

# Quality Improvement Division Pressure Ulcer to Zero Collaborative

# Sustainability



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September 2017

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# The law of thirds - improvement projects

1/3rd

- Never spread

1/3rd

- embedded
- spread

1/3rd

- spread
- Other organizations

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# Important Factors

## National Health Service Scotland

- Available resources for healthcare practitioners
- Understand what works well - what are the challenges
- Develop and test approaches to support staff to overcome challenges

NHS Scotland - 2014

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# What is sustainability?

- “When new ways of working and improved outcomes becomes the norm”
- “The improvement has become an integrated and the mainstream way of working”

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# 11 Key Factors of Sustainability

- Innovation
- Measurement
- Human Factors
- Culture
- Change Management
- Leadership
- Knowledge into action
- Engagement
- Evaluation
- Empowerment
- Communication



NHS Knowledge Network

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# Innovation

‘Doing something different rather than doing the same thing better’

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# Ideas which spread have:

1. **Clear advantage**
2. **Compatibility** - with current systems & values
3. **Simplicity of change** & its implementation
4. **Ease of testing** (before large scale change)
5. **Observability of the change**

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# Measurement

- ‘All improvement will require change, not all change will result in improvement’
- Use real time data
- Know why and what to measure
- Model for Improvement-PDSA Cycles
- Own the data and use it
- Data can help motivate

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# Human Factors

‘Optimising human performance through better understanding the behaviour of individuals, their interactions with each other and their environment’

## Human Factors in Healthcare

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70%-80% of healthcare errors due to breakdown in non-technical skills:

- Decision making
- Communication
- Teamwork
- Leadership
- Situation awareness

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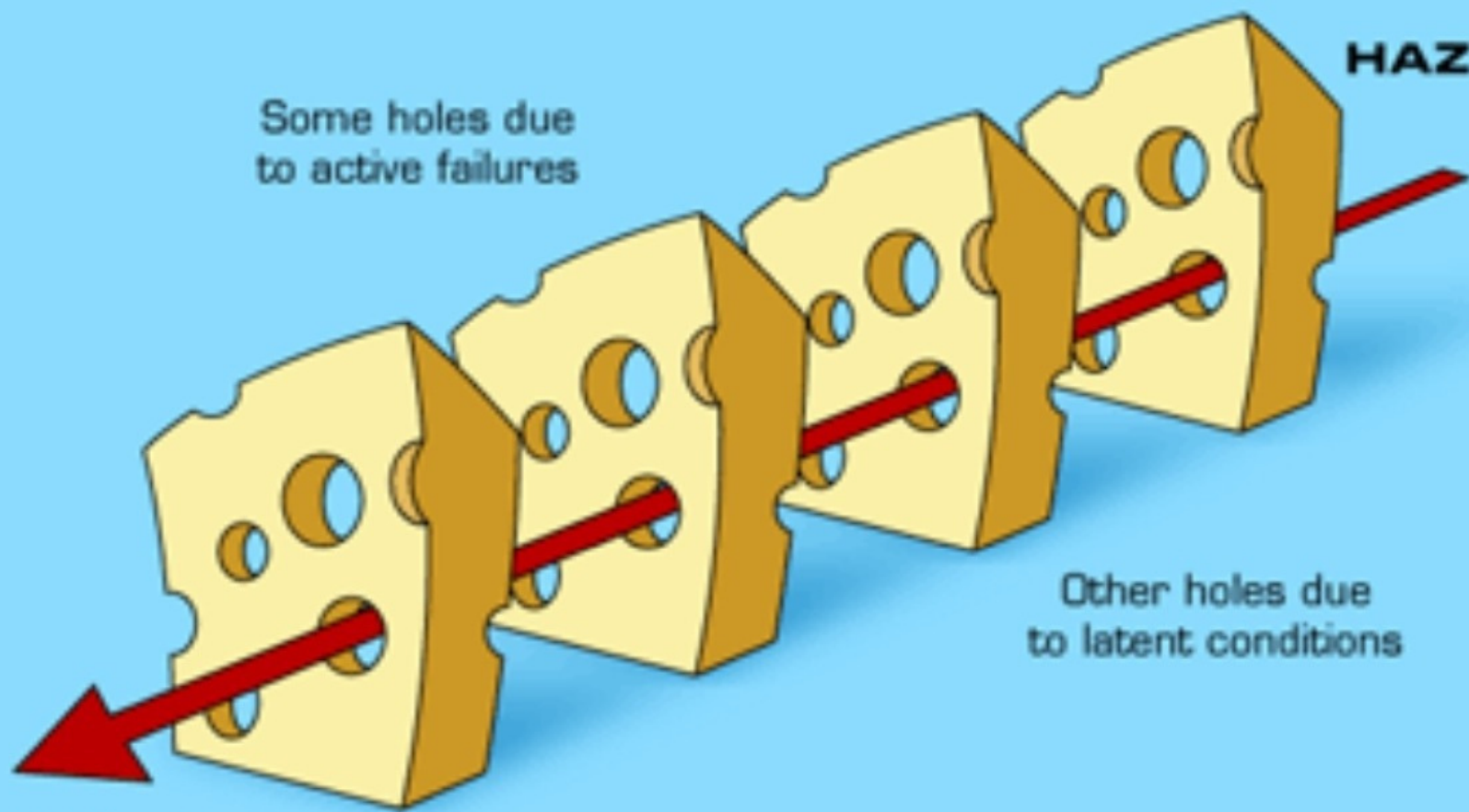
**HAZARDS**

