



QI TALK TIME

Building an Irish Network of Quality Improvers

Microsystems – Quality Improvement at the Frontline

06/March 2018

Connect

Improve

Innovate

Speaker

Lisa Toland:

- Staff Engagement Team of the Quality Improvement Division, HSE.
- Her primary focus is training and coaching frontline staff in Quality Improvement, specifically using Microsystems.
- Currently working with Emergency Department staff in a joint collaboration with the Emergency Medicine Programme and QID.
- She provides training for multi-disciplinary frontline staff in effective communication and teamwork and coaches teams using the Microsystems approach.



Instructions

- ▶ Interactive

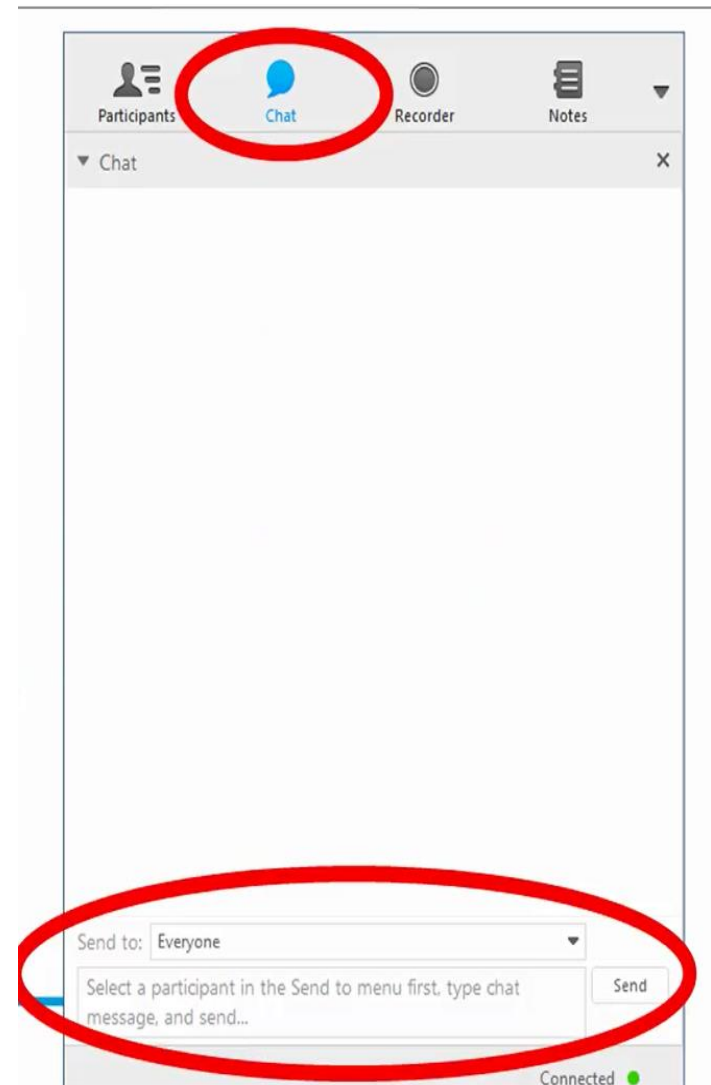
- ▶ Sound:

Computer or dial in:

Telephone no: 01-5260058

Event number: 844611690

- ▶ Chat box function
 - Comments/Ideas
 - Questions
- ▶ Keep the questions coming
- ▶ **Twitter: @QITalktime**



What is Quality in Healthcare?

US Institute of Medicine, 2001

- ▶ Safe
- ▶ Effective
- ▶ Person centred
- ▶ Efficient
- ▶ Equitable
- ▶ Timely

In addition quality healthcare should be:

- ▶ Reliable
- ▶ Affordable (value)

What is Quality Improvement?

“The combined and unceasing efforts of everyone to make the changes that will lead to better patient outcomes (health), better system performance (care), better professional development”

Batalden and Davidoff, 2007



Whose Job is it ?

“Everyone in health care must recognise that they have two jobs when they come to work each day : doing the work and improving it”

