Center for Public Health Systems Science

Brown School

The clinical sustainability assessment tool (CSAT):

Assessing sustainability in clinical & healthcare settings
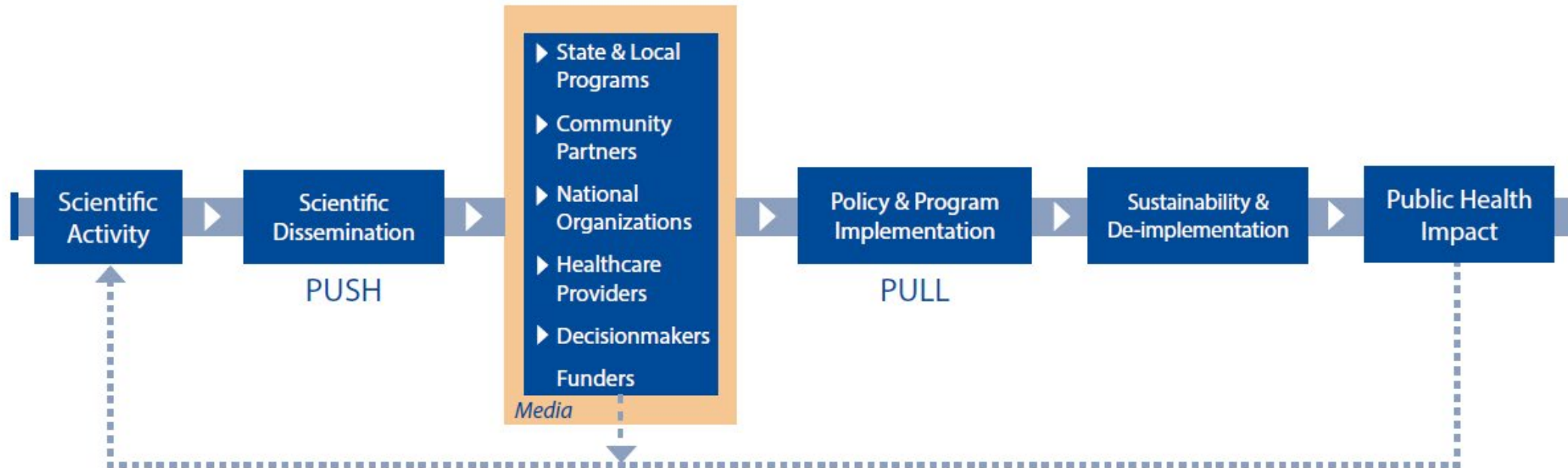
November 14, 2019

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Washington University in St. Louis

Outline

- Why sustainability?
- New tool for clinical setting
- Explore the CSAT

Why sustainability?

Scientific Discovery to Public Health Impact Pipeline

Source: Farrelly et al.[3]

Program Sustainability

The ability to maintain public health programming and its benefits over time.

Schell, SF, Luke, DA, Schooley, MW, Elliott, MB, Herbers, SH, Mueller, NB, and Bunger, AC. (2013). Public health program capacity for sustainability: A new framework. *Implementation Science, 8(15)*.

Sustaintool.org

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New tool for clinical setting

Why clinical sustainability tools are necessary

- Shift from policies and programs to practices and procedures

- Integration with other clinical practice activities

- High reliance on clinical and frontline staff

- Less reliant on external stakeholders

- More reliant on technical supports

- Positive outcomes are important and can be seen sooner

https://sustainability.ucsf.edu/3.686

Clinical sustainability

The ability of an organization to maintain structured clinical care practices over time and to evolve and adapt these practices in response to new information

CSAT Development Process

» Initial review
  ▪ Literature
  ▪ Review of existing PSAT framework and instrument domains