Some holes due to active failures

Other holes due to latent conditions

**Accident**

**SUCCESSIVE LAYERS OF DEFENSES**



# 7 Human Factors to manage risk

- Stress
- Fatigue
- Cognitive aids - checklists
- Design-how we move, think, behave
- Equipment
- Teams – avoid “group think “
- Culture

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# Culture

- “How we do things around here”
- Reflects attitudes, behaviours, perceptions, and values employees share
- Key: seek to understand the role of culture on our behaviours and ability to improve

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- “Deep changes in how people think, what they believe, how they see the world are difficult to achieve through compliance”

Senge, Dance of Change

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# Change Management

- How individuals, teams and your organisation transition to a desired future state
- People are supported to understand the problem a change is attempting to fix, and are involved in designing and testing the solutions

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# 4 Basic Conditions

- **A compelling story**, because employees must see the point of the change and agree with it
- **Role modelling**, because they must also see senior colleagues they admire behaving in the new way
- **Reinforcing mechanisms**, because systems, processes, and incentives must be in line with the new behaviour, and
- **Capability building**, because employees must have the skills required to make the desired changes

Lawson and Price

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# Leadership

- “We should view leadership as the capacity of a human community to shape its future and sustain the processes of change required to do so.”

Peter Senge

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- Organisations will enter a new domain when we stop.....
  - Thinking about preparing a few people for “the top”
  - Start nurturing the potential for leaders at all levels to participate in shaping new realities

Senge

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# Knowledge into action

- We need to understand how to translate and embed our best ideas and evidence
- Spreading QI work relies on practical knowledge being widely understood, shared and used.