Batalden and Davidoff 2007



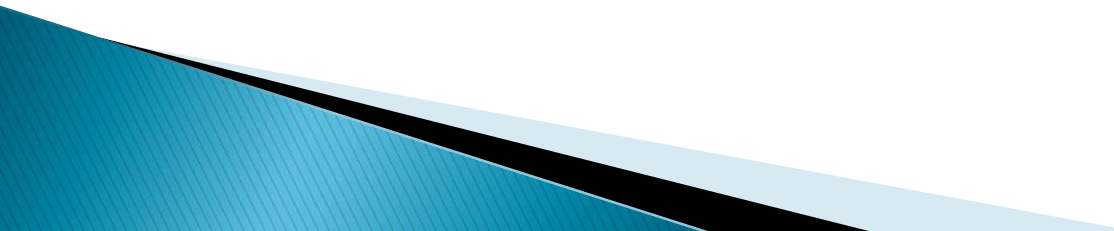
Improvement Approaches



Dartmouth Institute

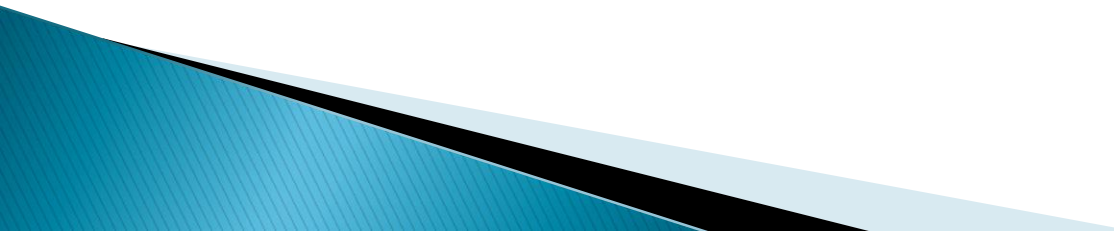


Microsystems

- ▶ Simple principles
 - ▶ Understand the problem (data)
 - ▶ Understand the processes/systems–patient pathway
 - ▶ Analyse demand/capacity/flow
 - ▶ Choosing tools–include leadership, clinical engagement, skills development
 - ▶ Include staff/patients
 - ▶ Evaluate change
- 

What is a Clinical Microsystem?

“The place where patients,
families and clinical teams
meet”