» Concept Mapping
  ▪ Expert input
  ▪ Domain and potential item identification

» Draft instrument development

» Draft instrument pilot

» Psychometric analyses

» Final instrument development and dissemination

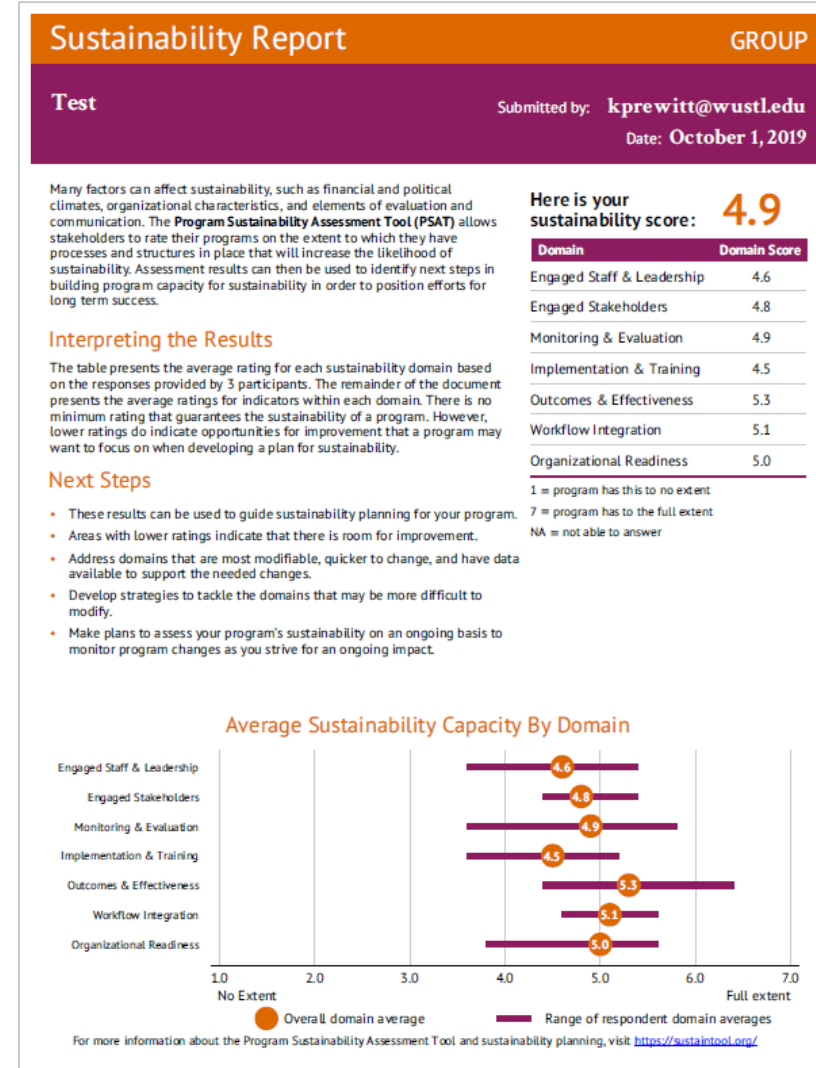# CSAT Design

» 7 domains

» 5 items in each domain

» Quick to complete

» Easy to use

» Used by evaluators and researchers

