**DARE Implementation Checklist**

Project title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose:

* ***Guide conversations*** between TPMG investigators and DARE colleagues to proactively identify relational and operational influences on the transition from investigation to clinical changes/innovations.
* ***Plan***for stakeholder engagement, communication, data, technology, culture, and leadership.
* ***Prepare*** for unanticipated changes and modifications over time regarding planning domains.
* ***Document*** project planning and implementation for both investigators and TPMG leadership.

Timing and people:

* **TPMG clinician and DARE investigators** complete at project initiation and update at least every 6 months.
1. ***TPMG and medical center stakeholder engagement and planning***. Establish relationships and develop implementation strategies, involve relevant local and regional clinical specialty leads and sponsoring AED(s). Iteratively and briefly describe initial and ongoing discussions (i.e., 2-3 bullet points).
2. Which medical centers and regional specialties will be impacted?
3. What specific clinical change(s) are needed (i.e., staff, workflows, EHR documentation)?
4. Who are relevant clinical leads (include roles)?
5. How receptive is this leadership to project and potential impact?
6. Any issues/problems? If yes, proposed solutions?
7. Any next steps or communications needed to address these issues and timing?
8. ***Data and technology stakeholder engagement and planning*.** If needed, identify and establish relationships and implementation plans with technology leads within HealthConnect, KP-IT, TTG, TPMG Consulting, and/or Precision Tracking. Iteratively and briefly describe initial and ongoing discussions (i.e., 2-3 bullet points).
	1. Which programming languages/technologies/systems (if any) are impacted or needed?
	2. What specific change(s) are needed?
	3. Who are relevant technology leads and roles?
	4. How receptive is this leadership to the project?
	5. Any issues/problems (e.g., project requirements vs. current capabilities)? If yes, proposed solutions.
	6. Any next steps or communications needed and timing to address these issues?
9. ***Research project management***
10. **Create realistic monthly implementation timelines,** identify barriers (sample calendar below).
11. **Assess if project is expanding beyond original plan (scope creep)**. Is this a positive or negative development given overall project goals? Are resources sufficient to complete the research and buy-in (timeline, staff)? If so, plan to include, if not, reestablish focus on original goals and/or consider expansion for future projects.
12. **Communicate regularly** with stakeholders (e.g., quarterly). Note dates and briefly plan content (i.e., 2-3 bullet points) of your meetings.

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| IMPLEMENTATION PLANNING TIMELINE | **QUARTER** |
| **TASKS (as relevant)**  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** |
| Establish relationships and plans with technology leads |   |  |   |  |  |   |   |   |
| Establish relationships and discuss possible clinical workflow implementation strategies with PICs & chiefs  |   |   |   |   |   |   |   |  |