System Levels

Example

Macrosystem

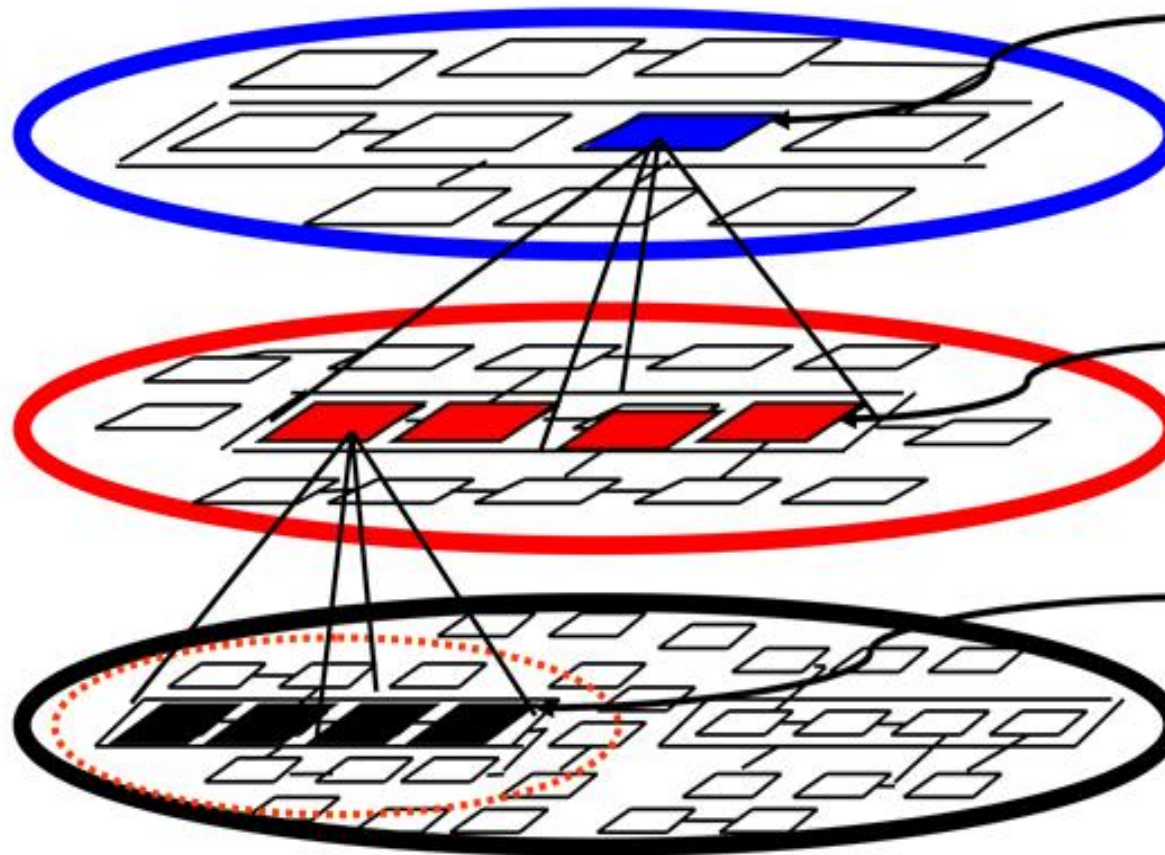
Nursing Services

Mesosystem

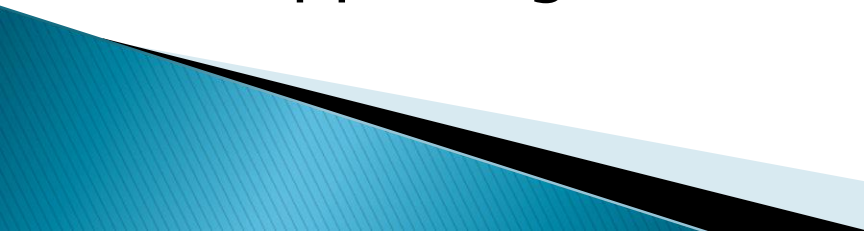
Nursing Divisions

Microsystem

Frontline Nursing Units

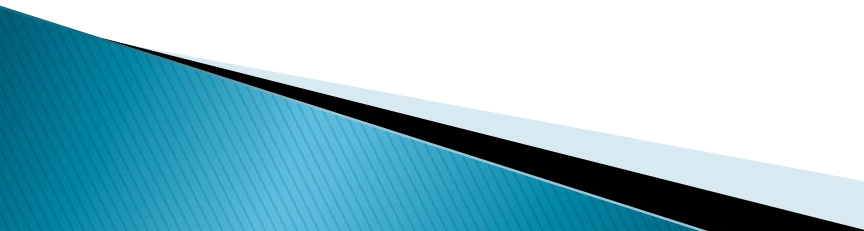


KEY CHARACTERISTICS

- ▶ Leadership
 - ▶ Organisational support
 - ▶ Staff focus and education
 - ▶ Patient focus
 - ▶ Performance and results focus
 - ▶ Supporting information technology.
- 

Improvement Initiatives

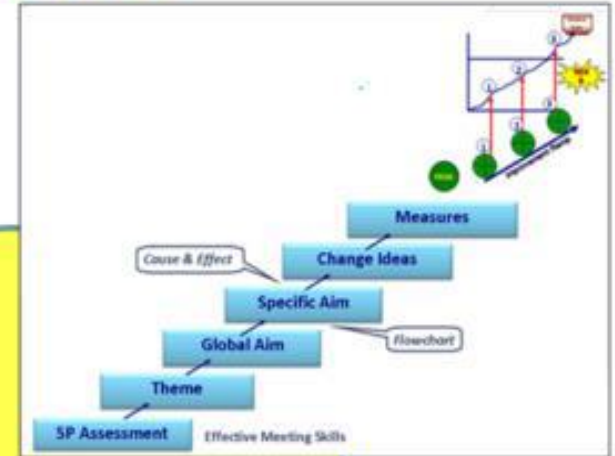
▶ Involve the front line

- work together on improvement initiatives;
 - using effective tools and teamwork;
 - to improve the care they provide and the working environment for staff.
- 

Improving Microsystems - Elements



Team Coaching



Improvement Science

QI

Microsystem



TEAM COACHING

“IMPROVEMENT IN HEALTH CARE IS 20%
TECHNICAL AND 80% HUMAN”

Dr Marjorie Godfrey, Dartmouth Institute

Use the teams knowledge and skills

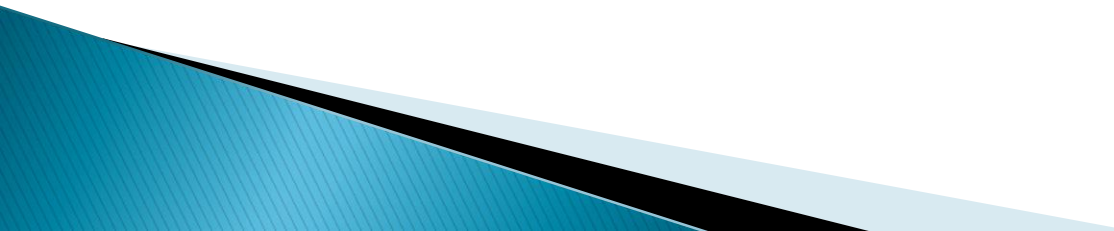


TEAM COACHING

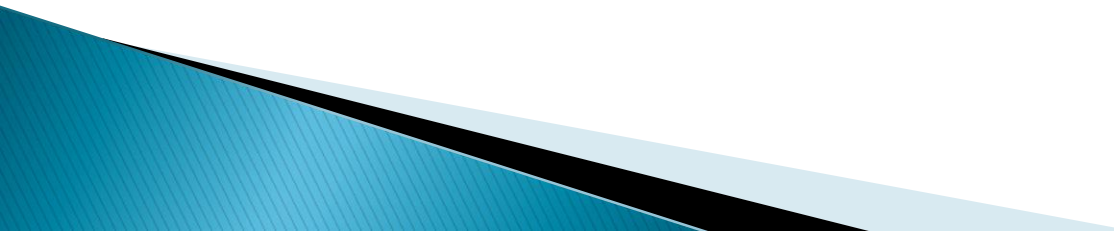
▶ OWNERSHIP V'S BUY-IN

Are they the same thing ?