» Respondents indicate the extent to which a practice has or does each thing

Tailored Reports
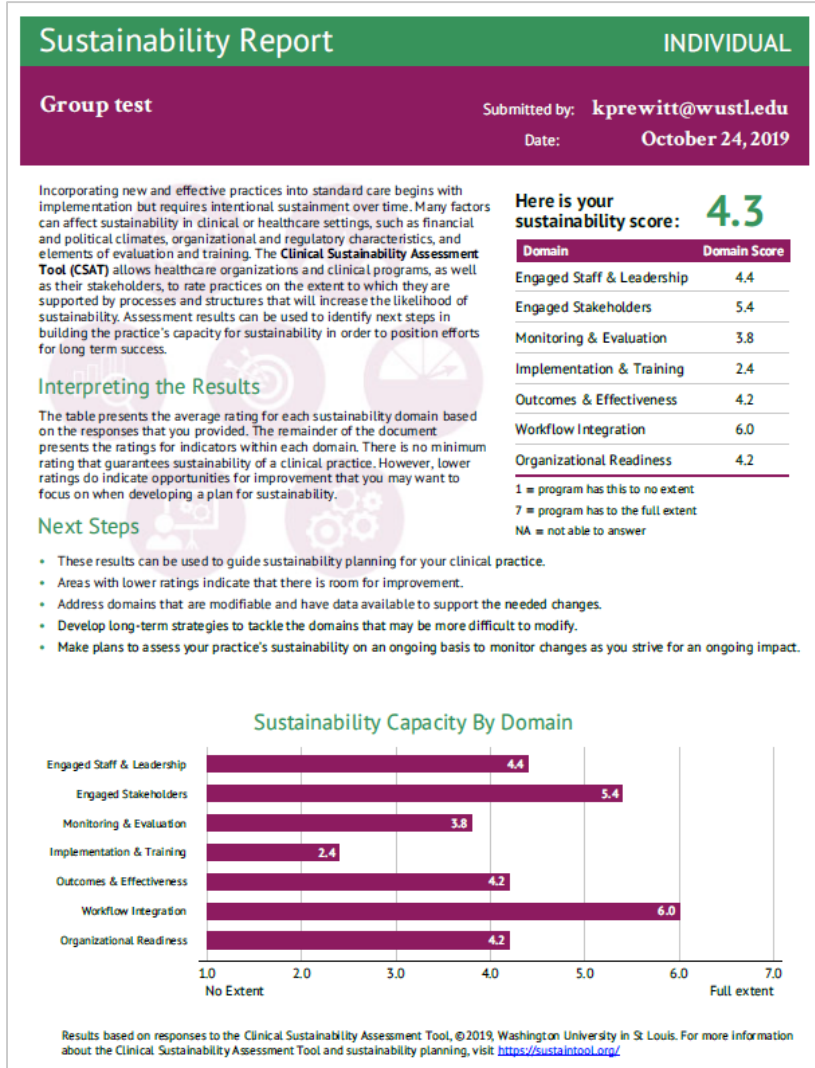
Pilot Test by the Numbers (N = 126)

Profession	%
Pharmacist	36
Physician	29
Nurse	15
Admin/Support	7
Other	12

Role	%
Bedside Provider	44
Program Leader	22
Leadership	7
Unit Management	5
Other	22

Environment	%
Academic Medical	69
Community Hospital	18
Community Health Center	5
Private Practice	5
Other	9

