

# Towards the Ever Improving Organisation

Experience based reflections

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## **Aims**

During the session, we will share lessons learned as we continue on a journey to embed continuous learning and improvement as the way everyone does business across our organisations, in service of best possible results. This session will:

- Describe how East London NHS Foundation Trust and Barts Health NHS Trust built a shared purpose and vision, and continue to develop improvement capability and leadership behaviours for improvement at scale
- Explore how they have invested in culture and people as well as strengthened the way they manage quality
- Share their approach to partnering, co-design and co-production over time
- Describe how they have proactively sought to close equity gaps as part of their efforts.



## The plan

- 1. Context and the why (10m)
- 2. Ever improving at ELFT, Barts, IHI: reflections (20m)
- 3. Keeping the fire lit (20m)
- 4. A conversation (10m)
- 5. Questions, closing (15m)





## i. Context and why

## **Whole System Quality**



#### **Quality Assurance (internal, external)**

#### **Quality Planning**

### **Quality Improvement**

- Focus on strategic priorities for the system
- Train and coach staff in improvement methods
- **Collaborate** across patients, communities and staff to ensure voice of the customer is embedded in processes
- Test, learn, and adapt process changes towards improved performance

- **Identify** customer needs
  - Assess performance & gaps
    - **Define** quality goals
- Invest in people (capabilities)

• **Set priorities** for improvement

Invest in required inputs
 (resources/structures)

### **Quality Control**

- Ensure protocols, skills and processes for key activities
- Reduce unwanted variation from expected performance
- Establish new standards and protocols based on results of QI initiatives to promote sustainability
- Integrate licensing, accreditation and professional oversight bodies



### **Cultivating a Learning System**

Clear Aim

Systems Focus

Collaborate

Learn

Scale

Methods













## Using Improvement Science to Improve and Strengthen Systems





## **Appreciation for a System**

In relation to the issue you have chosen to work on...

- Who are the **people** in your system?
- What is the culture like?
- What are the **structures**? How do you **organize** things?
- What are the key processes?

## **Psychology of Change**

- How do people respond to change? How can we encourage constructive change and commitment to excellence?
- How ready do you think people in your system are for change? Are some people more ready for change than others?
- How do you think people feel about the issue you are going to work on?

## **Theory of Knowledge**

- What is the issue you have chosen to work on?
- Why do you think this is an issue?
- What theories do you have about what will work/help you overcome this problem?
- What predictions do you make about new ideas being accepted?

## **Understanding Variation**

- What data do you have already?
- What is it telling you about the issue you have chosen to work on?
- How much statistical variation is there in the process?
- How much variation exists in attitudes and behaviors?





## Your why

Table reflections, 7mins

## Why?

$$5 + 3 =$$

$$x + y = 13$$

"Every system is perfectly designed

to get the results it gets"



