

# Sustainability Planner – Advanced Access and Efficiency for Primary Care

### 1. About the Sustainability Planner

An important part of the Learning Community improvement journey is planning how you are going to sustain your improvement efforts. 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 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. "Sustainability means maintaining the improvement...definitely not going back"

~ NHS Modernization Agency, 2002

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.



## 2. 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:

## 3. 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
□ A provider champion (physician and/or NP), has been identified and has	To strengthen leadership engagement, we
agreed to participate in the improvement efforts.	will:
□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).	

### 4. 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.

	Our next steps
<ul> <li>Staff members were provided with information about the purpose and significance of the improvement initiative.</li> <li>Front-line staff helped to identify issues from their perspective.</li> <li>Front-line staff members have been involved in developing solutions.</li> <li>The 'right' (most appropriate or qualified) staff are involved in the improvement project.</li> <li>Methods to regularly communicate with staff other than those directly working on the improvement team have been identified and used.</li> <li>A plan to address future skills and training needs has been created.</li> </ul>	To strengthen the involvement of front- line staff, we will:

## 5. 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?'.

	Our next steps
<ul> <li>Unique and targeted 'what's in it for me' characteristics have been communicated to different stakeholders.</li> <li>Baseline data and ongoing real-time data for the measures is being collected regularly, tracked on a run chart and shared.</li> <li>Stories, updates at staff meetings and a visual display of data have been shared.</li> <li>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>	To strengthen communication of the benefits we will:

## 6. Ensure the change is ready to be implemented and sustained

It is important to make sure the change is near the final stage of development. 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 unsustained change efforts often impedes future improvement projects.

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	Our next steps
<ul> <li>There is clear evidence that solutions address the root causes of real issues.</li> <li>The change has been successfully tested in a variety of conditions.</li> <li>The change will not benefit from any further testing or modification.</li> <li>The project measures are demonstrating real improvement.</li> <li>Improvement targets or goals have been achieved or are close to being achieved.</li> <li>The changes have improved efficiency or made jobs easier (reduced waste, avoided duplication, made things run smoother).</li> </ul>	To ensure the change is ready to be implemented and sustained we will:
waste, avoided duplication, made things full shoother).	

### 7. 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.

	Our next steps
$\Box$ The improvement project is important to the continued success of the	To embed the improved process and make
practice/clinic.	it the new standard we will:
□The necessary facilities, supplies, and equipment are in place to support	
the new process.	
□Training has been provided to staff and providers about the improved	
processes and changes so they know what is expected of them.	
$\Box$ Job descriptions have been updated to reflect the altered roles.	
$\Box$ Policies and procedures have been updated or created to reflect the	
new processes.	
$\Box$ The new processes are now "standard work" and supported with	
medical directives, forms, checklists, reminders (visual cues), and	
technology.	
The team has a mechanism for discussing, examining and adapting the	
improved processes in response to internal and external changes.	

### 8. 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.

Our next steps...

□ There are internal skills and a culture for continuous improvement. □ A refined set of measures to track on an ongoing basis is identified. (If	To strengthen our ability for ongoing measurement we will:
the team is sustaining improvements in access, track future open capacity	
and third next available appointment.)	
$\Box$ A group or person has been assigned responsibility to extract the data	
for this refined set of measures.	
□There is a structure or mechanism in place for reviewing the measures on a regular basis.	
□There is a plan for communicating performance to front-line staff, providers, and leaders within the practice.	
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.	
Celebrate accomplishments and aspire to take performance to a new	
level.	