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Acquire



Use



Share

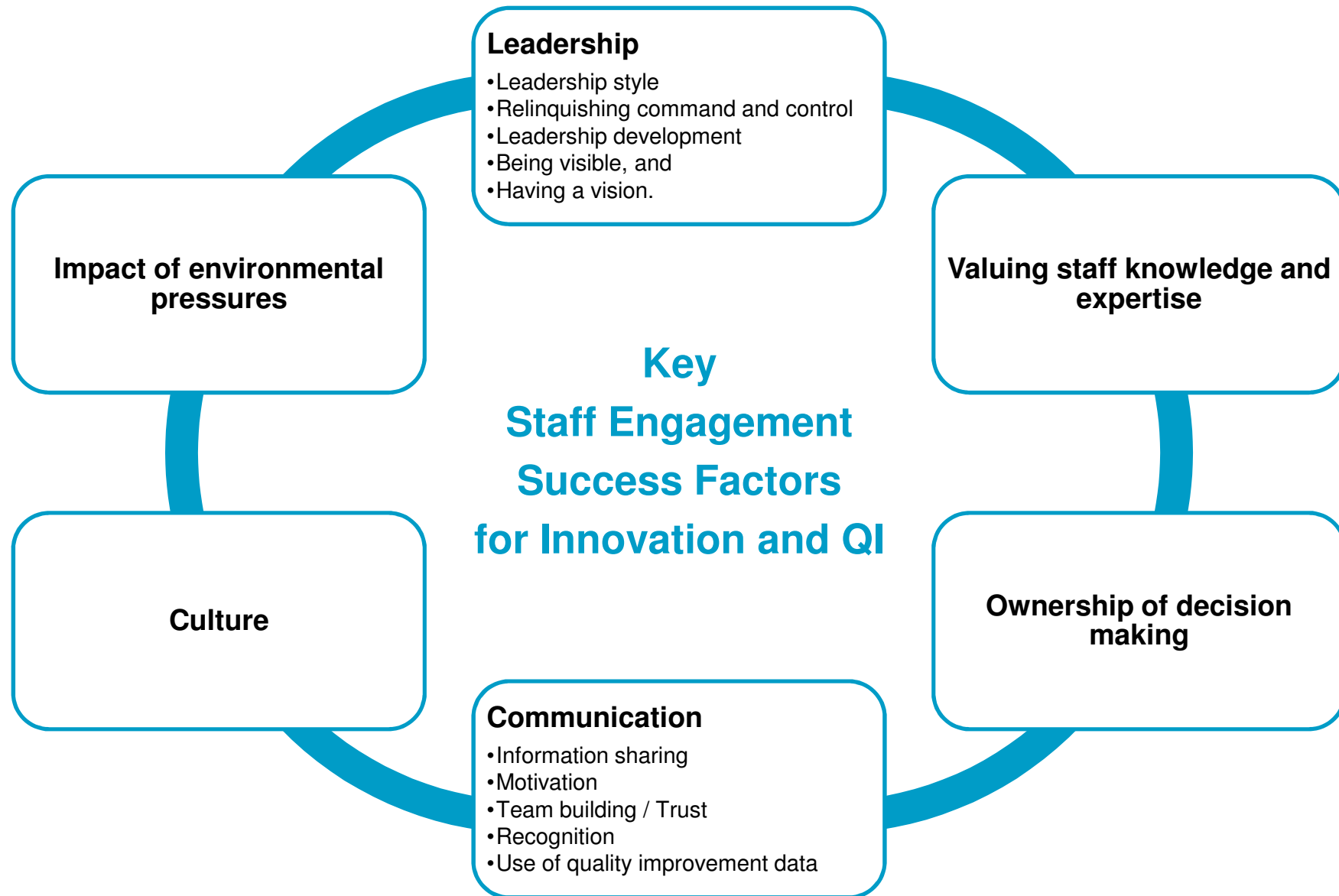
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(Quality Improvement Division - Guidera, 2017)

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# Principles of FLO

1. Go slow to go fast
2. Invite the unusual suspects
3. Work with those who want to work with you
4. Participation is voluntary
5. Nothing about me without me
6. Change can spread bottom up, top down, and sideways
7. Make the invisible visible
8. Act your way into a new way of thinking



Gardam M, Gitterman L. If you don't succeed the first 20 times, please try something different...  
Accreditation Canada Qmentum Quarterly 2013; 6(2):6-11

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# Evaluation

- We need evidence as to what changes have been made, and when and how they made an impact

