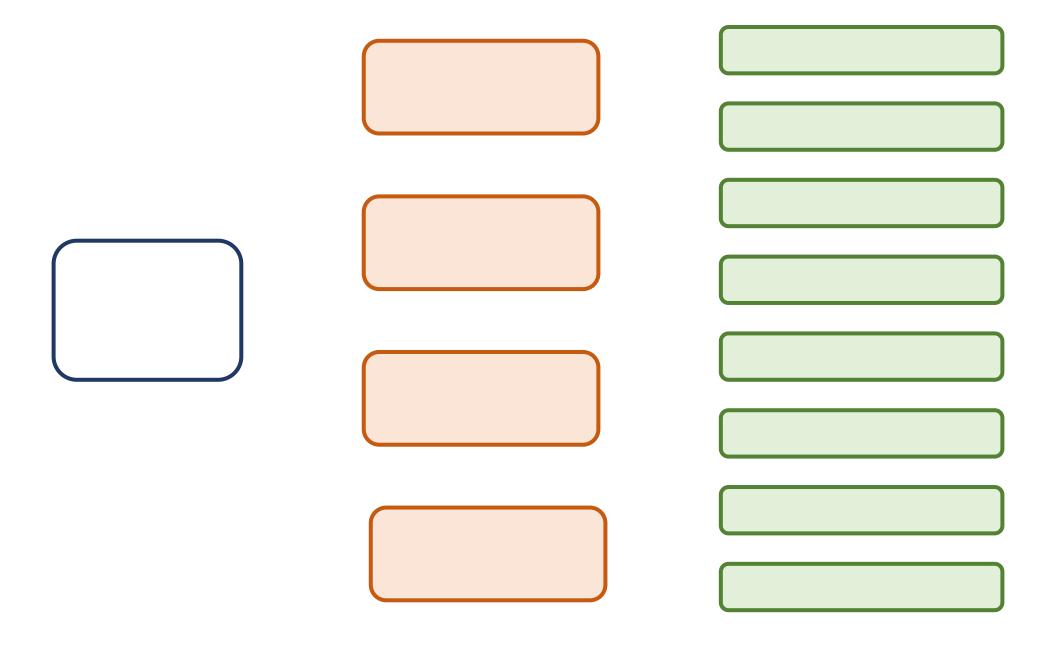


Session 2: Sustainability Activity

- Identify an innovation / quality improvement project in your organization
- Characterize the key drivers for your project
- Assess sustainability factors for your project
- Select the methods you plan to use for dissemination

Key Drivers



Sustainability Checklist

Engaged leaders		
A provider champion (physician and/or NP), has been identified and has agreed to participate in the improvement efforts.	□ No	□ Yes
The provider champion has devoted time to dialogue with and participate as a member of the improvement team.	□ No	□ Yes
If applicable, your business manager or executive director has agreed to support the improvement efforts.	□ No	☐ Yes
Leaders have the skills/knowledge required to support successful implementation.	□ No	☐ Yes
Leaders have removed barriers or threats to facilitate process improvement.	□ No	☐ Yes
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.	□ No	☐ Yes
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).	□ No	☐ Yes
Involved & Supportive Front Line Staff		
Staff members were provided with information about the purpose and significance of the improvement initiative.	□ No	☐ Yes
Front-line staff helped to identify issues from their perspective.	□ No	☐ Yes
Front-line staff members have been involved in developing solutions.	□ No	☐ Yes
The 'right' (most appropriate or qualified) staff are involved in the improvement project.	□ No	☐ Yes
Methods to regularly communicate with staff other than those directly working on the improvement team have been identified and used.	□ No	☐ Yes
A plan to address future skills and training needs has been created.	□ No	☐ Yes
Benefits of Improved Process Communicated		
Unique and targeted 'what's in it for me' characteristics have been communicated to different stakeholders.	□ No	☐ Yes
Baseline data and ongoing real-time data for the measures is being collected regularly, tracked on a run chart and shared.	□ No	□ Yes
Stories, updates at staff meetings and a visual display of data have been shared.	□ No	☐ Yes
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.	□No	□ Yes

Change is Ready to Be Implemented and Sustained		
There is clear evidence that solutions address the root causes of real issues.	□ No	☐ Yes
The change has been successfully tested in a variety of conditions.	□ No	☐ Yes
The change will not benefit from any further testing or modification.	□ No	☐ Yes
The project measures are demonstrating real improvement.	□ No	☐ Yes
Improvement targets or goals have been achieved or are close to being achieved.	□ No	☐ Yes
The changes have improved efficiency or made jobs easier (reduced waste, avoided duplication, made things run smoother).	□ No	☐ Yes
Improved Process is Embedded		
The improvement project is important to the continued success of the practice/clinic.	□ No	☐ Yes
The necessary facilities, supplies, and equipment are in place to support the new process.	□ No	☐ Yes
Training has been provided to staff and providers about the improved processes and changes so they know what is expected of them.	□ No	□ Yes
Job descriptions have been updated to reflect the altered roles.	□ No	☐ Yes
Policies and procedures have been updated or created to reflect the new processes.	□ No	☐ Yes
The new processes are now "standard work" and supported with medical directives, forms, checklists, reminders (visual cues), and technology.	□ No	☐ Yes
The team has a mechanism for discussing, examining and adapting the improved processes in response to internal and external changes.	□ No	☐ Yes
Ongoing Measurement is Built-In		
There are internal skills and a culture for continuous improvement.	□ No	☐ Yes
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.)	□ No	☐ Yes
A group or person has been assigned responsibility to extract the data for this refined set of measures.	□ No	☐ Yes
There is a structure or mechanism in place for reviewing the measures on a regular basis.	□ No	☐ Yes
There is a plan for communicating performance to front-line staff, providers, and leaders within the practice.	□ No	☐ Yes
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.	□ No	□ Yes
Celebrate accomplishments and aspire to take performance to a new level.	□ No	☐ Yes

Dissemination Checklist

DISSEMINATION
☐ Newsletter
☐ Website / Blog
☐ Social Media
☐ Press Release
☐ Brochure / Fact Sheet
☐ Conference / Workshop
☐ Journal / Magazine / Book
☐ Technical Report
☐ Radio / TV Interview
☐ Professional Organizations
☐ Informal Networks
☐ Other