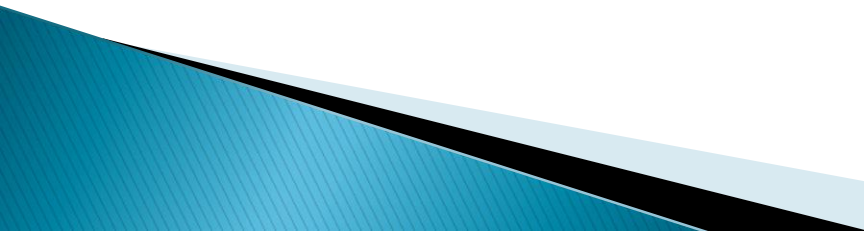
BUY-IN

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

OWNERSHIP

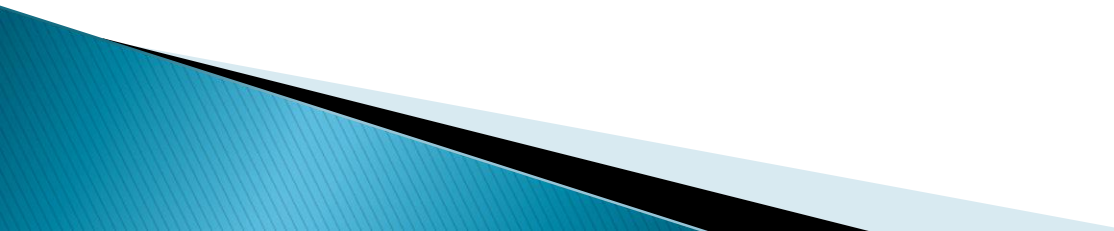
- ▶ You share the idea, a decision, a action plan
 - ▶ You have participated in its development, you endorse it
 - ▶ You understand it , believe in it and are willing to implement it!
- 

TEAM COACHING MODEL

- ▶ **PRE-PHASE**
 - ▶ Invite the department staff – open to all!
 - ▶ Set expectations with the team
 - ▶ Introductory meetings
 - ▶ Introduce improvement approach
 - ▶ Coaches start to set the scene for improvement
- 

TEAM COACHING

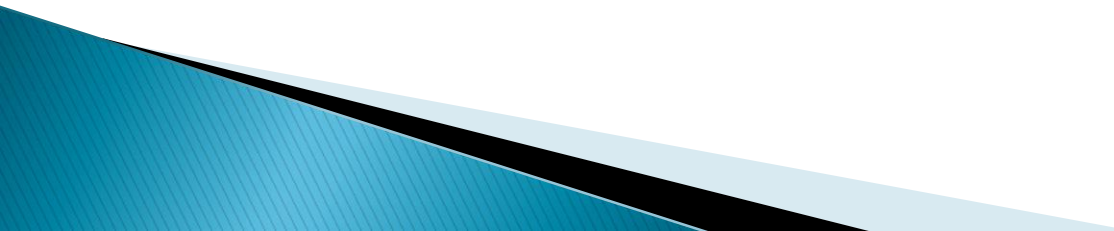
▶ ACTION PHASE

- ▶ Multi-disciplinary team regular meetings
 - ▶ Ground rules worked out
 - ▶ Effective meeting skills
 - ▶ Assessing unit, identifying areas for improvement
 - ▶ Work on projects
 - ▶ Start small – measurement
- 

TEAM COACHING

- ▶ **TRANSITION PHASE**
 - ▶ Teams continue using tools
 - ▶ Coaches take a back step
 - ▶ Embed improvements
 - ▶ Assessment /reflection
 - ▶ Celebration
- 

Some tools along the way!

- ▶ Effective Meeting Skills
 - ▶ Aim Statements
 - ▶ Fishbones
 - ▶ Flowcharts
 - ▶ Measurement for Improvement
 - ▶ Active Listening
 - ▶ Elevator Speeches
 - ▶ Communication
- 

WHY DO WE NEED TO WORK IN TEAMS?