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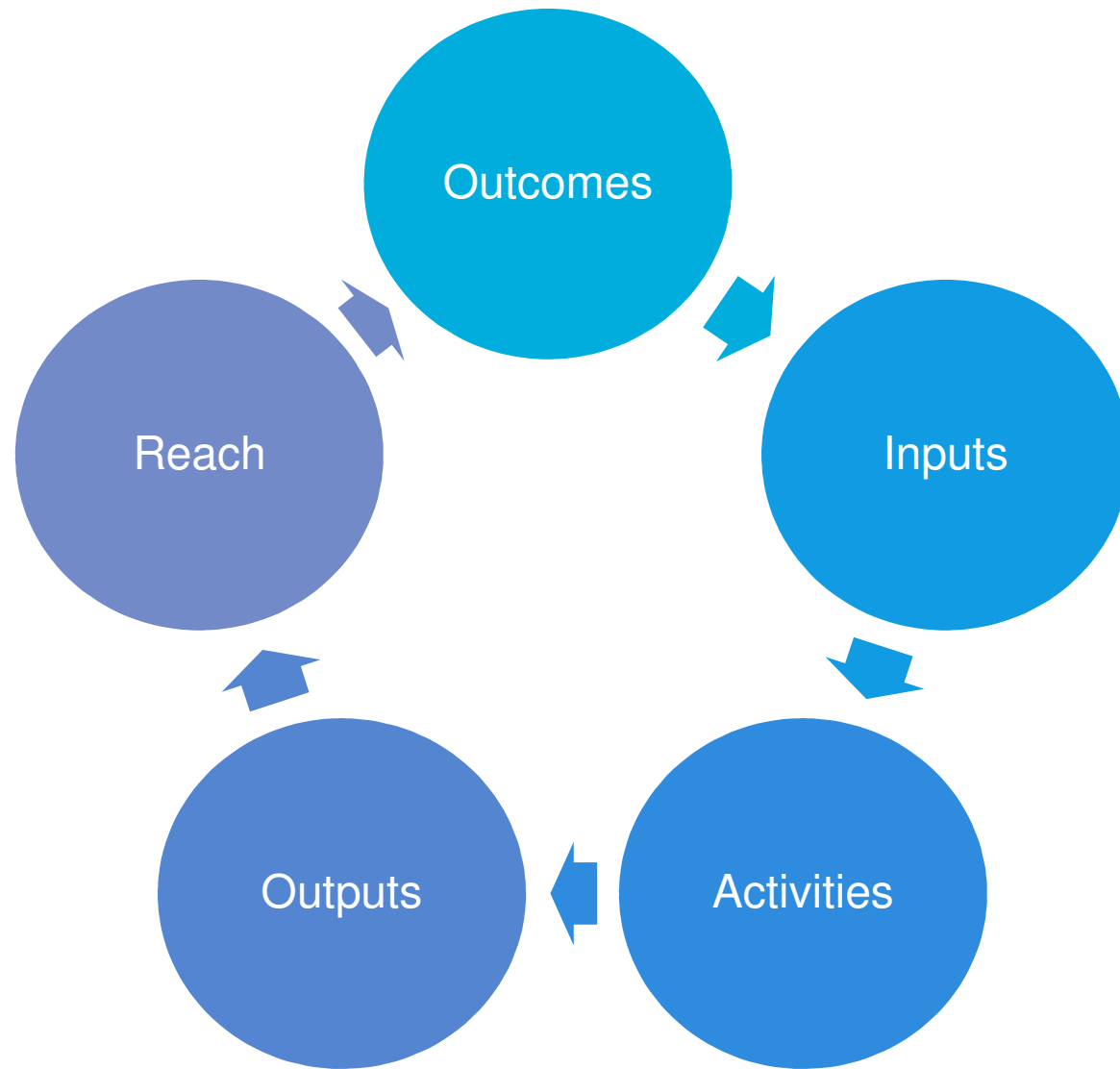
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# Empowerment

- This is about both the people who work in organisations and those who use the services provided by it
- By listening to the experiences and views of people who provide services and people who use services to drive improvement

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- LISTEN - to the voice of staff and service users
- INVOLVE - them in the process of where improvements should be made
- INVOLVE - them in the process of picking what changes to test and then making and evaluating the changes

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# Next steps

- What's your passion for this work / level of interest?
- How will you take this to the next level?

