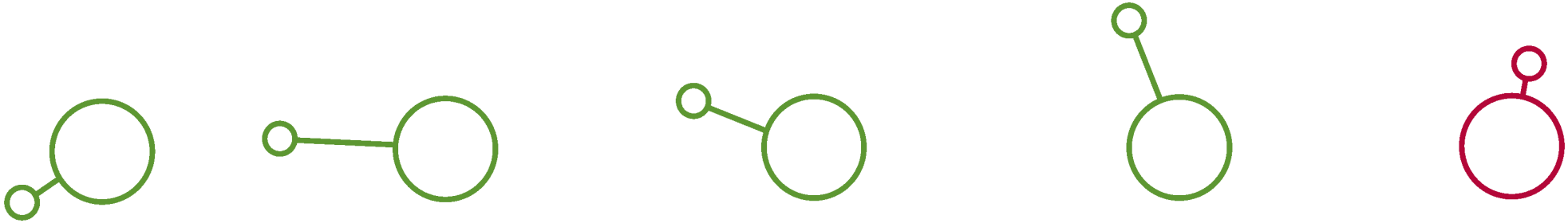
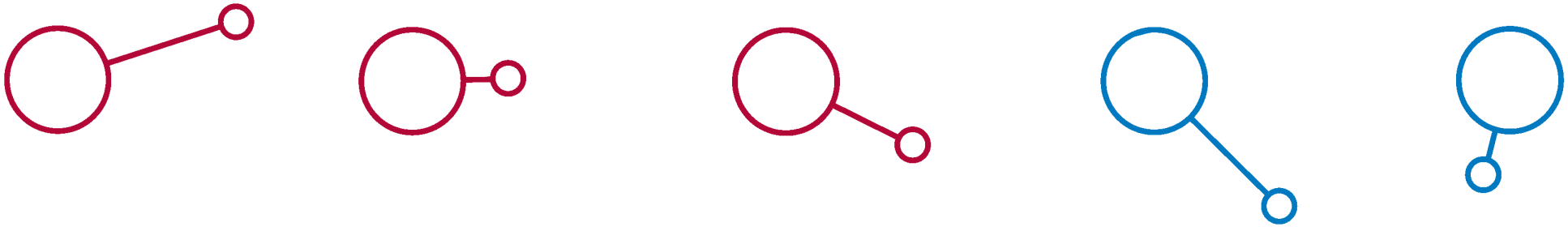
NHS
Institute for Innovation and Improvement

Sustainability

Model and Guide





NHS Sustain**ability** Model

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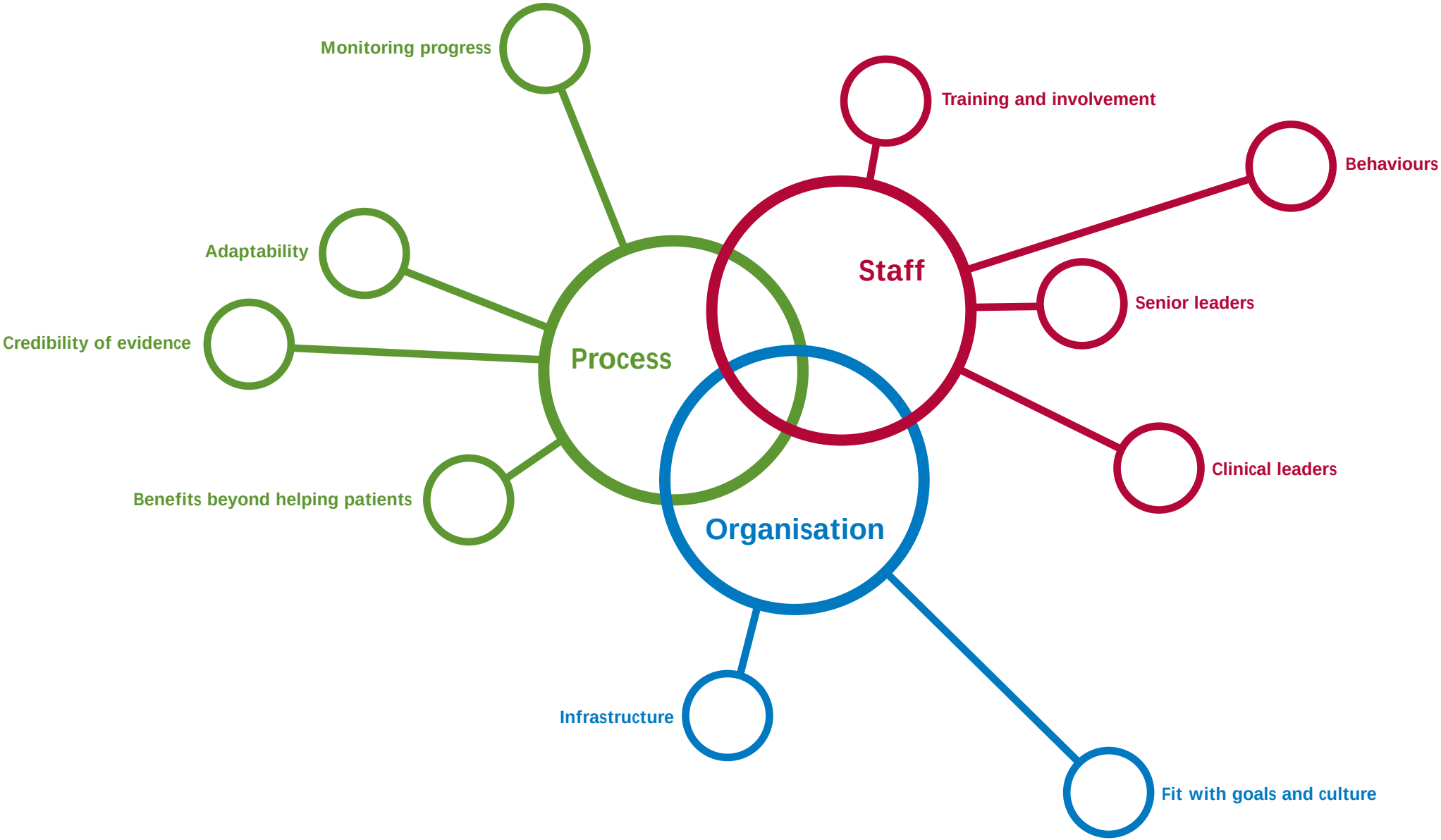
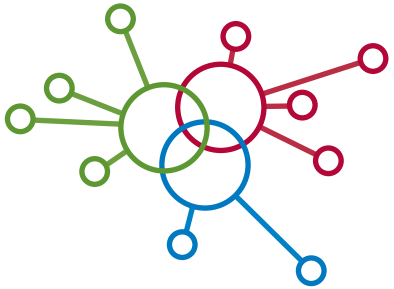


