

Patient Navigation Sustainability Assessment Tool – Short Version

Note: The Program Sustainability Assessment Tool (PSAT), a set of 40 quantitative items, was developed by Washington University in St. Louis, Missouri. A new tool, the Clinical Sustainability Assessment Tool (CSAT), was later developed to assess sustainability capacity in clinical settings. Working in partnership with Washington University, the [Patient Navigation Sustainability Assessment Tool \(PNSAT\)](#) was first adapted by the [Colorado Cancer Screening Program \(CCSP\)](#) at the University of Colorado Cancer Center and Colorado School of Public Health in 2019 to fuse questions and concepts from the two tools. In 2023, a shortened version of the PNSAT was released by CCSP to improve ease of use and expand the focus beyond cancer screening navigation. The PNSAT contains adapted components of PSAT and CSAT items, plus open-ended probes that were originally adapted from work by the evaluation team at the Center for Managing Chronic Disease, University of Michigan. See the [2022 article published in Cancer](#) for more information about the development and performance of the first version of the PNSAT.

This work is licensed under a Creative Commons Attribution-NonCommercial-ShareAlike License. If you would like more information about Washington University's PSAT and CSAT, visit <https://sustaintool.org>.

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Introduction:

Thank you for taking the time to fill out this assessment. On the following pages, you will find term definitions, the tool itself, and recommendations for how to use the results. You will use the tool to rate your patient navigation practice across a range of specific factors that affect sustainability.

What is the purpose of this tool? This tool can be used to perform a structured assessment of a clinic or organization's current capacity, including strengths and challenges, for sustainability of patient navigation practice(s) across a range of specific organizational and contextual factors. These responses can be used to guide the development of a sustainability action plan and take specific steps towards sustaining your patient navigation practice(s), as well as identify training, technical assistance, and resource needs.

What is clinical sustainability capacity? We use the definition developed by Washington University: clinical sustainability capacity is defined as the ability of an organization to maintain

structured clinical care practices over time and to evolve and adapt these practices in response to new information¹.

Why is clinical sustainability capacity important? Without sustaining effective practices over time, we risk not being able to see the full return on our nation's investment in translational and implementation science. Successful implementation of new evidence-informed practices in clinical or healthcare settings is affected by several organizational, financial, regulatory, and political factors. Clinical settings, community organizations, and public health programs must provide support to these practices to maintain their benefits. With knowledge of these critical factors, clinic staff and navigation leadership can build capacity for sustainability and long-term success of a clinical practice such as patient navigation.

Who should complete this tool? The Patient Navigation Sustainability Assessment Tool (PNSAT) can be used with a wide variety of patient navigation practices and clinical settings. Before starting the assessment, you should identify the specific patient navigation practice you will be assessing. For example, when used by clinic systems participating in the Colorado Cancer Screening Program (CCSP), the "Practice" may refer to your clinic's set of patient navigation services for preventive cancer screening, including colorectal cancer screening. This assessment is most informative when completed by a small group of clinic staff involved in the practice representing a variety of roles and perspectives. Completion by 3-5 individuals in a variety of roles is recommended. For example, a sustainability planning team may include patient navigators (PNs), PN supervisors, clinical leadership, financial leadership, and a quality improvement specialist.

Definitions:

Frequently used terms throughout the tool are defined as follows.

- **Patient Navigation (PN)** services are focused on helping patients overcome barriers and improve access to care, with the aim to improve patient outcomes and satisfaction, and ultimately reduce health care costs and disparities. Core patient navigation services include, but are not limited to, patient in-reach and outreach, education, communication, barrier reduction, insurance enrollment, care coordination, and reminders.
- **Practice** refers to the set of formal organized activities that you want to sustain over time. For patient navigation sustainability planning, the "Practice" refers to your clinic's set of patient navigation services, and related systems changes that facilitate the use of patient navigators. This tool can be used to assess sustainability capacity for an organization's overall patient navigation services or a subset of patient navigation activities for a particular intervention or program.
- **Organization** encompasses all the parent organizations or agencies in which the practice is housed. Depending on your site, the organization may refer to a health system, federally qualified health center, standalone clinic, or hospital, etc. You may also view organizations as units within these larger domains (for larger health systems).

¹ Washington University in St. Louis. (2019). *Clinical Sustainability Assessment Tool*. <https://sustaintool.org/csaf/>.

- **Community** refers to the individuals or groups who may benefit from or who may guide the practice. This could include clinical staff, leadership, care recipients and their families, etc. Community does not refer to a specific town or neighborhood.
- **Champions** are individuals such as health care providers or staff, organization leaders/management, or community members who "volunteer or are appointed to enthusiastically promote and facilitate implementation" of a practice or innovation (Santos et al., 2022).