Setting	%
Inpatient	59
Outpatient	21
Both	20

Patients	%
Adult	53
Pediatric	47

CSAT Usability is Good

» Pilot survey took about 20 minutes to complete
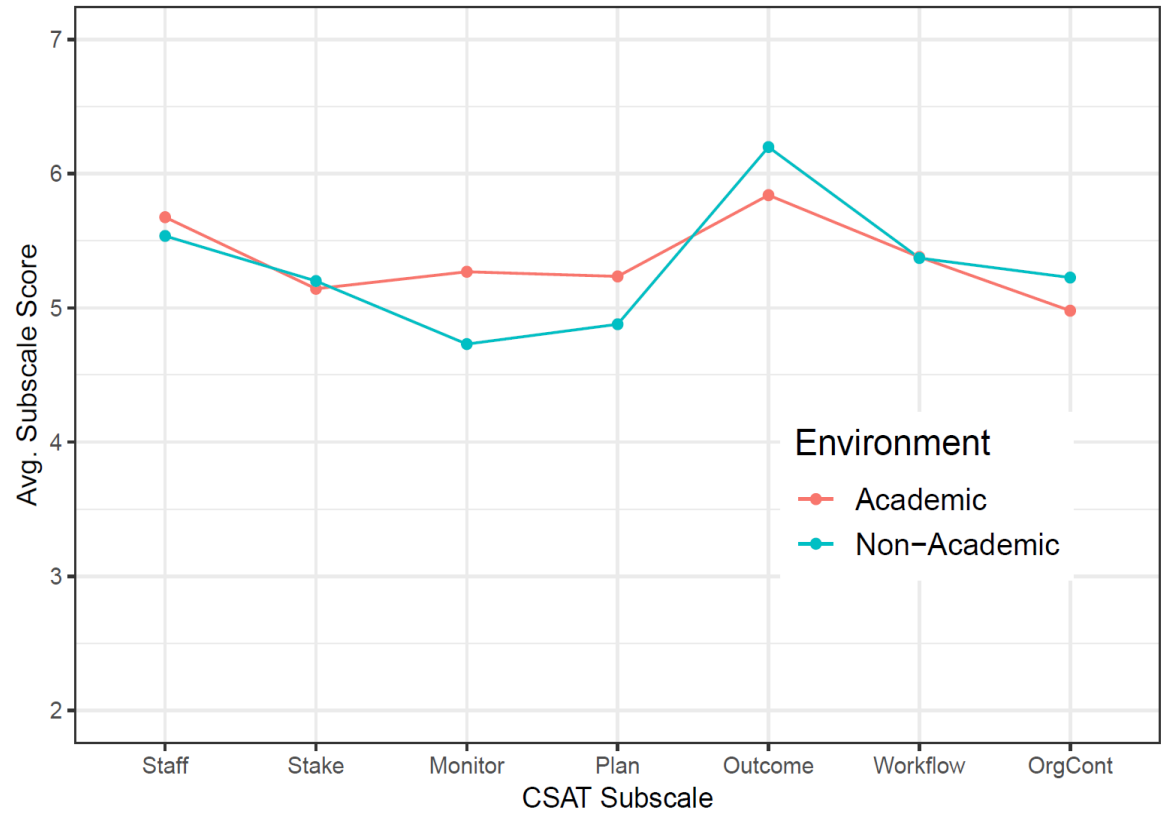
» Good participant reaction

- 85% agreed that it was *easy to use*
- 75% felt *very confident* using the tool
- 90% thought that most people would *learn to use* the tool quickly
- 69% disagreed that the tool was *unnecessarily complex*
- Only 35% thought that they would need *support* in order to use the tool effectively

