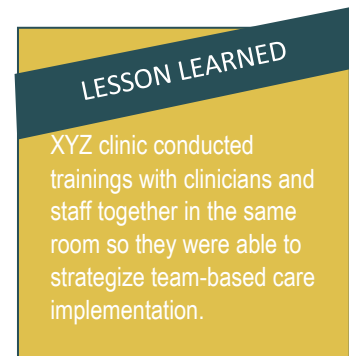

Rollout and Training

This resource offers suggestions on how to rollout and train on policies, agreements, workflows, and EHR templates created and revised through the Six Building Blocks program. The ideas come from primary care practices like yours who shared what worked for them. When considering the approaches you want to use, keep in mind what you already know works effectively at your organization.

- It can be overwhelming to implement new care processes all at once. Consider a slow ramp-up. For example, prioritize new elements and train on 1 or 2 key changes at each staff meeting. This also allows you to remind and reinforce earlier trainings (and celebrate the successes!).
- Create and distribute a one-page summary highlighting the key changes for each training.
- Consider identifying champions at each location to be a resource for others.
- Be sure to highlight the value of the changes to patients and to clinicians and staff members when introducing them.
- Train and remind through multiple platforms (e.g., in-person trainings, during meetings, email “touch-backs”, champion check-ins, and handouts).
- When training on new workflows, be ready to provide clinicians and staff with a realistic estimate of how long the processes will take.
- Provide thorough training on how to use EHR templates so clinicians and staff can implement with confidence.
- Provide necessary resources, such as [AHRQ Clinical Decision Support Tools](#), to guide implementation of new activities. For example, provide instructions for signing up for the state prescription monitoring database, print out copies of the new workflow, print screenshots and instructions for the EHR template, etc.
- Include a plan for refresher trainings and trainings for new employees.



After rollout and training, the next steps are to verify that the new policies, agreements, workflows, and templates are in use as expected and are effective. If not, support care teams in overcoming implementation obstacles and fine-tune and adjust, as needed. Strategies sometimes employed to monitor implementation success include:

- Reviewing tracking and monitoring reports (e.g., date of last patient agreement review, date of last urine drug test) to see what is and is not being done, then adjust workflows to support these processes.
- Peer chart reviews: clinicians can be assigned to review another clinician’s charts for one or two priority activities (e.g., state prescription monitoring database check).
- Check-ins during staff and clinician meetings to gather feedback on processes, celebrate success stories, and discuss challenges and solutions.

