# Improvement Collaborative Session 1

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#### **TODAY:**

Build commitment, motivation and connection

Establish **foundations** for future learning, sharing, and open conversation

Begin our QI journey – understand why use a QI approach and not feel intimated by the approach

#### Agenda:

- Welcome and introductions
- What is the Improvement Collaborative and expectations through programme
- Creating a safe space
- Why Quality Improvement?
- The process
- Next steps



# ..Quality Improvement Collaborative?



# **Defining Quality Improvement**

Quality ... Improvement...

Improving quality in health care is about making it safe, effective, patient-centred, timely, efficient and equitable.

We think of quality improvement as a systematic approach that uses specific techniques to improve quality in health and health care.

https://www.health.org.uk/topics/quality-improvement



# What is Quality Improvement (Qi)?

- In healthcare Qi is a systematic, bottom-up approach to improving services
- Qi recognises that frontline staff are best at identifying where things could be done differently within their teams and at finding the solutions
- When fully adopted, Qi becomes the way in which care is provided





## Improvement Collaborative

#### The ship for our journey

- 7 month programme supporting teams through a QI cycle
- Action periods punctuated by monthly improvement collaborative sessions to support learning and sharing
- Involving 7 borough based teams across South London with various job roles – working together to improve CVD prevention.
- Led by you as the people closest to the issues.



#### What will our Collaborative look like?

#### Relationships and shared learning

Support teams and individuals to connect with each other and problem solve together in safe, multi-professional and non-hierarchical spaces

#### 'bottom up'

We know that each practice is different and that local expertise is essential

#### **Engage with inequalities**

We will be data-driven and support people to engage with inequalities where they exist and seek to co-design with diverse voices in all we do

#### Start small...

Improvement science tells us that starting small, with small passionate groups, and with simple ideas, is the best way to achieve change

#### **Co-design**

People with lived experience will be equal partners in this programme, and ideally involved at every level and every phase

#### Joy

This work is really important but it can also be fun and motivating



# What can I expect?

#### What's expected of me?

- Form an improvement team at your practice/PCN including a variety of roles and seek patient/ lived experience involvement where possible
- Actively participate in collaborative sessions sharing progress and learning
- Keep your team coordinator updated on the developments in your project and any successes/failures (both provide opportunity for learning)

#### What support can I expect?

- Learning tools and techniques, tailored QI coaching and expert by experience coaching through your project
- CVD resources for practices e.g. UCLPartners proactive care frameworks
- Facilitated peer to peer sharing
- A diverse network alongside the Collaborative for broader discussion, sharing and inspiration

#### What will I gain?

- Learn practical skills in QI, codesign and leadership
- Opportunity to share and learn with peers regionally and nationally
- Be the expert work with your team and service users to understand practice, generate ideas and test them
- See practice in your organisation change and improve, real-time
- Improve the experience for your patients and staff



# In this space (our ground rules)

We show courage to speak up, share openly, and challenge kindly.

We approach topics with curiosity, humility and listen actively.

We foster a safe space for sharing for all. We share for improvement, not judgement.

We value all voices and seek to be inclusive in all we do. We are receptive to different ideas and ways of doing things.

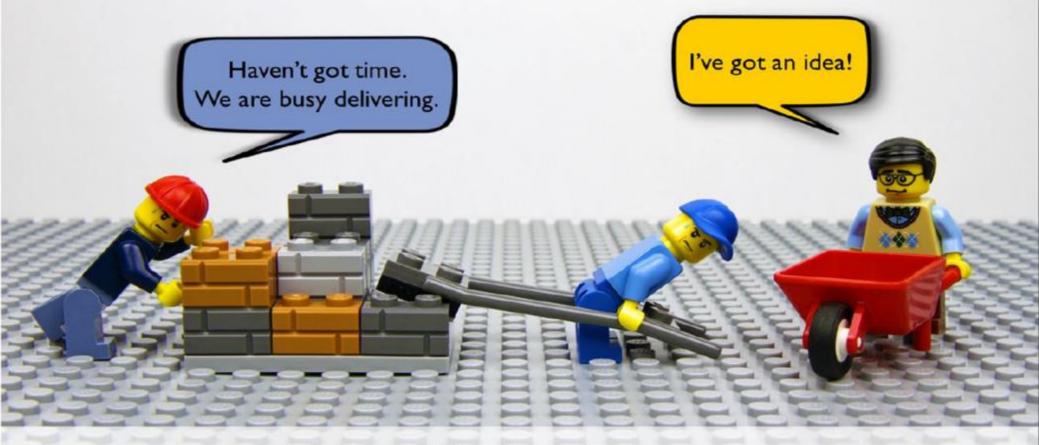
We work collaboratively towards our shared goal.



