practices demonstrate moderate impact, replicability, stakeholder support, and cost effectiveness. These Promising Practices help grow the greater Diffusion of Excellence community and remain available on Diffusion Marketplace for organic dissemination. They are eligible for Diffusion of Excellence ad hoc support and receive enterprise-wide resourcing opportunity updates through the Diffusion of Excellence mail server.

Examples of Organic Diffusion Practices

Improving Communication in Home-Based Primary Care

Improving Communication in Home-Based Primary Care improves communication between providers and patients through streamlined calls, standardized processes and the addition of guided tools.

EMS Clean Covers

The EMS Clean Plastic Covers will indicate to patients and staff that a piece of medical equipment is clean and ready for use.

COACH

COACH was designed to improve the quality of life for both patients with dementia and their caregivers, help Veterans to remain living at home for as long as possible, and alleviate caregiver burden.

Initial Diffusion Practices

Initial Diffusion Practices demonstrate strong impact, replicability, stakeholder support, and cost effectiveness. Like Organic Diffusion Practices, they are highlighted on Diffusion Marketplace and are made aware of open VA resource opportunities. In addition, they are invited to the annual VHA Diffusion Academy. At VHA Diffusion Academy, innovation teams cultivate their business case for further growth and sustainment.

Examples of Initial Diffusion Practices

VA Operating Room Preparation Standardization

Standardizing operating room setups dramatically decreases unnecessary waste and patient safety events and increases efficiency by creating the same setup no matter which staff rotates through or sets up the case.

BRIEF - The Specialty Optical Lab

BRIEF significantly reduces the average wait time for fabrication of low vision eyeglasses from 28 to five days by fabricating eyeglasses on-since at Louis Stokes Cleveland Medical Center rather than outsourcing.

Gerofit

Gerofit is an exercise program that promotes health and wellness for older Veterans by tailoring strength, aerobic, balance, and flexibility exercises to individual needs in person and virtually.



National Diffusion Practices



National Diffusion Practices demonstrate exceptional impact, replicability, stakeholder support, and cost effectiveness. They receive the same foundational benefits as Organic and Initial Diffusion Practices. Furthermore, National Diffusion Practices are assigned a Diffusion Specialist from Diffusion of Excellence. This support comes in the form of facilitating strategic planning, building a national stakeholder coalition, and conducting nationwide trainings.

Examples of National Diffusion Practices

Contraception on Demand

Contraception on Demand offers VA clinical pharmacists training and support to conduct patient-centered contraceptive counseling and dispense 12-month supplies of hormonal contraceptives when medically appropriate.

Primary Care Physical Therapy

Embedding Physical Therapists in Primary Care facilitates same day examination and treatment for musculoskeletal conditions allowing earlier intervention and frequently avoiding unnecessary medications, imaging, and specialty referrals while keeping Primary Care appointment times available for Veterans requiring medical care.

Surgical Pause

Surgical Pause utilizes the simple yet sophisticated Risk Analysis Index to screen Veterans for frailty in 30 seconds, effectively flagging high risk Veterans so that the surgical team can ensure that the proposed treatment plans both mitigate known risks and align with the Veteran's overarching life goals.

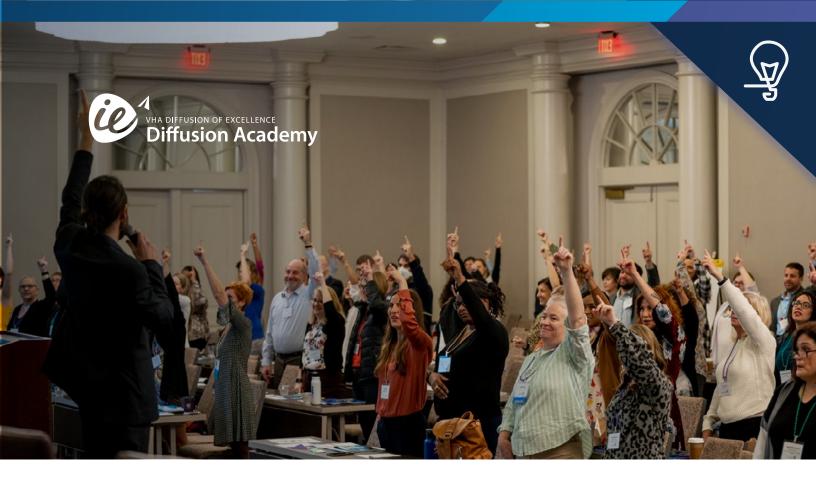




Diffusion of Excellence Summit

Facilitated replication reaches celebration at Diffusion of Excellence Summit (Diffusion Summit). The event is a graduation ceremony that marks the culmination of hard work, innovation, and commitment of the Promising Practices' Diffusion Fellows and Implementing Facility Fellows. Diffusion Summit allows the Diffusion Fellows and IFFs to recount their experiences and progress over the last year. The implementation teams share their efforts, challenges, and victories.