Instructions:

In each of the following sections (domains), you will rate your practice of patient navigation across a range of specific factors (statements) that affect sustainability and respond to corresponding "guiding questions." The guiding questions are designed to enrich your responses and will assist your team in facilitating the development of your clinic's sustainability plan and identifying training and technical assistance needs. In each domain, **it is recommended that you briefly respond to the guiding questions before rating the statements on a numeric scale. For each statement, select the number that best indicates the extent to which the program does the following things. Selecting 1 indicates "to little or no extent" and selecting 7 indicates "to a very great extent."** Please respond to as many statements as possible. If you truly feel you are not able to answer an item, you may leave it blank, but try to respond to as many items as possible. See an example of the rating scale below.

To little or no extent						To a very great extent
1	2	3	4	5	6	7

The assessment will take approximately 15-20 minutes to complete. Please keep in mind that **there are no right or wrong answers.** This tool will help you understand the factors that, in your view, most affect the sustainability of your organization's patient navigation practice.

If completing the paper version of the tool, calculate your average scores using the scoring table on page 12. You may additionally calculate the average scores for your full sustainability team once all members have completed the PNSAT. Then, use the results to guide sustainability action planning for your clinical practice.

I am assessing the sustainability capacity for this clinical practice:
Patient navigation for _____
and related systems changes that facilitate the use of patient navigators.

Engaged Staff & Leadership: Having frontline staff and management within the organization who are supportive of the patient navigation practice.

Guiding Questions (optional, but recommended):

- Who are your organizational champions or advocates? In what ways do they advocate for the patient navigation practice (or have they advocated, or do you hope they will)?
- How would the patient navigation practice be impacted if the lead champion(s) were to leave the organization or their role?

Engaged Staff & Leadership	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice engages staff and leadership throughout the process.	1	2	3	4	5	6	7
2. The practice has engaged, ongoing champions within the organization.	1	2	3	4	5	6	7
3. The practice has support from clinical team leaders.	1	2	3	4	5	6	7
4. The practice has team-based collaboration and infrastructure.	1	2	3	4	5	6	7

Notes or comments on the Engaged Staff & Leadership domain:

Organizational Context & Capacity: The patient navigation practice has the internal support and resources needed to effectively navigate patients/clients.

Guiding Questions (optional, but recommended):

- Describe the internal support and resources you currently have for the patient navigation practice (i.e. staff, time, space, funding, etc.).
- Describe the strengths and weaknesses you see in terms of the organizational capacity to maintain the patient navigation practice.

Organizational Context & Capacity	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice fits in well with the culture of the team.	1	2	3	4	5	6	7
2. The practice has goals that are aligned with the goals of the larger organization.	1	2	3	4	5	6	7
3. The practice has feasible and sufficient resources (e.g., staff, time, space, funding) to achieve its goals.	1	2	3	4	5	6	7
4. The practice is well integrated into the operations of the organization.	1	2	3	4	5	6	7

Notes or comments on the Organizational Context & Capacity domain:

Funding Stability: The patient navigation practice has established a consistent financial base.

Guiding Questions:

- Describe the current funding sources for the patient navigation practice, such as grants, foundational, institutional, etc.
- How stable is the current funding structure for the patient navigation practice?
- Describe your efforts to obtain new funding for the patient navigation practice. Include both past efforts and future plans.

Funding Stability	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice is funded through a variety of sources.	1	2	3	4	5	6	7
2. The practice has a combination of stable and flexible funding.	1	2	3	4	5	6	7
3. The practice has sustained funding.	1	2	3	4	5	6	7
4. The practice has a long-term financial plan.	1	2	3	4	5	6	7

Notes or comments on the Funding Stability domain:

Engaged Community: The patient navigation practice has external support and engagement (beyond the patient navigation team).

Guiding Questions (optional, but recommended):

- Who are external champions or political leaders for this type of patient navigation practice (locally, statewide, or nationally)? How do these leaders demonstrate their support or commitment to the practice?
- Are there partnership structures such as coalitions or networks supporting your patient navigation practice? Please describe the specific ways they are providing support.

Engaged Community	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice engages the patient and their family members.	1	2	3	4	5	6	7
2. The practice is valued by a diverse set of external partners and community champions.	1	2	3	4	5	6	7
3. The practice engages other medical teams and community partnerships as appropriate.	1	2	3	4	5	6	7
4. The practice team has the ability to respond to external feedback about the navigation services delivered.	1	2	3	4	5	6	7

Notes or comments on the Engaged Community domain:

Communication, Planning & Implementation: Using processes that guide the direction, goals, and strategies of the patient navigation practice.

