



Workshop 4

31st August 2017

Afternoon session

NOW WHAT?

Business as Usual & Sustainability

How to start planning for it?

What is...

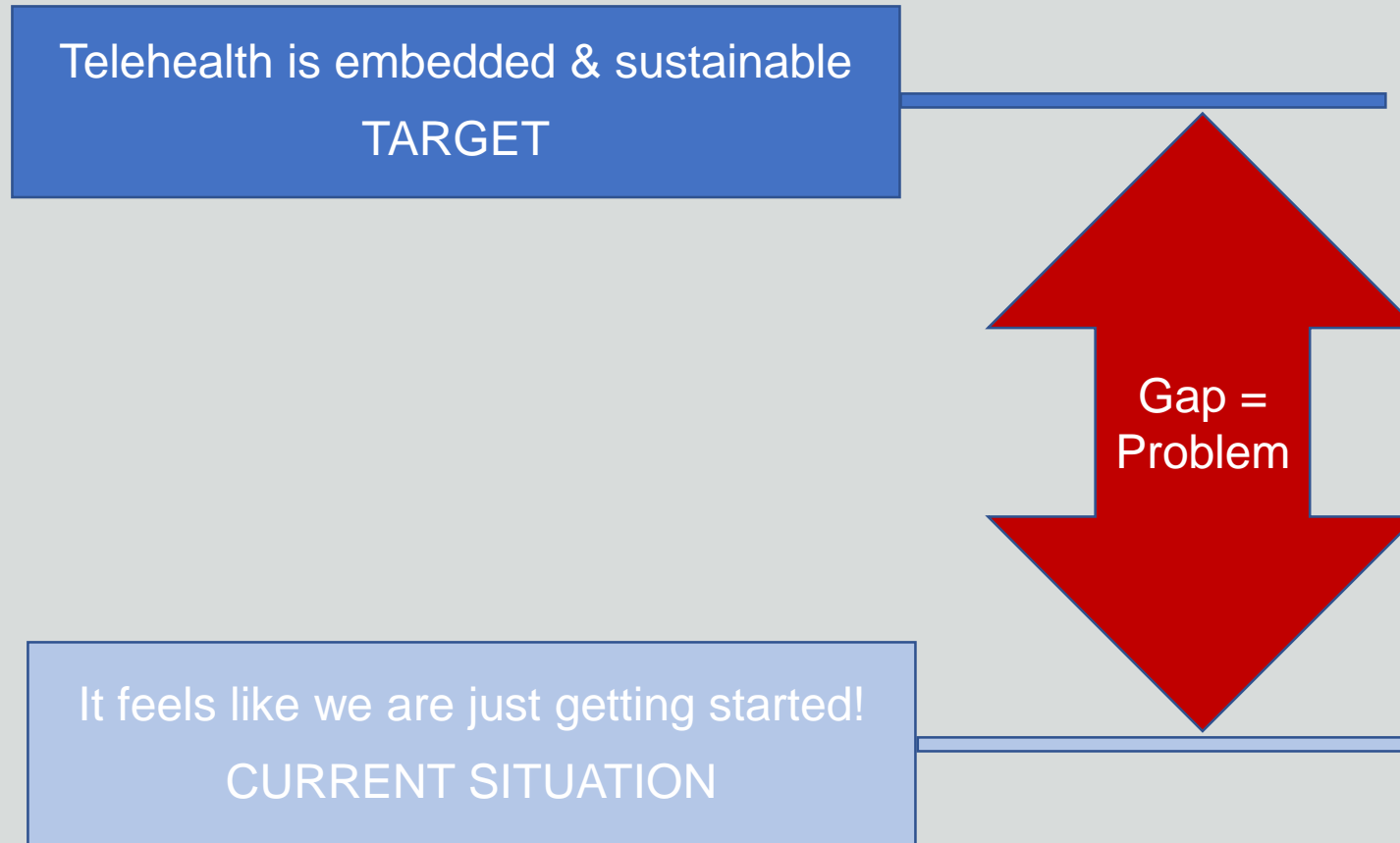
Business as usual