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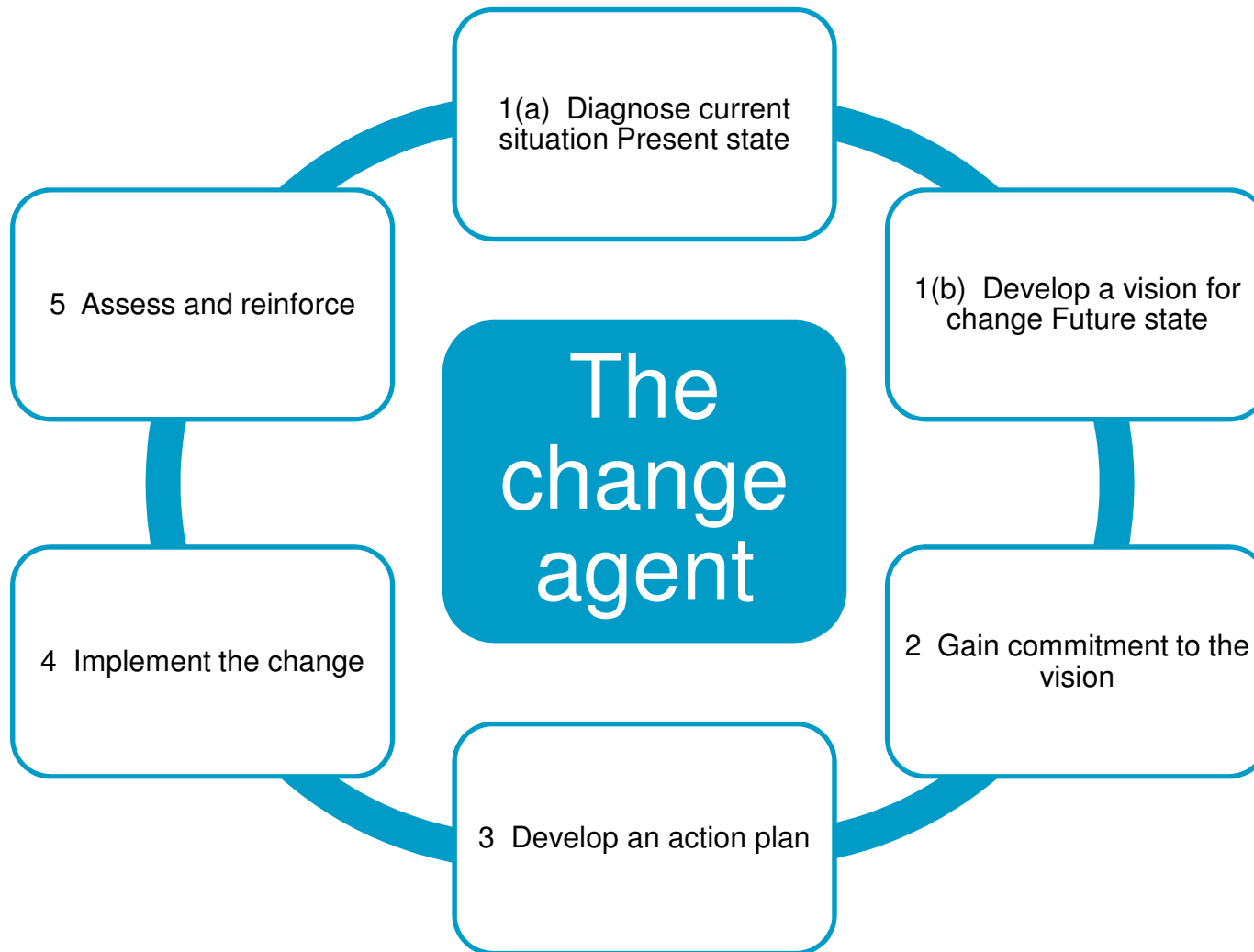
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An Organisational Development Model for Change – (adapted from Senior & Swailes, 2010)

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# Generative Relationships STAR