Sustainability

Introduction

Quality improvement often takes longer than expected to take hold and longer still to become widely and firmly established within an organisation
Ham et al, 2002



One of the primary reasons why quality improvement is difficult to integrate into an organisation is that many of the changes that are put into place fail to survive. Within the literature there is evidence of a high failure rate, up to 70%, of organisational change (Daft and Noe, 2000. Beer and Nohria, 2001).

In an attempt to substantially increase the sustainability of improvements for patients and healthcare services, this NHS Sustainability Model and Guide has been developed for use by individuals and teams who are involved in local improvement initiatives.

The Sustainability **Model** is a diagnostic tool that is used to **predict the likelihood** of sustainability for your improvement project.
The Sustainability **Guide** provides practical advice on how you might **increase the likelihood** of sustainability for your improvement initiative.

In undertaking this work, we found that it was important to be clear about what sustainability means to the NHS.

A short working definition of sustainability can be described as 'when new ways of working and improved outcomes become the norm'. A more detailed description, which includes the notion of 'steady state', in addition to promoting the desirability of continued improvement, is as follows:
'Not only have the process and outcome changed, but the thinking and attitudes behind them are fundamentally altered and the systems surrounding them are transformed as well. In other words the change has become an integrated or mainstream way of working rather than something 'added on'. As a result, when you look at the process or outcome one year from now or longer; you can see that at a minimum it has not reverted to the old way or old level of performance. Further, it has been able to withstand challenge and variation; it has evolved alongside other changes and perhaps has continued to improve over time. Sustainability means holding the gains and evolving as required - definitely not going back'.
(NHS Institute for Innovation and Improvement 2005)

Development of the NHS Sustainability Model and Guide

The **NHS Sustainability Model** consists of ten factors realting too process, staff and organisational issues, that play a very important role in sustaining change in healthcare. The Model has been developed with and for the NHS using a co-production approach. Contributors include: front line teams, improvement experts, senior administrative and clinical leaders from within the NHS and people with specific expertise in the subject area from academia and other industries. The development of the Model is based on the premise that the changes individuals and teams wish to make fulfil the fundamental principle of improving the patient experience of health services. Another important impact that can be gained by using the Model is the effective achievement of change which creates a platform for continual improvement. By holding the gains, resources - including financial and most importantly human resources - are effectively employed rather than being wasted because processes that were improved have reverted to the old way or old level of performance.

The **NHS Sustainability Guide** was developed as a direct result of request from NHS staff who were using the Model.

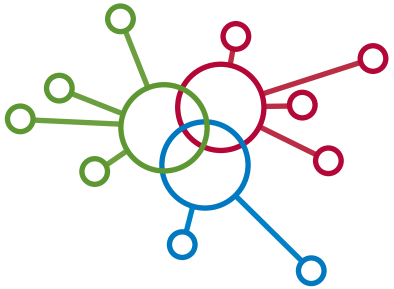
'The problem is confirmed but I am not sure what to do about it'
Project director

'I now have an indication of where I should focus some effort, but where do I get further advice?'
Service improvement manager

The structure of the Guide mirrors the ten factors identified within the NHS Sustainability Model. In doing so, it creates a comprehensive package consisting of a diagnostic model and guidance for sustainability. Information within the Guide was gathered from a variety of sources. These include the available literature on change and sustainability, discussions with experts within and outside the NHS and small research studies commissioned to explore specific learning from ongoing improvement programmes within the NHS.

We have provide what we hope will be helpful, practical advice relating to each of the ten sustainability factors. We recognise that this is not exhaustive and that other sources of useful information do exist. If you find something that works really well for you and is not in the Guide, we would be happy to hear about it. Contact us at sustainability@institute.nhs.uk

How to use the NHS Sustainability Model



The goal for creating the NHS Sustainability Model was to develop an easy-to-use tool to help NHS improvement teams:

- self-assess against a number of key criterion for sustaining change
- recognise and understand key barriers for sustainability, relating to their specific local context
- identify strengths in sustaining improvement
- plan for sustainability of improvement efforts
- monitor progress over time.

The Model has been designed for use at the level of a specific planned or ongoing improvement initiative or project. For example: within a GP surgery to create advanced access for patients; within a health community to develop a systematic approach to care for patients with diabetes, within critical care environments to create safer and more effective care through the development of care bundles; or within a healthcare organisation to redesign and extend roles. These are just a few examples to guide you.

The Model has **not** been designed to assess whether a department, whole organisation or health community is likely to sustain change in general.

The Sustainability Model can be used by individuals or teams. For example, a project lead may wish to undertake a sustainability assessment based on their individual thoughts. This will be useful in terms of providing an overview of the likelihood of sustainability. However, we have found that a much richer picture can be gained if more members of the team, or those involved in the improvement initiative, complete the diagnostic Model. In our experience, we have found that while one person might score a Sustainability Factor highly, another has a completely different perspective. It is these different perspectives that are important to understand. This is particularly significant if the improvement initiative spans a whole system, for example; an acute trust, GP practice and nursing home. In addition to providing an overall 'sustainability score', the act of completing the Model can lead to useful discussions about your improvement initiative.

We believe that the best way to use the Sustainability Model is at several different points in time:

- at the first planning stage, just as you are setting up your improvement project. This will enable you to identify and improve areas that require strengthening right from the start
- around the time of initial pilot testing so that you can go into the full implementation phase with confidence
- a few weeks after the improvement has been implemented to ensure an optimal position for sustainability and continual improvement.