- The normal execution of standard functional operations within an organisation

Sustainability

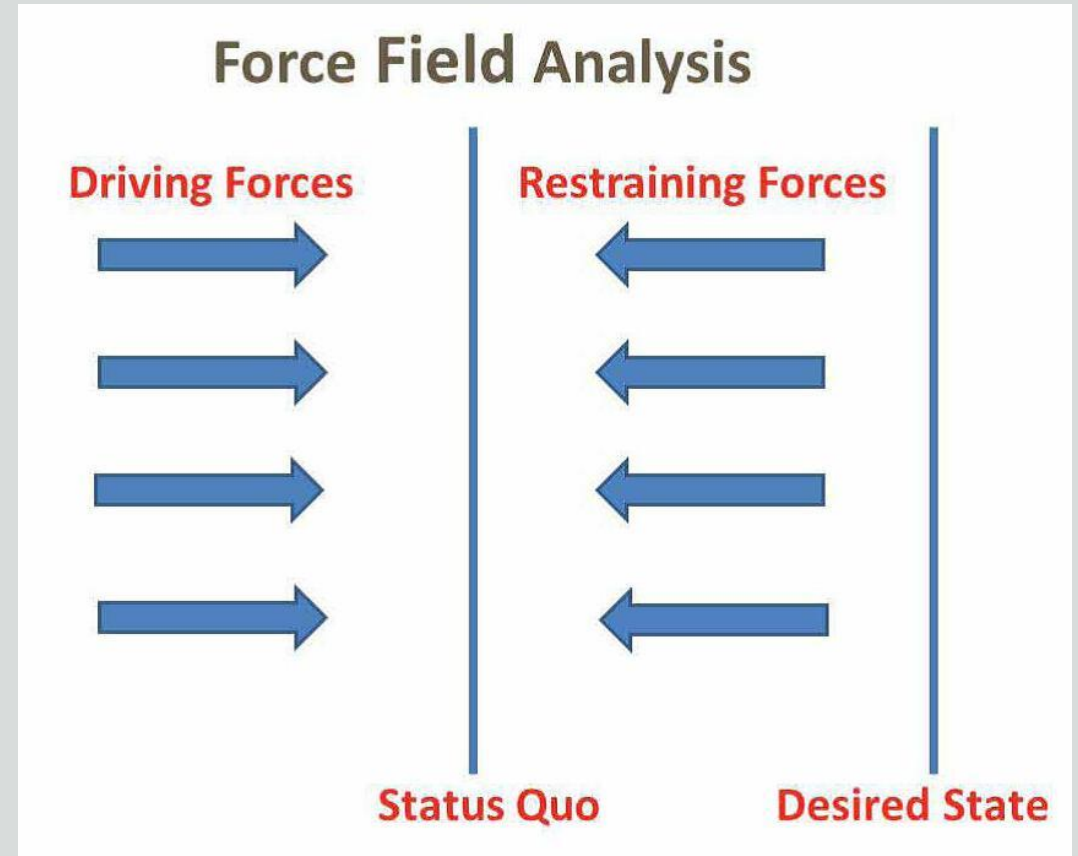
- The ability to continue operating into the future

The Challenge...

