



# Project to long term sustainable improvement

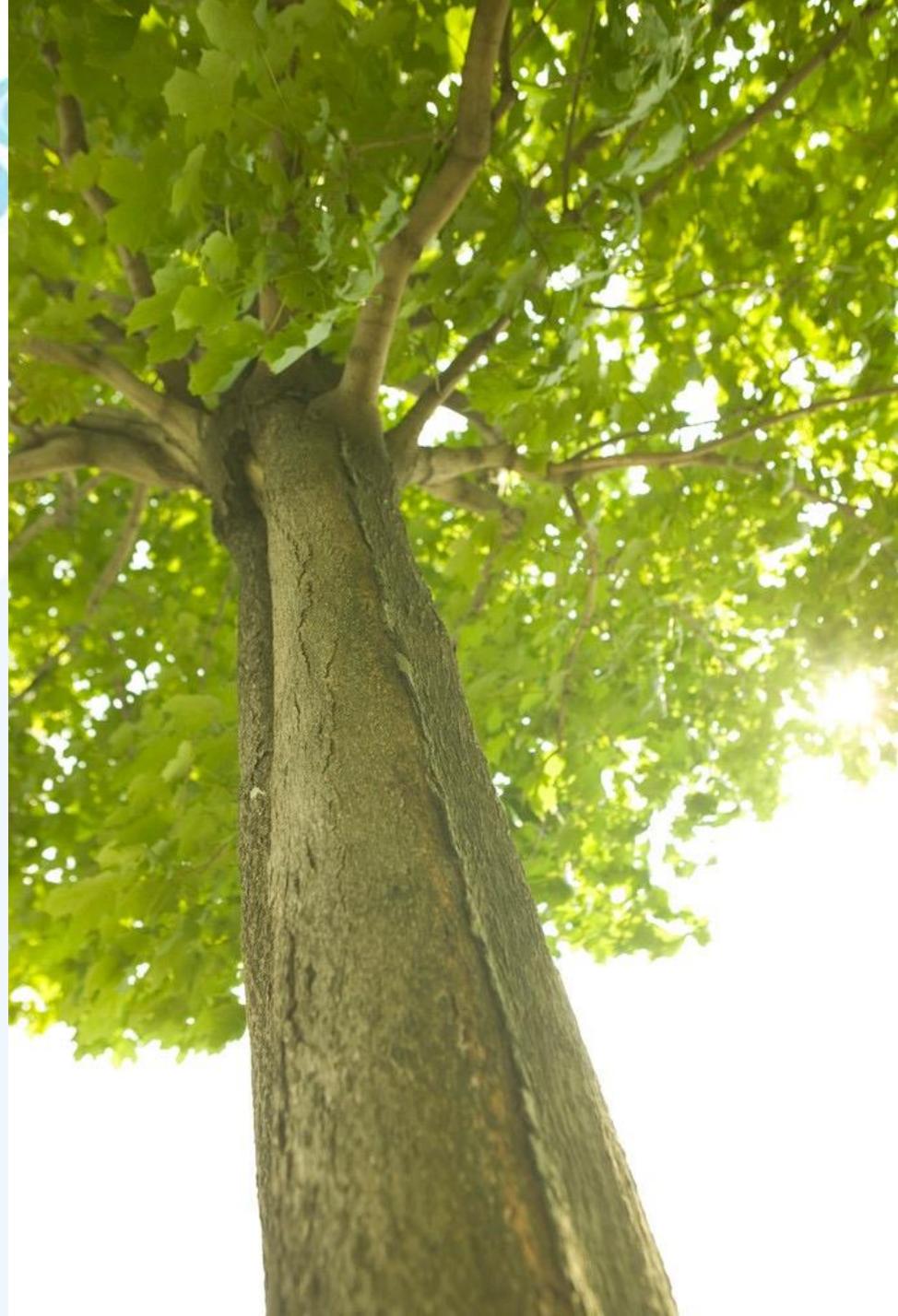
## Carolyn Robertson





## Sustainability

*‘Holding the gains and evolving as required, definitely not going back to the old way’*





# What percentage of improvement programmes fail?

**10%**

**30%**

**50%**

**70%**



## Are these frustrations unique to the NHS?

Price Waterhouse Coopers surveyed 200 leading companies (Global)

They ran a total of 10,640 projects per year

**Only 2.5% (254) delivered the desired business benefits**



The most successful organisations are those that can implement and sustain effective improvement initiatives leading to increased quality and patient experience at lower cost.