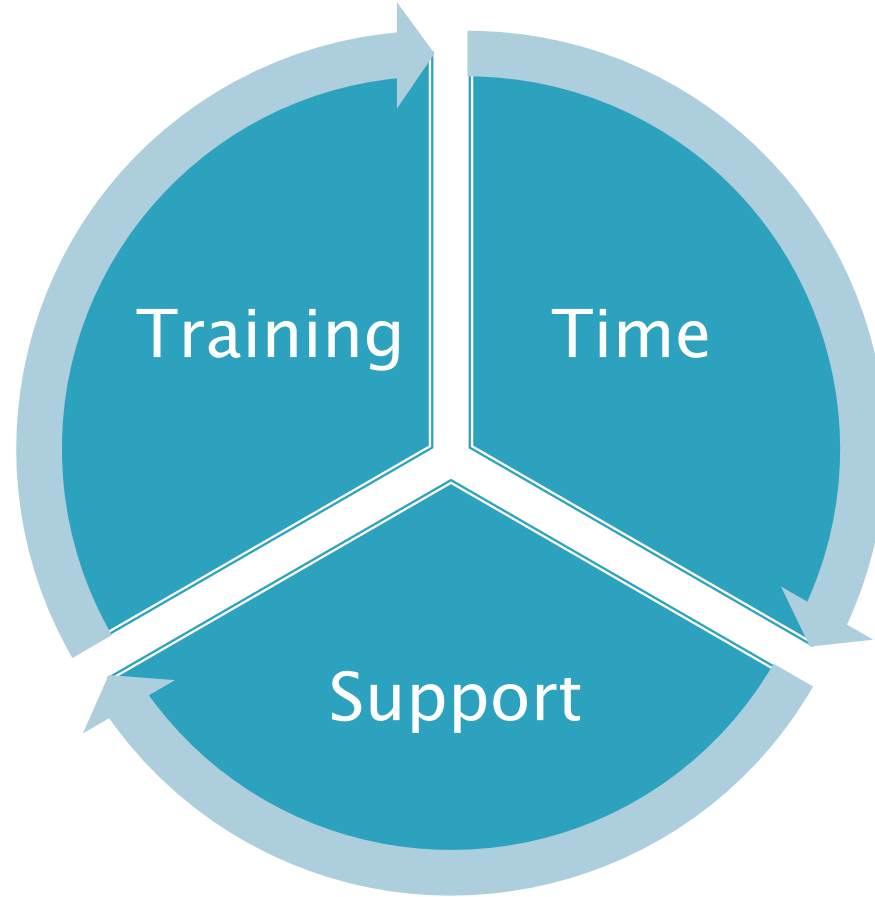


...AND THAT
IS WHY WE
LIFT ON
THREE...



COMMUNICATION

What's' needed?

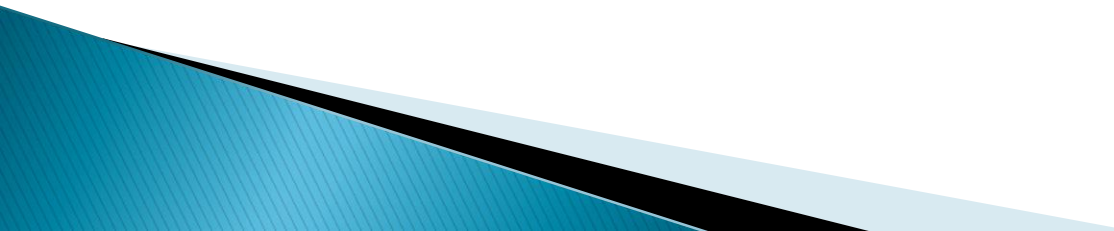


“Our challenge is not whether we will deliver care in teams but rather how well we will deliver care in teams”

Paul Schyve, WHO

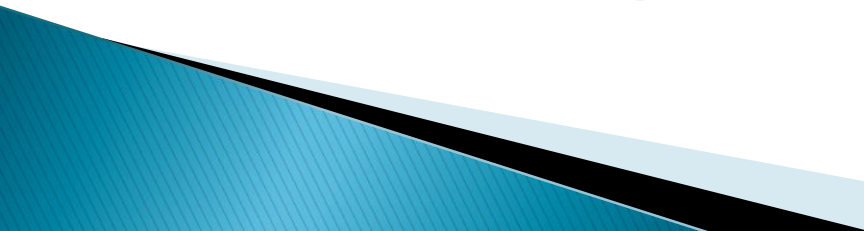


QUESTION

- ▶ Thinking back on your career,
 1. In the best job, how effective was the team?
 2. In your worst job, how effective was the team?
 3. Was there a specific focus on strengthening the teams in which you worked?
- 

Definition

A team is composed of 2 or more individuals who:

- Interact dynamically, interdependently, & adaptively towards a common and valued goal
 - Have specific roles or functions
 - Have a time limited membership **AND**
 - *Learn & improves over time*
- 

ATTRIBUTES OF A WELL FUNCTIONING TEAM



What makes a successful team?