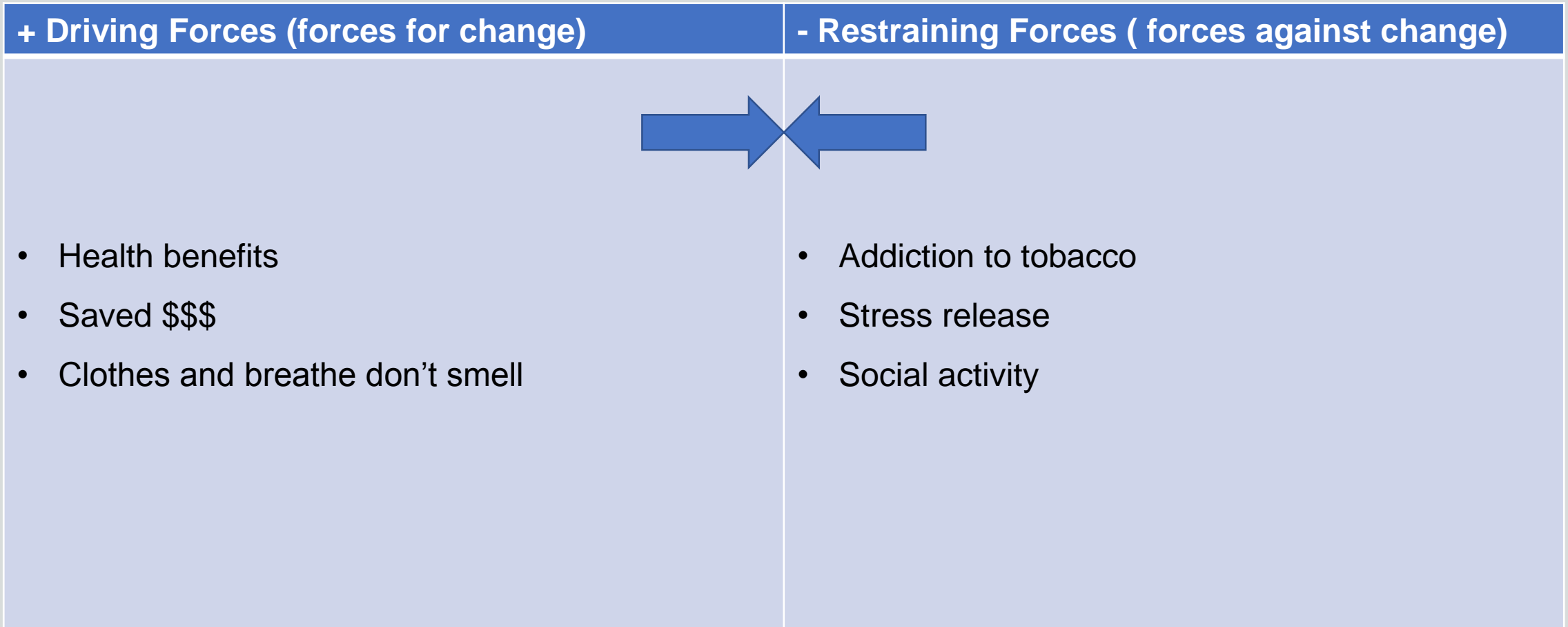


Force Field Analysis (Lewin)

- A method for systematically analysing the various forces for and against a proposed change
- **Driving forces** are the existing forces that help the change occur
- **Restraining forces** are the existing forces that work against change

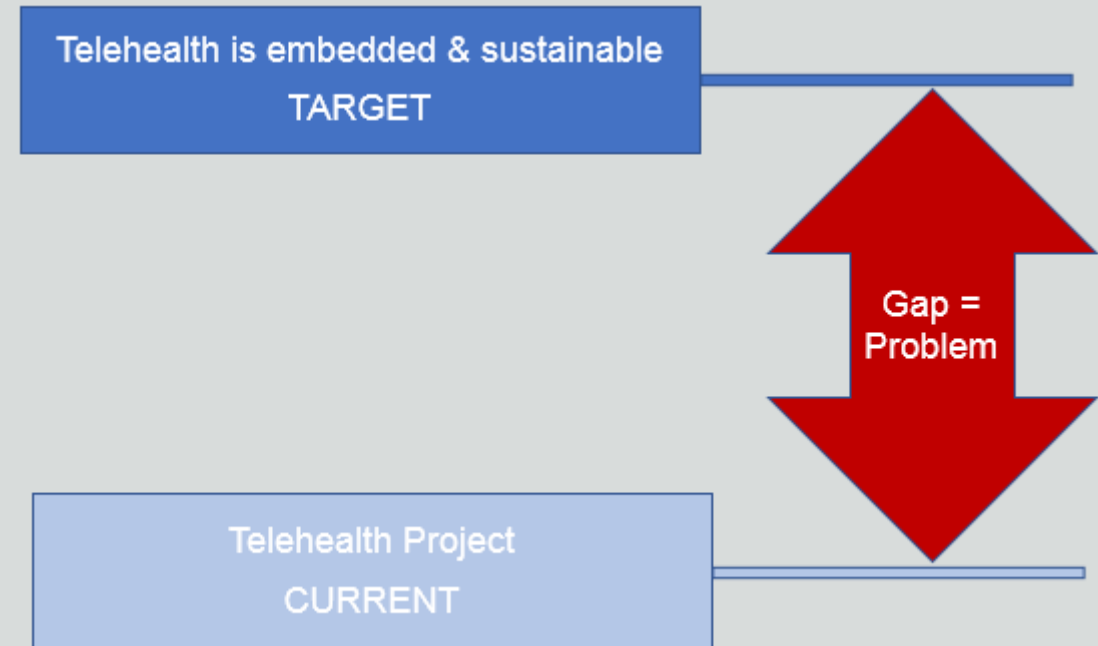


Force field analysis - Quitting smoking



1. Define the problem & the desired outcome

- What is the desired outcome that is worth working towards?
(Be as specific as possible)
- What is the current situation?