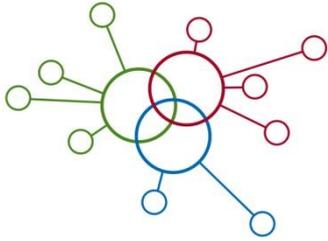
# Key Learning from UK Improvement Projects

- Sustainability is the result of effective preparation and implementation.
- Sustainability will not ‘**just happen**’; you need to plan for it.

*“Improvement programmes will only succeed if the same effort is put into their sustainability as their launch”.*

Health Service Management Centre 2002



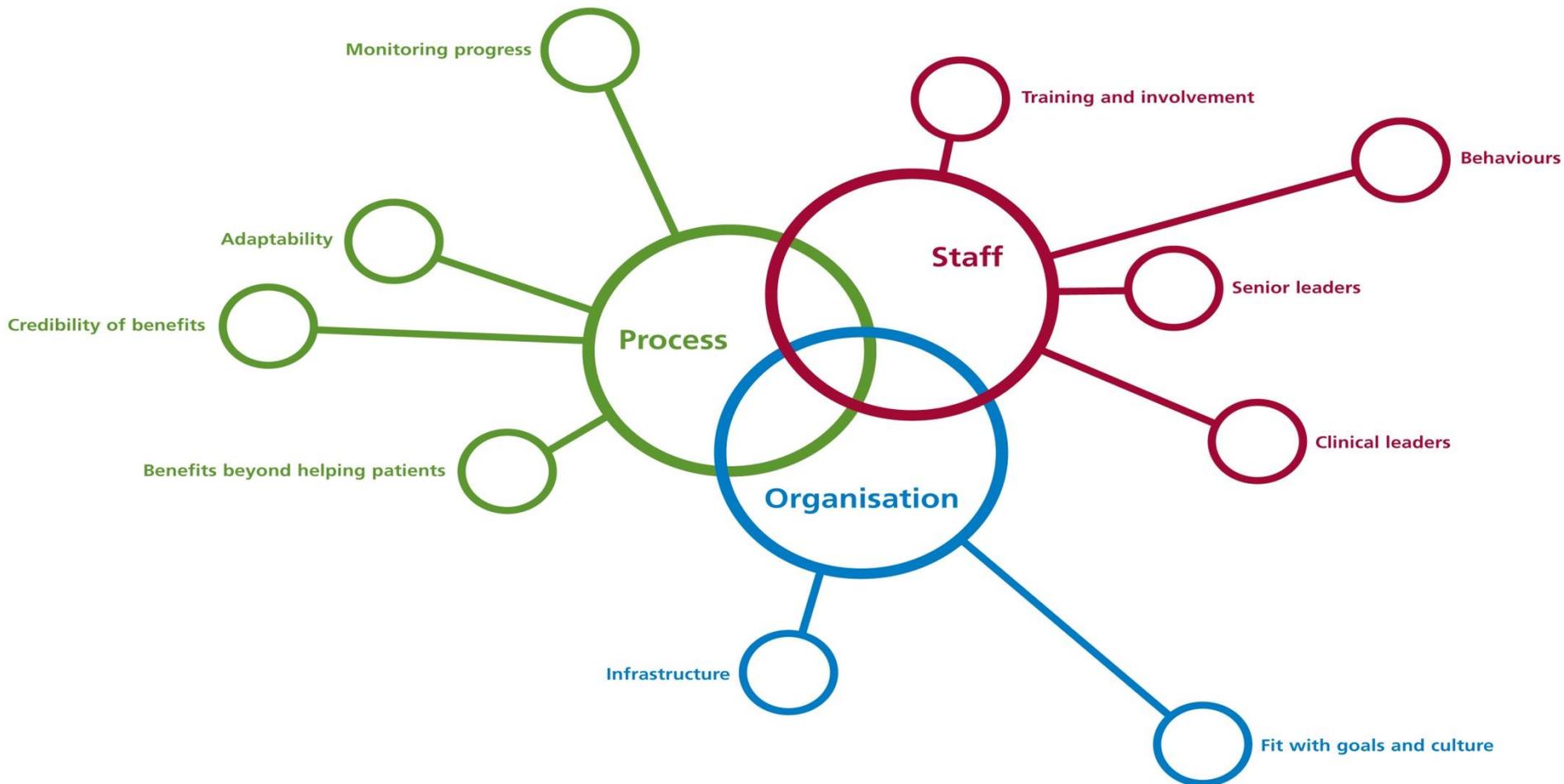


**“All models are wrong  
but some are useful”**

W Deming



# The NHS Sustainability Model

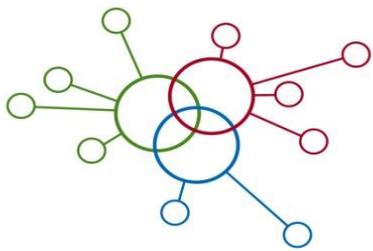


The ***NHS Sustainability Model*** is an easy-to-use tool which aims to help NHS improvement teams:

- Self-assess against ten key criterion for sustaining change
- Recognise and understand key barriers for sustainability, relating to their specific local context
- Plan for sustainability of improvement

# Using the Model

- Designed for use at the level of a specific planned, or ongoing improvement project
- Can be used as a 'diagnostic' for the project lead
- Is much better if multiple members of the team use it as well as other stakeholders with an interest in the project
- The score is useful, the insight and ensuing conversation from the whole team scores is extremely valuable



# How to use the Model

- Identify the factor level best describing your situation.
- Do this for each factor
- Add scores across all 10 factors
- Look at the total score

## Process

Home

Next

### Q1.) Benefits beyond helping patients

In addition to helping patients, are there other benefits? For example:

- Does the change reduce waste or avoid duplication?
- Will it make things run more smoothly?
- Will staff notice a difference in their daily working lives?

We can demonstrate that the change has a wide range of benefits beyond helping patients, for example by reducing waste, creating efficiency or making peoples jobs easier.



We can demonstrate that the change has some benefits beyond helping patients such as reducing waste and making jobs easier, but not a wide range.



We can demonstrate that the change has one or two benefits beyond helping patients



The benefits that we have identified are only directly related to helping patients. We have not identified any other benefits that this initiative could bring.





# The model in practice - 58.8





# Areas to focus on

- Infrastructures
- Senior leadership
- Effectiveness of the system to monitor progress