Some hints of validity…
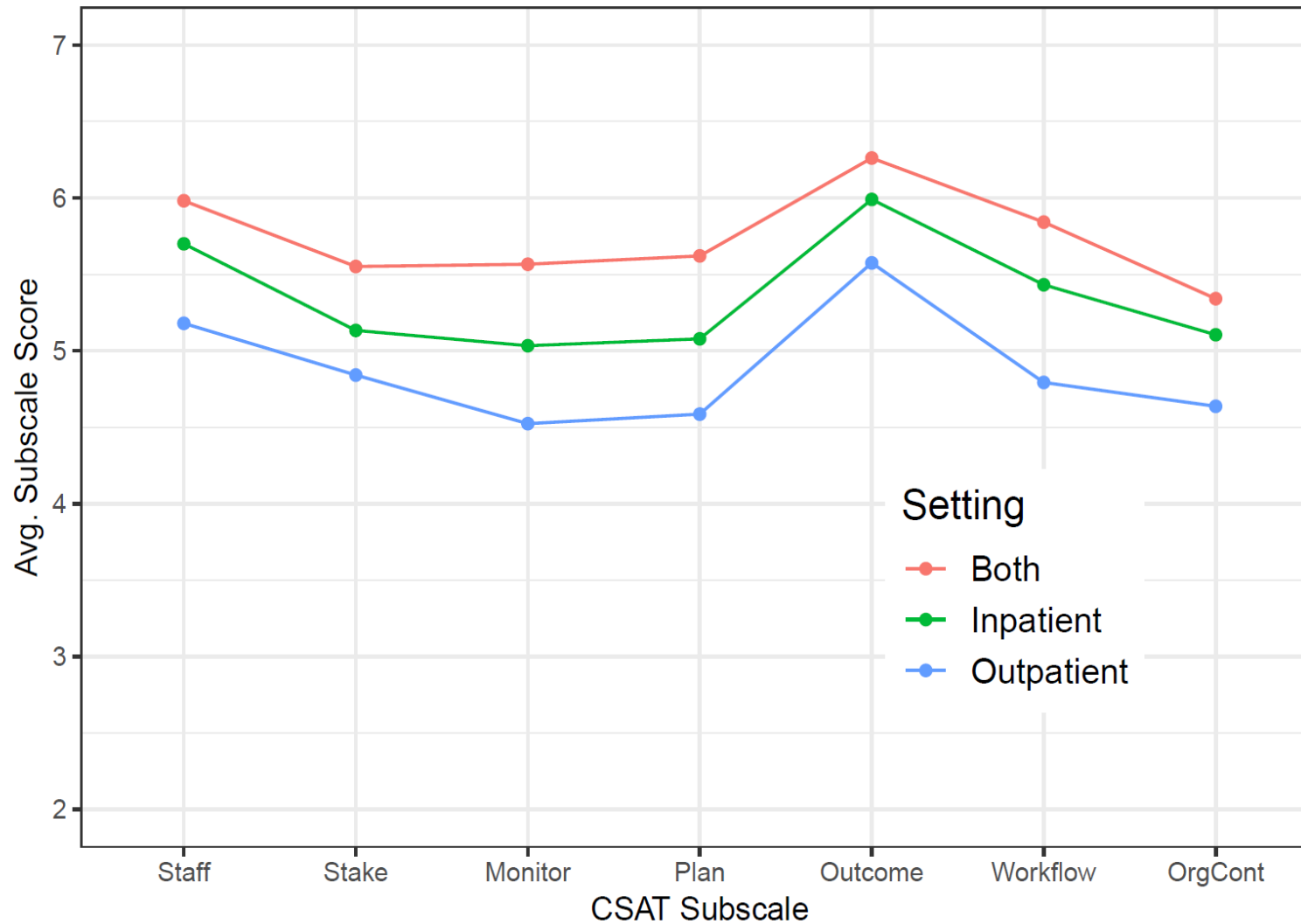
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