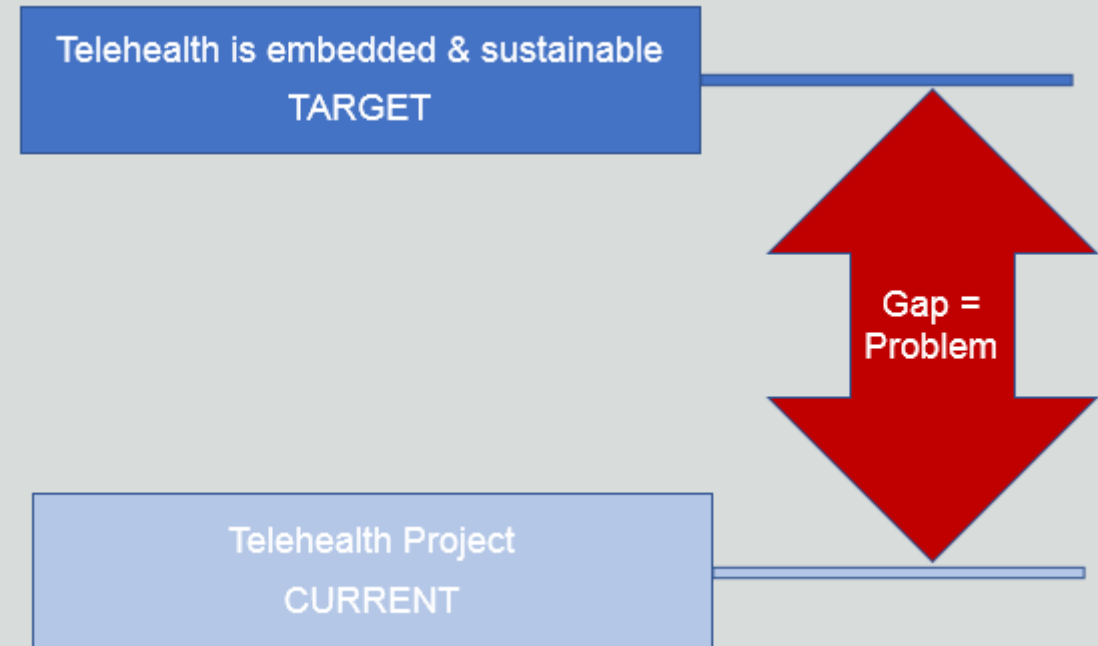


ACTIVITY 1a:

Define the problem & the desired outcome

1) Define the desired outcome
(Be as specific as possible)