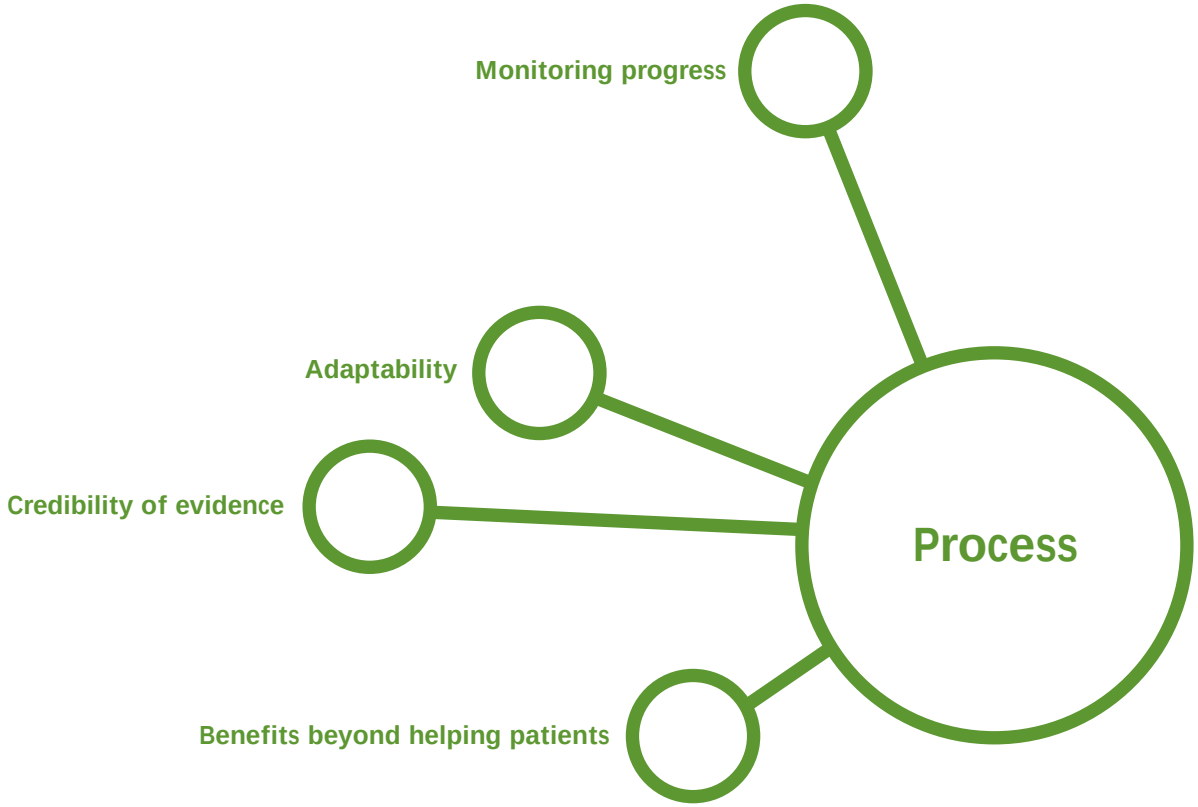
Don't feel restricted by this though; you can in fact use the Model at any time during your improvement initiative.

Directions

1. Read through each section of the Model.
2. Select the level of each factor that best describes your local project. Remember these factors may not exactly describe your situation.
3. Place a tick next to the description that best describes your local project.
4. When you have worked through all of the factors and identified a factor level for each, go to the 'Master Score System' where you will find the numerical values for each factor level. Calculate the scores and enter these onto the assessment panel at the bottom of the pages that you have marked.
5. Add up all of the scores to arrive at an over all sustainability score. (Preliminary evidence suggests a score of 55 or higher offers reason for optimism. Scores lower than this suggests that you need to take some action to increase the likelihood that your improvement initiative will be sustainable).
6. Identify the factors with greatest potential for improvement by plotting the scores. You can either use the bar chart or portal diagram to do this; you choose which method you prefer!
7. **We advise that you start by concentrating on the two or three factors with the greatest potential for improvement. Go to the corresponding sections of the NHS Sustainability Guide, on the CD attached, for some useful information on how you might improve the score for each factor. Feel free to browse through any of the other sections at any time.**

We are continuing to assess the use and impact of the Sustainability Model and Guide. We would be pleased to receive any thoughts or comments that you have for their improvement. Please contact us with any advice or comments at: sustainability@institute.nhs.uk

Sustain**ability**



What can you find in the Sustainability Guide CD?

Benefits beyond helping patients

- Use role/process mapping to illustrate areas of duplication, waste or inefficiency. Get staff to create their own role map that can be updated as roles and processes change
- Assess *'what is going well'* and *'even even better if'* from the perspective of staff and prioritise actions using dot voting
- Think of ways to release more time for staff and engage a wider community in the improvement work
- Support staff by making a plan to manage the transitions from old to new ways of working.

Credibility of the evidence

- Find out how you can effectively identify the benefits of the improvement that you are making
- *'Walk in their shoes'* to experience change from different perspectives
- See tips on gathering and effectively communicating the evidence and benefits of the changed process
- Use seven questions to help create your improvement story.

Adaptability of improved process

- Find out how you can adopt and adapt ideas from others
- Read a short case study about adaption
- Think about aspects of organisational change that might disrupt the progress of your improvement project
- Prepare a succession plan for the future of the process or service.

Effectiveness of the system to monitor progress

- Use measurement and communication to help staff look forward to continual improvement
- Find frameworks to help identify what are the most effective measures to use
- See examples of graphs, bubbles, pictures and quotes
- Learn about segmenting your messages to achieve effective communication