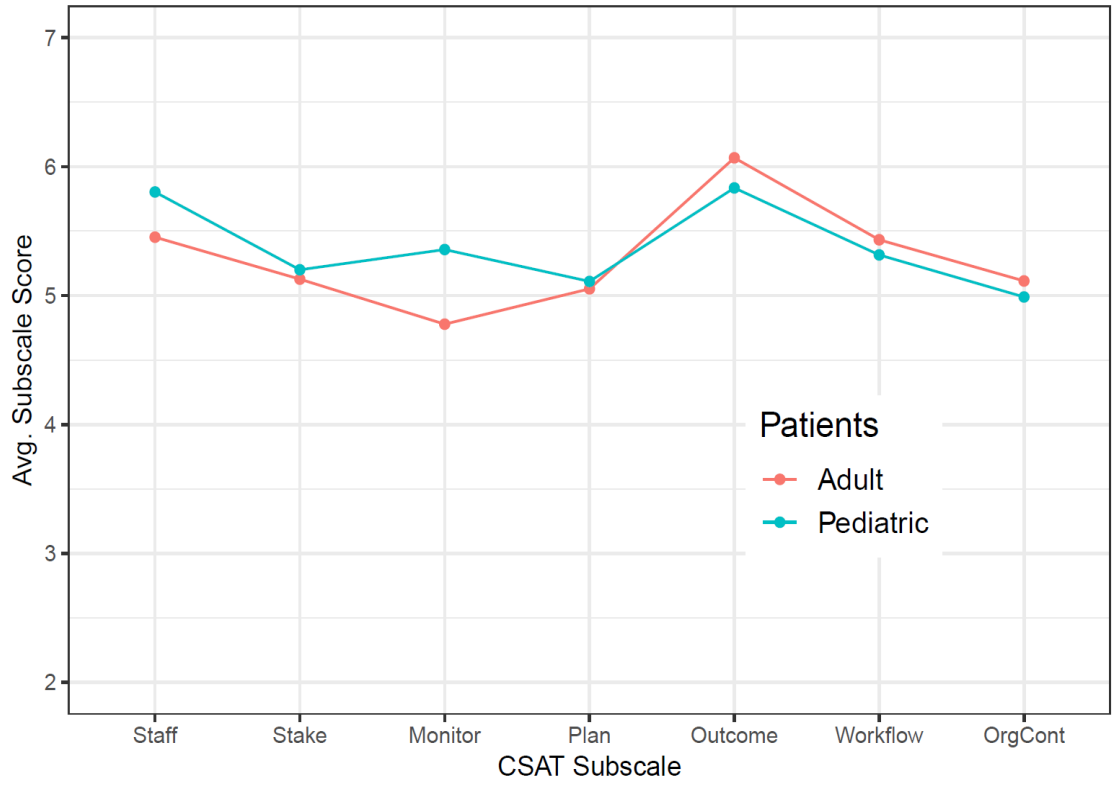
Excellent reliability for 5 items/scale