Program office leaders, facility leaders, and colleagues attend Diffusion Summit. Each Promising Practice's presentation provides a comprehensive account of the replication efforts and outcomes from facilitated replication. Diffusion Summit not only showcases the achievements of the Diffusion Fellows and IFFs, but also illuminates the path forward. It sets the stage for continued innovation and advancement in healthcare delivery.



VHA Diffusion Academy (Diffusion Academy)

VHA Diffusion Academy (Diffusion Academy) is an annual trailblazing event aimed at enhancing the scalability and sustainability of innovations through business case building. It unites like-minded innovators and frames VHA as a learning healthcare system.

Individualized Curriculum

The curriculum flexes to meet the specific needs of each innovation. The components encourage team cohesion, highlight replication strategies, improve communication planning, and identify resource opportunities. Diffusion Academy's goal is to equip innovators with the tools, resources, and community needed to maintain and expand their innovations over two to three years.

By creating a strong business case founded on Diffusion principles, gaps are bridged in resourcing, stakeholder buy-in, and communication strategies for innovations. Diffusion Academy's marquee event centers around a three-day workshop, where innovators build an enterprise-wide business case.





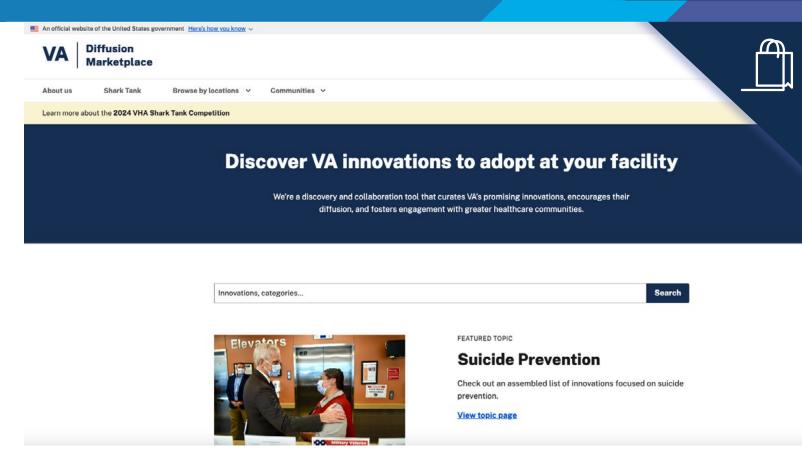
Diffusion Talent Accelerator (DTA)

Diffusion Talent Accelerator (DTA) embeds a diffusion culture by expanding the human talent pool capable of replicating and scaling innovations as an integral part of VHA's learning healthcare system. The program trains DTA Specialists in VISN or national program offices to see a project through the replicate and scale innovation stages. In the first year, these Specialists gain the skills to deploy their own diffusion program and identify, implement, and scale practices within their VISN or program office.

Specialists Support Opportunities

DTA Specialists join a multitude of events focused on replicating and scaling innovations. After a personalized orientation, DTA Specialists attend Diffusion Academy, participate in monthly training sessions, and receive a national Diffusion Specialist mentor.





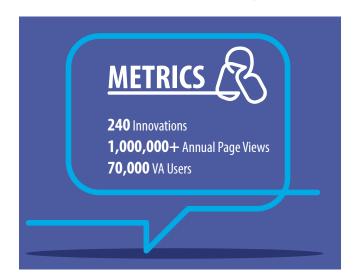
Diffusion Marketplace (Marketplace)

Diffusion Marketplace (Marketplace) is a publicly available platform designed to facilitate the discovery and collaboration of VA innovations. As a dynamic, digital repository, the Marketplace features over 100 innovations. These innovations vary in origin, complexity, achievements, and resource needs.

Innovations have a dedicated web page providing key insights into the challenges addressed, solutions implemented, and results achieved. Using human-centered design, innovation pages provide details about the implementation timeline, necessary resources, and team contact information and are entirely managed

by the innovation's team. An interactive map displays facility adoptions to lend a geographic perspective to an user's exploration.