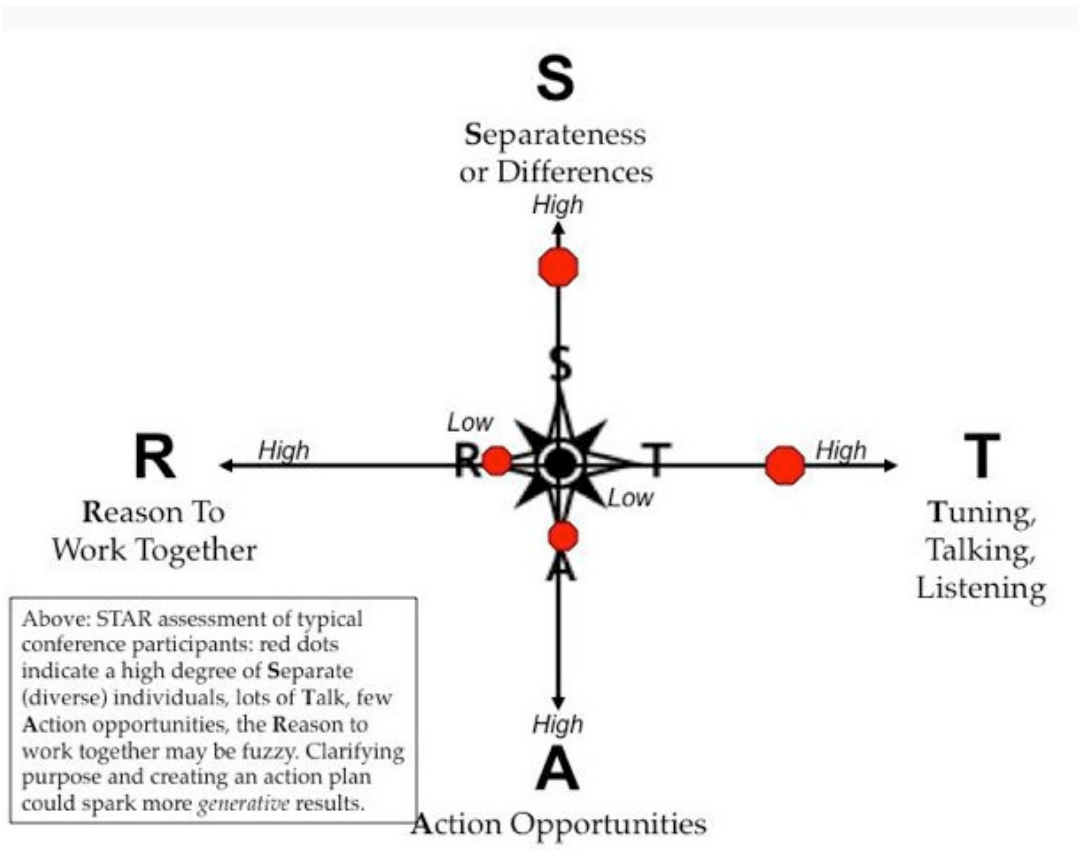
- **Separateness:**
  - the amount of diversity in perspective, expertise, and background among group members
- **Tuning:**
  - the level of listening deeply, reflecting, and making sense of challenges together
- **Action:**
  - the number of opportunities to act on ideas or innovate with group members
- **Reason to work together:**
  - the benefits that are gained from working together

<http://www.liberatingstructures.com/26-generative-relationships-st/>

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## Useful resources taken from:

# Getting Started Kit: Sustainability and Spread How-to Guide

### Sustainability Resources and Literature

- *Improvement leaders' guide to sustainability and spread.* NHS Modernisation Agency. Ipswich, England: Ancient House Printing Group; 2002. Available at: <http://www.modern.nhs.uk/improvementguides/sustainability/fw.html>
- *Spread and sustainability of service improvement: Factors identified by staff leading modernisation programmes.* London, England: NHS Modernisation Agency; February 2003. Research into Practice, Report No. 4: Overview of early research findings.
- 
- *Teamworking for improvement: Planning for spread and sustainability.* London, England: NHS Modernisation Agency; August 2003. Research into Practice, Report No. 5.
- Øvretveit J, Bate P, Cleary P, et al. Quality Collaboratives: Lessons from research. *Qual Saf Health Care.* Dec 2002;11:345-351.
- Juran J, Godfrey B. *Juran's Quality Handbook (5<sup>th</sup> Edition).* New York: McGraw-Hill, 1998. (Chapter 4)

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# For more info...