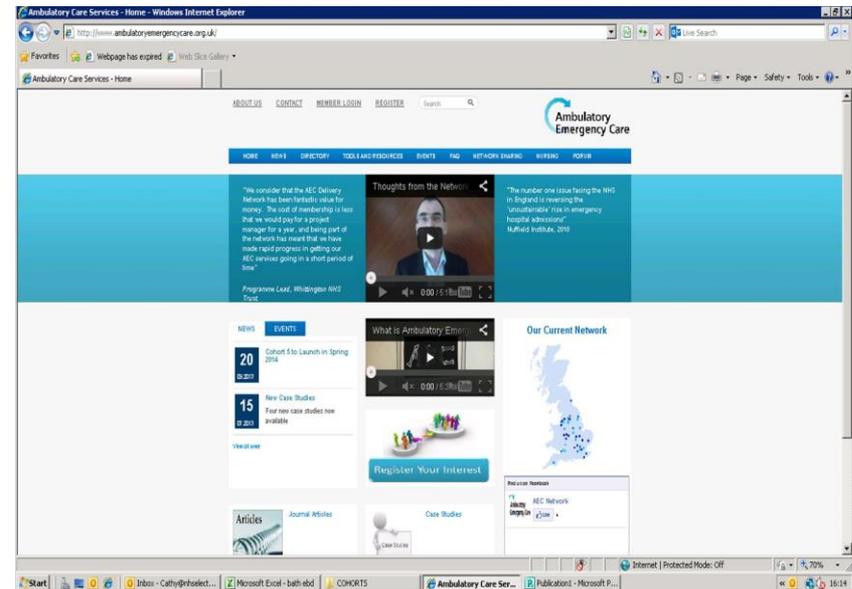
# AN Other Hospital - Action Plan

Actions		By Whom	By When
<b>Clinical Leadership</b>			
1	To identify Clinical Lead for ACC	FTP/PS	1/3/12
2	Agreement with Clinical Lead for Improvement Plan	FTP/Clinical Lead	1/4/12
3	Involvement of Clinical Lead in team meetings	FTP/Clinical Lead	1/4/12
4	Review and audit of cases seen by ACC	FTP/Clinical Lead	1/4/12
<b>Infrastructure</b>			
1	ACC manager to arrange and complete 1-1's with all staff & agree objectives.	FTP	19/2/12
2	To undertake experienced based design for staff as well as patients in ACC.	FTP	1/4/12
3	Review of Job Descriptions for staff members.	FTP/SS	19/4/12
4	Clarification of team roles and responsibilities, communication to staff	FTP/SS	27/4/12
5	Set up performance ('Know how we are doing') dashboard.	FTP	01/2/12 Complete
6	'Deep Dive' Rapid improvement event for all ACC staff (inc' CCT).	DT	27/4/2012
7	Set up formal system of reporting/predicting capacity and demand	FTP/PF	23/3/12
8	Formal meeting/project review to strengthen the transition from project to operations.	KW	19/3/12
9	Development of training programme for staff.	FTP/SS	27/4/12
<b>Adaptability of processes</b>			
1	Align aims and objectives of ACC with goals and vision of the organisation.	FTP/SS/KW	26/3/12
2	Encourage staff to feedback e.g. one positive/negative case to be discussed at each meeting.	FTP	At next team meeting.
5	Rotate staff within dept', e.g ACC & CCT to achieve integration for one team.	FTP/CT/LJ	09/4/12
4	Rotate staff roles with interface departments e.g. clinical navigator/harptree coordinator	FTP/SS	28/5/12



# Infrastructures

Website repository  
Case study presentations  
Workshops  
Virtual tours  
Network connections  
Experienced team





# Senior Leadership

Exec briefings

Project set up requirement

Invite to events

Offer verbal updates

Aligning the programme  
with National aims e.g.

Future hospitals





# Effectiveness of the system to monitor progress

Measurement expertise

Developing measurement tools e.g. ROI or EBD

Standards measures

Guidance on metrics

Lobbying to create a standard data definition and dataset

Coaching on the 7 steps to measurement

# 7 Steps to Measurement

1 Decide aim

2 Choose measures

3 Define measures

6 Review  
measures

7 Repeat  
steps  
4-6

4 Collect  
data

5 Analyse &  
present

**Challenge 1: Do we  
know our aim?**

**Challenge 2: Do we have  
the right measures?**

**Challenges 3 & 4: Do we  
focus on the right  
patients?**

**Tip: Get specialist help  
to prepare your data**



## Individually complete the questionnaire

Now **you** are going to assess your project; remember this is from your personal perspective:

1. Put your name and organisation on the top of the assessment sheet.
2. For each factor tick the sentence that most closely resembles your view
3. We will collect your sheets at the end of the session and produce a short report which includes your assessment and some advice if needed.