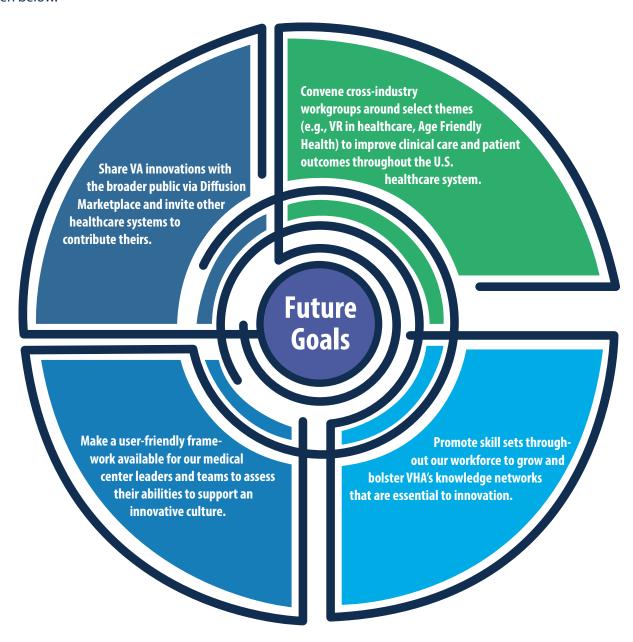
Launched in February 2020, the Marketplace was exclusive to VA employees. However, in October 2021, the website was made publicly accessible. Veterans, their caregivers, external healthcare innovators, and the public can now easily access innovations transforming VA. They can explore innovations, follow updates, and even pledge to adopt a particular innovation. Visit Diffusion Marketplace to discover the next influential or lifesaving innovation.





Conclusion

For the foreseeable future, Diffusion of Excellence continues to see innovation as key to VA's mission. Diffusion is committed to maintaining current services like VHA Shark Tank Competition, National Diffusion, and Diffusion Talent Accelerator efforts while creating new initiatives and setting transformative goals, as seen below.



Thank you for the unwavering support and commitment to VA's mission. Thank you also for being a part of this journey and contributing to the legacy of excellence at Veterans Affairs. Diffusion of Excellence looks to continue serving Veterans and advance the innovation boundaries in healthcare.



Part Three:

References and Appendices

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Appendix A:

Diffusion Dictionary

TERM	DEFINITION
Diffusion of Excellence (Diffusion)	Diffusion of Excellence identifies, replicates, and scales emerging Promising Practices across VHA.
Diffusion of Excellence Fellow (Diffusion Fellow, DF)	VHA Shark Tank winner who serves as a mentor to the new implementing facility during facilitated replication.
Diffusion Marketplace (Marketplace)	A discovery and collaboration digital platform that hosts over 240 innovations. Using human-centered design principles, the Marketplace curates VA's promising innovations, encourages their diffusion, and fosters engagement with greater healthcare communities.
Diffusion of Excellence Base Camp (Base Camp)	The three-day in-person training for implementation teams to meet and develop their implementation plans for facilitated replication. The focus is on diffusing practices at a local level.
Diffusion of Excellence Summit (Diffusion Summit)	The graduation event for Promising Practices to report the successes and lessons learned during their facilitated replication. Diffusion Summit is at VHA Innovation Experience.
Diffusion Pathways	Three pathways (i.e., organic, initial, and national) based on Promising Practice impact, replicability, and more. Promising Practices receive their diffusion pathway at the end of facilitated replication, and pathways are announced to a larger audience at Diffusion Summit.
Diffusion Specialist	Diffusion of Excellence team members who support Promising Practices during facilitated replication with national stakeholder conversations, initial diffusion Promising Practices during Diffusion Academy, and national diffusion Promising Practices for enterprise-wide spread.
Diffusion Talent Accelerator (DTA)	The training and mentorship program for VISN and Program Office Diffusion Specialists on how to guide projects through the innovation lifecycle.
Facilitated Replication	The six-to-nine-month period where implementation teams receive project management support from Diffusion to replicate at the implementing facility, develop an implementation guide, and confirm practice impact.