Alejandro
5 years old
Wants to be a
firefighter when he
grows up



## A WSQ Approach to Tackling Variations

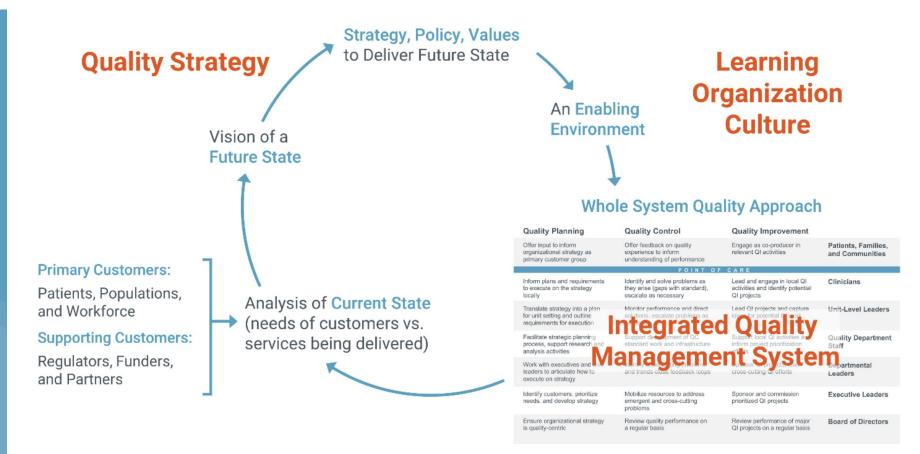




## Whole System Quality

A Unified Approach to Building Responsive, Resilient Health Care Systems

White Paper ihi.org





## The Whole System Approach: Juran Trilogy +



**Quality Methods** 



Systems Thinking



Continuous Learning







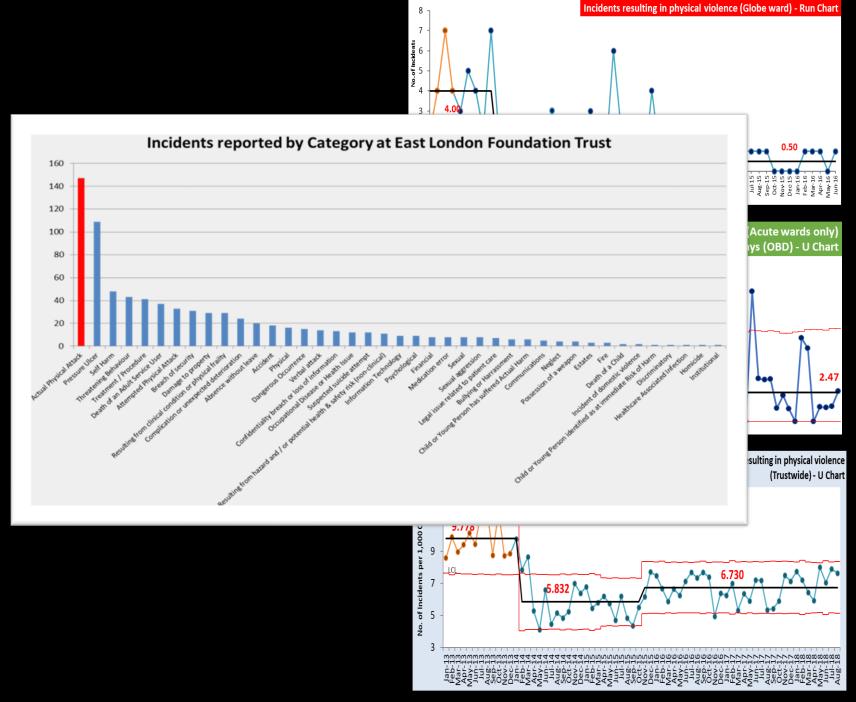
## ii. Ever Improving

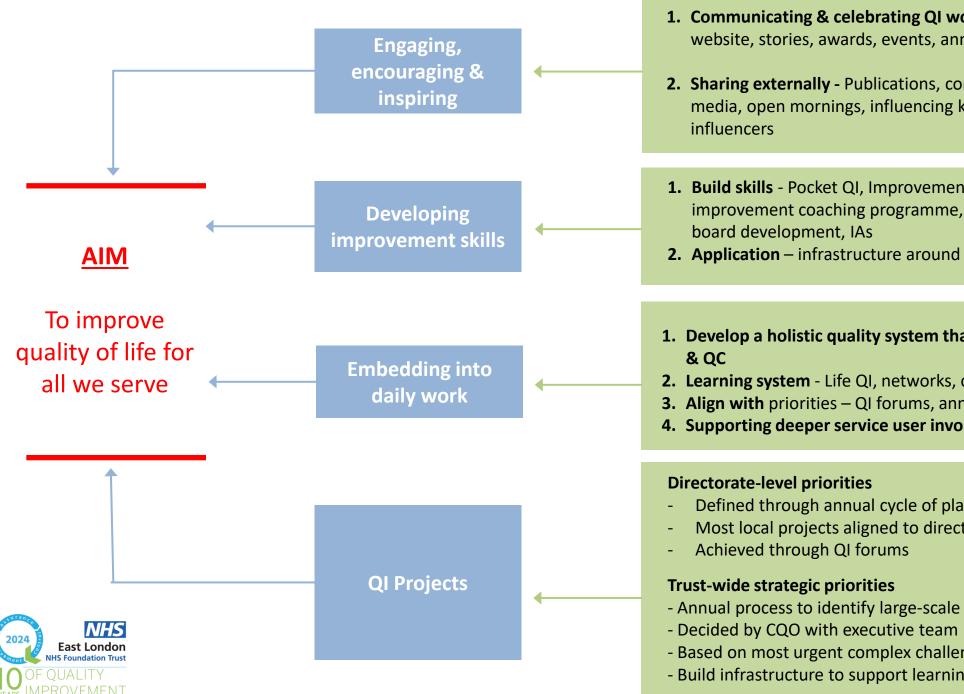
Rapid summaries of journeys



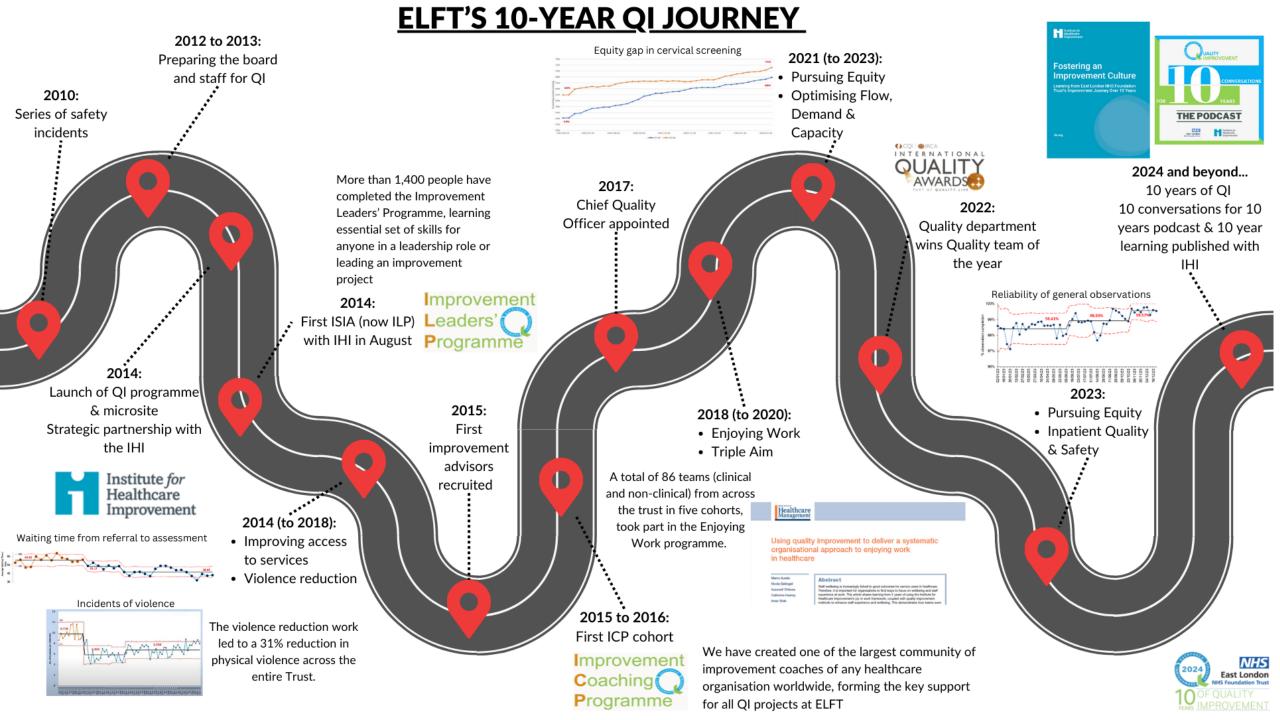








- 1. Communicating & celebrating QI work internally newsletters, website, stories, awards, events, annual IHI visit
- 2. Sharing externally Publications, conferences, awards, social media, open mornings, influencing key national and international
- 1. Build skills Pocket QI, Improvement leaders programme, improvement coaching programme, leadership development,
- **2. Application** infrastructure around teams, leadership behaviours
- 1. Develop a holistic quality system that encompasses QP, QI, QA
- **2. Learning system** Life QI, networks, collaborative events
- 3. Align with priorities QI forums, annual planning
- 4. Supporting deeper service user involvement
- Defined through annual cycle of planning
- Most local projects aligned to directorate priorities
- Annual process to identify large-scale improvement programmes
- Based on most urgent complex challenges across the Trust
- Build infrastructure to support learning and delivery





## The management system at ELFT

### Quality management systems

#### **Quality planning**

Identify the needs of the customer and population

Develop service models to meet the need

Put in place structures and process to manage the service

Identify what matters most

Discover solutions through involving those closest to the work, test ideas. implement, and scale up

