

# Ontario Sustainability Planner

## Why use a Sustainability Planner

An important part of the improvement journey is planning how you are going to sustain your improvement efforts. The beneficial results of an improvement project have been sustained when the new ways of working have become the norm.

The planner encourages quality improvement teams to think about seven key factors that support practices to hold the gains they have achieved from an improvement project. The seven key factors are:

1. Clarify what you are sustaining
2. Engage leaders
3. Involve and support front-line staff
4. Communicate the benefits of the improved process
5. Ensure the change is ready to be implemented and sustained
6. Embed the improved process
7. Build in ongoing measurement

***“Sustainability means maintaining the improvement...definitely not going back”***

~ NHS Modernization Agency, 2002

Sustainability is defined as: when the new ways of working become the norm or when you look at the process or outcomes a year from now, and things have not gone back to the old way. Sustainability does require evolution to adapt to internal and external changes in an effort to continuously improve.

After you have identified what you are sustaining, there is a list of ideas to consider for the six remaining factors. Use the list on the left-hand side to identify which of the ideas to consider you have addressed. Not all of the ideas may be applicable to your practice and situation, but the more items you consider the more successful we believe you will be in your sustainability efforts. On the right-hand side, there is the planning area for the team to write down the next steps the team will take to increase the likelihood of the new processes being sustained. You may not have next steps in each of the factor areas.

## References

- Centre for Healthcare Quality Improvement (2010). *Sustainability Planning: A Guide for ED-PIP Coaches & Team Leads*. CHQI: Toronto, Ontario.
- NHS Modernization Agency (2002). *Improvement leader's guide to sustainability and spread*. Ancient House Printing Group: Ipswich, England.
- Maher, Lynn, Gustafson, D. and Evans, A. (2007). *NHS Sustainability: Model and Guide*. NHS Institute for Innovation and Improvement: England.

## 1. Clarifying what you are sustaining

It is helpful to know what it is the team is planning to sustain. Is the team planning to sustain a **specific change idea** such as max packing patient visits to do as much as possible with the patient at each visit? Or, is the team attempting to sustain the **change concept** of reducing demand for visits through a number of change ideas (e.g., max packing but also reducing no shows, and extending revisit intervals)? The team could also be sustaining a **new or redesigned system of care** such as advanced access.

**We are planning to sustain:**

## 2. Engage leaders

Research and experience demonstrate support from leadership is essential to successful quality improvement work. Clinical and administrative leaders who work directly on, or indirectly support, the improvement project must ensure that all barriers to success are removed and project priorities are clearly identified and communicated. Think about who needs to be on side for changes to happen. Think about who ultimately influences whether or not something happens – these are the leaders within your practice/clinic. For small offices, the leaders may be everyone who works in the office such as the physician/NP, RN and receptionist.

### Our next steps...

To strengthen leadership engagement, we will:

- A provider champion has been identified and has agreed to participate in the improvement efforts.
- The provider champion has devoted time to dialogue with and participate as a member of the improvement team.
- If applicable, your business manager or executive director has agreed to support the improvement efforts.
- Leaders have the skills/knowledge required to support successful implementation.
- Leaders have removed barriers or threats to facilitate process improvement.
- Leaders are able to clearly articulate the benefits of the improvement project such as: improved access to care, patient safety, improved patient experience and/or increased staff skills.
- Leaders have provided the required resources to ensure the changes are sustained (e.g., time for staff to incorporate the changes into day to day operations).

### 3. Involve and support front-line staff

Front-line staff members play an important role throughout the improvement initiative. In the early phases, their involvement may be to identify the issues from their perspectives and identify solutions to test. Later, involvement may be to identify training needs and deliver / receive training opportunities. Continual support and evaluation of the needs of those working within the changed process are required.

<ul style="list-style-type: none"> <li><input type="checkbox"/> Staff members were provided with information about the purpose and significance of the improvement initiative.</li> <li><input type="checkbox"/> Front-line staff helped to identify issues from their perspective.</li> <li><input type="checkbox"/> Front-line staff members have been involved in developing solutions.</li> <li><input type="checkbox"/> The 'right' (most appropriate or qualified) staff are involved in the improvement project.</li> <li><input type="checkbox"/> Methods to regularly communicate with staff other than those directly working on the improvement team have been identified and used.</li> <li><input type="checkbox"/> A plan to address future skills and training needs has been created.</li> </ul>	<p><b>Our next steps...</b></p> <p>To strengthen the involvement of front-line staff, we will:</p>
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### 4. Communicate the benefits of the improved process

The change should address the root causes of problems and produce measurable benefits that meet the needs of all stakeholders (e.g., patients, front-line staff, providers, and leaders). Each stakeholder should be able to answer 'what's in it for me?'