Process

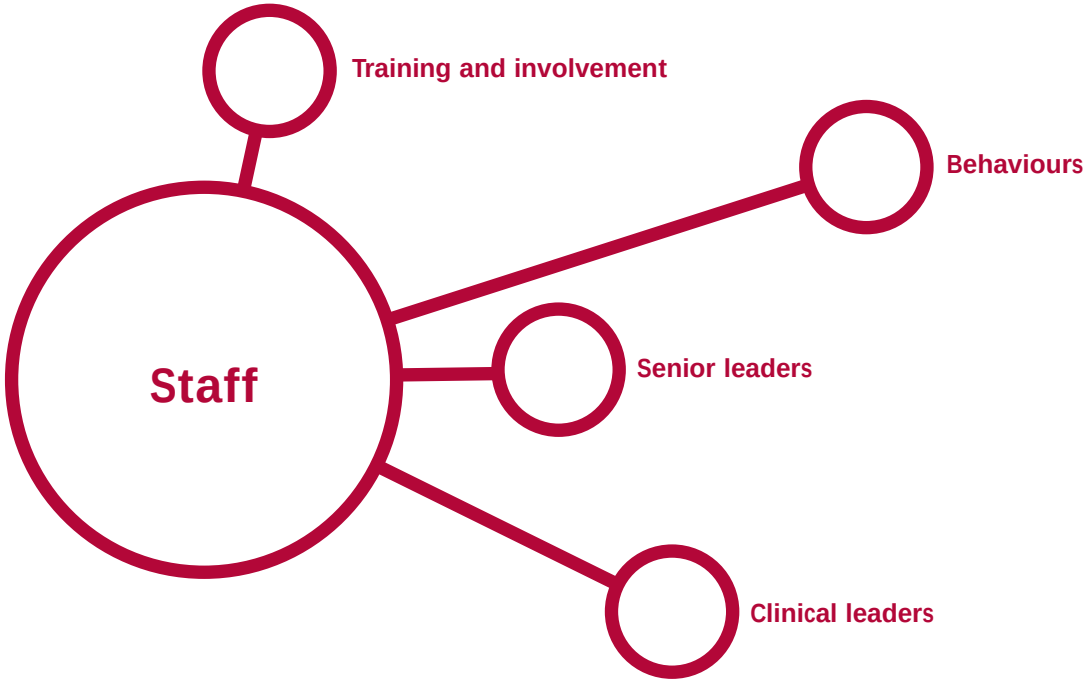
Choose the **factor level** that comes closest to your situation and tick the area to the left of it

Factor description	Identify (✔)	Factor level
Benefits beyond helping patients • In addition to helping patients, are there other benefits? • Does the change reduce waste, duplication and added effort? • Will it make things run more smoothly? • Will staff notice a difference in their daily working lives?	eg ✔	The change improves efficiency and makes jobs easier
		The change improves efficiency but does not make jobs easier
		The change does not improve efficiency but does make jobs easier
		The change neither improves efficiency nor makes jobs easier
Credibility of the evidence • Are benefits to patients, staff and the organisation visible? • Do staff believe in the benefits? • Can all staff describe the benefits clearly? • Is there evidence that this type of change has been achieved elsewhere?		Benefits of the change are immediately obvious, supported by evidence and believed by stakeholders
		Benefits of the change are not immediately obvious, even though they are supported by evidence and believed by stakeholders
		Benefits of the change are not immediately obvious, even though they are supported by evidence. They are not believed by stakeholders
		Benefits of the change are neither immediately obvious, supported by evidence nor believed by stakeholders
Adaptability of improved process • Can the process overcome internal pressures and continually improve? • Does the change continue to meet ongoing needs effectively? • Does the change rely on an individual or group of people, technology, finance etc to keep it going? • Can it keep going when these are removed?		The process can be adapted to other organisational changes and there is a system for continually improving the process
		The process can be adapted to other organisational changes but there is no system for continually improving the process
		The process is not able to adapt to other organisational changes but there is a system for continually improving the process
		The process is not able to adapt to other organisational changes and there is no system for continually improving the process
Effectiveness of the system to monitor progress • Does the change require special monitoring systems to identify improvement? • Is this data already collected and is it easily accessible? • Is there a feedback system to reinforce benefits and progress and initiate action? • Are the results of the change communicated to patients, staff, the organisation and the wider NHS?		There is a system in place to identify evidence of progress, monitor progress, act on it and communicate results.
		There is a system in place to identify evidence of progress and act on it, but the results are not communicated
		There is a system in place to identify evidence and monitor progress. The results are communicated but no one acts on them
		There is no system in place to identify evidence of progress or to monitor progress nor act on it or communicate it

Identify your factor level score by going to the Process master score system at the back of this document

Process total score		Date:

Sustainability



What can you find in the Sustainability Guide CD?

Staff involvement and training to sustain the process

- Learn how to recognise the characteristics displayed when staff feel lack of involvement
- Read tips on creating a culture of involvement
- Use the Six Thinking Hats for maximum involvement during decision making
- Read case studies from NHS organisations.

Staff behaviours toward sustaining the change

- Find out about key points that affect staff involvement
- Understand a range of possible concerns from staff
- Explore a range of steps that you can take to reduce those concerns
- See links to other support documentation.

Senior leadership engagement

- Enable leaders to be involved and updated
- Think about the most appropriate communication mechanisms for leaders
- Formulate a plan to raise awareness of the improvement work with senior leaders
- Identify specific roles for leadership involvement.

Clinical leadership engagement

- Understand the clinician's perspective
- Use the clinical engagement continuum as a tool
- Identify factors to support clinical engagement at a local level
- Find out how to enlist support.

