



NATIONAL
RURAL HEALTH
RESOURCE CENTER

Utilizing RAP for Project Evaluation

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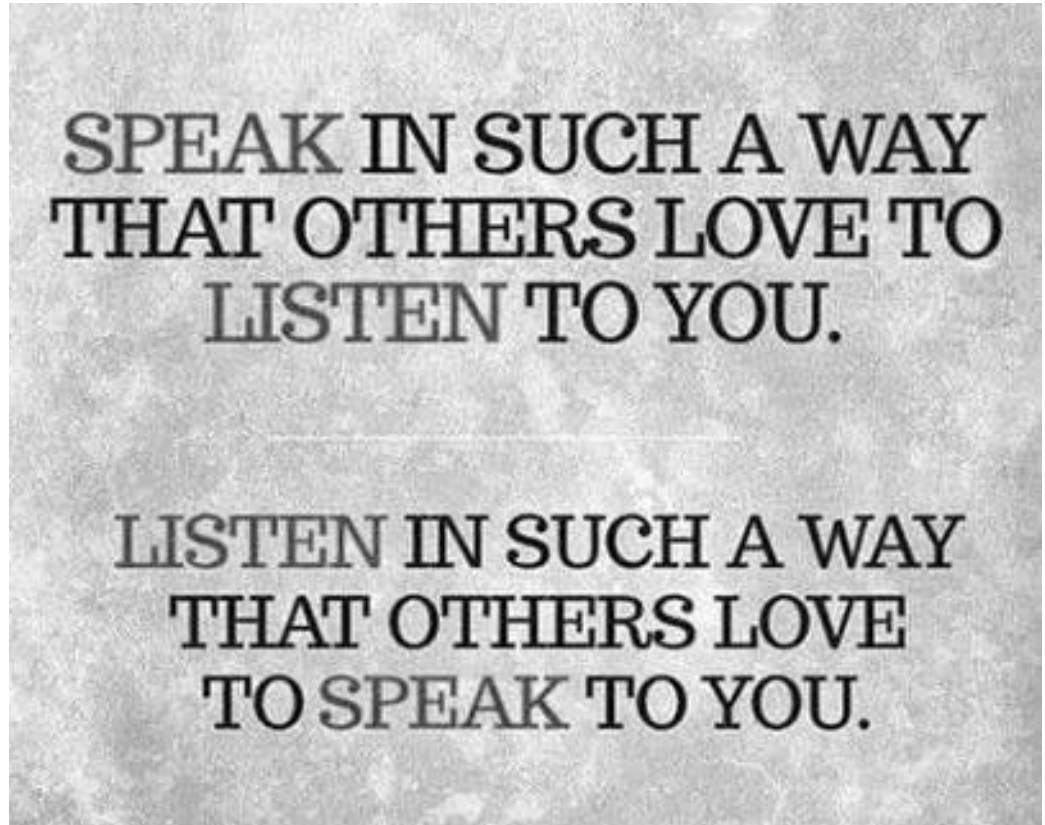
The National Rural Health Resource Center (The Center) is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce



Agenda

- Recommendation Adoption Progress (RAP) Overview
- Uses of RAP
- The science
- The art
- Questions



What is RAP?

RAP was created in 2010 to gather information from hospitals concerning their implementation of consultant recommendations for Rural Hospital Performance Improvement (RHPI) project.

RAP questions serve as a guide for an **interactive conversation** between the hospital leadership and The Center. RAP is **not** intended to be used as **an interview**.

Use of RAP Interview

- Should be used, along with the collection of measurable outcomes, to tell “**the whole story**” of project implementation
- Is used to energize and re-engage hospitals
- Can be used to identify success stories for hospital spotlights and spotlight videos
- Can be used for hospital testimonials concerning the value of a project
- Provides the basis for Return on Community Investment (ROCI)
- With slight question changes, can be used with any program evaluation



Small Rural Hospital Transitions (SRHT) Project Program Spotlights

[Home](#) > [Resource Library](#) > [Hospital Spotlights](#) > Delta Memorial Hospital's SEAL Team

Delta Memorial Hospital's SEAL Team

Downloads & Links

[Watch the Spotlight Video](#)