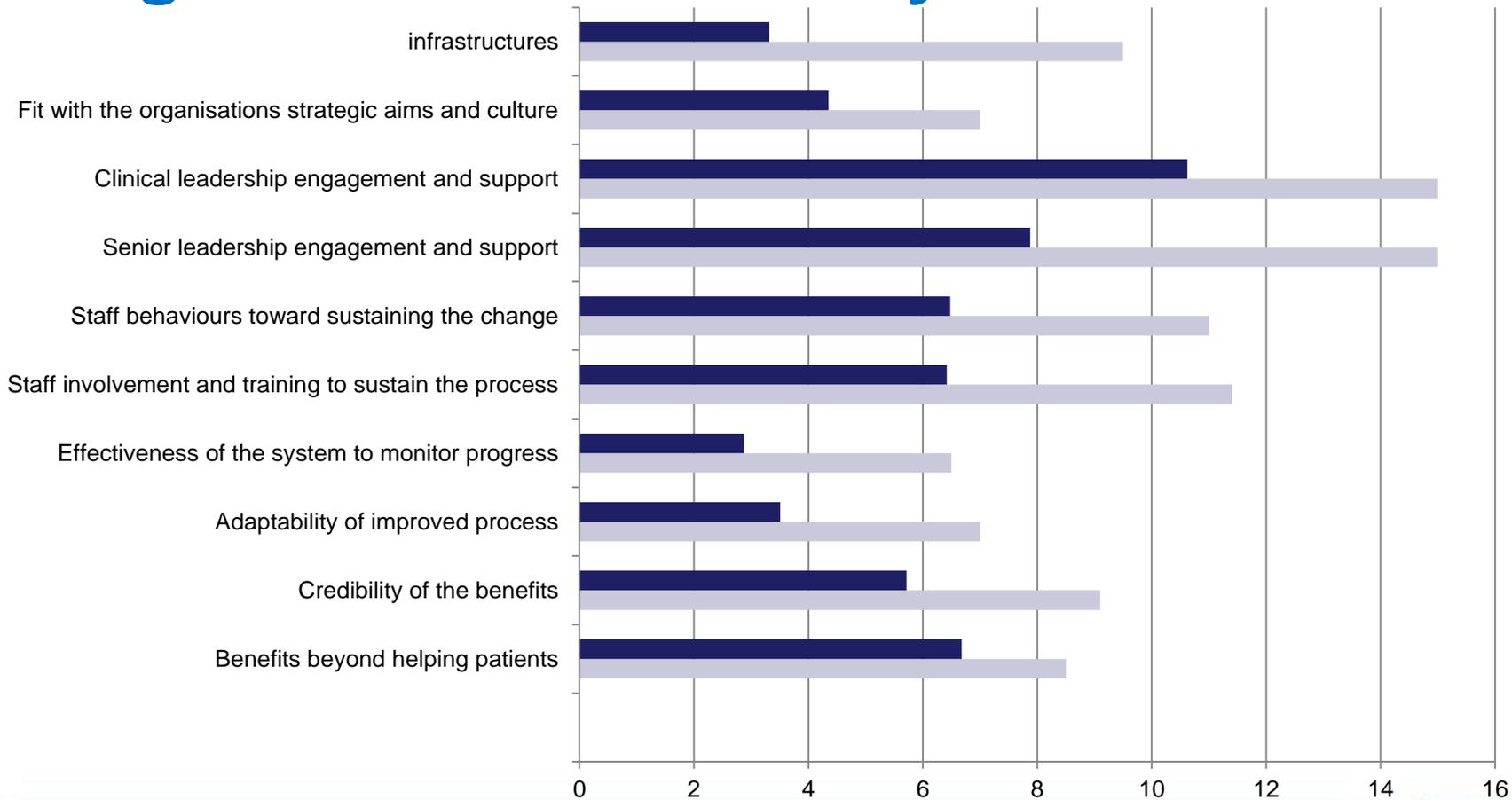


# Large Scale Application

	Max Score	Cohort 1	Cohort 2	Cohort 3	Cohort 4	Cohort 5	Cohort 6	Average Score
<b>Process</b>								
Benefits beyond helping patients	8.50	6.87	4.98	6.49	6.10	5.17	6.76	6.06
Credibility of the benefits	9.10	6.16	5.14	5.84	5.42	5.11	6.62	5.72
Adaptability of improved process	7.00	3.22	3.36	3.94	3.90	3.40	4.45	3.71
Effectiveness of the system to monitor progress	6.50	2.80	2.80	3.04	2.52	2.71	4.29	3.03
<b>Staff</b>								
Staff involvement and training to sustain the process	11.40	6.72	6.51	6.03	6.84	6.58	8.31	6.83
Staff behaviours toward sustaining the change	11.00	7.22	6.17	6.04	6.33	6.92	8.12	6.80
Senior leadership engagement and support	15.00	9.34	7.57	6.72	8.24	8.15	9.14	8.19
Clinical leadership engagement and support	15.00	9.32	12.74	9.81	9.69	9.73	11.47	10.46
<b>Organisation</b>								
Fit with the organisations strategic aims and culture	7.00	4.99	3.15	4.92	3.93	4.03	4.52	4.26
infrastructures	9.50	3.51	2.82	3.63	3.73	3.74	4.84	3.71
<b>Totals</b>	<b>100.00</b>	<b>60.15</b>	<b>55.24</b>	<b>56.46</b>	<b>56.70</b>	<b>55.54</b>	<b>68.52</b>	<b>58.77</b>



# Programme Sustainability – 58.77



# Conclusion

- Include sustainability assessments as part of your project set up
- Ask all members of the team and other stakeholders to complete the questionnaire
- A report based on the results will be created
- Discuss the results openly at your project meeting
- If you have a low score strengthen weak areas before starting the project
- Select the 3 areas where there is the greatest gap between the actual and potential score
- Use the sustainability guide to help formulate your action plan
- Reassess midway through your project