TERM	DEFINITION
Implementation Lead	Contract project managers from Diffusion who host regular meetings to monitor facilitated replication progress, track risks and mitigations, and assist in developing implementation guides.
Implementing Facility Fellow (IFF)	The champion from the facility primarily responsible for local implementation who is matched with a VHA Shark Tank winner.
Initial Diffusion	Practices that demonstrate strong impact, replicability, stakeholder support, and cost effectiveness. They are invited to Diffusion Academy to develop a business case for further growth and sustainment.
Innovation	An innovation is a program, process, or tool designed and implemented within VA that brings a unique value toward addressing a clinical, operational, or strategic problem.
National Diffusion	Practices that demonstrate exceptional impact, replicability, stakeholder support, and cost effectiveness. They are assigned a Diffusion Specialist for one to three years of national implementation effort.
Organic Diffusion	Practices that demonstrate moderate impact, replicability, stakeholder support, and cost effectiveness. They receive ad hoc support from Diffusion Specialists as they organically replicate to other facilities.
Promising Practice	Employee-developed practice that receives at least one Shark bid and wins VHA Shark Tank Competition. The practice team works with Diffusion to implement their innovation at the new facility during facilitated replication.
Shark	VISN and medical center directors who bid on practices at VHA Shark Tank Competition to implement one or more of these innovations at their facility.
VHA Diffusion Academy (Diffusion Academy)	The three-day in-person training that brings together seasoned innovation teams from across VHA to build a community and develop a business case for further growth and sustainment.
VHA Shark Tank Competition (VHA Shark Tank)	The competition identifies frontline employee innovations that promote positive outcomes and improved experiences for Veterans, employees, caregivers, and VHA community. The competition spotlights passionate employees who are addressing the toughest challenges across VHA while providing a platform for exposure to all levels of leadership.



Appendix B:

Templates and Tools

For templates, Diffusion recommends using templates available on the web-based project management tool Mural, as VA has a universal license for this platform. Please visit the yourIT Service Portal to start a Mural account with a VA email address or see templates readily available in Microsoft Office and below.

Business Case

A business case is an excellent communication tool. While there are several forms of a business case, below is business case template to get started. More templates can be found on Mural and in Microsoft Office.

Key partners

What third parties will we rely upon? Who are our key suppliers or distribution partners? What kind of partnerships are we looking for?



Key activities

What must we do to create our product/service? What key activities differentiate us? How do our activities align with our strategy?



Value propositions

What unique value do we bring to our customers? How does we solve our customer's problem? How do we differentiate from our competitors?



Customer relationships

How can we develop and maintain relationships?
What kind of relationship do our customers expect?
How do we approach customer relationship management?



Customer segments

Who are our target customer segments? What are their goals, needs, and preferences? How large is each customer segment?



Key resources

What physical, intellectual, human and financial resources do we require?



Channels

How do we reach customers now? Which communication channels work best? How does each channel deliver our value proposition?

Cost structure

What are the most significant costs inherent in our business model? Which resources and activities are most expensive? How can we optimize? How does our cost structure compare to our competition?

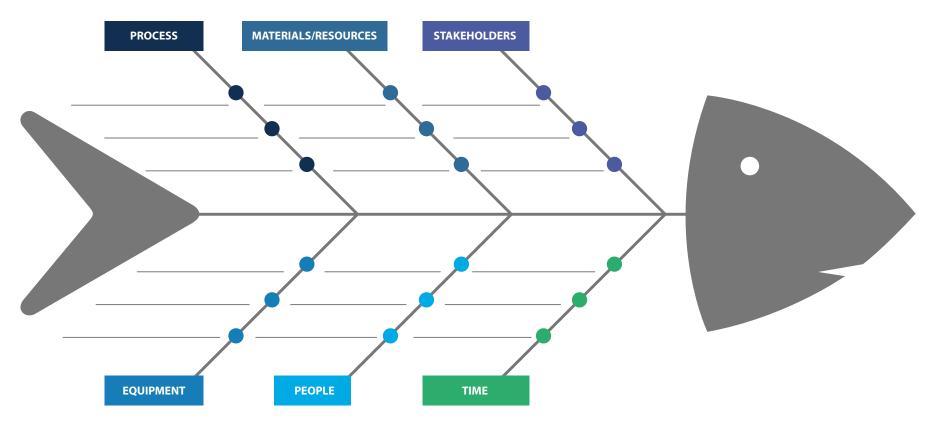
Revenue streams

What are our sources of revenue? For what value are our customers willing to pay? How much does each revenue stream contribute to the overall revenues? How can we innovate to diversify our revenue streams?





