



Training Unit 2: Implementation

v18/05/2022 (online)

theSNAP.org.uk

Copyright © 2022 (SNAP Unit 2 training v1) University of East Anglia & University of Cambridge. All rights reserved. Adapted in part from, and with the permission of the rights owners of, the Carer Support Needs Assessment Tool (CSNAT) training package. Copyright © 2018 The University of Manchester (School of Nursing, Midwifery and Social Work) / University of Cambridge (Centre for Family Research). All rights reserved. Janet Diffin, Gail Ewing and Gunn Grande have asserted their moral right to be identified as authors of the CSNAT training package for practitioners.

Welcome to Unit 2 of the online training for SNAP – the Support Needs Approach for Patients.

Unit 1 provided training for individual clinicians who will be delivering SNAP in their clinical practice.

Unit 2 is designed to help achieve successful implementation of SNAP by facilitating the introduction of SNAP as a new intervention for your team, at your site, or within your organisation, and then sustaining it.

There are some brief activities in the training for you to complete using the “SNAP Training Workbook for Unit 2” – these are highlighted on the slides with red text and, where the workbook is required, this is flagged by a black WORKBOOK icon in the top right-hand corner of the slide.

We strongly advise that implementation is a group effort rather than the task of one person on their own. If you are doing this Unit 2 training with a colleague or as a small team – which is a great idea – then doing its activities together will really help.

There are four short sections to Unit 2. You can complete them all in one go (as one unit) or do the training in small chunks – a section or two at a time. If you need to complete it in sections, make a note of which section you are up to in your workbook each time you leave the training.

Work through this document, pausing it when asked to, and use the workbook to record your answers to the questions posed – the workbook will both help you to collect your initial thoughts on what implementation might look like in your setting, and it will evidence your training.

In addition to the workbook, we have produced the **SNAP Implementation Resources Pack** which contains some useful resources to help you with implementation which we will introduce to you during this training.

If you haven't already done so, please download the **SNAP Training Workbook for Unit 2** and **SNAP Implementation Resources Pack** from the Training page of the SNAP website now.

Outline

- 1) Planning: getting ready for SNAP implementation
- 2) Piloting: getting started with SNAP implementation
- 3) Cascading SNAP training
- 4) Sustaining SNAP implementation

The training unit starts by thinking about planning – thinking about the steps you can take to get ready for SNAP implementation.

We'll explore piloting SNAP – why this can help and how to go about it.

We'll then think through how you then cascade SNAP through your team, site or organisation.

And we'll finish up by considering how to sustain SNAP for the longer term – building on the foundational work you will have put in through that planning, piloting and cascading.

1

Planning: Getting ready for SNAP implementation

Let's start with Planning – getting ready for SNAP implementation.

Planning and preparing for implementation

- Implementation of SNAP involves a **change in practice**
- Change is challenging – **planning & preparation help**
- **Aim = a clear & agreed plan for your team, site or organisation**

Planning and preparing will mean more successful implementation of SNAP, both initially and in the longer-term.

Our aim (as the developers of SNAP) is to give you an understanding of the key issues to think about early on.

Implementation of SNAP involves a move to a more patient-led process of identifying and addressing support needs – it involves a change in practice. We know that change can be challenging but planning and preparation can help you to meet these challenges.

Your aim is to have a clear and agreed plan in place to help support SNAP implementation within your team, your site, or your organisation.

Implementation Team

- **SNAP Champions:**
 - clinicians advocating for SNAP to be introduced
 - may have used SNAP
- **Administrative support:**
 - support meetings
 - bring the views of the administrative team
 - expertise of IT team

It will really help you if this a group effort, rather than one person leading this on their own, so, if you have not done so already, think about establishing a Implementation Team. The team should include SNAP Champions (so those clinicians who are advocating for SNAP to be introduced and who may have already used SNAP successfully in their practice), as well as administrative support (to both support the meetings and bring the views of the administrative team, and expertise of the IT team).

Think about who has the capacity (and who is enthused) to take this forward with you.



ACTIVITY 1- Consider...

- How has your team, site, or organisation previously introduced and embedded new initiatives?
 - *How were new initiatives introduced previously?*
 - *What preparation was done in advance?*
 - *How were individual clinicians helped to prepare?*
 - *How successful was it?*
 - *What helped?*
 - *What hindered it?*

Before you start to make plans for implementing SNAP, think about how your team, site, or organisation has previously introduced or embedded other new initiatives.

Take a look at Activity 1 in your workbook and the table headed “Consider...” – take a bit of time to consider each of the questions, then pause and jot down a few notes in the table in answer to each.

Take a moment to consider:

- How were new initiatives or practices introduced previously?
- What preparation was done in advance?
- How were individual clinicians helped to prepare for new ways of working? For example, were they consulted about the change? Were they provided with any training to help assist them to make a change in practice?
- How successful do you feel your team, site, or organisation has been in introducing and embedding new ways of working in the past?
- What factors helped this to be successful?
- What factors hindered its success?

Pause and jot a few notes down – just bullet points – to answer each of these questions in your workbook.

This activity works really well if you can think of an example of an initiative that was introduced and embedded well – and one that went not so well.

We highly recommend you do this, and each of the following activities, **with your Implementation Team.**



...and reflect

- What should be done differently when implementing SNAP as a new way of working?



Now – thinking about the answers you’ve noted down in the table, briefly reflect for a moment on this question – what do you think should be done differently when implementing SNAP as a new way of working within your team, site, or organisation?

There’s a space in your workbook to jot your reflections down.

Image source: https://pixabay.com/en/photos/?q=reflect&hp=&image_type=all&order=&cat=&min_width=&min_height=

Useful resources

- NICE: Practical steps to improving the quality of care and services using NICE guidance

<https://intopractice.nice.org.uk/practical-steps-improving-quality-of-care-services-using-nice-guidance/index.html>

- NHS: First steps to quality improvement: a simple guide to improving services

<https://www.england.nhs.uk/improvement-hub/publication/first-steps-towards-quality-improvement-a-simple-guide-to-improving-services/>

There are documents and guides available that can help you through the change process – a couple of handy ones for health care organisations are available from NICE (the UK’s National Institute for Health and Care Excellence) and from NHS England, ...but there are others.

Engage senior management

- Engage the senior management team **early**
- Support for time and resources

So how do you start?

Well engaging your senior management team early will ensure that support is in place going forward.

The early planning you will be doing requires time and resources for it to be a success, so management need to support the Implementation Team to carry out this work.

Planning Meetings

- Purpose:
 - Developing an implementation plan **as a team**
 - Reviewing progress
 - Troubleshooting
- Who should be there? **Implementation Team!**
 - SNAP Champion(s)
 - Admin support and IT team

Setting up a series of planning meetings is incredibly helpful for:

- Developing an implementation plan, as a team, for this new way of working
- Reviewing your progress on that plan, and
- Trouble-shooting any issues

But who should be included in planning meetings?


Well, this should be the Implementation Team! – which includes those SNAP Champions and administrative support that will be key to your success.

