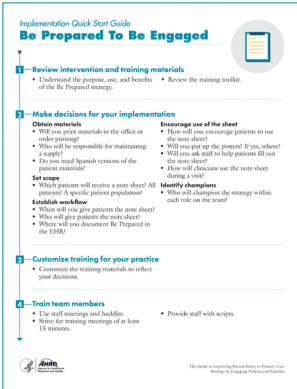


Appendix A – Be Prepared To Be Engaged Implementation Guidance



To help you plan and design your Be Prepared To Be Engaged implementation, a Quick Start Guide (QSG) is available. The Be Prepared To Be Engaged QSG has six stages.

1. Review the Intervention and Training Materials

Before you implement Be Prepared To Be Engaged, the practice champion needs to understand the materials, their intended use, and strategies for success.

Be Prepared Note Sheet

The Be Prepared Note Sheet is given to patients and family members before their appointment so they can write down what they want to talk about during their appointment. It can be given to the patient and family member at check-in or during rooming so they have time to fill it in.

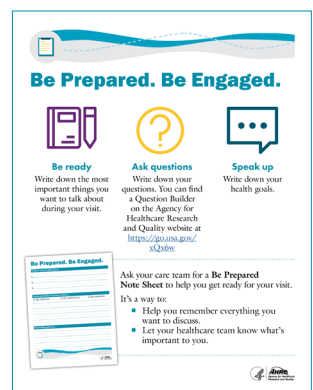
When the clinician comes into the exam room, he or she can quickly review what the patient has written. This information will help the clinician plan the visit. Sometimes it may mean asking patients to schedule an additional appointment because there will not be time to discuss both their current complaint and all their nonurgent concerns, questions, and goals.

Some considerations for using the Be Prepared Note Sheet include:

- The Be Prepared Note Sheet should be made available to each patient in the exam room or handed out during check-in.
- The practice should consider the need to have copies of the Note Sheet, clipboards, and pencils/pens available.
- The clinician can use the Note Sheet to help guide the visit and ensure the patient's goals and concerns are addressed either at this visit or in a followup visit if needed.
- The practice may need English and other language versions of the Be Prepared Note Sheet, depending on their patient population.

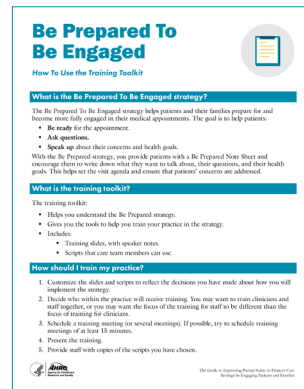
Be Prepared Patient Poster

The patient poster can be hung in an examination room or in the waiting room to help patients understand what they are being asked to do. When planning the implementation, you may want to consider including posters where they will be most visible to patients and their family members. Consider whether you will need English and other language versions of the patient poster.



Be Prepared Training Toolkit

The training toolkit provides slides, scripts to use when introducing the Be Prepared To Be Engaged Note Sheet, and a training guide (“How To Use the Training Toolkit”) to help with training and adoption. The training toolkit should be used by the practice champion and would be most successfully used in collaboration with a clinical and staff champion.



2. Make Decisions for Your Implementation

You will need to make several decisions to support the design of your Be Prepared To Be Engaged implementation. These are listed in the Quick Start Guide and include decisions on:

- How you will obtain materials,
- What the scope of your implementation will be,
- What the workflow will be in your implementation,
- How you will encourage and reinforce the use of the strategy, and
- Who will champion the implementation.

3. Customize the Training for Your Practice

The Be Prepared To Be Engaged strategy includes a training guide, slides, and scripts for you to use for team training. You will need to customize the slides and the scripts to reflect the decisions you make on how to implement the strategy in your practice.

4. Train Team Members

You should organize initial training sessions to inform staff and clinical teams of the implementation, its goals, and the processes that will be piloted during the initial adoption.

Ideally, trainings should be between 15 and 30 minutes and leverage existing meetings to minimize disruption. Make sure you have copies of the materials for everyone who is attending the training session so they can practice and feel comfortable with the strategy and how to use each material during implementation. Provide enough time to answer questions and discuss any concerns.

5. Go Live With Implementation

Once your team is trained and materials are obtained and ready to use, it is time to go live with the Be Prepared To Be Engaged strategy.

- Inform staff and clinical teams of the go live date and timelines for initial adoption and evaluation.

- Reinforce the training by using staff meetings and huddles to discuss challenges to implementation and share success stories. These discussions should be held at least weekly during the initial implementation period. This will promote the Be Prepared To Be Engaged strategy and encourage its sustained adoption.
- Identify good implementors and use them as peer coaches or mentors. Share stories of “Safety Catches” revealed through using the strategy.

6. Evaluate Your Progress

In addition to the practicewide evaluation of patient safety, it is important to select one or two evaluation measures or metrics specific to the Be Prepared To Be Engaged strategy. Examples of these are provided in the Quick Start Guide.