PROBLEM



SOLUTION



This template is a great resource to define your project and set project boundaries or scope. You can also use it to identify project deliverables and assign different sections to your team members. For each step of your practice, define the different elements and break them down into activities.

Problem Statement	Stated Reason for Action:			
Solution	Short Description of Selec	ted Solution:	Baseline	Target Audience
Outcome Metrics				
DATA	ТҮРЕ	DATA SOURCE		COLLECTOR

#	STEP	PERSON RESPONSIBLE	START DATE	COMPLETION DATE	CURRENT STATE & NEXT STEPS
1	Identify resources needed for imp	lementation			
(a)	Identify resources needed				
(b)	Create an acquisition plan				
2	Create a timeline for required task	«s			
(a)	Identify the incremental and sequential steps needed to implement the practice				
(b)	Define a timeline for each step				
(c)	Insert detailed tasks required to address implementation plan				
3	Identify risks and mitigation plans	S			
(a)	Brainstorm potential project risks				
(b)	Create prevention/mitigation plans for each risk				



#	STEP	PERSON RESPONSIBLE	START DATE	COMPLETION DATE	CURRENT STATE & NEXT STEPS
4	Build an implementation team				
(a)	Identify personnel required to support implementation				
(b)	Note any required trainings and ensure they are available				
(c)	Assign team responsibilities				
5	Engage necessary stakeholders				
(a)	Identify stakeholders necessary to implementation and utilization				
(b)	Prepare a stakeholder communication strategy				
(c)	Engage with stakeholders per strategy				
6	Create implementation evaluation	n plan		'	
(a)	Identify process to regularly collect process metric data				
(b)	Identify interim goals and benchmarks				

#	STEP	PERSON RESPONSIBLE	START DATE	COMPLETION DATE	CURRENT STATE & NEXT STEPS
(c)	Identify metrics and processes to monitor impacts on system				
(d)	Develop reporting format and timeline				
7	Frequently reference and update	project timeline			
(a)	Use project timeline to stay on track and update progress				
8	Frequently refer to project comm	unication plan			
(a)	Use communication plan to keep stakeholders informed and educated				



Gantt Chart

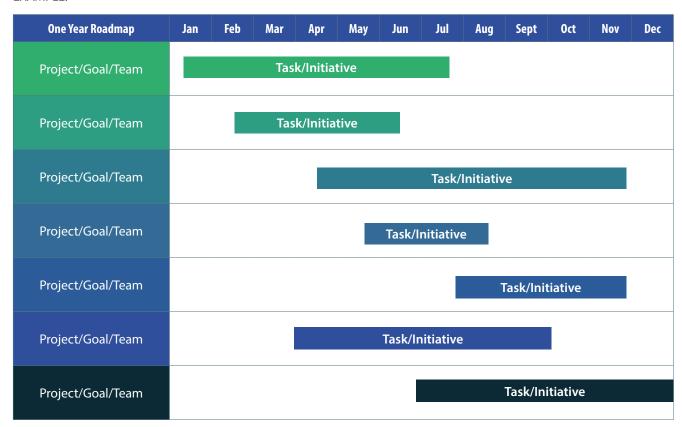
A Gantt chart is a great way to map out different implementation tasks as it provides a visual representation of your project plan over time. Developing and planning a timeline prior to beginning implementation is a great reference to ensure the implementing team stays on track.

At a glance, a Gantt chart includes:

- Tasks list this is all the project activities to be completed
- Timeline this displays when each task will start and end
- Progress this may be indicated by percentage complete or bar shading
- · Milestones this could be major events, dates, or decisions
- Resource assigned this designates the person responsible for each task

Additional elements may include a dateline, which is a vertical line that highlights the current date, and dependencies, which are lines to connect tasks that may need to be completed in chronological order. The Gantt chart can be created in Microsoft Office using Project, Excel, or Word. Other online tools or software that can be used to build out the Gantt chart are Mural, Asana, and Monday.com.