- ▶ Common purpose – which is clearly defined
- ▶ Measurable goals – teams set these goals
- ▶ Effective Leadership – set and maintain structures, manage conflict, listen, trust, support
- ▶ Effective communication – eg surgical teams
- ▶ Good cohesion – unique, identifiable team spirit
- ▶ Mutual respect – accept & encourage diversity of opinion

Mickan and Rodger



Invictus (2009)

“ How do you inspire your team to do their best”

Nelson Mandela

“By example, I’ve always thought to lead by example”

Francois Pienaar

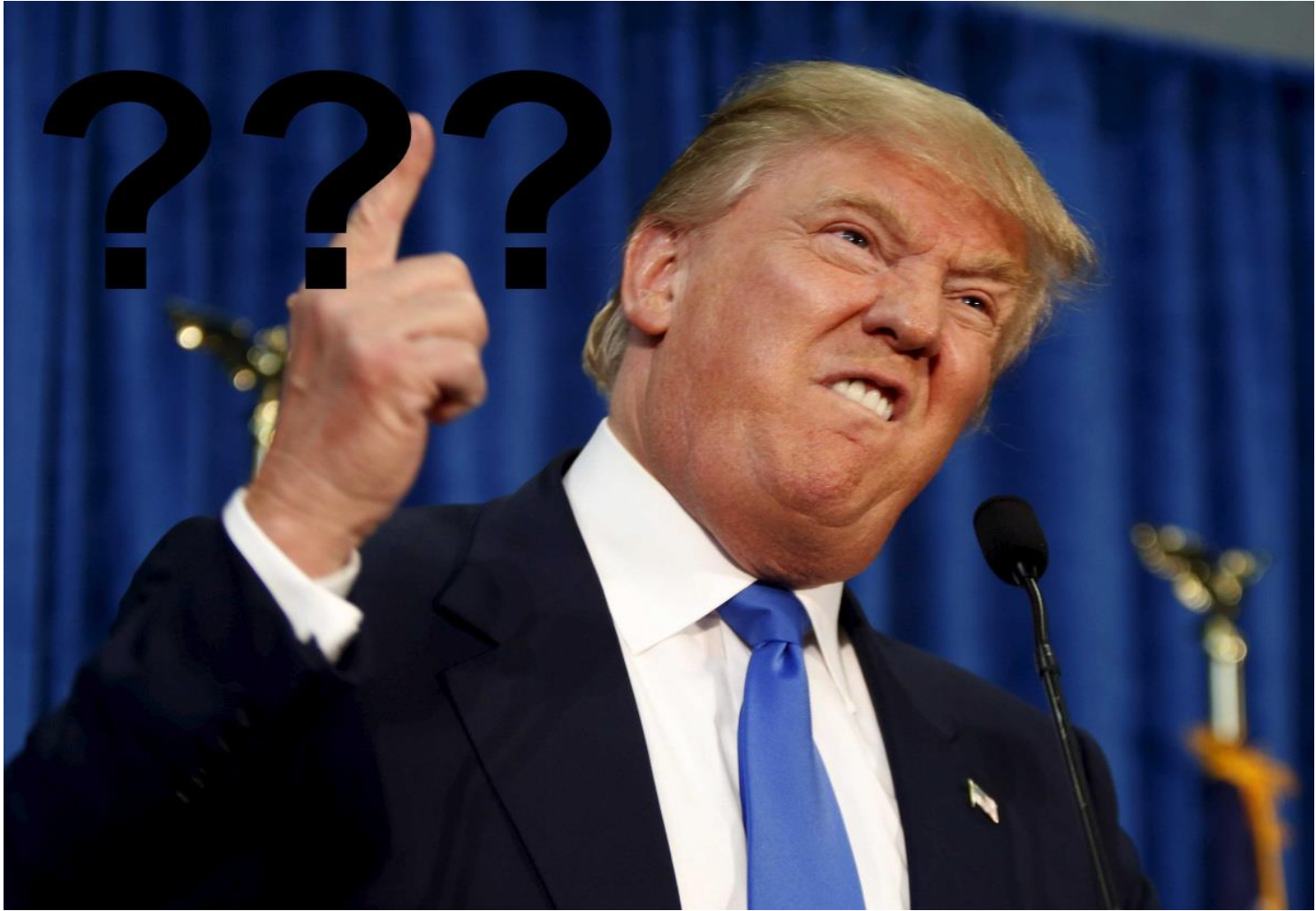


meetings : where minutes are kept

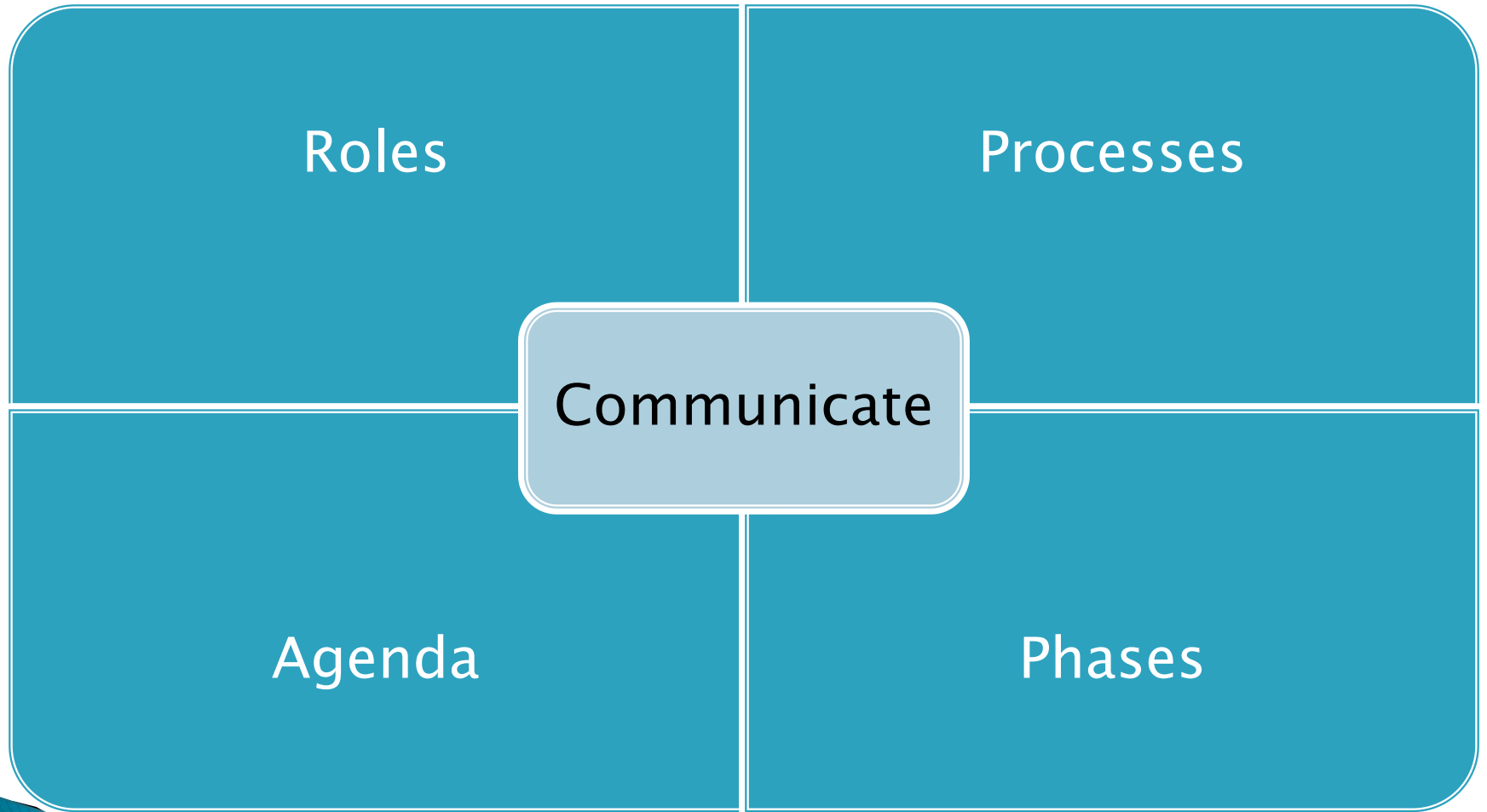