### **Quality control**

Identify clear measures of quality for the service, and monitor these over time

Take corrective action when appropriate

Internal vigilance to hold gains made through improvement

#### **Quality improvement**

Design project and bring together a diverse team

#### **Quality assurance**

Periodic checks to ensure the service is meeting the needs of the customer and population

Actions to address gaps identified



## ii. Ever Improving

Rapid summaries of journeys



## Results-based Activity Year 1 (2018-19)

IHI Initial Diagnostic (December 2018)

QI Leading for Change workshops with IHI/BH top team (March 19)

Outstanding Place to work Collaborative launch

- Executive sponsorship
- OPTW Steering group programme design
- 26 teams from across the Trust signed up
- Coaches identified for teams
- Launch event and subsequent learning events (supported by ELFT colleagues and IHI staff: Jess Perlow and Susan Hannah)

Improvement Science in Action (wave 1) - June 2019

 ndividuals across teams trained in QI methodology, delivered by IHI

- QI programme/projectCapability buildingSpreading the word
- Infrastructure

**Excellent Patient Safety Collaborative Launch XXX** 

- Executive sponsorship in place
- EPS group programme design
- 18 teams from across the sites signed up to participate
- Coaches identified to support teams onsite
- Launch event and subsequent learning events (supported by IHI staff (SH) and faculty (Kevin Rooney)

**Quality Improvement Coaches trained** 

- 28 graduated following 6 days of training
- Coaches aligned to support teams form ISIA 1 &
   2.

Improvement Science in Action (wave 2) - October 2019

- 21 teams signed up for Improvement Science in Action 2
- Currently developing their projects following workshop in October
- Coaches aligned on sites to provide support

Launch of QI Coach Network (Nov 2019)



## **ExCel National Vaccination Centre**

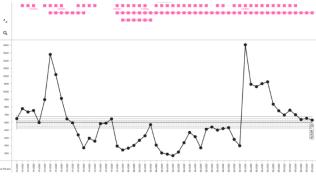


#### Strategic driver

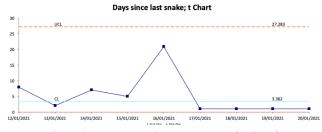
#### Operational driver

→ Rapid start-up times

- → Improved signage around ExCel
- → Rapid responses to queuing through the day
- → Faster flow through the Pods
- → Barts clinical teams have a way to refer patients
- → Ensuring staff can identify and support vulnerable adults
- → Outreach to under-represented communities
- → Understanding vaccine nervousness
- → Great experience of vaccination intervention
- → Good Information and vaccine learning opportunity
- → People as ambassadors for vaccination
- → Minimising vaccine wastage
- → Clear clinical leadership (Datix & pinnacle)
- → Support for new starters
- → Staff training and competency
- → Good infection control
- → Improved communication & connections
- → Respond rapidly to staff HWB issues
- → Involve staff in problems solving
- → Improve roster compliance
- → Effective delivery (capacity vis-a-vis demand vis-à-vis supply)
- → Maintaining Quality standards in all settings



#### # Vaccines given daily (c-chart)



#### Days between snakes - queues (t-chart)



By June 2021, we will vaccinate Londoners, ensuring

- → High numbers,
- → Fair access
- → Great experience

Smooth, safe & efficient flow of patients

Equitable access for vulnerable people

> Outstanding patient experience

High clinical standards

Strong staff wellbeing

> Well governed planning



































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## **Celebration: The Welmprove Awards**





What a fantastic event - congratulations to all of our winners, and for all nominated teams! @WeImproveBH @NHSBartsHealth @JenLeonard6 @chrisjgordon1 @S AshtonNHS



#### t7 8

6 111

1

#### The aim of the awards is to:

- Celebrate the achievements of teams across BH in applying
   QI methodology to make improvements
- Identify projects for wider sharing and potential implementation
- Inspire participants and wider BH communities to be involved in Welmprove
- Spread the word about Welmprove and achievements so far

A new Welmprove category has now been added to the Barts Health Heroes, with agreement that those projects shortlisted for the Welmprove Awards are automatically entered for the Heroes. This does not preclude other teams from entering.