EXAMPLE:

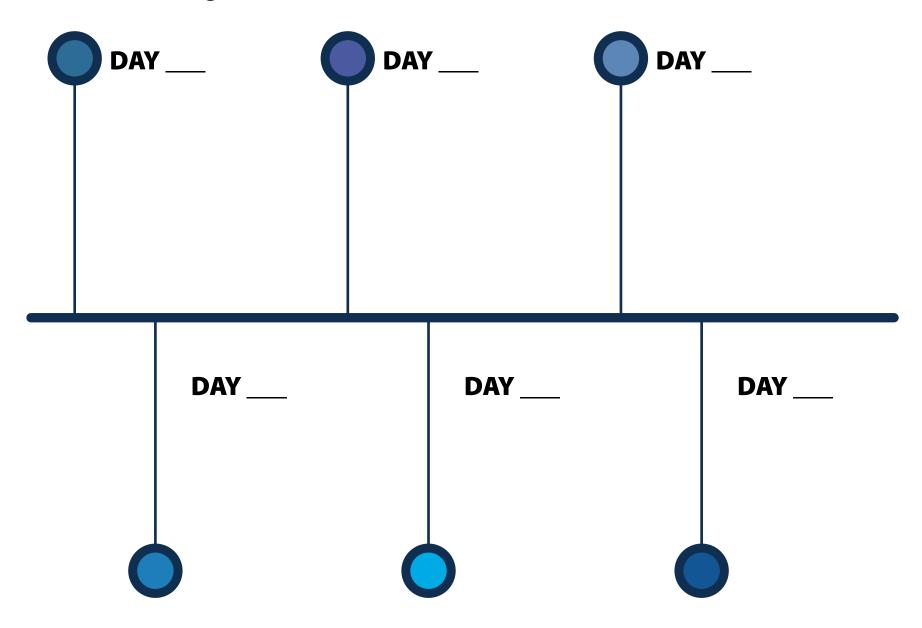




One Year Roadmap	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	0ct	Nov	Dec



Timeline for seeking resources from stakeholders



RAID Log

A RAID log is a tool used to identify and track key risks, actions, issues, and decisions for an innovation. It is created during the planning phase and updated throughout the implementation lifecycle. This tool helps with organizing information and monitoring changes affected by potential risks, actions taken, known issues, and pivotal decisions.

ACTIONS DECISIONS RISKS ISSUES Risks are events that might Actions are what you or Issues arise during **Decisions are conclusions** happen, but it is uncertain implementation that may any other team members or judgments made on when or if they will happen. must do for the innovacreate a timing delay or how to move forward with other problem that tion. Tracking action status the innovation. impedes success. Issues (i.e., in progress, on hold, complete) is an easy way are events you know you to manage tasks and will have to deal with, and complete them on time. you may have an idea of when they will occur.

RAID Category	Description	0wner	Priority Level	Comments



National Diffusion Agreement Example

The following national diffusion agreement serves as an example for completing the template in Diffusion Principle #8. Use this as a guideline. Since no single example can cover all types of practices, feel free to modify the information based on the specific needs of your innovation.

Innovation Name: Awesome Innovation	Program Office Alignment: Office of Innovation
National Diffusion Agreement Start Date: 6/11/2024	Program Office Process Owner(s): John Smith
Target Completion Date: 6/11/2027	Innovation Champion(s): Gerald Jones and Jane Smith
Revision Date (if applicable):	

Agreement Purpose

<Insert the purpose of coming into this national agreement with the Program Office or other party>

Ex:

This charter is intended to define the goals, workgroup members, roles, responsibilities, and timeline for national diffusion of the Awesome Innovation project. The charter also formally documents the shared commitment of the stakeholders to support this national diffusion effort.

Innovation Background

<Insert background information on what the problem statement is, how the practice solves this issue, and what the current successes have been. Refer to your answers in Principles 1 & 5 to help craft this section.>

Ex:

Early intervention for cognitive-behavioral therapy (CBT) for anxiety disorders has been shown to improve functional outcomes, reduce costs, and decrease the incidence of chronic mental health issues. Rising health care costs driven by inefficient systems is a known issue across the United States, and the VA is not immune to this issue. Anxiety disorders are a common reason for visits to primary care. This leads to access issues, increased referrals for imaging, specialists, and prescription medications. Embedding CBT within Primary Care results in improved outcomes and cost savings. Historically, the Department of Defense did this as early as 1975 in the Army. In 2010, Generic Hospital demonstrated a \$1200 savings per patient by following this care model. This was replicated in 2018 by the Navy. Most recently, third-party insurance has begun to waive co-pays if a patient sees a CBT therapist first. The Defense Health Agency Director approved waiving cost-sharing for TRICARE beneficiaries in 2023 in 15 states.