Guiding Questions (optional, but recommended):

- What current communication strategies are in place to share the role and value of the patient navigation practice? How can these strategies be strengthened?
- What type of training, training programs, or navigation registries have your navigation teams participated in? Are you planning to continue utilizing these programs? Why or why not?

Communication, Planning & Implementation	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
3. The practice clearly outlines roles and responsibilities for all staff.	1	2	3	4	5	6	7
4. The reason for the practice is clearly communicated to and understood by all staff.	1	2	3	4	5	6	7
5. Staff receive ongoing coaching, feedback, and training for the practice.	1	2	3	4	5	6	7
6. Practice implementation is guided by feedback from external partners and patients.	1	2	3	4	5	6	7

Notes or comments on the Communication, Planning & Implementation domain:

Workflow Integration: Designing the patient navigation practice to fit into existing processes, policies, and technologies.

Guiding Questions (optional, but recommended):

- What workflows, procedures, or organizational norms have changed due to your patient navigation practice? How will they be sustained?
- Describe any internal or external policies that support the patient navigation practice. Include existing policies or impending policy changes that impact sustainability of the patient navigation role and practice.

Workflow Integration	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice is built into the clinical workflow.	1	2	3	4	5	6	7
4. The practice is easy for clinicians and other clinic staff to implement.	1	2	3	4	5	6	7
5. The practice aligns well with other clinical systems (e.g., EMR).	1	2	3	4	5	6	7
6. The practice is designed to be used consistently.	1	2	3	4	5	6	7

Notes or comments on the Workflow Integration domain:

Monitoring & Evaluation: Assessing the patient navigation practice to inform planning and document results.

Guiding Questions (optional, but recommended):

- Do you have a specific evaluation question you will continue to study for the duration of the patient navigation practice? If yes, describe.
- How have the evaluation results been used and/or disseminated?
- Do you have the necessary support and resources (financial and otherwise) to continue to evaluate the patient navigation practice?

Monitoring & Evaluation	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice has clear documentation to guide process and outcome evaluation.	1	2	3	4	5	6	7
2. The practice has a designated person or persons responsible for monitoring and evaluation of the practice.	1	2	3	4	5	6	7
3. Evaluation and monitoring of the practice are reviewed on a consistent basis.	1	2	3	4	5	6	7
4. Evaluation results inform practice planning and implementation.	1	2	3	4	5	6	7

Notes or comments on the Monitoring & Evaluation domain:

Outcomes & Effectiveness: Understanding and measuring the outcomes and impact of the patient navigation practice.

Guiding Questions (optional, but recommended):

- How is the patient navigation practice impacting measurable outcomes (reach, clinical outcomes, cost, etc)?
- In what ways have the results of measurable outcomes been used to strengthen the patient navigation practice and its ability to be sustained?

Outcomes and Effectiveness	Response Categories						
	To little or no extent	2	3	4	5	6	To a very great extent
1. The practice has evidence of beneficial outcomes.	1	2	3	4	5	6	7
2. The practice is associated with improvement in patient outcomes that are clinically meaningful.	1	2	3	4	5	6	7
4. The practice is linked to patient and provider satisfaction.	1	2	3	4	5	6	7
5. The practice has clear advantages over alternatives.	1	2	3	4	5	6	7

Notes or comments on the Outcomes & Effectiveness domain:

Patient Navigation Sustainability Assessment Tool Scoring Instructions

1. Once you have completed the PNSAT, transfer your responses to the statements to this scoring table to calculate your average scores. Please record the score for each statement (1-7) or write 'NA' if you were not able to answer a statement.
2. Add up your scores in each column. Exclude 'NA'.
3. Calculate the average score for each domain by dividing the domain total by the total number of items with a score. Exclude 'NA'.
4. Calculate the overall score by averaging together all the domain scores.

		Domain							
		Engaged Staff & Leadership	Organizational Context & Capacity	Funding Stability	Engaged Community	Comm., Planning & Implementation	Workflow Integration	Monitoring & Evaluation	Outcomes & Effectiveness
Item	1.								
	2.								
	3.								
	4.								
Domain Total:									
Average Score for Domain:									
Overall Score:									

Next Steps

- These results can be used to guide [sustainability planning for your patient navigation practice](#). Domains with lower scores indicate there is room for improvement.
- Discuss strengths and opportunities for improvement with the sustainability planning team.
- Identify 1-2 domains to be addressed in a time-bound sustainability action plan that are feasible to target for change, and resources and data can be obtained to support the needed changes.
- Develop longer-term strategies to tackle the domains that may be more difficult to modify.
- Make plans to assess your practice's sustainability on an annual basis to monitor practice changes as you strive for ongoing impact.