Staff

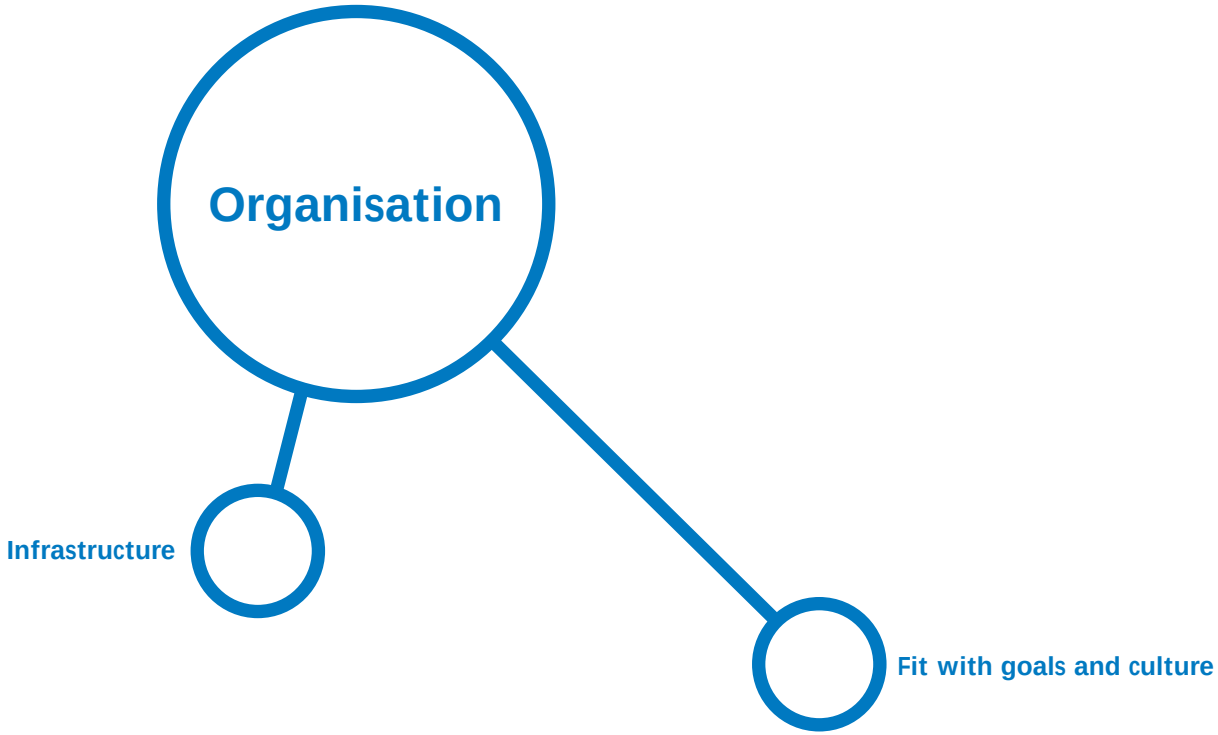
Choose the **factor level** that comes closest to your situation and tick the area to the left of it

Factor description	Identify (✔)	Factor level
Staff involvement and training to sustain the process • Do staff play a part in innovation, design and implementation of change? • Have they used their ideas to inform the change process from the very beginning? • Is there a training and develeopment infrastructure to identify gaps in skills and knowledge and are staff educated and trained to take change forward?		Staff have been involved from the beginning of the change and adequately trained to sustain the improved process
		Staff have been involved from the beginning of the change but not adequately trained to sustain the improved process
	eg ✔	Staff have not been involved from the beginning of the change but they have been adequately trained to sustain the improved process
		Staff have neither been involved from the beginning nor adequately trained to sustain the improved process
Staff behaviours toward sustaining the change • Are staff encouraged and able to express their ideas and is their input taken on board? • Are staff able to run small-scale tests, e.g. Plan, Do, Study, Act, (PDSA cycles) based on their ideas, to see if additional improvements should be recommended? • Do staff think that the change is a better way of doing things that they want to preserve for the future?		Staff feel empowered as part of the change process and believe the improvement will be sustained
		Staff feel empowered as part of the change process but don't believe the improvement will be sustained
		Staff don't feel empowered by the change process but believe the improvement will be sustained
		Staff don't feel empowered by the change process or believe the improvement will be sustained
Senior leadership engagement • Are the senior leaders trustworthy, influential, respected and believable? • Are they involved in the initiative, do they understand it and do they promote it? • Are they respected by their peers and can they influence others to get on board? • Are they taking personal responsibility and giving time to help ensure the change is sustained?		Organisational leaders take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader.
		Organisational leaders don't take responsibility for efforts to sustain the change process. Staff generally share information with, and seek advice from, the leader
		Organisational leaders take responsibility for efforts to sustain the change process. Staff typically don't share information with, or seek advice from, the leader
		Organisational leaders don't take responsibility for efforts to sustain the change process. Staff typically do not share information with, or seek advice from, the leader
Clinical leadership engagement • Are the clinical leaders trustworthy, influential, respected and believable? • Are they involved in the initiative, do they understand it and do they promote it? • Are they respected by their peers and can they influence others to get on board? • Are they taking personal responsibility and giving time to help ensure the change is sustained?		Clinical leaders take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader
		Clinical leaders don't take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader
		Clinical leaders take responsibility for the efforts to sustain the change process. Staff typically do not share information with, or actively seek advice from, the leader
		Clinical leaders don't take responsibility for efforts to sustain the change process. Staff typically do not share information with, or actively seek advice from, the leader

Identify your factor level score by going to the Staff master score system at the back of this document

Staff total score		Date:

Sustainability



What can you find in the Sustainability Guide CD?

Fit with organisational strategic aims and culture

- Learn about indicators for receptive context
- Embed improvement into the mainstream of the organisations business
- Use a framework to demonstrate the relationship between the improvement and organisational goals and vision
- Read the case study illustrating none alignment of improvement and organisational goals.

Infrastructure for sustainability

- Align roles and job descriptions with the new process.
- Use a table to help develop new procedures reflecting the improvement
- Use a simple cost benefit analysis framework to consider ongoing resource needs for staff and equipment
- Read about the four important questions to ask when developing your communication plan.

Organisation

Choose the **factor level** that comes closest to your situation and tick the area to the left of it

Factor description	Identify (✔)	Factor level
Fit with the organisation's strategic aims and culture • Has the organisation successfully sustained improvement in the past? • Are the goals of the change clear and shared? • Is the improvement aligned with the organistaion's strategic aims and direction? • Is it contributing to the overall organisational aims. • Is change important to the organisation and its leadership? • Does your organisation have a 'can do' culture?		There is a history of successful sustainability and improvement goals are consistent with the organisation's strategic aims
		There is a history of successful sustainability but the improvement and organisations strategic aims are inconsistent
		There is no history of successful sustainability but the improvement goals are consistent with the organisation's strategic aims
	eg ✔	There is no history of successful sustainability and the improvement goals are inconsistent with the organisation's strategic aims
Infrastructure for sustainability • Are there enough staff who are trained and able to work in the new way? • Are there enough facilities and equipment to support the new process? • Are new requirements built into job descriptions? • Are there policies and procedures supporting the new way of working? • Is there a communication system in place?		Staff, facilities and equipment, job descriptions, policies, procedures and communication systems are appropriate for sustaining the improved process
		There is an appropriate level of staff, facilities and equipment, but inadequate job descriptions, policies, procedures and communication systems for sustaining the change
		The levels of staff, facilities and equipment to sustain the change are not appropriate although job descriptions, policies, procedures and communication systems are adequate
		The staff, facilities and equipment, job descriptions, policies and procedures and communication systems are all not appropriate for sustaining the change

Identify your factor level score by going to the Organisation master score system at the back of this document

Organisation total score		
+		
Staff total score		
+		
Process total score		
=		
Sustainability total score		Date:

To calculate your score, use the master score system at the back of this document
Add the **Process**, **Staff** and **Organisation** scores together and place in the **Sustainability total score** box above.
Now go to the bar chart and portal diagram provided at the back of this document and plot your scores.