May 2018

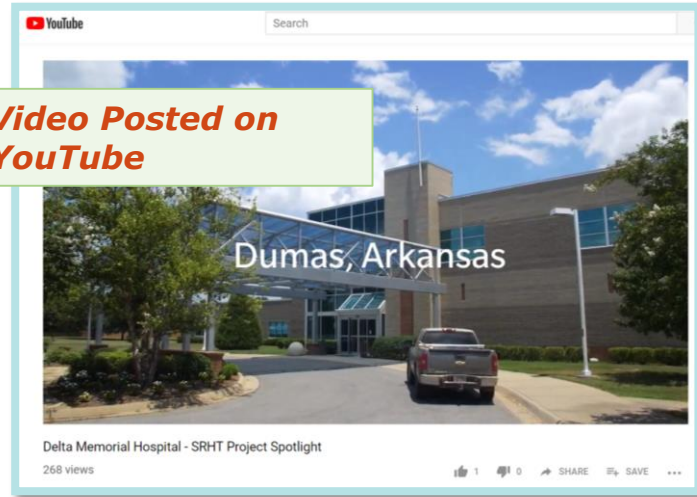
Organization: National Rural Health Resource Center (The Center)

[Delta Memorial Hospital](#) (DMH), a 25-bed, Critical Access Hospital (CAH) located in Dumas, Arkansas, participated in a Quality of Care and Transition of Care Project through Small Rural Hospital Transition (SRHT) in 2017.



**Spotlight Posted on
Center Website**

**Video Posted on
YouTube**



Spotlight: Delta Memorial Hospital's SEAL Team

[Delta Memorial Hospital](#) (DMH), a 25-bed, Critical Access Hospital (CAH) located in Dumas, Arkansas, participated in a [Quality of Care and Transition of Care Project](#) through [Small Rural Hospital Transition](#) (SRHT) project in 2017. They were [spotlighted](#) in November 2017 for their six-month post-project progress. Just six months later, they have met two of their three measurable goals and are so close to meeting the third goal!

- Use of Emergency Department Transfer Communication (pre-project 76% to 100%)
- "Patients who reported that YES, they were given information during their recovery at home" increased from 76% to 100%
- "Patients who Strongly Agree they understood their care at hospital" increased from 42% to 49%, just short of the 50% goal

[READ THE FULL SPOTLIGHT ON THE WEBSITE...](#)



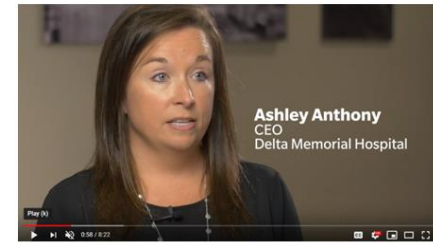
**Spotlight
Disseminated
Through Newsletter**

SRHT Project Video Success Stories

[Delta Memorial Hospital \(DMH\)](#)

DMH participated in a SRHT quality project.

"This project helped us to identify areas of focus to guide us in streamlining processes to improve overall efficiency and quality of care. I believe we are in a good position"



**Video Disseminated
Through Newsletter**



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RAP Philosophy: The Science

RAP development was based on the principles of [Appreciative Inquiry](#) (AI). AI is a model of change based on identifying and leveraging strengths rather than deficits (such as those found in the medical model).

It is important to know that RAP is based on AI but does not follow the 4-D Cycle of true AI (discovery, dream, design, and destiny).

SRHT RAP Questions

- 1. On a scale of 1-5, rate the extent to which the hospital has implemented consultant best practice recommendations (or work plan)**
- 2. What is your hospital's current status with regard to implementing the performance improvement recommendations made by your consultant? Specifically, what is going well?**
- 3. What are your expected next steps towards adopting your consultant's recommendations?**
- 4. Aside from the measurable outcomes, what are some of the ways this project has impacted your hospital, its culture and the community?**
5. How do you believe this project has helped you move forward in transitioning to a value-based system and preparing for population health? (SRHT specific question)
6. How do you believe the Learning Collaborative has helped you move forward in transitioning to a value-based system and preparing for population health? (SRHT specific question)



RAP Process: The Art

The effectiveness of RAP results from a **true conversation** between the participants. The staff member leading the conversation **MUST**:

- Set the stage for a warm, non-threatening discussion
- Listen to what is said but also what is not said
- Remain very engaged in the conversation
- Know when to dig deeper and ask for details
- Not adopt an interview-like tone



Setting the Stage: The Art

- Let participants know the process for the call. *“I sent you the questions for this call. It is only a guide. I will be taking lots of notes while you talk and might stop you at times to dig deeper.”*
- Acknowledge that the project is big and takes one to two years to fully implement. This call is really to identify the successes and all the work that has been done on the implementation
- *“Are there any questions before we begin?”*

RAP Question 1: The ART

“On a scale of 1 – 5, rate the extent to which the hospital has progressed on the action plan.”