The Welmprove Awards for 2024 are in planning stages, with a review of the criteria and process for application and assessment of nominations. Following feedback from participants, the aim is to engage a wider audience and seek to hold hospital celebrations/events ahead of the Awards<sub>22</sub>

## **QMS** at Barts Health

# Wards/Depts **Divisions** Hospitals

Group

## **Planning**

### **People Patients Partnerships**

Setting improvement goals based on local data and interpretation of Hospital objectives. Determine needs/changes req to make progress

Supporting Ward planning.

Developing divisional outcome goals, prioritising against group/hospital goals. Ensure refined focus and capability to deliver

Setting Hospital objectives.
Connecting Div needs with Hospital and Group Objectives. Embedding values into planning and engagement.
Supporting Div. and ward planning. Identify enabling priorities

Setting Trust Objectives in context of APC and Hospital delivery plans. Find and focus on Golden thread. Support Collaborative planning across Group.

### Infrastructure

### Welnform

Data dashboard, displaying ward level data for Improvement. Regular Quality Huddles to discuss and plan phases. Inclusive membership

Divisional dashboard. Stand-up meeting cycle. Longitudinal programmes to enable inclusion of rotating staff. Reporting via QI platform connected to Priorities

Reporting through data for Improvement. SPC/data over time in PR / QDD. Visible presence of senior team in workplace to support culture of Improvement 'How can I help?". Use of Welmprove participation as governance metric

Set Information strategy to support Welmprove metrics for PR/QDD.
Sponsor leadership programme.
Demonstrate values and behaviours.
Be Curious

### **Leadership Behaviours**

### WeLead

Develop Welmprove plans for priorities Embed into regular activities. Build improvement discussions into daily work. Support staff to make time.

Support units in daily Welmprove work. Encourage focus on priorities, help find and resolve barriers. Create supportive culture. Share and celebrate success. Weekly stand up huddle to review data.

Demonstrate a culture of support for Welmprove activity. Reinforce focus on local priorities and data for Improvement. Regular ward visits to hear progress and issues. Offer help to Divisions delivering progress. Share and spread practice. Horizontal collaboration

Championing Trust strategic priorities. Living and supporting the values and behaviours of Improvement, inclusion and . Encouraging excellence, experimentation co-design, systems thinking.



## ii. Ever Improving

Rapid summaries of journeys

## Vital 7 (pre-conditions)

- 1. Rituals and symbols everywhere for learning
- 2. Senior leaders actively participating, not just passively supporting
- 3. An appreciative inquiry approach to managing
- 4. A definitive move to SPC for data visualisation
- 5. A WSQ approach to continously learning and improving (not just QI)
- 6. A central team with an active distributed infrastructure
- 7. A dosing approach to **building skills experientially**



Inequities are variation
Inequities are harm
Created by systems.

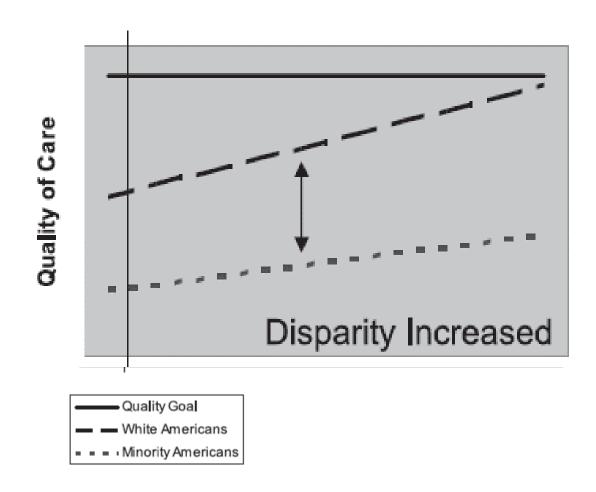


## **Quality Improvement & Equity**

Our systems are perfectly designed to create inequities

The benefits of quality tend to accrue to the powerful before others

Improvement tools can reduce inequities, but not without deliberate aims



Green, Alexander R., et al. "Leveraging quality improvement to achieve equity in health care." *The Joint Commission Journal on Quality and Patient Safety* 36.10 (2010): 435-442.





## iii. Keeping the fire lit



## iv. A conversation





Learning from East London NHS Foundation Trust's Improvement Journey Over 10 Years

ihi.org







**Podcast** 



YouTube





## v. Questions, closing