



University of Wollongong



Sustainability and spread: strategies and initial findings

Kate Williams

Centre for Health Service Development

Evaluation questions

- ◆ What did you do? (PROGRAM & PROJECT DELIVERY)
- ◆ How did it go? (PROGRAM & PROJECT IMPACT)
- ◆ What's been learned? (CAPACITY BUILDING)
- ◆ Will it keep going? (SUSTAINABILITY)
- ◆ Are your lessons useful for someone else? (GENERALISABILITY)
- ◆ Who did you tell? (DISSEMINATION)

Definitions

- ◆ Sustainability: aspects of a project's goals and objectives that may continue
- ◆ Capacity building: skills and knowledge gained, or support for ongoing changes within a system
- ◆ Generalisability: whether the lessons learned from the project could be useful in other settings

'Sustainability and spread' tool

- ◆ Sustainability questions adapted from tool developed and validated in the UK
- ◆ Partnership building – strength of networks
- ◆ Capacity building and generalisability questions used in previous projects

How is the tool used?

- ◆ Completed in discussion with a NET member in the early part of the project and again at the end
- ◆ Provide a framework for thinking about and developing strategies
- ◆ Also provide data for the national evaluation about
 1. Likely broader and longer term impacts of the Care Planning sub-program
 2. Changes over time in project officers' thinking about these issues

Findings: Sustainability

	Strongly agree %	Agree %	Don't know %	Disagree %
1. Project will improve efficiency of services	33	57	5	5
2. Staff will notice a positive difference in work	24	71	5	0
3. Benefits immediately obvious	14	43	24	19
4. Stakeholders aware of benefits	27	62	5	5
5. New processes don't rely on one person ...	19	52	24	5
6. Process to monitor and act upon feedback	38	57	5	0
7. Staff involved from the beginning*	43	38	9	5

Findings: Sustainability 2

	Strongly agree %	Agree %	Don't know %	Disagree %
8. Staff are adequately trained *	24	52	0	0
9. Staff believe new processes are better*	9	57	19	0
10. Managers will advocate for project	43	48	0	9
11. Clinical leaders will promote project to staff	48	43	0	9
12. Staff can share info with management*	24	48	9	5
13. History of sustained improvement*	43	29	19	0
14. Project's goals consistent with host's aims	57	33	9	0

Findings: Sustainability 3

	Strongly agree %	Agree %	Don't know %	Disagree %
15. Staffing levels are adequate**	5	38	29	9
16. Facilities and equipment are available	29	67	0	5
17. Policies and procedures developed*	29	38	0	19
18. Communication with stakeholders	57	43	0	0

Sustainability strategies

- ◆ Select steering committee to act as advocate for change, endorse new models, encourage referrals
- ◆ Find champions in agencies/services
- ◆ Incorporate project work into clinical role
- ◆ Develop resources (tools, protocols, DVDs)
- ◆ Purchase equipment (teleconference phone)
- ◆ Negotiate with clinical experts – credibility
- ◆ Build into existing training and/or quality processes

Findings: Partnership building

	Strongly agree %	Agree %	Don't know %	Disagree %
19. Improved relationships with agencies	29	52	19	0
20. Positive changes to relationships*	29	52	14	0
21. More streamlined and coord. services*	38	24	9	9
22. Costs greater than benefits**	0	5	29	38

Findings: Partnership building 2

	Strongly agree %	Agree %	Don't know %	Disagree %
23. Protocols and tools for routine use	38	52	9	0
24. Formal policies can change relationships*	5	48	29	9
25. Projects can strengthen relationships	57	43	0	0
26. Projects provide local lessons	62	24	9	5

Partnership building strategies

- ◆ Look after the steering committee
- ◆ Formal presentations to partner agencies
- ◆ Informal discussions with key people
- ◆ Email and phone lists facilitate regular contact
- ◆ Memoranda of understanding
- ◆ Service agreements
- ◆ Policies and protocols
- ◆ Seeking feedback, consultation, focus groups
- ◆ Marketing to other services

Findings: Capacity building

	Strongly agree %	Agree %	Don't know %	Disagree %
27. Agreed policies with other orgs on services*	29	38	14	9
28. Generated and supported local skills	38	43	14	5
29. More organisational resources directed*	5	27	24	27
30. Training of people directly involved*	29	62	0	0
31. Developing palliative care skills of others*	57	33	0	0

Capacity building strategies

- ◆ Develop education packages and materials for carers, GPs, RACF staff, etc
- ◆ Newsletters
- ◆ One-to-one discussions with key staff
- ◆ Tools and documents to support new processes
- ◆ Link with other projects
- ◆ Build own capacity through training, study (PhD) or finding a mentor
- ◆ Encourage development of support networks for staff using new processes

Findings: Generalisability

	Strongly agree %	Agree %	Don't know %	Disagree %
32. Project designed to meet local needs**	43	24	0	24
33. Other regions will learn useful lessons	48	52	0	0
34. Outcomes could be replicated elsewhere	57	43	0	0
35. Success relies on flexible implementation	29	57	0	14
36. Strategy already in place to share findings	52	33	5	9
37. Strategy will be developed to share findings*	62	33	0	0
38. Project provides important local lessons	52	48	0	0

Generalisability strategies

What could be used more widely?

- ◆ Methods (gap analysis)
- ◆ Products (assessment tools, pathways, patient diaries)
- ◆ Supporting documents (education packages, protocols and procedures, service agreements and MOU)

How to ensure this happens:

- ◆ Products etc based on National Standards and consultation - credible
- ◆ Networking and sharing
- ◆ Dissemination plans

Dissemination log

- ◆ Record all your dissemination activities
- ◆ Code for purpose:
 1. stakeholders (capacity building and sustainability)
 2. wider community (generalisability)
- ◆ Code 1-16 for method (medium)
- ◆ Estimate impact
- ◆ Complete as you go
- ◆ Submit six-monthly with evaluation progress report