MQii Sustainability Template Overview

INTRODUCTION

Sustainability is the process of **"**locking in progress hospitals have made already and continually building upon it."[1]

Why is Sustainability Important? Without sustainability we will find ourselves solving the same problems over and over again. By building sustainability into the implementation process, we help ensure that a quality improvement project will achieve its goals over the long term, even after the initiative is no longer receiving special attention and extra resources.[1]

Sustainability versus Spread: The process of sustaining improvement needs to be separate from the process of extending the intervention to additional care settings and/or patient populations. The latter is commonly referred to as "spread." While both are important to improving patient care quality, it is critical to ensure improvements are fully sustained before spreading to additional patient populations or care settings, as applicable.

Purpose of a Sustainability Plan: The purpose of a Sustainability Plan is to formally document the actions needed for ensuring sustainability of previously implemented improvements. The plan is to be implemented by the Sustainability Team[1] identified in the template.

WHAT IS THE SUSTAINABILITY PLAN TEMPLATE?

This template can be completed at the end of the Implementation Phase or at the beginning of the Post-Implementation phase depending on when data are available to confirm an improvement is ready to be sustained at your hospital. An area of improvement is ready to be sustained once your team, leadership, and/or your hospital's Quality Improvement (QI) department agree the level of improvement identified by the data satisfies the QI Focus Goals outlined in the Project Charter.

Best practices: Ensure timelines are realistic. Designate someone to track completion of actions in the plan and inform the team on progress. Use all resources available including email reminders, marketing/flyers, and networking to inform staff of the improvement being sustained and the resources needed to sustain the improvement.

Additional Resources on Sustainability:

- Health Catalyst. (n/a). How to Sustain Healthcare Quality Improvement in 3 Critical Steps.
- Health Resources and Services Administration. (n/a). Redesigning a System of Care to Promote QI: Sustain and Spread in Quality Improvement.
- Quality Progress. (2006). The Hard Part: Holding Improvement Gains.
- Sustaining Improved Outcomes: A Toolkit by Scott Thomas and

[1] Institute for Healthcare Improvement. (2008). How-to-Guide: Sustainability and Spread. Cambridge, Massachusetts, USA.
[**]Staff members selected by the Project Champion who are responsible for implementing the Sustainability Plan. This may include members from the implementation project team but not always, as core members should depend on the intervention being sustained. The Sustainability Team is responsible for working with the Project Champion of the implementation effort to develop a Sustainability Plan. Often the Project Champion is a core member of the Sustainability Team, however, since the action of monitoring sustainability can require strong oversight influence, the clinical nutrition manager, nurse manager, or supervisor is often the Sustainability Team Project Champion versus the dietitian implementing the effort on the ground. Overall, the members included in the Sustainability Team should conform to the needs of the Sustainability Plan and the intervention being sustained.

MQii Sustainability Template

To complete this template identify members to be included in your Sustainability Team, if they have not previously been identified.

- Convene your team and as a group, identify key short- and long-term strategies for sustaining your improvement across key areas of impact. These can include people, processes/policies, training, infrastructure, and communications, among others.
- Consider actions needed to obtain acceptance of the sustainability plan from key decision-makers within each area of impact, as well as steps needed to acquire resources necessary for implementing sustainability strategies for each area of impact.

Complete one template for each improvement being sustained. An example of a completed plan for sustaining processes associated with adoption of the new Electronic Health Record (EHR) screening tool implemented to standardize the malnutrition screening process for nurses is below in *orange text* for your reference.

Sustainability Team Member Name	Title, Department, and Email	Role and Responsibilities
Kathy Henderson	*Nurse Manager, ICU, khenderson@hgfr.org*	***Sustainability Team Project Champion*** *– ensure the sustainability plan is implemented and measured according to the requirements outlined.*

Date Template Completed: *July 3, 2017*

Improvement being sustained: *Adoption of the new EHR screening tool build implemented to standardize the malnutrition screening process for nurses*

Person responsible for tracking Plan progress: *Sustainability Team Project Champion*

Area of impact:	What Needs to Be Done?	Who Will Do This?	By When?	How Will It Be Measured?	How Often Will it Be Measured?
People	*Need to meet with hospital leadership to present data*	*Project Champion*	*July 14, 2017*	*Progress for completing this task will be measured through status updates provided by the Project Champion to the Sustainability Team during weekly meetings; challenges and solutions will be addressed before any general updates*	*Progress for completing this task will be measured weekly until completed*
Processes and Policies	*Information Technology (IT) and clinical department Standard Operating Procedures (SOP) need to be updated to reflect new processes for staff. Sustainability Team will work with leadership to understand the process for revising SOPs and work with the necessary hospital committees to develop content and ensure content is approved by August 31.*	*QI Department Lead*	*September 29, 2017*	*Progress for completing this task will be measured through status updates provided by the QI Department Lead to the Sustainability Team during weekly meetings; challenges and solutions will be addressed before any general updates*	*Progress for completing this task will be measured weekly until completed*

Training	*New employee training materials (both IT and clinical) including video, training guides, and onboarding materials must be reviewed and revised to include content to educate new staff on the new process. The team member responsible will work with Human Resources (HR) and the education department to ensure correct content is developed and approved by August 31.*	*Dietitian Champion, IT Lead, and Nurse Champion*	*September 29, 2017*	*Progress for completing this task will be measured through status updates provided verbally by the Dietitian Champion, IT Lead, and Nurse Champion to the team during weekly meetings; challenges and solutions will be addressed before any general updates.* *Feedback survey results on the new content added will be collected from HR following the completion of training.*	*Progress for completing this task will be measured weekly until completed.* *Survey results for new content: Feedback results will be reviewed after the first 4 months and then again after 7 months by Dietitian Champion, IT Lead, and Nurse Champion as well as the Sustainability Project Manager so refinements to content can be made.* *Content will be revisited annually for updates with HR.*
Infrastructure	*Hospital intake malnutrition screening flowcharts distributed need to be updated to reflect the new process*	*Dietitian Champion, IT Lead, and Nurse Champion*	*August 31, 2017*	*Progress for completing this task will be measured through status updates provided by the Dietitian Champion, IT Lead, and Nurse Champion via email on July 19 and August 16 to the team; challenges and solutions will be addressed at the beginning of the email before any general updates*	*Once per month: July 19 and August 16, IT Lead and Nurse Champion will provide status update to the team via email*
Communications	*Staff need to be informed of the timeline/expectations for executing the sustainability plan, including why this improvement is being sustained (i.e. value to the patient) via dissemination of information in the August version of the hospital newsletter*	*Dietitian Champion and Nurse Champion*	*August 14, 2017*	*Progress for completing this task will be measured through status updates provided by the Dietitian Champion and Nurse Champion via email to the team; challenges and solutions will be addressed at the beginning of the email before general updates on progress*	*Weekly*

Other?	*Add quality indicators being collected to monitor QI Focus goals to our hospital quality dashboard monitored by the QI department and reported to leadership monthly*	*QI Department Lead*	*August 31, 2017*	*Quality Indicators to monitor long-term adoption and value of the EHR screening tool to the patient will be collected monthly by the QI Department and reported to hospital leadership, the Sustainability Team, and the Implementation Team*	*Monthly*