Sustainability

Sustain**ability** Master score system

Process

Identify the **factor level** you seleceted and fill in the associated **score** in the blank **Process** score system located at the front of this document

Factor description	Score	Factor level
Benefits beyond helping patients • In addition to helping patients, are there other benefits? • Does the change reduce waste, duplication and added effort? • Will it make things run more smoothly? • Will staff notice a difference in their daily working lives?	**8.7**	The change improves efficiency and makes jobs easier
	4.7	The change improves efficiency but does not make jobs easier
	4.0	The change does not improve efficiency but does make jobs easier
	0.0	The change neither improves efficiency nor makes jobs easier
Credibility of the evidence • Are benefits to patients, staff and the organisation visible? • Do staff believe in the benefits? • Can all staff describe the benefits clearly? • Is there evidence that this type of change has been achieved elsewhere?	**9.1**	Benefits of the change are immediately obvious, supported by evidence and believed by stakeholders
	6.3	Benefits of the change are not immediately obvious, even though they are supported by evidence and believed by stakeholders
	3.1	Benefits of the change are not immediately obvious, even though they are supported by evidence. They are not believed by stakeholders
	0.0	Benefits of the change are neither immediately obvious, supported by evidence nor believed by stakeholders
Adaptability of improved process • Can the process overcome internal pressures and continually improve? • Does the change continue to meet ongoing needs effectively? • Does the change rely on an individual or group of people, technology, finance etc to keep it going? • Can it keep going when these are removed?	**7.0**	The process can be adapted to other organisational changes and there is a system for continually improving the process
	3.4	The process can be adapted to other organisational changes but there is no system for continually improving the process
	2.4	The process is not able to adapt to other organisational changes but there is a system for continually improving the process
	0.0	The process is not able to adapt to other organisational changes and there is no system for continually improving the process
Effectiveness of the system to monitor progress • Does the change require special monitoring systems to identify improvement? • Is this data already collected and is it easily accessible? • Is there a feedback system to reinforce benefits and progress and initiate action? • Are the results of the change communicated to patients, staff, the organisation and the wider NHS?	**6.7**	There is a system in place to identify evidence of progress, monitor progress, act on it and communicate results.
	3.3	There is a system in place to identify evidence of progress and act on it, but the results are not communicated
	2.4	There is a system in place to identify evidence and monitor progress. The results are communicated but no one acts on them
	0.0	There is no system in place to identify evidence of progress or to monitor progress nor act on it or communicate it

Sustainability

Staff

Identify the **factor level** you seleceted and fill in the associated **score** in the **Staff** blank score system located at the front of this document

Factor description	Score	Factor level
Staff involvement and training to sustain the process • Do staff play a part in innovation, design and implementation of change? • Have they used their ideas to inform the change process from the very beginning? • Is there a training and develeopment infrastructure to identify gaps in skills and knowledge and are staff educated and trained to take change forward?	**11.5**	Staff have been involved from the beginning of the change and adequately trained to sustain the improved process
	4.9	Staff have been involved from the beginning of the change but not adequately trained to sustain the improved process
	6.3	Staff have not been involved from the beginning of the change but they have been adequately trained to sustain the improved process
	0.0	Staff have neither been involved from the beginning nor adequately trained to sustain the improved process
Staff behaviours toward sustaining the change • Are staff encouraged and able to express their ideas and is their input taken on board? • Are staff able to run small-scale tests, e.g. Plan, Do, Study, Act, (PDSA cycles) based on their ideas, to see if additional improvements should be recommended? • Do staff think that the change is a better way of doing things that they want to preserve for the future?	**11.0**	Staff feel empowered as part of the change process and believe the improvement will be sustained
	5.1	Staff feel empowered as part of the change process but don't believe the improvement will be sustained
	5.1	Staff don't feel empowered by the change process but believe the improvement will be sustained
	0.0	Staff don't feel empowered by the change process or believe the improvement will be sustained
Senior leadership engagement • Are the senior leaders trustworthy, influential, respected and believable? • Are they involved in the initiative, do they understand it and do they promote it? • Are they respected by their peers and can they influence others to get on board? • Are they taking personal responsibility and giving time to help ensure the change is sustained?	**15.0**	Organisational leaders take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader.
	6.2	Organisational leaders don't take responsibility for efforts to sustain the change process. Staff generally share information with, and seek advice from, the leader
	5.7	Organisational leaders take responsibility for efforts to sustain the change process. Staff typically don't share information with, or seek advice from, the leader
	0.0	Organisational leaders don't take responsibility for efforts to sustain the change process. Staff typically do not share information with, or seek advice from, the leader
Clinical leadership engagement • Are the clinical leaders trustworthy, influential, respected and believable? • Are they involved in the initiative, do they understand it and do they promote it? • Are they respected by their peers and can they influence others to get on board? • Are they taking personal responsibility and giving time to help ensure the change is sustained?	**15.0**	Clinical leaders take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader
	6.7	Clinical leaders don't take responsibility for efforts to sustain the change process. Staff generally share information with, and actively seek advice from, the leader
	5.5	Clinical leaders take responsibility for the efforts to sustain the change process. Staff typically do not share information with, or actively seek advice from, the leader
	0.0	Clinical leaders don't take responsibility for efforts to sustain the change process. Staff typically do not share information with, or actively seek advice from, the leader

Organisation

Identify the **factor level** you seleceted and fill in the associated **score** in the **Organisation** blank score system located at the front of this document