- One (1) means that no progress has been made
 - Two (2) means implementation has begun
 - Three (3) means that implementation is well underway
 - Four (4) means that implementation is underway and the hospital is beginning to identify outcomes
 - Five (5) means the project is completed and sustained with measurable outcomes.
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- When I ask them this question, I remind them that I really want to get a feel for their sense of their progress on their project.
 - This questions creates a framework for the questions that follow. In other words, their response helps me to know what I can expect.

RAP Question 2: The ART

“What is your hospital’s current status with regard to implementing the performance improvement recommendations made by your consultant? Specifically, what is going well?”

This question is often the “meat” of the conversation and is typically the one we spend most of the RAP call discussing.



Suggestions to Finesse Question 2

Responses should validate the RAP score. If it does not, this should be a red flag and lead to focused digging. You could do this by asking for more detail:

- *"Specifically what is going well?"*
- *"You mentioned rolling out bedside report, how did you do that? How is it going? How are you handling non-compliance?"*
- *"Tell me more about your leader rounds."*

More Suggestions to Finesse Question 2

- Listen for diversionary tactics:
 - General and vague responses
 - Not answering the question
 - Moving to non-related topics
- Bring conversation back to your question. It's okay to interrupt with *"I really want to hear more about what's going well. Tell me more about bedside report"* or *"I'd like to go back to bedside report..."*

Suggestions to Finesse Question 2 (3)

Maximize the time spent on this question

- Reinforce great work. *“This is so amazing”* or *“You all have done so much with this!”*
- When leaders finish talking about successes, prompt again, *“What else is going well?”* This often leads to more.
- Allow some silence while people think.
- Refer to one or two items in their action plan if they did not mention them. *“I know you all planned to work on swing bed, what have you all done with that?”*



RAP Question 3: The ART

“What are your expected next steps towards adopting your consultant’s recommendations?”

- If they mentioned a next step in relation to something they are doing well, make note of it and reference it *“I know you mentioned...what are other next steps?”*
- Can reference an item from their action plan they did not mention, *“I know one of your priorities is to work on recruiting primary care physicians, what are your plans for this?”*
- If little work has been done, participants will usually voice the intention to pull the team back together and regroup.



RAP Question 4: The ART

"Aside from the measurable outcomes, what are some of the ways this project has impacted your hospital, its culture and the community?"

This question is often underestimated in its importance.



Suggestions to Finesse Question 4

Spend a little time explaining why this question is important. I usually say something like, *"Measurable outcomes are important but I'd really like to hear how this project is impacting your hospital, your staff, and your community. This is important because it speaks to the sustainability of the project. For example, this includes things like better communication, leaders are more engaged, or there is better staff morale. Changes in culture help to sustain the measurable outcomes. For instance, one I already heard you mention is..."*



RAP Question 5: The ART

“How do you believe this project has helped you move forward in transitioning to a value-based system and preparing for population health?”

- Remind them that this really speaks to the goal of the project (at least for SRHT)
- I often try to capture the quote of this. It is really nice to use in spotlights or testimonials.

RAP Question 6: The ART

"How do you believe the Learning Collaborative has helped you move forward in transitioning to a value-based system and preparing for population health?"

Capturing as a quote can be helpful in case you decide to use as a testimonial.



Wrapping Up the Call

- I always end with ***"Is there anything we haven't talked about or that you want to make sure I capture here?"***
- Remind them they can always email you with additional thoughts
- If appropriate, express sincere appreciation of all the work that has been done
- If little work was done, close with a note of encouragement, *"I appreciate you being honest with me about your work on this project. I look forward to hearing about your progress on our next call."*
- Thank them for their time and let them know if there will be follow up

RAP Documentation

RAP Score: 3

Accomplishments:

- Optimize revenue cycle process (LEAN rapid improvement event – value stream analysis)
- Completed value stream analysis and lowered Days net AR from 56 to 43 by optimizing time from process to process and improved documentations on medical necessity.
 - Starting to look at POS collection.
 - Evaluate implementation of a merit-based incentive program-Working with consultant to tighten up on performance evaluation process and description.
- Establish budget development ownership and monthly distribution of financials
 - Distribute financials
 - Next budget comes up in June and start preliminary in March /April
 - Start doing training for leaders in February.

Next Steps:

- Expand pain clinic into new building
- Look for opportunities to meet regional demands
- Recruit strong providers and build program

Non-measurable Impact:

- More engagement for leaders around the financial running of their departments
- More ownership of managers for some concepts (such as the business part); measuring or paying attention to something helps to improve; helps them to refocus
- Continues to assist them to assess present state and make decisions about future; consider all possibilities

How project assisted in moving forward in emerging model of health care:

Looking at reducing cost and value proposition. Improving value by improving efficiencies and reduce cost and increase quality.



Questions?





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