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# Pressure Ulcer to Zero Collaborative Staff Engagement



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Quality Improvement  
Division Lead Staff  
Engagement

Lisa Toland,  
Microsystems  
Facilitator



June 2017

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## Health Sector Definition

Staff are engaged when they feel valued, are emotionally connected, fully involved, enthusiastic and committed to providing a good service... when each person knows that what they do and say matters and makes a difference.

National Staff Engagement Forum 2016



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# Key challenges

- **Communications strategy**
  - Stakeholders
  - Language of communication
- **Effective meetings**
- **Resistance to change**
  - Focus when so many issues at the same time
  - Change fatigue
  - Motivation - how to sell another piece of paper
- **Motivating - getting colleagues engaged / everyone's responsibility – engagement in general**



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# Communications

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# How to engage frontline staff

**Planning is vital at the beginning**

Who do you need to communicate with (stakeholder analysis)?

What opportunities do you have for staff to become involved?

What do they need to know?

What do they want to know?

**Focus less on telling and more on engaging**

What's the best channel of communication?

What language will you use?

**Right message, Right time, Right audience**

Who is the best person to deliver the message?

When's the best time to share the message?  
(Pace, timing, sequencing)

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# Ownership V Buy-in!

- Not the same thing !

WHY?

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# Buy-in!

- Someone else has done the development, the thinking
- They are now telling you or convincing you to implement their ideas

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# Ownership!

- You share the idea, a decision, a action plan
- You have participated in its development, you endorse it
- You understand it, believe in it and are willing to implement it!

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# Effective meeting skills

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# Effective Meeting Skills

- When you think about meetings what words come to mind?

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meetings : where minutes are kept



and hours are lost P.R. Engle

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# Meeting Outcome!



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# What's important?

- Roles
- Processes
- Timed Agenda

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# Meeting Skills-Roles

Leader – prepares agenda, moves agenda

Recorder – visual record for group, next actions list

Timekeeper-verbally announces amount of time remaining and when time is up

Facilitator-helps to manage group progress-to balance participation-keep group focused

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# Meeting Skills-Processes

- Pre – meeting: plan which includes location, time, invitation, agenda
- In-meeting: focusing on aims, timekeeping, working on aims
- Post meeting: follow up