This model was successfully implemented across VISN 0 from 2015-2021, resulting in the lowest CBT wait times of any VISN, reduced specialty care referrals, improved patient functional outcomes, and high Veteran satisfaction. The process was diffused through shark tank to two additional sites and selected for national diffusion.



National Diffusion Priorities and Performance Metrics

Priorities:

<Insert your priorities for national diffusion.>

Ex:

- 1) Improve access to XYZ
- 2) Cost savings due to ABC
- 3) Improve Veteran and Provider satisfaction

Performance Metrics:

<Insert the performance metrics you will track against (i.e. your goal metrics) during this agreement's time period.>

Ex:

- 1. All VA Medical Centers have implemented at least one location (VAMC or CBOC) of Awesome Innovation by 6/11/2027
 - a. Year 1 25% of remaining facilities (50)
 - b. Year 2 60% of remaining facilities (100)
 - c. Year 3 15% of remaining facilities (15)
- 2. Awesome Innovation Dashboard development for continuous monitoring of defined metrics
 - a. Wait Time Reduction by 33%
 - b. Community Care Utilization reduction by 20% from baseline
 - c. Specialty Utilization Reduction by 10% from baseline

National Diffusion Team Responsibilities

<Insert the responsibilities of the workgroup as a whole for this agreement.>

Ex:

This workgroup is responsible for serving as Subject Matter Experts (SMEs) to in the development of a diffusion strategy for continued implementation Awesome Innovation across all VA Health Care systems in at least one location (VAMC or CBOC) by 6/11/27. The workgroup will serve as SMEs to guide development of processes to operationalize, implement and sustain national diffusion of Awesome Innovation. The workgroup members will serve as advisors in the replication of the process at implementing facilities. The workgroup is responsible for guiding alignment of National Awesome Innovation with existing resources and current as well as future best practices.



National Diffusion Team Reporting Responsibilities

<Insert the responsibilities of each position.>

Ex:

- 1) Specialist Support (0.5 FTE)
 - a. Project Management/Primary responsibility for implementation of this charter
 - b. Leads quarterly calls for Awesome Innovation
 - c. Leads monthly Awesome Innovation leadership calls with SMEs and stakeholders
 - d. Engaging and supporting the SMEs and stakeholders
- 2) Ideally 5 SE (0.25 FTE each)
 - a. Participate in quarterly Awesome Innovation calls
 - b. Participate in monthly Awesome Innovation leadership calls
 - c. Provide support and mentorship to implementing facilities
- 3) Stakeholders (volunteers):
 - a. Participate in quarterly Awesome Innovation and monthly leadership calls as needed
 - b. Provide feedback to Specialist and SME team

National Diffusion Goal and Timeline

Implementation Goal:

<Insert your performance metrics statement and then break down how you will accomplish that goal into phases.>

Ex:

Implementation Goal:

All VA Medical Centers have implemented at least one location (VAMC or CBOC) of Awesome Innovation by 6/11/2027

Phase I – Set-Up (Year 1)

- 1. Develop charter
- 2. Create strategy
- 3. Recruit funded Specialist Support and SMEs

Phase II – Pre-Implementation (Year 1)

- 1. Kick off calls
- 2. Recruit facility points of contact
- 3. Gather Stakeholders for steering committee
- 4. Develop metric dashboard

Phase III – Implementation (Years 1 – 3, see below): 18 VISNs, 165 VA Medical Centers

- 1. Awesome Innovation training modules
- 2. Guidebook review
- 3. Set 3-year goal

Phase IV – Maintenance of programs (Years 3+)

- 1. Data monitoring
- 2. Continued training
- 3. Publication dissemination

Implementation Strategy:

Year 1 – 25% of remaining facilities (50)

Year 2 – 60% of remaining facilities (100)

Year 3 – 15% of remaining facilities (15)

National Diffusion Ir	mplementation Team
Team Member Name	Title/Role on Team
John Smith	Co-Lead for National Implemetation/SME
Jane Smith	Co-Lead for National Implemetation/SME
Ellie Sattler	Co-Lead for National Implemetation/SME
Chase Hammond	Co-Lead for National Implemetation/SME
Cher Horowitz	Co-Lead for National Implemetation/SME
Kevin McCallister	Co-Lead for National Implemetation/SME
Program Offic	e Stakeholders
Key Stakeholder	Program Office
Gerald Jones	Office of XYZ
Mia Wallace	Office of ABC
Vivian Ward	Office of EFG
Арр	roval
	Date:
	Date:
	Dutc
	Deter
	Date:
	Date:



Memorandum of Understanding (MOU) Example

The following MOU serves as an example for completing the template in Diffusion Principle #8. Use this as a guideline. Since no single example can cover all types of practices, feel free to modify the information based on the specific needs of your innovation.