2) Define the problem

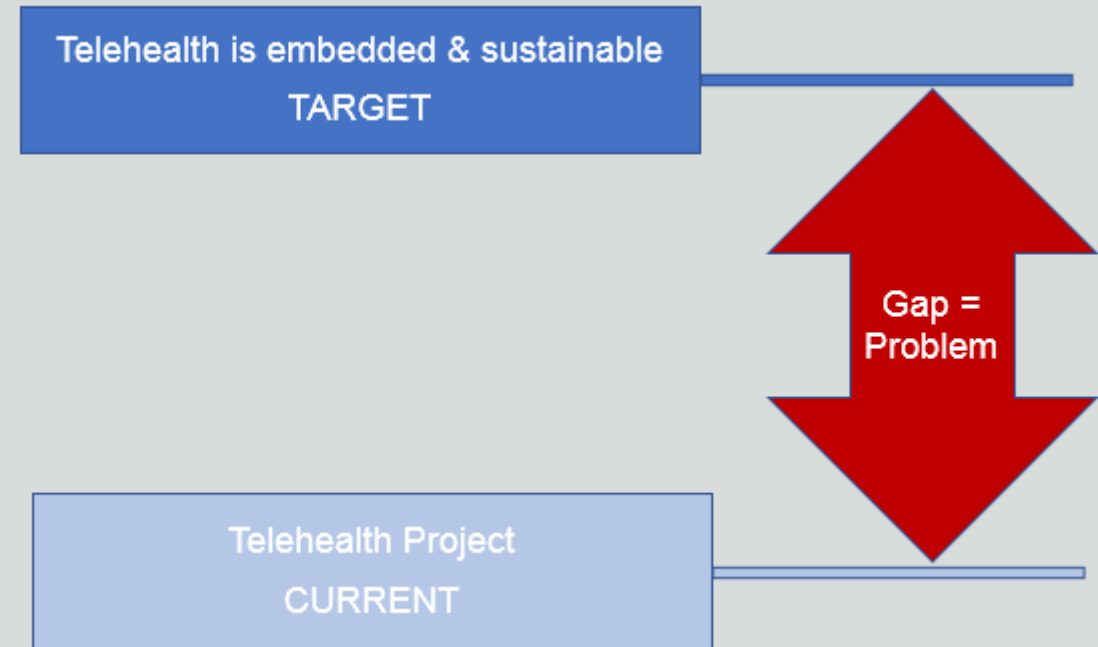


ACTIVITY 1b:

Define the problem & the desired outcome

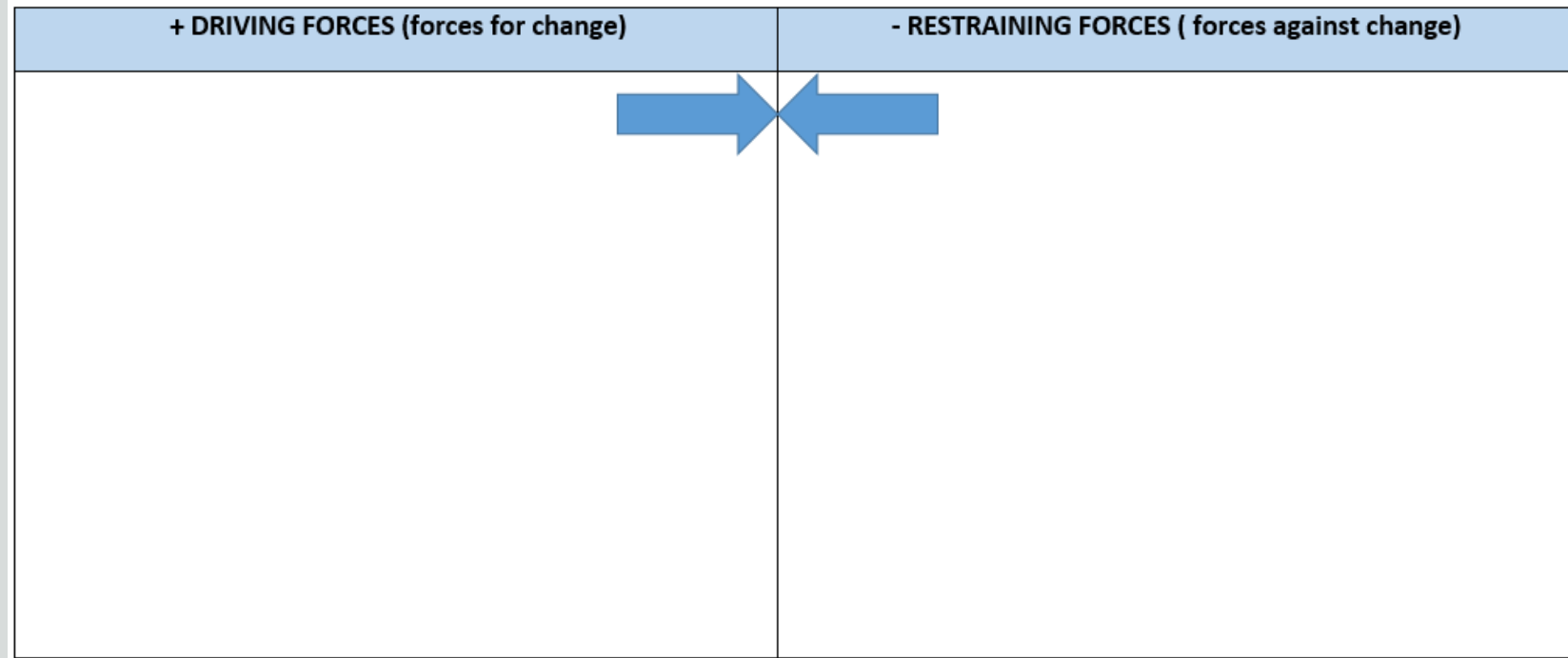
1) Define the desired outcome
(Be as specific as possible)

2) Define the problem



2. Identify the driving & restraining forces

- 1) Identify the factors that support change in the desired direction?
- 2) What are the factors or pressures that restrain the proposed change?