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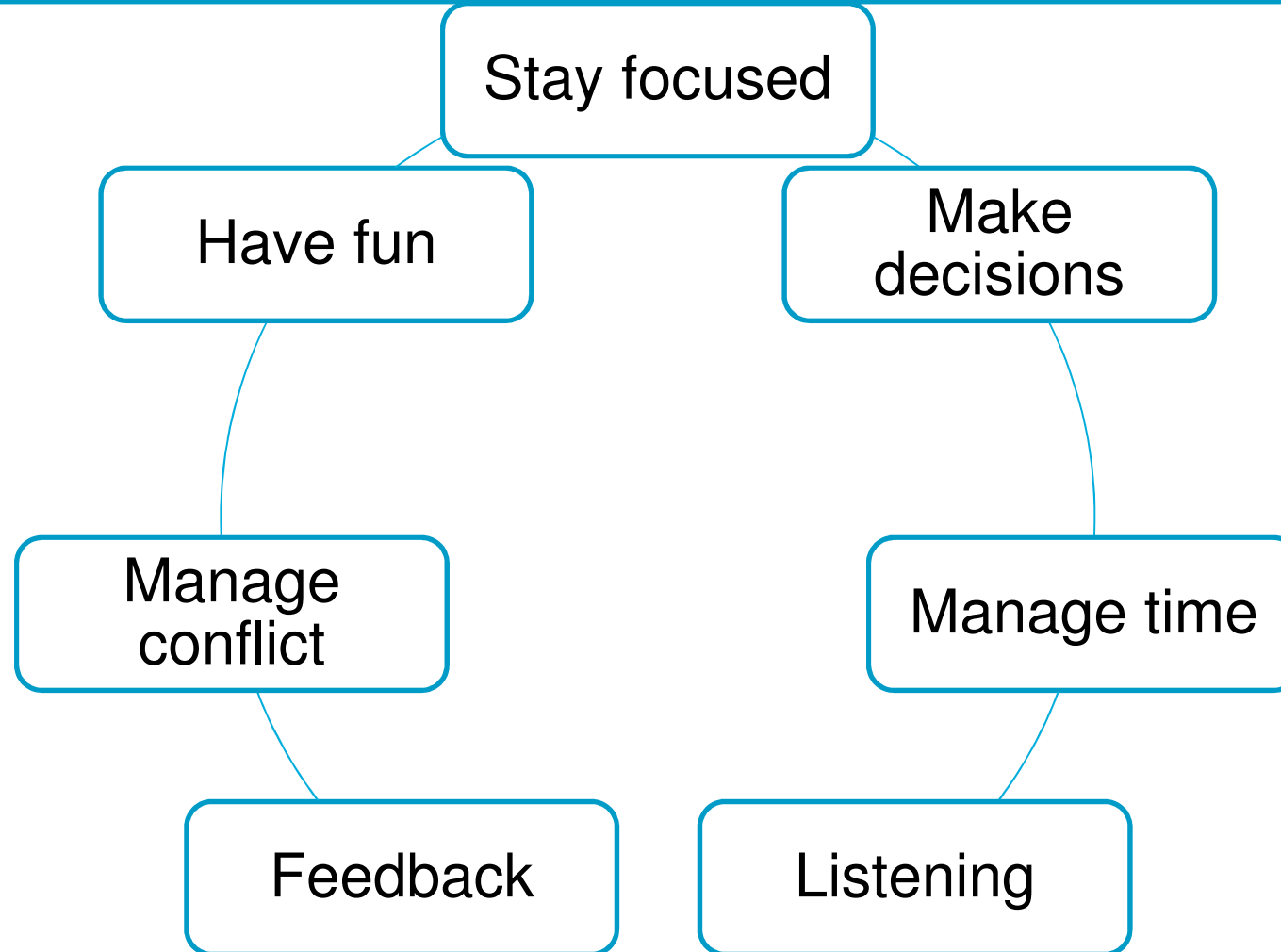
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# Meeting Skills - Processes



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# Resistance to change

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# Resistance to change

- Understand what the resistance is?
- Identify what can you control?
  - Educate (share information)
  - Participate (encourage involvement / co-design)
  - Negotiate (bargain)
  - Escalate (compliance / manipulate)
- Work with the willing

*[Adapted from Bridges. W (2004)]*

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# Resistance is normal

- How dissatisfied are people with the current state?
- What does the vision offer them? How will it be a positive for them?
- Do they trust the process? Have they been involved in design?
- How much extra work do they think it will bring and is it worth it?

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# People support change they help create

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# Motivating for excellence

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# Motivating for Excellence

I am treated with **dignity and respect**

I am given tools to do work that adds **meaning** to my life

Someone notices and says **thank you**

*(adapted from Don Berwick, IHI)*

Also consider  
generational  
differences



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# Top tips

- **Get to know each other / make it fun**
- **Strong Vision**
  - Do you all staff know what you're trying to do?
- **Role definition**
  - Does each staff member have a defined role and responsibility?  
Do staff know what's expected of them? Do they have a job description?

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## ■ Motivation

- What motivates your team? Is it a patient story? Feeling they're making a difference?
- Keep it personal

## ■ Consistent Communication

- Introduce effective internal channels for communication to enable staff to share knowledge within the team, raise concerns, celebrate success and suggest improvements.
  - Team Huddles / meetings
  - Departments briefings
  - Introduce a weekly update email / notice board / suggestions board

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## ■ Trust

- How is information shared in relation to developments? Do staff hear of developments from within the team or outside of it?
- Are staff consulted and listened to during change processes?

## ■ Ensure staff are involved in decision making

- How do you involve staff early in the decision making process?

## ■ Team Environment

- How is team work encouraged?
- Do all staff have the tools to do their work safely?

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## ■ Staff Recognition

- Do staff feel acknowledged and valued as part of the team?
- Do you say thank you?
- How are small wins and achievements acknowledged and recognised through the unit?

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# Principles of FLO

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