Domain	# of Items	Scale Mean	Scale SD	Alpha
Engaged Staff	5	5.62	0.70	0.84
Engaged Stakeholders	5	5.02	1.16	0.81
Monitoring & Evaluation	5	5.12	0.69	0.94
Planning & Implementation	5	5.18	0.80	0.88
Outcomes & Effectiveness	5	6.03	0.54	0.88
Workflow Integration	5	5.62	0.73	0.88
Organizational Context	5	5.02	0.89	0.87

Explore the clinical sustainability assessment tool (CSAT)

sustaintool.org

Register

» Username

» Email address

Understand   Assess   Plan   About Us   Services

Welcome to the online Clinical Sustainability Assessment Tool.

Rate the sustainability capacity of your clinical practice to help plan for its future.

GET STARTED

1. Understand

2. Assess

3. Review

4. Plan

Before the CSAT: terms to define

"practice" = The set of formal organized activities that you want to sustain over time

"organization" = The parent organization or agency in which the practice is housed

Sustaintool.org: begin assessment

CSAT Domains

» **Engaged leadership & staff**

» Engaged stakeholders

» Organizational readiness

» Workflow integration

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Engaged Staff & Leadership

1. The practice engages leadership and staff throughout the process.

2. Clinical champions of the practice are recognized and respected.

3. The practice has engaged, ongoing champions.

4. The practice has a leadership team made of multiprofessional partnerships.

5. The practice has team-based collaboration and infrastructure.

CSAT Domains

» Engaged leadership & staff

» **Engaged stakeholders**

» Organizational readiness

» Workflow integration

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Engaged Stakeholders

1. The practice engages the patient and family members as stakeholders.

2. There is respect for all stakeholders involved in the practice.

3. The practice is valued by a diverse set of stakeholders.

4. The practice engages other medical teams and community partnerships as appropriate.

5. The practice team has the ability to respond to stakeholder feedback about the practice.

CSAT Domains

» Engaged leadership & staff

» Engaged stakeholders

» **Organizational readiness**

» Workflow integration

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Organizational Readiness

1. Organizational systems are in place to support the various practice needs.

2. The practice fits in well with the culture of the team.

3. The practice has feasible and sufficient resources (e.g., time, space, funding) to achieve its goals.

4. The practice has adequate staff to achieve its goals.

5. The practice is well integrated into the operations of the organization.

CSAT Domains

» Engaged leadership & staff

» Engaged stakeholders

» Organizational readiness

» **Workflow integration**

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Workflow Integration

1. The practice is built into the clinical workflow.

2. The practice is easy for clinicians to use.

3. The practice integrates well with established clinical practices.

4. The practice aligns well with other clinical systems (e.g., EMR).

5. The practice is designed to be used consistently.

CSAT Domains

» Engaged leadership & staff

» Engaged stakeholders

» Organizational readiness

» Workflow integration

» **Implementation & training**

» Monitoring & evaluation

» Outcomes & effectiveness

Implementation & Training

1. The practice clearly outlines roles and responsibilities for all staff.

2. The reason for the practice is clearly communicated to and understood by all staff.

3. Staff receive ongoing coaching, feedback, and training.

4. Practice implementation is guided by feedback from stakeholders.

5. The practice has ongoing education across professions.

CSAT Domains

» Engaged leadership & staff

» Engaged stakeholders

» Organizational readiness

» Workflow integration

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Monitoring & Evaluation

1. The practice has measurable process components, outcomes, and metrics.

2. Evaluation and monitoring of the practice are reviewed on a consistent basis.

3. The practice has clear documentation to guide process and outcome evaluation.

4. Practice monitoring, evaluation, and outcomes data are routinely reported to the clinical care team.

5. The practice process components, outcomes, and metrics are easily assessed and audited.

CSAT Domains

» Engaged leadership & staff

» Engaged stakeholders

» Organizational readiness

» Workflow integration

» Implementation & training

» Monitoring & evaluation

» Outcomes & effectiveness

Outcomes & Effectiveness

1. The practice has evidence of beneficial outcomes.

2. The practice is associated with improvement in patient outcomes that are clinically meaningful.

3. The practice is clearly linked to positive health or clinical outcomes.

4. The practice is cost-effective.

5. The practice has clear advantages over alternatives.

Sustainability Report

INDIVIDUAL

test

Submitted by: **kprewitt@wustl.edu**

Date: **November 13, 2019**

Incorporating new and effective practices into standard care begins with implementation but requires intentional sustainment over time. Many factors can affect sustainability in clinical or healthcare settings, such as financial and political climates, organizational and regulatory characteristics, and elements of evaluation and training. The **Clinical Sustainability Assessment Tool (CSAT)** allows healthcare organizations and clinical programs, as well as their stakeholders, to rate practices on the extent to which they are supported by processes and structures that will increase the likelihood of sustainability. Assessment results can be used to identify next steps in building the practice's capacity for sustainability in order to position efforts for long term success.
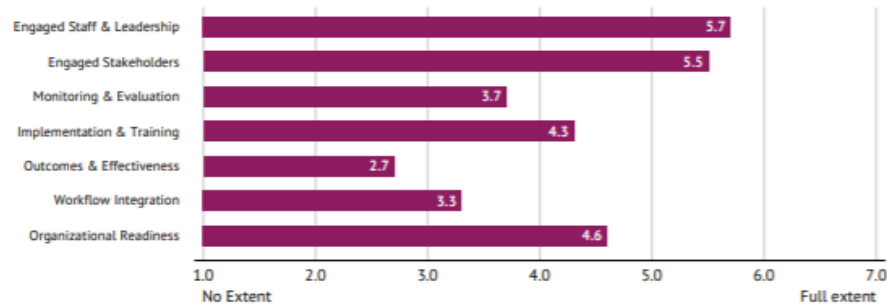
Interpreting the Results

The table presents the average rating for each sustainability domain based on the responses that you provided. The remainder of the document presents the ratings for indicators within each domain. There is no minimum rating that guarantees sustainability of a clinical practice. However, lower ratings do indicate opportunities for improvement that you may want to focus on when developing a plan for sustainability.

Next Steps

- These results can be used to guide sustainability planning for your clinical practice.
- Areas with lower ratings indicate that there is room for improvement.
- Address domains that are modifiable and have data available to support the needed changes.
- Develop long-term strategies to tackle the domains that may be more difficult to modify.
- Make plans to assess your practice's sustainability on an ongoing basis to monitor changes as you strive for an ongoing impact.