# What is Quality Improvement and why do it?



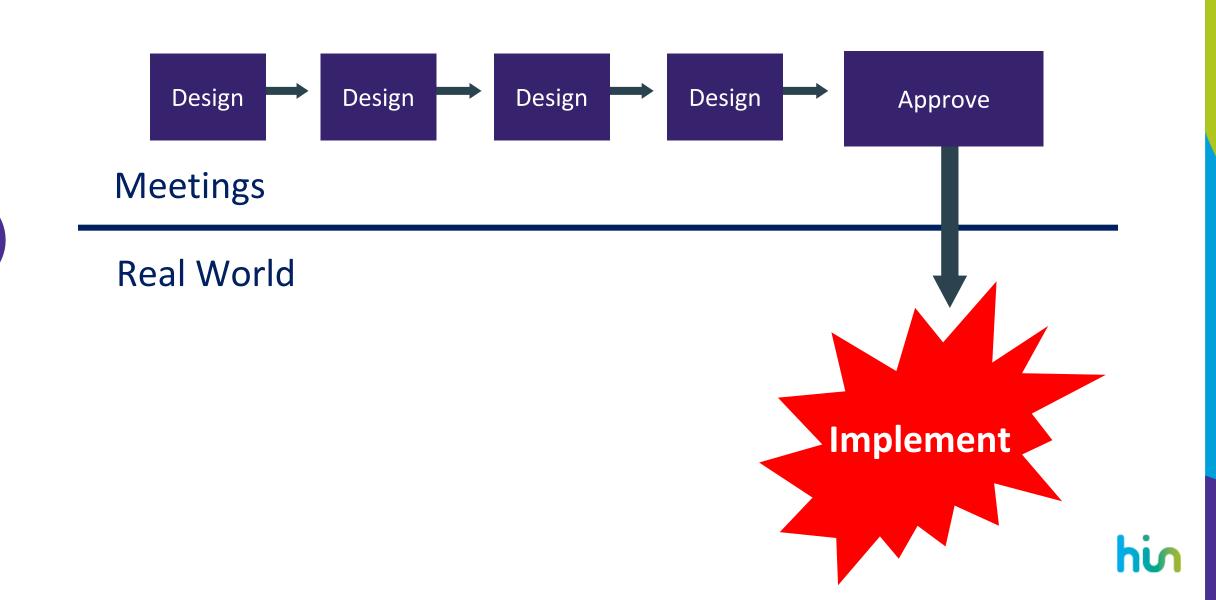
# **TOO BUSY TO IMPROVE?**

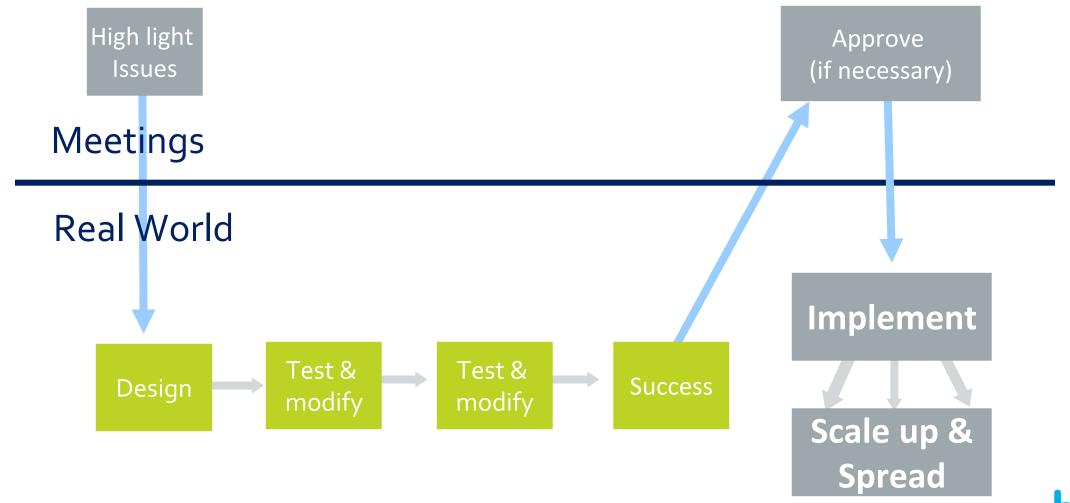


Chris Chan @ChrisChanAU http://chrischan.com.au Adapted from Hakan Forss @hakanforss



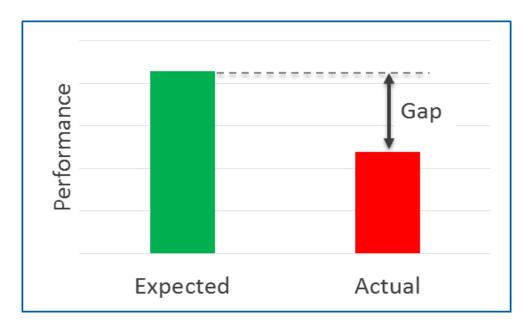






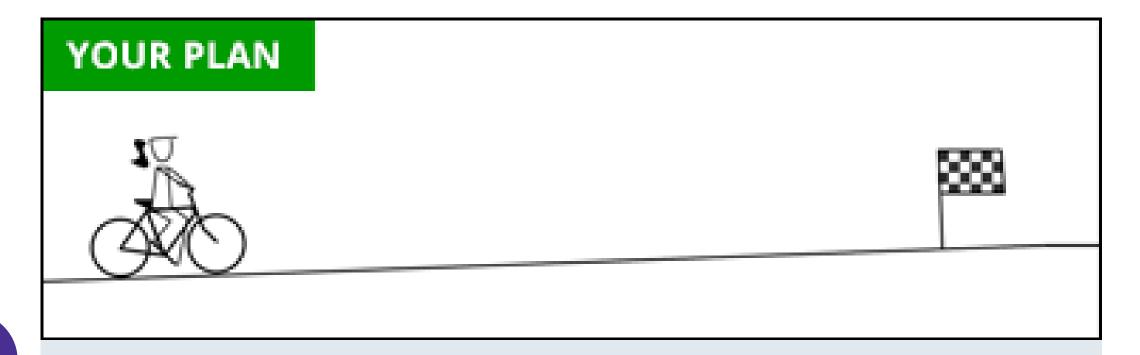


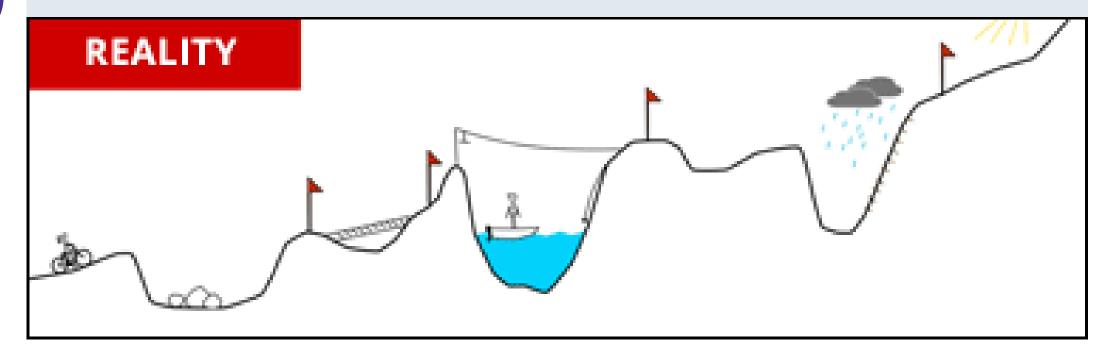
## What is Quality Improvement (Qi)?



- Audit and assurance processes help to identify gaps in performance; Qi is a means to address those gaps
- Qi is about more than just 'try harder'. It's about doing something different, using tests and creative ideas
- However, you don't need an audit or performance report to propose a Qi project!



