

 **Tool 4.1: IDENTIFYING BARRIERS & DRIVERS: PROGRAM SETTING**

**Section in Planner: Phase 2, Step 4 (4.1)**

**Why is this important?**

Planners are encouraged to systematically examine potential barriers (challenges) and drivers (facilitating or supporting factors) to the implementation of the selected/preferred program option. When introducing any change, what is often considered at the outset to be a simple adjustment to the current way of doing things can have much broader impacts as the full extent of the proposed change becomes clear.

**How to use this tool:**

The Stroke Recovery in Motion planning model provides an established framework\* for identifying and addressing barriers and drivers to effective program implementation by grouping potential issues into three categories.

This worksheet outlines factors related to the category: *organizational setting and systems,* e.g. the structure, policies and processes, and cultural elements that might influence or govern the practices of program providers and possible community partners.

You will have answers to most of these questions from the work you completed in Phase 1. Explore any issues that are not clear or present potential challenges. Rank the priority of each issue. Remember to also consider possible assets; you will want to leverage any key advantages or local support for implementation. Use and adapt this tool to suit your own setting and circumstances by adding factors, as needed.

**User Comments:**

*“The assessing barriers tool includes barriers we have faced related to the organizational structure and would have helped us to have those important conversations or help put things on the table for discussion in a more neutral way. The tool would facilitate a more objective conversation and get at what the real needs and issues are.”* (Program Coordinator)

*\** Graham ID, Logan J. Innovations in knowledge transfer and continuity of care. Can J Nurs Res. 2004;36(2):89–103.

**Phase 2, Step 4: Identification of Barriers and Drivers – factors associated with the exercise PROGRAM SETTING**

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| The following factors associated with the PROGRAM SETTING are known to influence implementation. These factors focus on the provider organization, relevant delivery systems, community partnerships, and include cultural, social, structural, and economic capacities and concerns. Assess these factors as they relate to your selected program(s) to identify potential barriers (challenges to overcome) or drivers (supportive assets) to implementation. Rank the priority of each factor.  | ⌧ NO | Potential BARRIER | 🗹YES | Potential DRIVER | NOT SURE(explore further) | PRIORITY (1-12) |
| 1 | Is this program compatible with the mandate, culture, and values in our organization *and* amongst our community stakeholders and partners?  |  | Poor matchPotential conflict |  | Good alignment |  |  |
| 2 | What is the level of organizational investment and prioritization for this program? |  | Low priority |  | High priority |  |  |
| 3 | Do we have competing service responsibilities or programs?*Consider time/cost/staffing resources implications for other programs* |  | Competition |  | No competition |  |  |
| 4 | Do we have buy-in from our organization including relevant systems management, *and* from our partners? |  | Not convinced |  | Highly supportive |  |  |
| 5 | Have key stakeholders been included in decision-making? |  | GapsLimited engagement |  | Inclusive |  |  |
| 6 | What is the current stress level within our organization?*Consider level of trust, respect, cohesion – critical to implementing change* |  | High level stress |  | Low level stressReceptive to change |  |  |
| 7 | Is this program recognized by our funder/sponsor(s)? |  | No familiarity/support |  | Positive recognition |  |  |
| 8 | Do we have a continuous source of funding/sponsorship to deliver this program? *Consider e.g. staffing, training, administration, space, equipment expenses* |  | No continuous funding |  | Stable funding |  |  |
| 9 | Do we have the administrative infrastructure and capacity to manage this program? *e.g. promotion, registration and pre-screening processes, fee management, space and equipment, staffing, training, supervision and safety, data management*  |  | Minimal infrastructure |  | Established, good infrastructure |  |  |
| 10 | Can we address any necessary program commissioning requirements?*e.g. medico-legal, risk management, emergency procedures, licensing, insurance, waivers and policies, other regulatory, partnership or collaboration agreements?* |  | Difficult to accommodate  |  | Easily accommodated |  |  |
| 11 | Can we address participant/client recruitment and retention factors? *e.g. discharge planning/referral patterns from institutional, family practice, private PT practice, or rehabilitation centre sources and ongoing enrolment capacity*  |  | Difficult to accommodate  |  | Easily accommodated |  |  |
| 12 | Have we considered participant transportation needs including availability of e.g. specialized transport services, volunteer drivers, reliance on family caregivers? |  | Difficult to accommodate  |  | Easily accommodated |  |  |
|  | Other Factors? |  |  |  |  |  |  |