Admin support is helpful for taking meeting notes, recording and sharing action points and timeframes, and helping create any documents. But it also ensures the admin team are aware of, and are involved in, the change you are planning – same for the IT team.

Teamwork approaches are associated with more successful implementation – we have seen this with SNAP – even when not all of the team are directly delivering SNAP.

Everyone will play a role in its success.

Proactive Planning

- Proactive planning approach  sustainability
- Plan:
 - describes the **goals**
 - sets out the **preparation work**
 - helps determine **resources** needed and when
 - establishes key **milestones**
 - helps **monitor progress**
 - helps **achieve goals**

Taking a proactive approach to planning will mean fewer hurdles once SNAP implementation is underway. This does require that investment of time and resources but helps ensure that time and energy are well spent on implementing a high quality, well thought out change that can be sustained.

A plan will allow you to describe the goals and sets out the preparation work and activities that your team, site, or organisation will do, and in what order.

It will also help you to determine what resources are needed and when.

It establishes key milestone activities which will help identify what can't begin until other things are completed. It also enables you to monitor your progress against those milestones in order for you to achieve your goals.

At the end of this section, once we've explored what some of the preparation work might involve, we will get you to consider what might go into your Plan.

So, what might the preparation work involve?...

Revisiting current policies

- Any established policies on identifying and addressing patients' needs, or person-centred care?
- Are we entirely delivering on that policy?
- Legitimises implementing SNAP
- Document and communicate to:
 - colleagues
 - senior management team



Well one of the first pieces of work is to find out if your organisation has any established policies, strategies or procedures that relate to identifying and addressing patients' support needs, or to the delivery of person-centred care – as these are the two key goals of SNAP. You might then want to consider, with the senior management team, whether your site is entirely delivering on that policy or strategy.

Knowing about any policy statements or strategies that recognise the benefits of identifying and addressing patients' support needs, or delivering person-centred care, will help legitimise, and provide a clear rationale for, implementing SNAP.

This clear link between your goal of implementing SNAP and your organisation's aims or ambitions can then be documented and communicated to your colleagues and senior management team.

Image source:

https://pixabay.com/en/photos/?q=questionnaire&hp=&image_type=all&order=popular&cat=&min_width=&min_height=

Identifying current practice

- How do we become aware of, and address, patient support needs?
- Creates a baseline
- Hold a discussion session
- Use a short survey
- Document and communicate to:
 - colleagues
 - senior management team



Once you have identified if your organisation has any relevant policies or strategies, the next step is to establish a record of how your team or site currently becomes aware of, and addresses, patients' support needs.

This will establish a 'baseline' to draw comparisons with once you implement SNAP – you will be able to see what has changed as a result of implementing this new evidence-based practice.

To find out what is currently happening you could hold a discussion session with a few clinicians within your team or site.

Or you could use a short survey to try to get the views of all clinicians within your team or site – this is useful if there is a larger group of clinicians, if it is hard to get everyone together, or if you think that keeping things anonymous might help (so they feel more able to express their true opinions). We've given you a survey template in the **SNAP Implementation Resources Pack**.

Whichever method you choose, we recommend you cover the following key questions:

- How do you identify patients' support needs?

- What actions do you tend to take when you have identified that a patient has support needs?
- Do you record anything about their support needs and the actions?
- Where do you record this?

The answers to these questions will provide an overview of how clinicians within the site are identifying and addressing patients' support needs and may give you indication of how person-centred their practice is.

It is helpful to share the outcomes of these discussions or surveys at a feedback session as clinicians may be unaware that their colleagues are working in a similar or a different way to them.

This will also ensure that all clinicians to be aware of the planned implementation and to get a chance to express their views early on, which will also help to engage them in the overall implementation. This is really important for longer-term sustainability.

Image: https://pixabay.com/en/photos/?q=conversation&hp=&image_type=all&order=popular&cat=&min_width=&min_height=

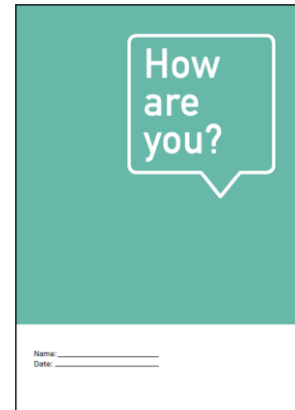
Tip

- Record any information gathered to reflect back on when evaluating how SNAP has changed practice

It will be helpful to think now about where you will record any information gathered through this exercise so that you can reflect back on it at a later stage to evaluate how implementing SNAP has changed practice

Formatting the “How Are You?” Booklet

- Can tailor the booklet to your organisation, but must maintain the SNAP Tool’s integrity– the copyrighted content
- Front page – you could add...
 - Organisation name/logo
 - Space for patient name and date
 - Statement of purpose – or use a cover letter (template in “Resources” on SNAP website)



Next it’s time to take some practical steps.

In Unit 1 we showed you what the SNAP Tool – the ‘*How are you?*’ booklet – looks like. We’ll send you a copy of the SNAP Tool and booklet once your licence is in place.

You can simply use it in the format we send you – just print the booklet – or you might want to tailor it to your team, site, or organisation, while maintaining the integrity of the tool – its copyrighted content. We will also send you image files to use for this.

The booklet has a front page, centre pages (which hold the copyrighted material) and a back page.

On the front page you can add the name or logo of your organisation, and include a space for the patient’s name and the date the booklet was completed – so that the patient can fill these in.

The front page is important as it’s the first view of the booklet for the patient.

You might want to state on the front page that the booklet is part of a process to ensure better support for patients – or (as we explored in Unit 1) develop a cover letter to the patient, to help them understand the purpose of the booklet. We’ve produced a template letter to help you with this which you can find in the Resources section of the SNAP website.

Formatting the “How Are You?” Booklet

- Centre pages – core copyrighted © components of the SNAP Tool (can not be changed):
 - 15 questions
 - ‘anything else’ section
 - response categories
 - Directions for completion
 - Prioritisation statement
 - Copyright details

The image shows a page from the 'How are you?' booklet. It features two columns of questions, each with a corresponding grid for responses. The questions are:

- Do you need more support with:
 - ...understanding your illness
 - ...managing your symptoms (including medication and surgery)
 - ...dealing with your feelings and worries
 - ...looking after any other physical health problems you may have
 - ...having a healthier lifestyle (stop, smoking, eating or getting well)
 - ...getting out and about
 - ...managing household or household
 - ...financial, legal, work or housing issues
- Do you need more support with:
 - ...practical help in the home or garden
 - ...your personal care (e.g. dressing, washing)
 - ...tools or equipment to help you
 - ...family relationships (including talking to your relatives about your illness)
 - ...knowing what to expect in the future
 - ...accessing or using services
 - ...anything else (please write in)

Each question has a grid with columns for 'No', 'A little more', and 'A lot more'.

In the centre pages are the ‘core’ components of the SNAP Tool – so that’s the 15 questions (or domains), the ‘anything else’ section, the response categories, the directions for completion, the prioritisation statement and the SNAP Tool copyright details. These core components of the SNAP Tool need to remain **unchanged**, and the copyright details need to be included below the SNAP Tool questions.

Formatting the “How Are You?” Booklet

- Back page – could add a summary of shared response:
 - support need(s) discussed
 - actions identified together
 - conversation date
 - or use the SNAP Support Plan

SNAP | Support Needs Approach for Patients

Support Needs Approach for Patients (SNAP): Support Plan

Copyright © 2018 (SNAP Support Plan) University of East Anglia & University of Cambridge. No adaptations or modifications allowed without permission. M. Parry, AC. All rights reserved. Please do not disseminate this document without the permission of the University of East Anglia. For more information, please visit <https://www.uea.ac.uk>

Name of patient: _____

Date of needed conversation	Support need prioritised (state the specific need identified, not the item ticked on the SNAP tool)	Shared response (agreed action plan to address support need discussed)

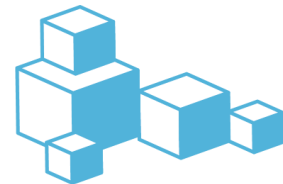
You can also tailor the Back page to suit your organisation – you could include a space for the summary of Stage 4 – the shared response – this could include the support needs identified and prioritised by the patient and discussed, and **actions** you identified together to address those needs, and the date. To help you with this we have produced a SNAP Support Plan which you could include on the back page or use as a separate document – the SNAP Support Plan is sent to you once your licence is in place.

Alternatively, you may prefer to have a different presentation to a booklet, for example an A4 format, or include it as part of an electronic record.

Formatting the “How Are You?” Booklet

- **REMEMBER!**

- The ‘core’ components of the SNAP Tool must not be amended as they are **protected by copyright**
- However, the **back and front covers and any cover letter can be tailored** to suit your individual service



Whatever format you opt for, the ‘core’ components of the SNAP Tool must not be amended as they are protected by copyright. But the back and front covers, and any cover letter you might use, can be tailored to suit your individual service.

Image:

https://pixabay.com/en/photos/?q=building+construction&hp=&image_type=all&order=popular&cat=&min_width=&min_height=

Tips

- Consider support with the design aspect of your documentation e.g. admin, IT
- Consider where to store blank SNAP Tools so that they are easily accessible to clinicians

Think about whether you need any support with the design aspect of your documentation, for example from admin or IT support.

And think about where to store spare copies of the blank SNAP Tools so that they're easily accessible to clinicians to use.

Records

- Think about your current record system:
 - *paper or electronic?*
 - *what information is currently recorded?*
 - *does it need amending to record and retrieve SNAP info?*
- Tip:
 - start using paper records to work out what information you need, before you create an electronic record (if applicable)

Once you've considered how you will format the SNAP Tool and Support Plan, think about how this information will sit within your record systems.

Think about your current record system: Is this a paper-based or electronic?

If your records are electronic and you'd like advice on working with SNAP on e-systems then do please get in touch with us – we are always happy to help.

Also think about: What information is currently recorded?

...you can then think about what may be required to either amend your current record system to enable you to record and retrieve information on SNAP e.g. IT or administrative support.

You might want to start out using paper records until you get a better idea of what information you need to record and then create an electronic record later (if that's appropriate for your service).

This is because you might find that, after a short pilot period of using SNAP in practice, you want to adjust what information you record about SNAP, where you record it and how. We will look at piloting in the next section

Identifying your goals

- Identify your goals and reflect on what successful implementation of SNAP will look like
- SMART system:
 - S pecific
 - M easurable
 - A ttainable
 - R ealistic
 - T imely

It's helpful to identify your overall goals and reflect on what successful implementation of SNAP will look like within your team, site, or organisation.

You could use the SMART system to help with this: think of Specific, Measurable, Attainable, Realistic, and Timely goals

Having a clear view of your goals will help your team, site or organisation to focus on achieving the benefits you hope to gain from using SNAP. This is vital if you want to reflect later on the overall success of the implementation, as it will enable you to identify if you achieved your original goals. This will also inform what information you want to collect on the use of SNAP to help demonstrate how successful the implementation has been. Only by defining what success looks like can you then review the implementation and continue to monitor if you are meeting your goals.

SMART: Specific

- Identify :
 - the area that needs improvement
 - what action you will take
 - what you hope to achieve
 - who will be involved in making the change
- Likelihood of addressing a specific goal is higher than a general goal
- Series of mini targets toward overall goal

To have goals that are specific, you need to identify the area that needs improvement, what action you will take, what you hope to achieve and who will be involved in making the change.

The likelihood of addressing a specific goal is higher than a general goal.

It may be that you have a series of mini targets that will enable you to reach your overall goal.

SMART: Measurable

- Track progress
- Identify:
 - what to measure
 - how to measure
 - who will measure
- For example:
 - n=? SNAP Tools & SNAP needs-led conversations completed
 - shared responses – planned and actioned
 - unmet needs that can't currently be addressed

When you have a goal that is measurable, it is also more manageable. You will also be able to track progress over time. You need to think about: what you will measure in order to show you have met your goals, how you will do it, and who will do this.

For example, you might want to record how many SNAP Tools are completed, how many SNAP needs-led conversations are held, what shared responses get planned and actioned, and any areas of unmet need that can't currently be addressed (as this could help inform future service provision).

SMART: Attainable

- Acceptable to team
- Work within the resources available
- Develop with the team
- Likelihood of achieving a goal will be higher if agreed together

To have goals that are attainable involves thinking about whether your goals are acceptable within your team, site, or organisation given the resources you have available in terms of things like time and staffing levels.

It's worth involving other colleagues in these discussions to ensure goals are attainable – the likelihood of achieving a goal will be higher if they have been agreed together

SMART: Realistic

- Goals should be something you can actually achieve and relevant to your work
- For example:
 - *Is the organisation willing to introduce SNAP?*
 - *Do clinicians have the resources to deliver SNAP?*
 - *Is the patient group able to engage with SNAP?*

Your goals must be something that your team, site, or organisation can actually achieve and that are relevant to your work.

For example:

- Is the organisation willing for you to introduce SNAP?
- Do clinicians have the resources they need to deliver SNAP?
- Is the patient group able to engage with SNAP?

SMART: Timely

- Setting a timeframe will help you keep on track
- Interim time targets toward overall goal
- For example :
 - *when should the pilot have been completed?*
 - *when should all clinicians have received training by?*

Finally, setting a timeframe within which to achieve your goals will help you to stay on track.

You could have interim time targets that build toward your overall goal

For example, when should the pilot have been completed? When should all clinicians have completed training by and be ready to start using SNAP?



ACTIVITY 2- SMART

- Pause the presentation
- Complete the activity in the workbook which encourages you to start thinking about your goals for implementing SNAP using the SMART system

Pause and complete Activity 2 in your workbook which encourages you to start thinking about your goals for implementing SNAP using the SMART system – these are your goals for SNAP as a site, team or organisation, rather than your goals for SNAP as an individual clinician working with a patient

SNAP Implementation Charter

- Purpose: to document goals
- Share with colleagues – including admin staff and senior management team – invite comments
- Useful for communicating:
 - the plan
 - the rationale for implementing SNAP
 - possible constraints to implementation and plans to overcome them

It's a really good idea to develop a SNAP Implementation Charter. This is essentially a statement outlining the key objectives or aims of introducing this new way of working – it documents your goals.

You'll find a template for this in the **SNAP Implementation Resources Pack**.

It can be helpful to share this document with your colleagues, including admin staff and the senior management team – and invite their comments – that way everyone will have a clear understanding of what you are trying to achieve by implementing SNAP and everyone has an opportunity to contribute and feel invested in it.

This document also comes in very useful if you need to deliver any SNAP-related training or activities to your colleagues as they will be able to see a clear rationale for implementing SNAP.

It also encourages you to record the possible constraints that may impact on the success of the implementation of SNAP and how you could overcome these.

Collecting meaningful information

- Keep this simple!
- Helps you:
 - **demonstrate** if your goals have been met
 - **demonstrate** how successful the implementation has been within each team or site
 - **evidence** the work you are doing
- Establish what to collect and where/how to store it (retrievable)
- Don't need a final plan yet – just a starter plan

Once you've established your goals and what successful implementation will look like within your team, site, or organisation, you can think about how to collect meaningful information on the use of SNAP.

Keep this simple!

This information will help you to demonstrate if your goals have been met, how successful the implementation has been within each site, and evidence the work you are doing.

Establishing the information you want to collect and where and how you will store it will help you ensure that information will be easily retrievable – something which could be important for later audit and review.

Remember, you don't have to finalise the details at this stage but it's helpful to start thinking about this early-on in the planning process. So, you don't need a final plan yet – just a starter plan. After a short pilot period of using SNAP in practice you will be more informed about the information you want to collect.

How to collect information on SNAP

- Examples of good practice from clinicians:
 - motivate others
 - useful for training new staff
- Patient feedback:
 - present SNAP at existing patient groups
 - collect stories from patients
 - use a short survey
- Numerical information, e.g.:
 - *how many patients have completed a SNAP Tool and have a Support Plan completed?*

There are a number of different ways to collect information on the use of SNAP:

- You could collect examples of good practice from clinicians. Sharing examples of when the use of SNAP has worked well will help other clinicians remain motivated, and building a collection of examples is also useful for training new staff members, especially if they show how each stage of SNAP was done in practice
- You could collect feedback from patients - you could present SNAP at existing patient groups to discuss with them or ask patients who have experienced SNAP whether it was helpful, and why – so collect their stories. You could also consider using a short patient survey
- You could gather numerical information on how SNAP has been implemented. For example, how many patients have completed a SNAP Tool and have a Support Plan completed?

The most useful information is information that demonstrates completion of the whole of the SNAP intervention – not just completion of the SNAP Tool. Collecting data solely on how many SNAP Tools have been completed will only give you very limited information.

You might also want to explore what sorts of supports are being put in place as a result of using SNAP.

Creating awareness about SNAP

- Within the team
- Across teams/sites/organisation

- Clinical and admin teams:
 - staff noticeboards
 - staff meetings
 - ...response to policy review (legitimises)

- Patients:
 - patient groups
 - patient noticeboards
 - patient newsletters



The final aspect of planning is about awareness raising.

Create as much awareness as possible about your plans to implement SNAP within your team, or across each team, site, or the organisation.

You'll want to find a way of informing the clinical and administrative teams – you could do this on staff noticeboards and at staff meetings. You could say it's a response to the development, review or update of the organisation's strategy on person-centred care (as we explored earlier) – this will give added legitimacy to the implementation - something which is vital for long-term success.

You might also want to find a way of informing patients generally – you could promote it at a patients' group or on noticeboards or in newsletters.

Whether you are awareness-raising with the clinical or admin teams, or with patients, multiple strategies are likely to be needed.



ACTIVITY 3– DRAFT IMPLEMENTATION PLAN

- Pause the presentation
- Start formulating your draft Implementation Plan
- Use the template for this in your workbook

Having listened to this section on planning, pause and jot a few notes down – just bullet points for now – to start formulating your draft Implementation Plan – we have given you a template for this in your workbook in Activity 3.

Alternatively, you could use the template to review the key tasks listed on it and start planning who will lead on them and work out some initial dates for completion.

We've also included a copy of this template in your **SNAP Implementation Resources Pack**.

2

Piloting: Getting started with SNAP implementation

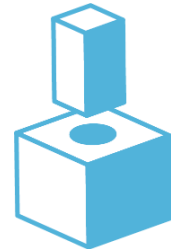
Let's now explore piloting SNAP.

Thinking through the practicalities around incorporating SNAP into routine practice and carrying out a small pilot will help you identify:

- what will enable this to be successful
- what could be a challenge
- and how you could address that

Incorporating SNAP into practice

- Explore with your team, or within each site, the practicalities of how SNAP can best be incorporated into their routine practice
- Teams/sites may each need their own Delivery Plan
- Workbook includes:
 - Guidance for developing a SNAP Delivery Plan
 - Blank template for a SNAP Delivery Plan

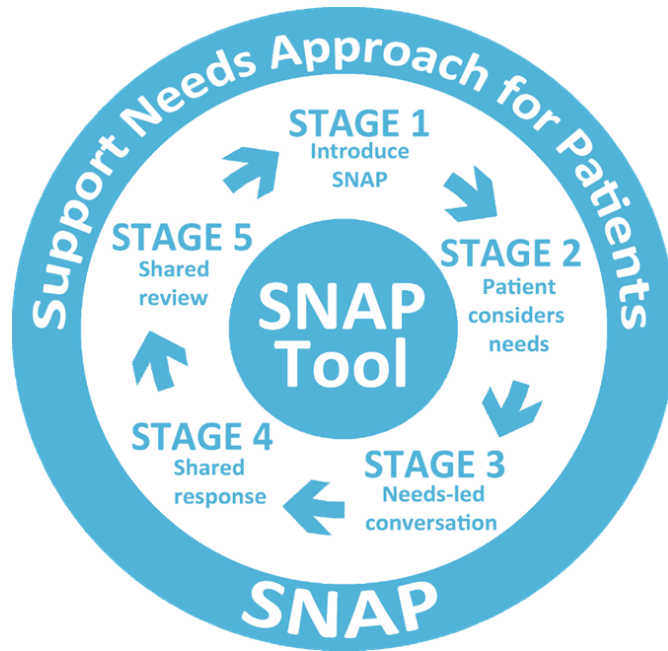


Before you can pilot SNAP you need to explore with your team, or at each site, the practicalities of how SNAP can best be incorporated into their routine practice – how they will work with it day to day.

If you are going to implement SNAP across more than one site it's really important to remember that what works well in one service or site, may not work so well in another. It is not a 'one size fits all' approach – that's a key reason why we're fairly non-prescriptive on how you implement SNAP. The reason for this variation across teams may be because of differences in patient groups (including how often they are seen), or different roles that clinicians have, or simply how each team works.

Developing a SNAP Delivery Plan for each team will really help with this – this is different to the Implementation Plan we explored in Activity 3 – the Implementation Plan was about what needs to happen within your site or organisation to bring in SNAP as a new way of working. The SNAP Delivery Plan is about how SNAP can be delivered by clinicians to individual patients.

We've produced a guidance document for developing a delivery plan for SNAP to help you think about how each stage of SNAP could be incorporated into practice, and also a template for you to complete for your practice – both of these can be found in your workbook (and in your SNAP Implementation Resource Pack), but before we ask you to explore these, let's quickly run through the key points in the next few slides.



Let's – very briefly – go through each of the five stages, one by one and think about implementation.

Stage 1: Introduce SNAP

- How are you going to introduce SNAP?
- Who will introduce it?
- When will SNAP be introduced?
- Where will SNAP be introduced?

Stage 1 is all about introducing SNAP to the patient

As a team you will need to think about and agree:

How you are you going to introduce SNAP – e.g. will it be to all patients?

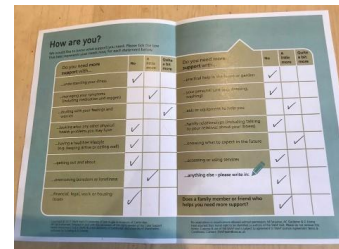
Who will introduce it? Do they need to arrange follow-up?

When will it be introduced to patients? At what point in their care trajectory?

And where will SNAP be introduced?

Stage 2: Patient considers needs

- When will patients have time to reflect on their needs?
- Where will the patient complete the SNAP Tool?
- What will the patient do with their completed SNAP Tool?



In Stage 2 the patient uses the tool to consider their support needs

As a team you will need to think about and agree:

When will patients have time to reflect on their needs and complete the tool?

Where will the patient complete the SNAP Tool? Do they have privacy if needed?

What will the patient do with their completed SNAP Tool?

Stage 3: Needsled conversation

- How will you ask about priorities and explore their individual needs?
- Who will complete the conversation with the patient?
- When will it happen?
- Where will it happen?

Stage 3 is SNAP's needs-led conversation

As a team you will need to think about and agree:

How you will ask about priorities and explore their individual needs

Who will complete the needs-led conversation with the patient?

When will it happen?

And where will it happen?

Stage 4: Shared response

- Who will facilitate the shared response?
- When will it happen?
- Where will it happen?

Stage 4 is about your shared response to the patient's identified prioritised support need

As a team you will need to think about and agree:

Who will facilitate the shared response? Will it be the person who did the SNAP needs-led conversation?

When will it happen? Will it be within the SNAP needs-led conversation?

And where will it happen?

Stage 5: Shared review

- Who will facilitate the shared review?
- When and where will it happen?
- How will the review be recorded?
- How will you decide whether or when SNAP is needed again (Stages 1-5)?

The final stage, Stage 5, is the shared review.

As a team you will need to think about and agree:

Who will facilitate the shared review?

When and where will it happen?

How will the review be recorded?

And how will you decide whether or when SNAP is needed again (revisiting Stages 1-5)?



ACTIVITY 4– DRAFT DELIVERY PLAN

- Pause the presentation
- Start formulating your draft Delivery Plan
- Use the guidance and template for this in your workbook

Pause and find Activity 4 in your workbook:

- the Guidance for developing a SNAP delivery plan,
- and the Blank Template for the SNAP delivery plan

Jot a few notes down on the template – just bullet points for now – to note your first thoughts for the delivery plan – going forward you will need to work on this template with the teams you are working with, so we’ve also included a copy of the guidance and template in your **SNAP Implementation Resources Pack**.

Admin things...

- Tracking use of SNAP:
 - Where in the record system?
 - Reference copy of SNAP Tool & Support Plan for patient?
 - Clinician log?
- Where to keep 'blank' SNAP Tools & Support Plans:
 - New patient packs
 - Supplies for clinicians' bags/ clinic rooms

You might also like to think about some administrative things related to SNAP within each site such as tracking use of SNAP – think about where the completed SNAP Tool and Support Plan should sit within the record system within each site and whether a reference copy is given to the patient. You may want to encourage clinicians to keep a 'log' of which patients have had the SNAP Tool, and when.

- In terms of where 'blank' SNAP Tools and Support Plans will be located, ready for use, some sites with paper-based record systems include a 'blank' SNAP Tool within the pack they use when seeing new patients so it's readily at hand to introduce to the patient. Community-based clinicians tend to routinely carry them - keeping a stash in their bags – and clinic-based clinicians keep spares in clinic rooms.

Keeping things accessible really helps implement SNAP.

Enablers and challenges

- Identify enablers and challenges
- Explore with colleagues how to address likely challenges
- Stakeholder analysis
 - NHS England & NHS Improvement – Online library of Quality, Service Improvement and Redesign tools – Stakeholder Analysis
 - <https://www.england.nhs.uk/wp-content/uploads/2022/02/qsir-stakeholder-analysis.pdf>

Now that you have thought about the practicalities of how SNAP might work within each site – at least initially – it’s helpful to reflect on those things which may enable clinicians to successfully integrate SNAP into their practice, and what may be challenges for clinicians. It’s then important to explore with colleagues how any identified challenges could be overcome. Some enablers and challenges will relate to the overall organisation, but others may be specific to the site or team – and some to individuals.

Thinking through potential enablers and challenges early on will allow you and your colleagues to take a more proactive approach to the planning process and think about difficulties before they actually occur.

You could ask colleagues to reflect on their concerns or worries about using SNAP in their practice and use these as a starting point for exploring together ways to address them.

It’s helpful to also think about who could help enable the success of the implementation and how to get them on board – as well as identifying those that may present challenges. A stakeholder analysis will help you to think through this. For example, those people with a significant interest in the outcomes of implementing SNAP and a high level of influence within your team, site, or organisation are enablers as they are really important for bringing others on board. The UK’s NHS England and NHS Improvement has a short useful document about stakeholder analysis.



ACTIVITY 5– ENABLERS & CHALLENGES

- Pause the presentation
- Complete the workbook activity on enablers and challenges

Pause and complete Activity 5 in your workbook – which encourages you to start thinking about those enablers and challenges

Piloting

- Useful for:
 - Gaining experience in using SNAP
 - Identifying early enablers and challenges
 - Identifying and testing solutions
 - Gathering material for additional training
- **Tip:** A pilot will help you to reflect on *potential* challenges identified and whether they *actually* arose in practice

Once you've made plans for how each stage of SNAP might work within each team, and you've identified the likely enablers and challenges, you are in a really strong position to carry out a small pilot of using SNAP.

Piloting will enable you to get experience of using SNAP and identify early on what works and what doesn't work so well. Solutions to any issues that do come up can also be tried and tested early. This may decrease the likelihood of issues arising once you implement SNAP more widely.

If you plan to provide training to your colleagues (*in addition to our free online training*), and you've done a pilot, you'll be able to speak from your own experience when explaining what SNAP is, and how to best incorporate it into practice.

Involving other staff in the process of introducing and embedding a new way of working is also important for getting feedback and may help reduce any resistance to adapting to a new way of working as they will have been involved from the outset.

Importantly, a small pilot will help you to reflect on the potential challenges you and others identified and whether they actually arose in practice.

Plan, Do, Study, Act

- **Plan** – the change to be tested or implemented
- **Do** – carry out the test or change
- **Study** – data before and after the change and reflect on what was learned
- **Act** – plan the next change cycle or full implementation

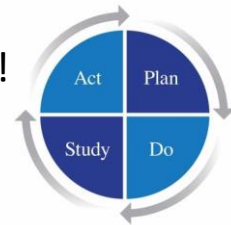


The 'Plan, Do, Study, Act' cycle is a useful guide for your small-scale pilot of SNAP.

- **Plan** the change to be tested or implemented
- **Do** – so, carry out the test or change
- **Study** – gather data before and after the change and reflect on what was learned
- and **Act** – plan the next change cycle or go into full implementation

Plan, Do, Study, Act

- Plan:
 - Which clinicians will pilot the use of SNAP?
 - How long will you pilot SNAP for?
 - What are your goals for the pilot?
 - How will you collect information during the pilot?
 - Pilot Monitoring Template
- Do:
 - Run the pilot - start using SNAP in practice!



So, when you Plan you need to think about:

- Which clinicians will pilot the use of SNAP? Start with a few who are already interested in and motivated to use SNAP. Clinical members of the Implementation Team may be ideal, particularly if they will be delivering any related training to colleagues.
- How long will you pilot SNAP for? You may opt to use SNAP with a certain number of patients first, or pilot it over a set period of time such as a couple months.
- What are your goals for the pilot? You may have a number of goals for it. You may hope it'll inform how the use of SNAP will work within each site, help finalise the details of the format you will use for the SNAP Tool, what information you will record within the Support Plan and your records system – or it may be about getting feedback from patients and clinicians on how it's working
- How will you collect information during the pilot? It is important to collect information to enable you to judge whether you have met your pilot's goals

We've developed a Pilot Monitoring Template that you can ask clinicians taking part in the pilot to complete in order to: summarise their use of SNAP, record an exemplar of delivering SNAP and document what worked well for them or areas they feel may need

improvement. This will be a useful starting point when it comes to discussing the overall outcomes of the pilot. You will find the template in the **SNAP Implementation Resources Pack**.

Moving onto Do – well once you have planned how you will carry out your pilot, the next stage is to start piloting – start using SNAP in practice.

Plan, Do, Study, Act

- Study:
 - Review completed Pilot Monitoring Templates
 - Meetings with piloting clinicians and other stakeholders (e.g. senior managers and admin staff)
 - Consider what information to share (e.g. number of SNAP needs-led conversations, shared planning outcomes)
 - Get feedback and ideas from your colleagues and senior management team
- Act:
 - Wider implementation or make some changes and test with another small pilot



In terms of “Study”, once you’ve completed the pilot, evaluate it to decide if you are ready to scale up to wider implementation across more teams or sites, or if some changes are required.

How you evaluate the pilot will depend on your original goals.

- You could review the completed Pilot Monitoring Templates – if you used them.
- You could set up meetings with those who took part in the pilot and other stakeholders (such as senior managers and admin staff) to get their feedback and reflect on all the information gathered (and you could use the completed Pilot Monitoring Templates as a basis for these discussions).

Think about what information you should share in relation to the use of SNAP during the pilot - for example, the number of SNAP needs-led conversations held and the outcomes of shared planning.

Getting feedback and ideas from your colleagues and senior management team for further suggestions on how SNAP could work in practice will be really helpful

Moving onto Act:

Once you have evaluated the pilot you can then decide if you are ready to move to wider implementation or if you want to make some changes to how you will use SNAP in practice and test out these changes with another small pilot.

You may find that there may be sources of small amounts of funding available to you from your organisation, or external organisations, to resource pilot work.



ACTIVITY 6– PILOT PLANNING

- Pause the presentation
- Complete the workbook activity on planning your pilot

Pause and complete Activity 6 in your workbook which will help you to plan your pilot

3

Cascading SNAP training

Once the pilot has been completed and evaluated, and you're ready to roll SNAP out across your teams, sites, or organisation, you need a method for providing SNAP training for everyone who will be delivering SNAP in their practice.

This is a licence requirement as it is essential that all clinicians who will be using SNAP develop an understanding of SNAP and know how to use it in their practice.

Training others after the pilot

Two main methods:

- 1) Completion of SNAP online training (Unit 1) + team discussion sessions (pre & post)
 - Access to computer/tablet for Unit 1?
 - Professional development time for Unit 1?
 - Time-frame for completing Unit 1?

There are two main methods for providing this training:

You can provide clinicians with the link to access and complete Unit 1 online and do the activities in its workbook and provide an opportunity for discussions with the rest of the team either as they access the training together, or shortly afterwards. These discussions are also a further chance for you to give feedback on the pilot and share examples of how you've used SNAP in practice, and to give your colleagues the opportunity to ask questions. It's also helpful to have a group discussion prior to your colleagues completing Unit 1 so you can present the rationale for implementing SNAP in your locality.

Think through a few questions in planning this, such as:

- Will all clinicians have access to a computer or tablet to complete Unit 1?
- Will they be given time to complete Unit 1 as part of their professional development?
- Will you need to set a timeframe for Unit 1 to be completed? (this would be important if you plan to launch wider scale implementation by a certain date)

Training others after the pilot

Two main methods:

- 1) Completion of SNAP online training (Unit 1) + team discussion sessions (pre & post)
 - Access to computer/tablet for Unit 1?
 - Professional development time for Unit 1?
 - Time-frame for completing Unit 1?

- 2) Face-to-face training session delivered by Implementation Team

Or you could provide a face-to-face training session delivered by the Implementation Team

How you deliver your training sessions will depend on the nature of the service and resources available – for example, it may be easier for some sites to have one large training session but for others it may be more feasible to have a series of smaller training sessions e.g. perhaps due to difficulties in getting all clinicians within the site together at one time.

The amount of detail you choose to go into within these sessions is up to your individual site, however, it should match what is covered within Unit 1 and you can use the workbook from Unit 1 to support this.

Again, share any examples of using SNAP in practice gathered during the pilot.

Common questions asked about SNAP

- We have the answers!
 - ...in the SNAP Implementation Resources Pack
 - ...and short film on the website training page

Whichever option you choose, a collegial approach with discussion time is likely to work best: training sessions are a chance to gain valuable feedback on how colleagues feel the approach may work best within the service and promote a sense of ownership.

It's important to give your colleagues a chance to discuss any concerns or worries they may have about this new way of working – you may have had similar concerns initially.

To help you respond to your colleagues, we've compiled a list of the most commonly asked questions and concerns about using SNAP and have added these to the **SNAP Implementation Resources Pack** – you can also see a really helpful short film clip of two clinicians who use SNAP in their daily practice sharing their thoughts on some of these questions on the website training page.

Other thoughts on training...

- Post-training meeting – once using SNAP in practice
- Training new staff
- Refresher sessions
- Additional training requirements e.g. communication skills, change management

Whichever method of training you use, we recommend that you follow up with all clinicians afterwards with a post-training staff meeting to give them the opportunity to ask questions or share any worries they have once they have started to use SNAP in their practice. This will enable you to provide continued support to your colleagues in keeping going (or even getting started) with using SNAP which is vitally important for the longer-term sustainability.

Have a plan in place to train new staff in the use of SNAP – getting them to access the online training is ideal for this; you could factor it into any staff induction procedures.

It's also helpful to consider when it might be appropriate to have refresher sessions with staff to sustain enthusiasm for SNAP over time. You could consult with colleagues on whether they'd find a refresher session helpful once implementation is underway.

It's also worth considering whether any clinicians who will be using SNAP in their practice would benefit from any additional training, such as in communication skills and change management

4

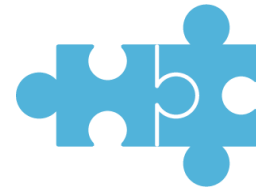
Sustaining SNAP implementation

In this final section we'll look at how to monitor the progress of, and continually review, implementation of SNAP.

It is important to continually review the progress of SNAP implementation so that if any challenges arise, solutions can be promptly identified and trialled.

Sustaining a new way of working

- Aim for SNAP to become the ‘norm’
- The work already done will help (communicating clearly, agreeing processes, training everyone)
- Senior management support



Once you have moved to wider implementation, you want to ensure that SNAP gets integrated into everyday practice and becomes ‘the norm’ rather than being viewed as an ‘add-on’.

It’s then important to focus on sustaining this new way of working.

Much of what we’ve already covered will have helped with this - for example, communicating with all clinicians from the outset about your plans, agreeing a recording mechanism, and training everyone. Sustainability is then about holding onto the benefits of using SNAP and making small changes as required, without reverting to the old way of doing things.

In the same way that it was important to ensure there is support from the senior management team in the early days, it is also vital important that this is in place in order for you to do the work needed to sustain things. Rather than wait until the implementation is actually underway, try to think about this early on so you can make plans for how and when you’ll do this within your team, site, or organisation.

Image: https://pixabay.com/en/photos/?q=together&hp=&image_type=all&order=popular&cat=&min_width=&min_height=

Methods for sustaining successful implementation

- 1) Monitor progress with SNAP
- 2) Engage your colleagues
- 3) Normalise SNAP



There are three key methods that will help ensure the longer-term sustainability of SNAP: Monitor progress with SNAP, Engage your colleagues, and Normalise SNAP

- You will need to regularly monitor uptake and progress and review this, as a team, regularly – we'll say a bit more about this on the next slide.
- Try to engage with everyone impacted by this new way of working on an on-going basis to maintain those initial levels of enthusiasm and motivation. This includes clinicians using SNAP, admin staff, the IT team and senior management.
- And put measures in place to help to 'normalise' the use of SNAP so that it becomes embedded into the 'culture' of the team, site, or organisation.

1) Monitoring and reviewing progress

- Who will be responsible for monitoring progress?
- Will you set up meetings specifically to reflect on your progress?
- How often will you reflect on your progress?
- What information will you use as a basis for monitoring your progress?

Once implementation is underway on a wider scale, get a plan in place to continually monitor progress, and reflect on this as a team, to identify what is working well and what might need to be improved.

There are a number of things to consider when planning for how you'll monitor progress of the implementation:

- Who will be responsible for monitoring progress?

- This is a team responsibility. Leaving one person to have overall responsibility is particularly problematic if this person goes on annual/sick leave or leaves the organisation completely.
- For this reason, it's also important to ensure that you document the work you are doing, and store this in a central location so that if someone else joins the team, they are able to access it easily.

- Think about whether you'll set up meetings specifically to reflect on your progress

- In the same way that we advised setting up a series of planning meetings, we similarly advise you set up series of meetings to reflect on your progress as a team.

- How often will you reflect on your progress?

- Within the first year in particular, it is recommended that you meet regularly to discuss your progress. It may be that you will carry out a formal audit at a certain point in time to help reflect on the progress of the implementation, for example every six months.

- What information will you use as a basis for monitoring your progress?

- You could refer back to your 'charter' for this

Earlier you also started to plan for what information you would collect to help you determine if you were meeting your goals and you'll have set up your record systems so that this information can be easily retrieved.

- This may have included using SNAP with a certain number of patients and the recording of outcomes

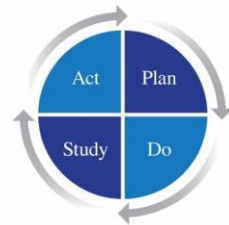
- If you opted to record details such as those on the SNAP Support Plan, you'll be able to identify the outcomes of Stage 4 – shared action planning.

- Importantly, you will also be able to identify any areas in which patients have support needs that you've been unable to address. These key unmet needs for patients provide powerful evidence of gaps in service provision for which you may be able to seek funding.

1) Monitoring and reviewing progress

If you are not meeting your goals..

- Were the goals realistic? Were they SMART?
- Discuss with colleagues what prevented goal attainment and what would help
- Repeat the Plan-Do-Study-Act cycle



So what will you do if you are not meeting your goals?

Firstly, it is important to reflect on whether the goals you set initially were realistic. Were they SMART?

It is then important to have discussions with your colleagues about what prevented you from meeting your goals and what changes could be made to help address any issues identified.

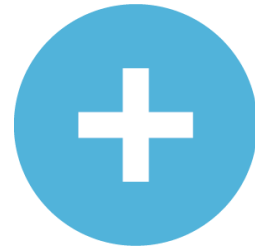
You can then try out these changes and re-evaluate at a later point in time to see if they were successful.

The Plan, Do, Study, Act cycle is again a useful guide to this process.

1) Monitoring and reviewing progress

Feedback

- Provide regular feedback to everyone:
 - senior management team
 - admin and IT staff
 - clinical colleagues
- Seeing progress incentivises
- Co-develop solutions



Provide regular feedback to everyone on the progress of implementation – so not just your clinical colleagues, but also to the senior management team and admin staff, reception staff, the IT team – everyone!

Being able to see progress and improvement is a great incentive for everyone to continue using this new way of working.

Equally, sharing any difficulties or issues is important for thinking together of ways to overcome them – co-developing solutions.

Image: https://pixabay.com/en/photos/?q=better&hp=&image_type=all&order=popular&cat=&min_width=&min_height=

2) Involving and engaging colleagues

- Get feedback and act on it – listen and adapt
- Motivation and enthusiasm may start high, but need sustaining
- Ongoing engagement helps:
 - prevent reverting to previous practice
 - identification of positives and challenges
 - development of a culture of involvement

Try to ensure your colleagues feel involved.

Involving everyone in the process of implementation, communicating with them effectively, and getting and acting on feedback from them is important for encouraging them to support this new way of working. If you want them to listen and adapt, then you – as Implementation Team – should do the same.

Levels of motivation and enthusiasm may be high when implementation first begins, but the challenge is to then sustain this over time. Although their level and type of involvement will vary over time and between individuals, clinicians who will be using SNAP need to feel involved throughout: in the planning period, during the pilot period and once the implementation is underway.

This ongoing engagement will:

- help ensure that clinicians who initially adapt to using SNAP don't revert back to how they worked previously.
 - it will help identify what is working well and what areas could be improved.
 - and by obtaining staff views on an ongoing basis you'll create 'a culture of involvement' and ensure they feel that their opinions matter.

2) Involving and engaging colleagues

- Gather feedback formally & informally
 - explore & address challenges
 - use the motivation & successes of some to encourage others

- Share good practice:
 - Exemplars from clinicians
 - Feedback from patients (*ask about “How Are You?” Booklet*)

- Network with others externally

You can gather their feedback, either formally at team meetings, or informally by simply asking staff how things are going.

A group refresher training session provides a great opportunity to get feedback, or you could use a short staff questionnaire – we’ve given you a template for such a survey in the **SNAP Implementation Resources Pack**.

You could use the results of this as a basis for further discussions – again, either formally in a focus group or team meeting, or informally.

As well as exploring and addressing the challenges, use these meetings to find out about the positives - why they feel motivated and what has helped them to integrate SNAP into their practice. This may help address the concerns of those more resistant to this new way of working with patients, and help you explore why they feel that way.

Similarly, try and share good practice. You could gather exemplars from clinicians who have used SNAP in a meaningful way and then share these either formally at staff meetings, or informally during discussions with your colleagues. If you’ve collected feedback from patients on SNAP and how beneficial it has been for them, get their permission to share this information. This will evidence the work you’re doing with patients beyond the reporting of any numerical ‘data’ and will help to maintain

enthusiasm amongst clinicians if they can see the positive outcomes SNAP has helped to achieve.

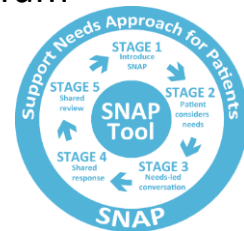
A tip for when asking patients about their experience is to ask what they thought of the “How Are You?” Booklet and what happened once they had filled it in – don’t ask them what they thought of “SNAP” as that is unlikely to mean anything to them – they are unlikely to know what “SNAP” is.

It’s a good idea to keep a log of what is working well and any issues you or your colleagues are experiencing – this can be used as a basis for discussion at your meetings to monitor progress and identify solutions.

Another idea is to network with others. It’s incredibly helpful to link up with clinicians at other organisations to discuss how they are using SNAP. This is helpful for sharing good practice and finding out what has worked well for them, or for sharing any challenges you are having and getting advice on how to overcome these.

3) Normalising use SNAP

- Remove links to old ways of working
- Reminder systems:
 - stickers
 - fix the “How Are You? Booklet to the front of notes
 - electronic reminder system
 - SNAP tracking board
 - ‘aide-memoire’ e.g. 5-stages of SNAP diagram



To help ensure the longer-term sustainability of this new way of working remove links to ‘old ways’ if that is relevant – for example, old paperwork or records. This helps avoid confusion and reiterates that, moving forward, SNAP is the process of support to be used with patients.

You want to ensure that there are processes in place to help ‘normalise’ use of SNAP. You may have already achieved some of this through things like tailoring the “*How Are You? Booklet* to suit your organisation and record systems, but there are other things you can do:

1) Reminder systems are any method of keeping SNAP in view - they act as a reminder and prompt staff to take action; this is a useful way of helping people to adapt to a new way of working.

You could:

- use ‘SNAP’ stickers in notes or diaries to remind when a SNAP conversation is due.
- staple the “How Are You? Booklet to the front of the notes to remind clinicians to introduce it to the patient
- set up an electronic reminder system.

- keep a board in the central office which tracks which patient have had the SNAP Tool introduced to them and which SNAP stage they are currently at – so, has a SNAP needs-led conversation been completed, or is it still due?
 - You could also use ‘aide-memoires’ such as the “5-stages of SNAP diagram” that you can download from Resources page of the SNAP website and pin up on noticeboards

3) Normalising use SNAP

- Agenda item: staff meetings & multi-disciplinary team meetings
- Add SNAP training to new staff induction programmes
- Hand responsibility for ongoing monitoring of SNAP over to senior managers

2) You could add SNAP as an agenda item to existing staff, team or multidisciplinary meetings – as you discuss each patient, check whether SNAP has been used with the patient and its outcome. This enables team managers to keep SNAP ‘on the agenda’. In the same way as other routine practices, SNAP should be discussed regularly with clinicians as a normal part of their role. This will ensure that using SNAP is not seen as a short-term project which is solely reliant on members of the Implementation Team for its continued use. It will become part of routine practice.

These meetings can also be used to get feedback and to share examples of good practice and address any concerns or worries.

You can also ask everyone involved for ideas on what would help them to normalise SNAP – the clinicians delivering it and the senior managers and admin staff supporting it.

3) Another idea is to add SNAP training to new staff induction programmes – in fact this is essential!

4) And consider whether responsibility for ongoing monitoring of SNAP can be handed over to senior managers to signal that this is no longer a ‘pilot’



ACTIVITY 7 – NORMALISING SNAP

- Pause the presentation
- Complete the workbook activity on normalising the use of SNAP

Pause and complete the final activity in your workbook which gets you to think of ways to help ‘normalise’ the use of SNAP

Final checklist

- Support from senior management to move to wider implementation?
- All clinicians completed SNAP training?
- SNAP site champions been identified within each team/site implementing SNAP?
- Pilot of SNAP completed at each site?
- Everyone knows start date of wider SNAP implementation?
- All clinicians have a copy of the SNAP Delivery Plan?
- Plans for sustaining SNAP in place?


Finally, before moving to wider implementation of SNAP, it's useful to reflect on a few points to determine if you are ready – think of this as a “final checklist”.

- Have you got support from senior management to move to wider implementation?
- Have all clinicians who will be using SNAP in practice completed their training?
- Have two or three SNAP site champions been identified within each team/site implementing SNAP (depending on team/site size)?
- Has a pilot of SNAP been completed at each site?
- Have all clinicians, senior managers and admin staff been notified of the start date of the wider SNAP implementation?
- Do all clinicians who will be delivering SNAP got a copy of the SNAP Delivery Plan?
- Are plans in place for sustaining SNAP?

We've given you a template for this final checklist in the **SNAP Implementation Resources Pack**.

SNAP Support Needs Approach for Patients

SNAP: Support Needs Approach for Patients




Gail Ewing, Morag Farquhar, Carole Gardener

Photo credit: Peter Jones

SNAP development work was conducted by Morag Farquhar, Carole Gardener and Gail Ewing, at the University of East Anglia and University of Cambridge...

SNAP Support Needs Approach for Patients

SNAP: Support Needs Approach for Patients



...and funded by both the National Institute for Health Research and Marie Curie.



CONGRATULATIONS!

And so now it's "congratulations!" – you've reached the end of Unit 2 of the online training in SNAP

You will find a certificate at the back of your workbook, with learning outcomes, that you can complete for your records.

[END]