Factor description	Score	Factor level
Fit with the organisation's strategic aims and culture • Has the organisation successfully sustained improvement in the past? • Are the goals of the change clear and shared? • Is the improvement aligned with the organistaion's strategic aims and direction? • Is it contributing to the overall organisational aims. • Is change important to the organisation and its leadership? • Does your organisation have a 'can do' culture?	**7.2**	There is a history of successful sustainability and improvement goals are consistent with the organisation's strategic aims
	3.3	There is a history of successful sustainability but the improvement and organisations strategic aims are inconsistent
	3.5	There is no history of successful sustainability but the improvement goals are consistent with the organisation's strategic aims
	0.0	There is no history of successful sustainability and the improvement goals are inconsistent with the organisation's strategic aims
Infrastructure for sustainability • Are there enough staff who are trained and able to work in the new way? • Are there enough facilities and equipment to support the new process? • Are new requirements built into job descriptions? • Are there policies and procedures supporting the new way of working? • Is there a communication system in place?	**9.7**	Staff, facilities and equipment, job descriptions, policies, procedures and communication systems are appropriate for sustaining the improved process
	4.4	There is an appropriate level of staff, facilities and equipment, but inadequate job descriptions, policies, procedures and communication systems for sustaining the change
	3.3	The levels of staff, facilities and equipment to sustain the change are not appropriate although job descriptions, policies, procedures and communication systems are adequate
	0.0	The staff, facilities and equipment, job descriptions, policies and procedures and communication systems are all not appropriate for sustaining the change

Score system portal diagram and bar chart

Use either the portal diagram or the bar chart to plot **your scores** and identify which **factors** require most attention. Or you can even use both if you prefer.

Within the example diagrams here, we have inserted example scores as an illustration. If you look at these examples for each different factor you will note that 'Adaptability of the improved process' has the lowest numerical score level of 3.4. However, this is not the factor where the biggest improvement gain can be made. Now look at the factor 'Clinical leadership engagement'. You will see that the overall potential for improvement is much bigger therefore this is the factor to focus on.

Now plot the scores for your project on either or both diagrams and look to see which are the two or three factors with the greatest potential for improvement.

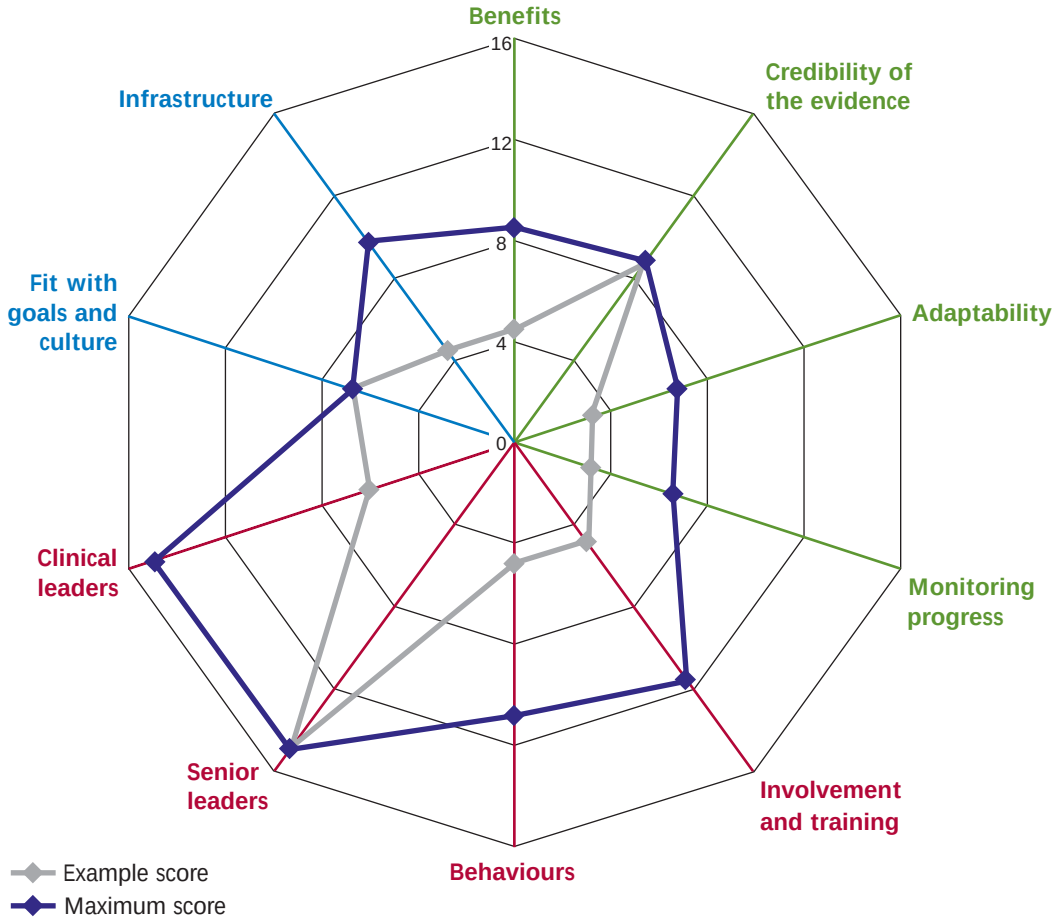
Key issues
Look at the example scores in the bar chart or portal diagrams. What do they tell you? Use the ideas here to help you interpret your scores.

- **Clinical leadership**
  A large amount of work is needed to really help clinicians to be more involved. Some have been involved in the early stages but this is a little peripheral. None are actively involved in the work or promote the initiative. One meeting has been arranged recently but we need to build on this.
- **Involvement and Training**
  Some staff have not been involved from the beginning of the initiative and we need to catch up with them. There does seem to be some confusion about what we are really trying to do and we also need to see what their ideas are. We also need to have a higher focus on training staff to manage the new way of working as it is implemented and established. We will link this in with the Infrastructure factor.
- **Infrastructure**
  We have not thought about changing any policies or procedures yet. Communication systems are limited at this early stage of the work but we do need to strengthen this factor fairly urgently. One of the first things to do is set up some information in the work area so that staff can see progress.