<ul style="list-style-type: none"> <li><input type="checkbox"/> Unique and targeted 'what's in it for me' characteristics have been communicated to different stakeholders.</li> <li><input type="checkbox"/> Baseline data and ongoing real-time data for the measures is being collected regularly, tracked on a run chart and shared.</li> <li><input type="checkbox"/> Stories, updates at staff meetings and a visual display of data have been shared.</li> <li><input type="checkbox"/> Information about the improvement (i.e., patient outcomes, improved efficiencies, how the improvement efforts have been able to reduce or eliminate duplication of effort, unnecessary or repetitive work, unreliable processes, or excessive waits or delays) have been shared with stakeholders as the new way of work.</li> </ul>	<p><b>Our next steps...</b></p> <p>To strengthen communication of the benefits we will:</p>
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## 5. Ensure the change is ready to be implemented and sustained

If the improvement teams have not completed the testing, or PDSA cycles, associated with the change, then it is too early to consider full implementation and sustainability. Similarly, if the change is perceived as an additional duty or task, then the improvement is likely to not be integrated into the clinic’s culture nor become ‘the way things get done’. Some practices/clinics have attempted to ‘fast-track’ an improvement initiative by moving to implementation without fully testing or measuring change ideas. In many cases, they lose time when the improvement effort fails. The cost to the practice/clinic is significant as a history of failed or unsustainable change efforts often impedes future improvement projects.

<ul style="list-style-type: none"> <li><input type="checkbox"/> There is clear evidence that solutions address the root causes of real issues.</li> <li><input type="checkbox"/> The change has been successfully tested in a variety of conditions.</li> <li><input type="checkbox"/> The change will not benefit from any further testing or modification.</li> <li><input type="checkbox"/> The project measures are demonstrating real improvement.</li> <li><input type="checkbox"/> Improvement targets or goals have been achieved or are close to being achieved.</li> <li><input type="checkbox"/> The changes have improved efficiency or made jobs easier (reduced waste, avoided duplication, made things run smoother).</li> </ul>	<p><b>Our next steps...</b></p> <p>To ensure the change is ready to be implemented and sustained we will:</p>
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## 6. Embed the improved process

A barrier to sustainability is the failure to clearly link the goal of the improvement project to the strategy or vision of the organization. Without doing so, it is often difficult to change the culture or understand why valuable resources are being allocated to specific improvement projects. An improvement is much more likely to be sustained if it is well integrated into the culture and core processes of a practice/clinic and if it is flexible and able to respond to changes in the environment. In order to do so, the systems supporting the improvement need to be adapted so that they are compatible with the change.

<ul style="list-style-type: none"> <li><input type="checkbox"/> The improvement project is important to the continued success of the practice/clinic.</li> <li><input type="checkbox"/> The necessary facilities, supplies, and equipment are in place to support the new process.</li> <li><input type="checkbox"/> Training has been provided to staff and providers about the improved processes and changes so they know what is expected of them.</li> <li><input type="checkbox"/> Job descriptions have been updated to reflect the altered roles.</li> <li><input type="checkbox"/> Policies and procedures have been updated or created to reflect the new processes.</li> <li><input type="checkbox"/> The new processes are now “standard work” and supported with medical directives, forms, checklists, reminders (visual cues), and technology.</li> <li><input type="checkbox"/> The team has a mechanism for discussing, examining and adapting the improved processes in response to internal and external changes.</li> </ul>	<p><b>Our next steps...</b></p> <p>To embed the improved process and make it the new standard we will:</p>
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## 7. Build in ongoing measurement

Establishing an ongoing measurement system and a standardized way of communicating results reinforces that the change is important to the practice. A mechanism for looking at a few key and relatively easy to extract measures allows teams to see if there is slippage and to take action to resolve any issues. It also allows teams to celebrate when an indicator has stayed at an improved level over time. Future open capacity and third next available are two key measures for monitoring sustainability efforts around advanced access.

	<b>Our next steps...</b>
<ul style="list-style-type: none"><li><input type="checkbox"/> There are internal skills and a culture for continuous improvement.</li><li><input type="checkbox"/> A refined set of measures to track on an ongoing basis is identified. (If the team is sustaining improvements in access, track future open capacity and third next available appointment.)</li><li><input type="checkbox"/> A group or person has been assigned responsibility to extract the data for this refined set of measures.</li><li><input type="checkbox"/> There is a structure or mechanism in place for reviewing the measures on a regular basis.</li><li><input type="checkbox"/> There is a plan for communicating performance to front-line staff, providers, and leaders within the practice.</li><li><input type="checkbox"/> There is a plan to outline what we will do to reflect on our progress – to celebrate continued success and to respond if our measures start to slip.</li><li><input type="checkbox"/> Celebrate accomplishments and aspire to take performance to a new level.</li></ul>	To strengthen our ability for ongoing measurement we will: