**Regional/Site Action Plan Outline**

|  |
| --- |
| **ACCOUNTABILITY 1: Describe Your Region’s Process for Regularly Reviewing Quality Data, across the H&K Surgical Continuum of Care**   * Describe your region’s quality improvement council, leader, frequency of meetings * Identify gaps in your region’s quality improvement council * Describe actions you will take to change the structure of your region’s quality improvement council * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |
| **COMMUNICATION 1: Describe Your Region’s Key Stakeholders**   * Describe the specific people in your supervisory structure * Describe the specific people related to your supervisory structure (i.e. surgeons) * Identify gaps in these people’s understanding of a) The Existing Provincial Hip and Knee Program &   b) Operationalization of the Program   * Describe actions you will take to engage these stakeholders to communicate operationalization * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |
| **COMMUNICATION 2: Describe Your Site Representative’s Communication Protocols**   * Describe the specific actions your site rep takes after each WG meeting and each provincial communication from SCN/ABJHI * Identify gaps in your region’s communication protocols * Describe actions you will take to improve your region’s *documented* communication protocols * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |
| **ACCOUNTABILITY 2: Describe Your Region’s QI Council’s Protocol for Responding to Positive or Negative Quality Events**   * Describe how your QI Council develops and executes an action plan for a negative quality event * Describe how your QI Council celebrates and shares contributing factors from a positive quality event * Identify gaps in your QI Council’s protocols for responding to changes in your quality outcomes * Describe actions you will take to improve your QI Council’s *documented* QI protocols * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |
| **SUSTAINABILITY 1: Describe Your Site’s Working Group Representative Succession Plan**   * Describe the specific people who can currently alternate for your WG rep and their understanding of the SCN, ABJHI, the provincial program and recurring QI data review. * Describe your site’s protocol if your WG rep moves to another team with respect to the H&K Program * Identify gaps in your site’s protocols for succession of the WG rep role * Describe actions you will take to improve your site’s *documented* succession protocols * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |
| **SUSTAINABILITY 2: Describe Your Site’s Arthroplasty Program Succession Plan**   * Describe how you train new staff and/or new strong influencers in your team about the SCN, ABJHI, the provincial program, the full patient continuum of care and the cycle of QI data review * Describe your site’s protocol if your strong influencers move to another team * Identify gaps in your site’s protocols for maintaining the sense of importance of improving quality outcomes for patients among the staff * Describe actions you will take to improve your site’s *documented* training protocols for the H&K Program * Identify possible obstacles and where ABJHI/SCN support may be required |
|  |