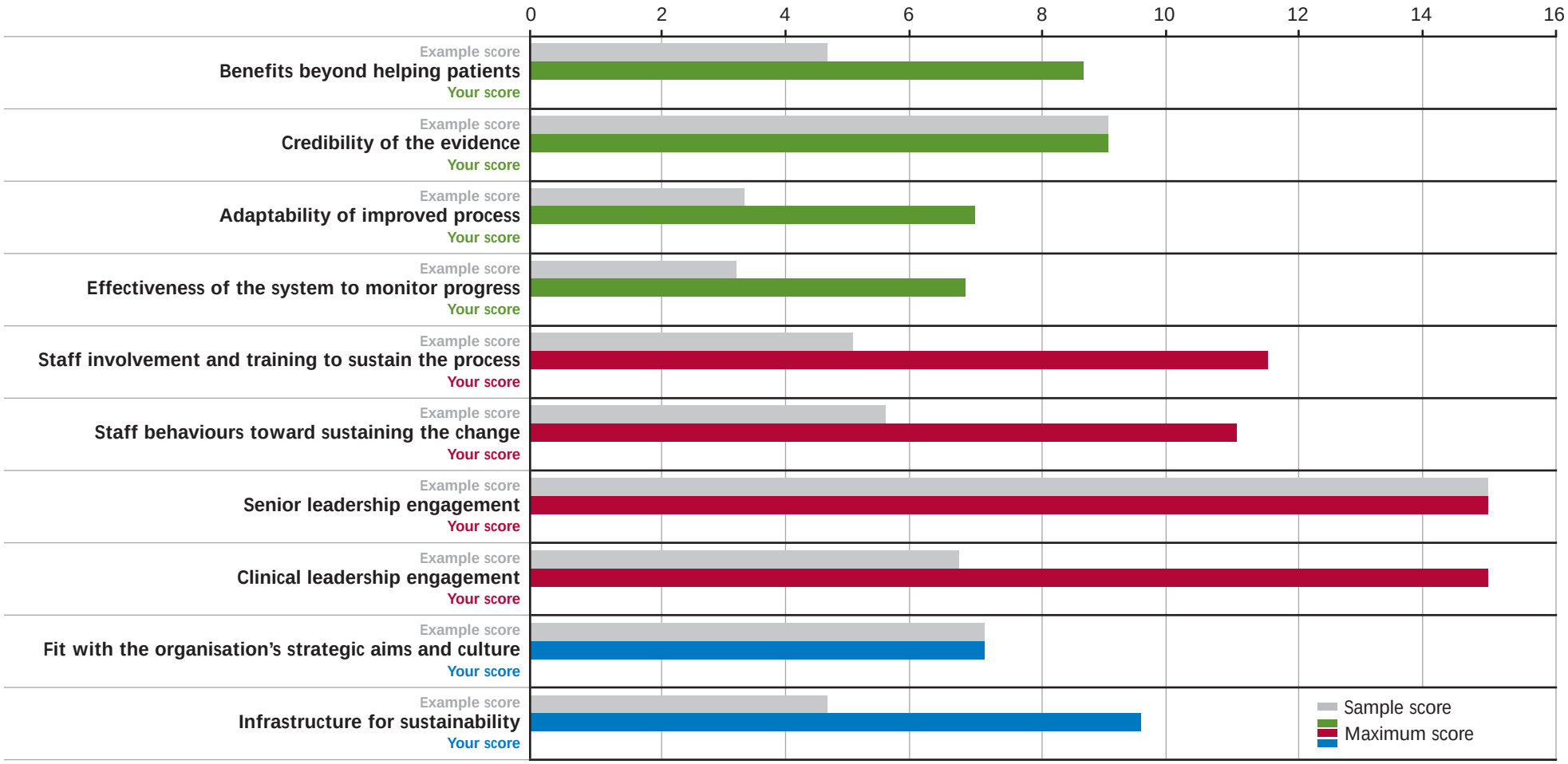
◆ The **dark blue points** represent maximum possible numerical score attached to each of the ten factors

◆ The **grey points** represent the example score

The gap between the dark blue and grey points shows the improvement potential for each of the ten factors.



Score system portal diagram



Sustainability

Why should I use the Sustainability Guide?

10 top reasons to look at this CD…

If you've already worked through the Sustainability Model, you'll now know where your priority areas are for sustaining your improvement - but what next? You might be wondering what you'll gain by going into the Sustainability Guide: will it be worth the effort; will you be able to find what you want; and even then, will it tell you anything new?

In putting this Model and Guide together, we have been constantly aware of the huge pressures on your time as improvement leaders; clinicians; service managers and frontline professionals. You'll want to know that any time you spend going through the Guide will be as useful and practical as arriving at your sustainability score through the Model.

Here's ten good reasons to use this Guide and get some new ideas and practical measures for tackling the areas most relevant to you.

The Guide will help you ensure your sustainability activities are:

1. **Focused:** you don't need to read the whole Guide - just go straight to the parts where your scores were lowest and where you can have most impact
2. **Practical:** the Guide is packed with practical ideas and tools for you to try
3. Visual: you'll learn about the best process mapping techniques to help you and your staff visualise how improvements are changing processes and roles
4. **Inclusive:** you'll find out how to get your staff involved, for instance 'dot voting' to pinpoint the really important issues
5. **Doable:** bringing benefits to life will become easier with simple, achievable techniques like creating a data wall and letting service users do the talking
6. **Balanced:** if you've never used the 'Six thinking hats' method (De Bono 1999) find out how it can help you consider sustainability from every angle
7. **Tailored:** find out how to present your data and communications in a way that your different audiences will welcome and understand
8. **Forward thinking:** plan for long-term sustainability by making sure your improvement goals fit with the organisation's wider strategic aims and visions
9. **Holistic:** explore better ways to ensure your change is embedded in your organisation's wider systems - through detailed job descriptions, clear policies and communications channels that work
10. **Real:** read real life case studies from frontline teams who are successfully sustaining their improvements.

NHS Sustain**ability** Guide CD

How to use this CD

This CD contains three downloadable PDF files that contain all of the NHS Sustainability Guide information and are intended for use with this document only. Once you have identified the factors with the greatest potential for improvement by using the Sustainability Model, go to the appropriate section(s), on this CD, where you will find esential guidance and advice.

The PDF files on this CD are split into three Guide sections:
ST_WHYTHE_CD - Top ten reasons to look at this CD
ST_GUIDE_P - **Process**
ST_GUIDE_S - **Staff**
ST_GUIDE_O - **Organisation**

‘The challenge is not starting,
but continuing after the initial enthusiasm has gone’

Ovretveit (2003) Making temporary quality improvement continuous:
A review of the research relevant to the sustainability of quality improvement in healthcare

For further information visit
www.institute.nhs.uk/sustainability

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