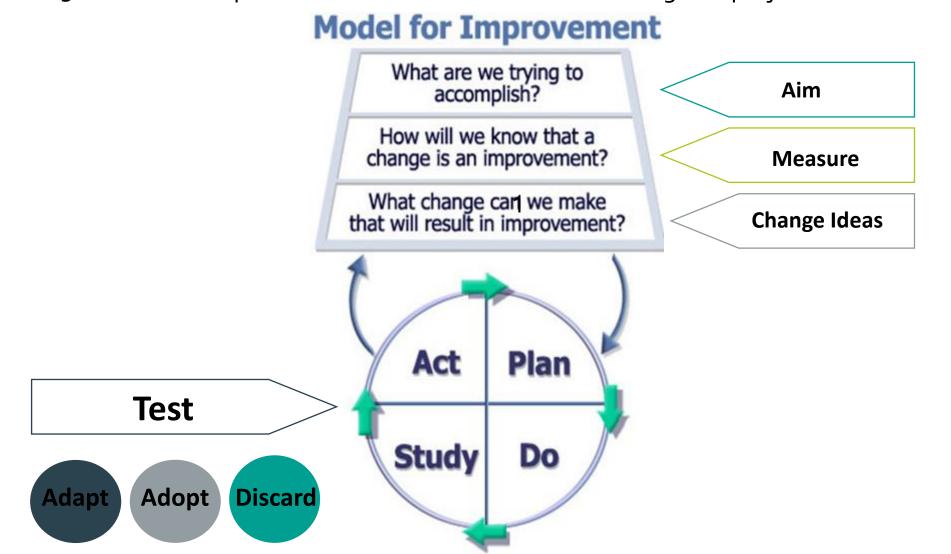






## The Model for Improvement (MFI)

There are 3 fundamental questions we need to answer when doing a Qi project





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**IDENTIFICATION** OF A QUALITY ISSUE

#### **UNDERSTANDING** THE PROBLEM

DEVELOPING A STRATEGY AND CHANGE IDEAS

TESTING

IMPLEMENTATION

· what matters the most? ·Start conversations with staff and service users Review all information to

understand opportunities

what is the current state, Learn from others and the past understand the system deeply through a range of tools Ce g cause+ effect) ·Assess readiness

formalising project info. using different tools to generate improvement ideas. Developing aim and Driver Diagram. use the model for Improvement.

using the model for change ideas through a Plan Do Study Act approach Using data to evidence if an improvement is made.

PDSAs!

Show improvement data, then implement change idea that improvement to test out has been shown to work and make it part of business as usual Build quality control systems to ensure the gams are Sustained

#### Diagnosis

- Looking at data
- Reviewing complaints/serious incidents
- Talking to staff and patients

- Process mapping
- **RCAs**
- 'Deep dives'

#### Planning

- Write your aim statement
- Create a driver diagram
- Stakeholder mapping

#### Iterative testing Refine and scale up

Spread and adopt

Communicating and involving

Measuring



East London

#### Qi in a nutshell

- Bottom up approach ideas from those closest to the problems
- 2. Not about trying harder it's about being different!
- 3. Giving everyone a voice
- 4. The Model for Improvement:
  Aim, measure, change ideas follow it up with a test (PDSA!)
- Take projects in small manageable chunks





# What matters to you?

#### Questions to consider

- 1. What area of practice do you want to improve?
- 2. How do you know that this is a problem? (Do you have any baseline data/evidence about the problem)?
- 3. Why is this challenge hard? What makes it difficult to work on?
- 4. Why is it important to you personally and those around you? Why is it worth spending time and effort on?
- 5. How might you go about doing this?
- 6. Who else may you need to involve?



# **Next steps**

- The next clinical webinar is on the 4<sup>th</sup> May 12.00 13.20
- The section from 13.00 13.20 will be delivered by Doctor Matt Kearney who is going over the UCLPartners proactive care frameworks.

- Your task for by the next collaborative session is to **set up your project team** within your practice/PCN. This will involve identifying the colleagues who will be involved in the improvement project you will look to develop.
- If you have any questions please reach out to your team co-Ordinator or other members of your team.