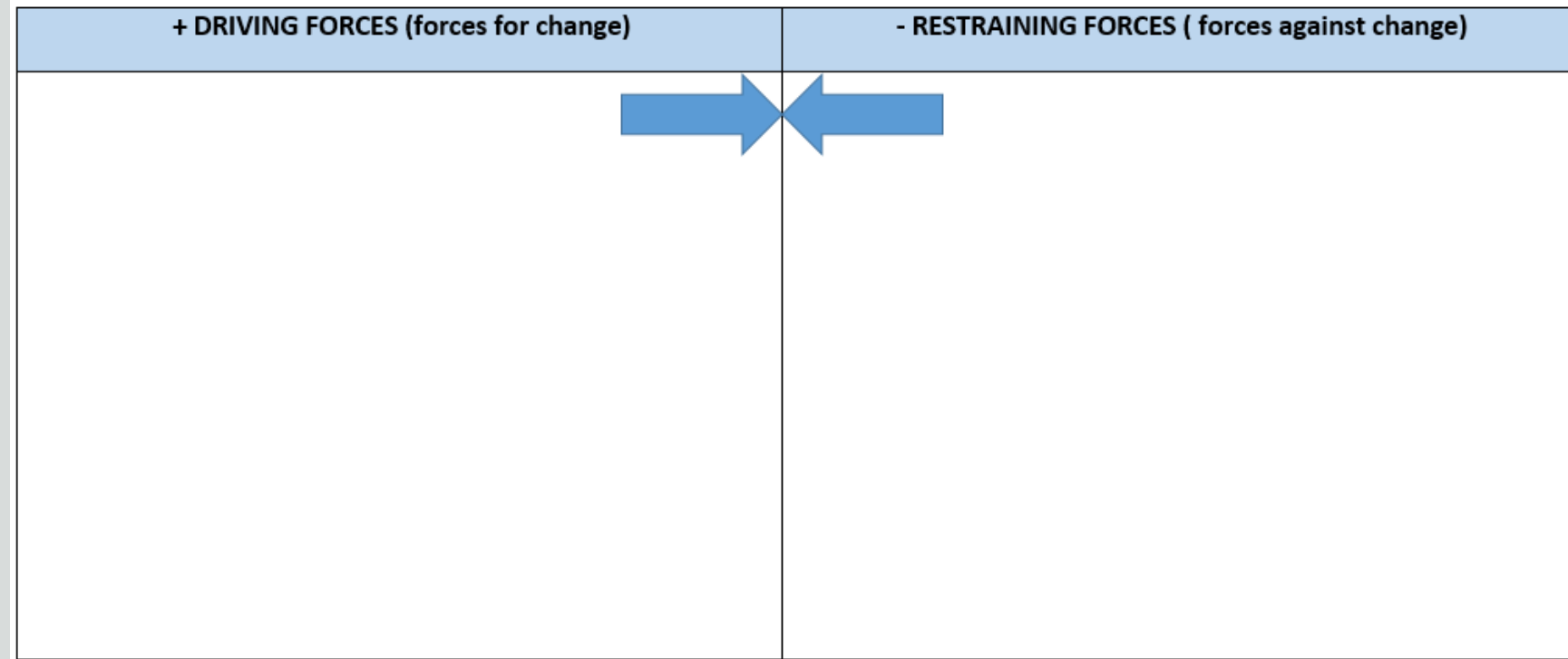
Some forces to consider

- Available resources – infrastructure, funding, time, support staff etc
- Government directives
- Organisational strategic focus & values
- Organisational policies & procedures
- Benefits
- Needs of consumers
- Needs of clinicians
- Past & present practices
- Attitudes
- Relationships

ACTIVITY 2a:

Identify the driving & restraining forces

- 1) Identify the driving forces
- 2) Identify the restraining forces



ACTIVITY 2b:

Identify the driving & restraining forces

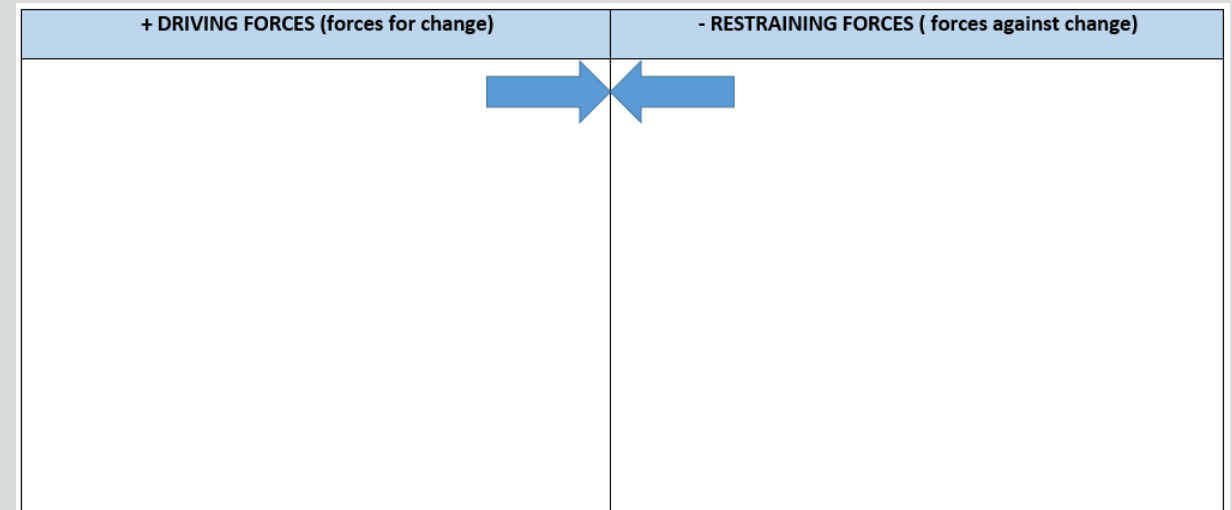
- 1) Share and group your driving & restraining forces
- 2) Refine your driving & restraining forces



3. Determine the impact of the forces


This can be done by several different methods:

- Discuss & prioritise
- Rate each force with a score between 1 and 5, where 1 is low or weak and 5 is high or strong
(The higher the score = the greater the impact)
- Vote



3. Determine the impact of the forces

+ Driving Forces (forces for change)	- Restraining Forces (forces against change)
<ul style="list-style-type: none">• Health benefits - 4• Saved \$\$\$ - 3• Clothes and breathe don't smell - 2	<ul style="list-style-type: none">• Addiction to tobacco - 4• Stress release - 3• Social activity -4

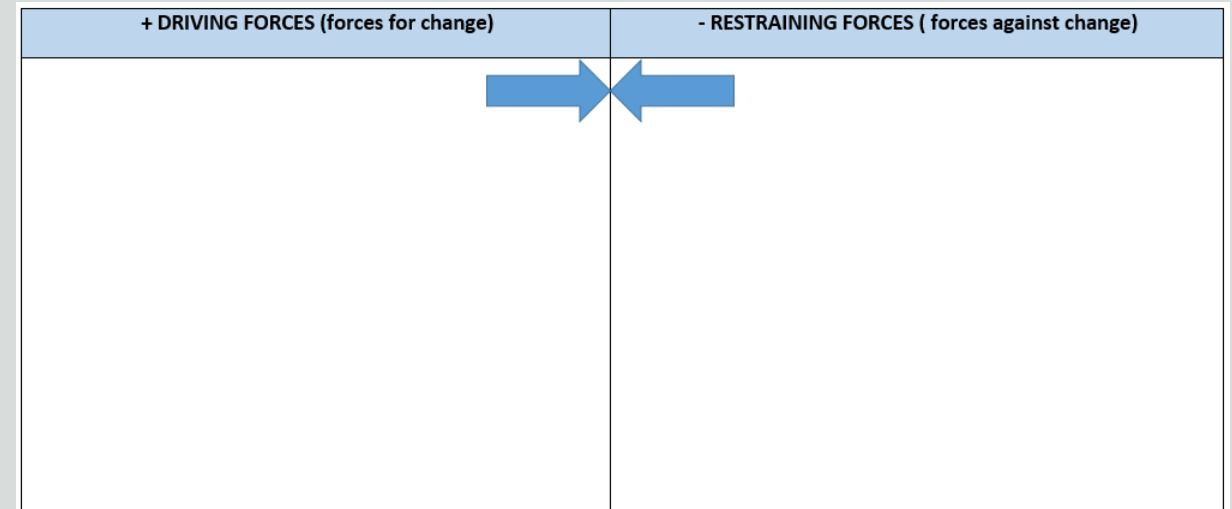


ACTIVITY 3:

Determine the impact of the forces

Either by:

- Discussing & prioritising
- Rating each force with a score between 1 and 5, where 1 is low or weak and 5 is high or strong
(The higher the score = the greater the impact)
- Voting



4. Develop an action plan

- What can and are we going to do about the things that will help & hinder our project to become BAU & sustainable?
 - Change can occur as a result of:
 - increasing the driving forces
 - decreasing the restraining forces*
 - or a combination of both
- *Lewin suggests that the best way to help the change occur is to decrease the restraining forces

ACTIVITY 4: Develop an action plan

- Identify 5 actions that will increase the chances of achieving your desired outcome
- Remember change can occur as a result of:
 - increasing the driving forces
 - decreasing the restraining forces*
 - or a combination of both

*Lewin suggests that the best way to help the change occur is to decrease the restraining forces

ACTIVITY 5: Group feedback

Report back to the whole group:

- 1) Top 3 driving forces
- 2) Top 3 restraining forces
- 3) Top 3 actions

* If same as previous group choose something further down your list

Debrief

- Was this process useful?
- Do you think you can go back and apply the principles of the Force Field Analysis to your current projects or health service?
- Any other comments or feedback
- Resources to take home

What does the literature say...

Three main phases:

1: Telehealth initiation (project phase)

- Find, support & develop champions*
- Raise awareness of telehealth
- Promote safety & effectiveness of telehealth - disseminating evidence
- Give clinicians hands on experience to increase acceptance
- Build relationships between providers

* **Champions** – enthusiastic individuals who drive initial uptake – encourage, promote, build relationships, staff training & mentoring

What does the literature say...

2: Telehealth is routine business/sustainable

- Clinician acceptance*
- Leadership support** for telehealth – Exec support, incorporated into organisational plans & goals
- Marketing telehealth
- New clinical and business models of care
- Build telehealth into process and procedures
- Integrated into the usual funding models and budgets
- Selecting the appropriate technology for purpose

What does the literature say...

3: Large scale uptake

- Government policy/direction
- Collaborative consortium
- Technical management – need for technical support to clinicians & patients for day to day services and also to manage technology upgrades and new developments.
- Governance – who would take responsibility for clinical standards and quality improvement - government vs organisation
- Choose a sustainable model of operation – fit into existing health care service with sufficient referrals & activity to justify dedicated staff & infrastructure
- Funding models
- Evidence of benefits

What does the literature say...

Vision

- clear, realistic vision of the purpose of the service

Ownership

- Deliberate & consultative service development with all stakeholders
- Supportive management
- Clinicians who champion the service by actively engaging & participating in service delivery

Adaptability

- Trial and modify the service model according to the needs of patients, clinicians and health service
- Often require several iterations before establishing a suitable model

What does the literature say...

Economics

- Provide value for patients
- Deliver cost or time savings or facilitate prioritisation of services for health services
- Achieve comparable benefits to face to face services

Efficiency

- Have defined, efficient processes and procedures, such as, coordination of clinician time, room bookings, maintenance of equipment, sharing of test results & documentation, and troubleshooting technical problems
- High levels of activity are not necessarily required to be sustainable

Equipment

- Careful consideration of equipment used
- Need processes in place to manage technical issues

Useful references

- Wade (2014) How to Make Telehealth Work: Defining telehealth processes & procedures
- NSW Health (2016): Telehealth Framework and Implementation Strategy, 2016-2021
- Bradford, N.K., Caffery, L.J., & Smith, A.C. (2016) [Telehealth services in rural and remote Australia: a systematic review of models of care and factors influencing success and sustainability](#). *Rural and Remote Health*, 16: 3808.
- Wade, V. A., Taylor, A.D., Kidd, M.R., & Carati, C. (2016) Transitioning a home telehealth project into a sustainable, large-scale service: a qualitative study. *BMC Health Services Research*, 16:183. doi: 10.1186/s12913-016-1436-0

**How can we
sustain the
COP after
2017?**

Workshop Overview

- Review of the day
- Sharing of resources post workshop
- Evaluation
- Spread the word about the COP & encouraging others to join

Save the date

- Next & final workshop Workshop – Friday 17th November 2017
- Webinars – 12/11/17, 10/10/17, 14/11/17 & 5/12/17

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The Telehealth Victoria Community of Practice (COP) enables collaboration among members of the Victorian health workforce who are involved in implementing, supporting, managing and evaluating telehealth access to their health services.