1. Innovation Background: <Insert your practice's background here. Refer to Principle 1 as needed>

Ex: Early intervention for cognitive-behavioral therapy (CBT) for anxiety disorders has been shown to improve functional outcomes, reduce costs, and decrease the incidence of chronic mental health issues. Rising health care costs driven by inefficient systems is a known issue across the United States, and the VA is not immune to this issue. Anxiety disorders are a common reason for visits to primary care. This leads to access issues, increased referrals for imaging, specialists, and prescription medications. Embedding CBT within Primary Care results in improved outcomes and cost savings. Historically, the Department of Defense did this as early as 1975 in the Army. In 2010, Generic Hospital demonstrated a \$1200 savings per patient by following this care model. This was replicated in 2018 by the Navy. Most recently, third-party insurance has begun to waive co-pays if a patient sees a CBT therapist first. The Defense Health Agency Director approved waiving cost-sharing for TRICARE beneficiaries in 2023 in 15 states.

This model was successfully implemented across VISN 0 from 2015-2021, resulting in the lowest CBT wait times of any VISN, reduced specialty care referrals, improved patient functional outcomes, and high Veteran satisfaction. The process was diffused through shark tank to two additional sites and selected for national diffusion.

- 2. Purpose: This Memo is intended to memorialize the transition of the innovation from <insert current owner here> to the long-term stewardship of <insert program office name or other new owner here>. This change will be effective on <date>. Your signature is requested to acknowledge this transition. Please accept our thanks for your steadfast support of frontline, employee-led innovation at the Veterans Health Administration (VHA).
- 3. Impact: <Insert the impact that your team has managed to achieve thus far using the metrics from Principle 5 and/or your chart from Principle 8)
- Ex: a. Wait Time Reduction by 33%
 - b. Community Care Utilization reduction by 20% from baseline
 - c. Specialty Utilization Reduction by 10% from baseline
- 4. Lessons learned: <Insert any lessons learned from the start of your innovation until now.>
- Ex: a. Training and collaboration are crucial; Successful implementation required extensive training for primary care providers to recognize anxiety disorders and make appropriate referrals to in-house CBT therapists. Enhanced collaboration between primary care physicians and mental health professionals ensured a seamless continuum of care, highlighting the importance of interprofessional communication and ongoing education.
 - b. Scalability and Adaptation to Different Settings; The strategy demonstrated that the model could be adapted and scaled across various healthcare settings, including VA facilities and military



health systems. Flexibility in implementation allowed for customization based on specific patient populations and local healthcare infrastructure, proving the model's versatility and potential for widespread adoption.

- 5. Roles and responsibilities: The responsibilities of <new owner> assigned to support <current team name>
- <Current Team> Responsibilities
- Ex: a. Participate in quarterly Awesome Innovation calls
 - b. Participate in monthly Awesome Innovation leadership calls
 - c. Provide support and mentorship to implementing facilities
- <New Team> Responsibilities
- Ex: a. Participate in quarterly Awesome Innovation and monthly leadership calls as needed
 - b. Provide feedback to < current team>
- 6. Remaining activities and deliverables: Remaining activities and deliverables that will transition from <current team> to <new team> regarding resource transitions and budget reallocation.
- Ex: a. Data monitoring report data regularly to necessary stakeholders. Also ensure that dashboard is up-to-date and any tech updates are made.
 - b. Continued training aim to train 30 VA clinicians per year over 3 years in incorporating CBT into Primary Care
 - c. Publication dissemination keep situational awareness of Awesome Innovation by disseminating any relevant publications to stakeholders and audiences.
- 7. Please direct any questions regarding this memo to: <Insert POC here>



Appendix C:

Professional Development Opportunities

Congratulations! You are one of VHA's change leaders interested in or already engaged in VHA's goal to bring effective, efficient, and patient-centered care to our nation's Veterans. You may be asking yourself, "Where do I go from here?" Diffusion of Excellence encourages you to check out the <u>VHA Innovation Ecosystem Catalog</u> as well as <u>VA Pathfinder</u> and <u>VHA Innovators Network's Innovation Program Playbook</u> to guide you in the right direction on your innovation journey.



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VHA Diffusion of Excellence