Here is your sustainability score: **4.2**

Domain	Domain Score
Engaged Staff & Leadership	5.7
Engaged Stakeholders	5.5
Monitoring & Evaluation	3.7
Implementation & Training	4.3
Outcomes & Effectiveness	2.7
Workflow Integration	3.3
Organizational Readiness	4.6

1 = program has this to no extent

7 = program has to the full extent

NA = not able to answer

Sustainability Capacity By Domain

Domain	Score
Engaged Staff & Leadership	5.7
Engaged Stakeholders	5.5
Monitoring & Evaluation	3.7
Implementation & Training	4.3
Outcomes & Effectiveness	2.7
Workflow Integration	3.3
Organizational Readiness	4.6

1.0 No Extent — 7.0 Full extent

Results based on responses to the Clinical Sustainability Assessment Tool, ©2019, Washington University in St Louis. For more information about the Clinical Sustainability Assessment Tool and sustainability planning, visit https://sustaintool.org/

Engaged Staff & Leadership

	Rating
1. The practice engages leadership and staff throughout the process.	NA
2. Clinical champions of the practice are recognized and respected.	6.0
3. The practice has engaged, ongoing champions.	6.0
4. The practice has a leadership team made of multiprofessional partnerships.	5.0
5. The practice has team-based collaboration and infrastructure.	NA

Engaged Stakeholders

	Rating
1. The practice engages the patient and family members as stakeholders.	4.0
2. There is respect for all stakeholders involved in the practice.	NA
3. The practice is valued by a diverse set of stakeholders.	NA
4. The practice engages other medical teams and community partnerships as appropriate.	NA
5. The practice team has the ability to respond to stakeholder feedback about the practice.	7.0

Monitoring & Evaluation

	Rating
1. The practice has measurable process components, outcomes, and metrics.	3.0
2. Evaluation and monitoring of the practice are reviewed on a consistent basis.	4.0
3. The practice has clear documentation to guide process and outcome evaluation.	4.0
4. Practice monitoring, evaluation, and outcomes data are routinely reported to the clinical care team.	NA
5. The practice process components, outcomes, and metrics are easily assessed and audited.	NA

Implementation & Training

	Rating
1. The practice clearly outlines roles and responsibilities for all staff.	2.0
2. The reason for the practice is clearly communicated to and understood by all staff.	4.0
3. Staff receive ongoing coaching, feedback, and training.	5.0
4. Practice implementation is guided by feedback from stakeholders.	NA
5. The practice has ongoing education across professions.	6.0

Outcomes & Effectiveness

	Rating
1. The practice has evidence of beneficial outcomes.	2.0
2. The practice is associated with improvement in patient outcomes that are clinically meaningful.	3.0
3. The practice is clearly linked to positive health or clinical outcomes.	3.0
4. The practice is cost-effective.	NA
5. The practice has clear advantages over alternatives.	NA

Workflow Integration

	Rating
1. The practice is built into the clinical workflow.	5.0
2. The practice is easy for clinicians to use.	4.0
3. The practice integrates well with established clinical practices.	NA
4. The practice aligns well with other clinical systems (e.g., EMR).	2.0
5. The practice is designed to be used consistently.	2.0

Organizational Readiness

	Rating
1. Organizational systems are in place to support the various practice needs.	5.0
2. The practice fits in well with the culture of the team.	6.0
3. The practice has feasible and sufficient resources (e.g., time, space, funding) to achieve its goals.	4.0
4. The practice has adequate staff to achieve its goals.	4.0
5. The practice is well integrated into the operations of the organization.	4.0

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Review CSAT results

» Did your results surprise you at all?

» Are any domains currently under-emphasized at your practice?

» What are your practice's biggest strengths?

» How can you leverage your collective strengths to build on areas with potential for growth?

Questions & Discussion

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