and hours are lost

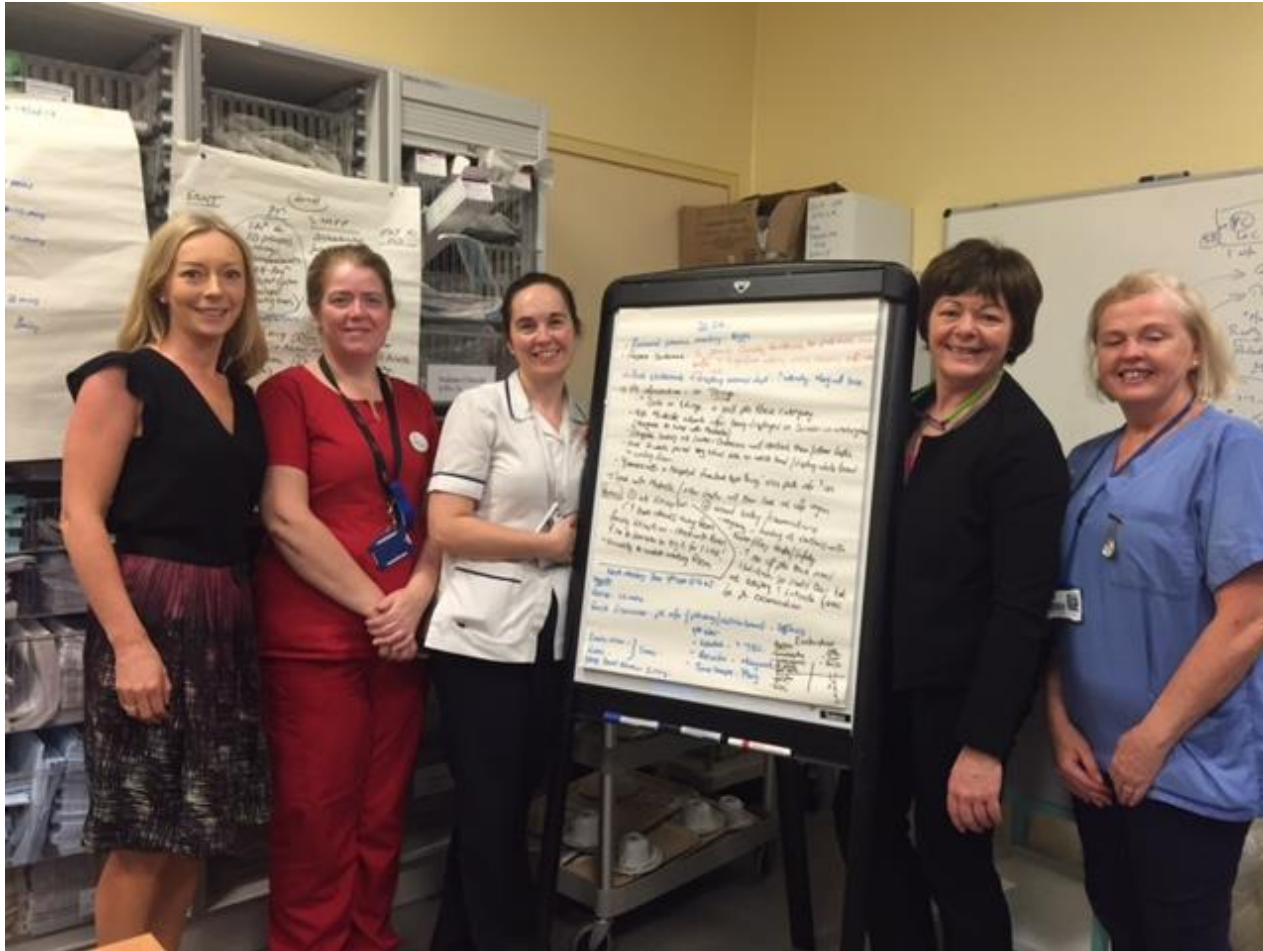
P.R.Engle



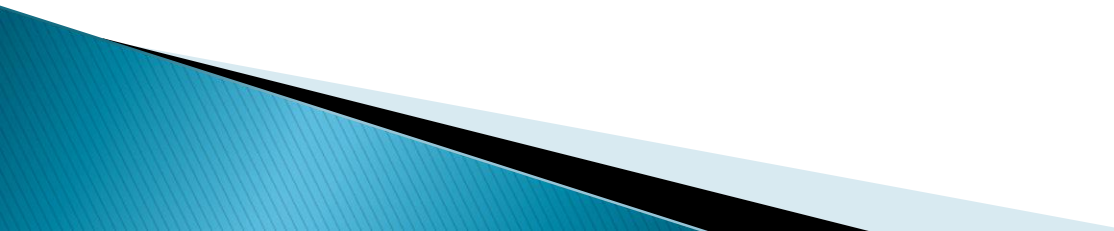
MEETINGS



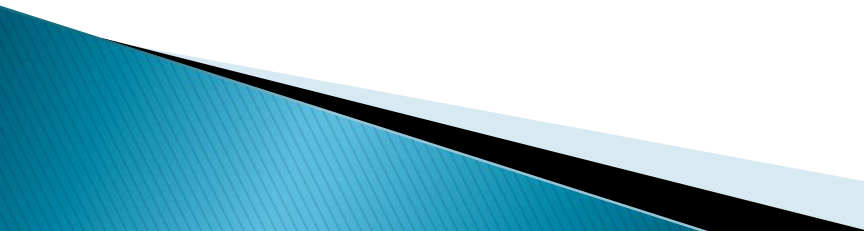
TEAM MEETING



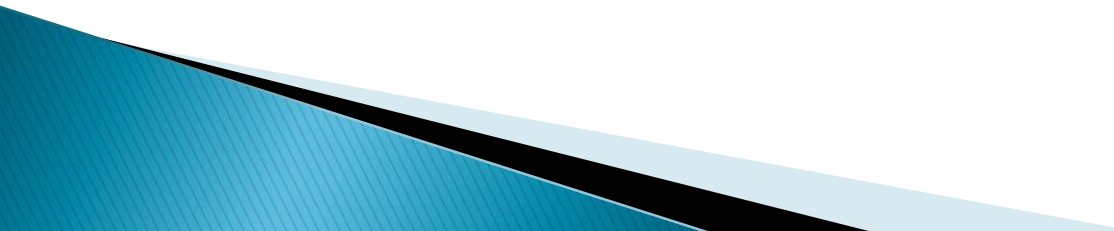
QUESTION?

- ▶ Do we engage patients as team members?
 - ▶ Do we involve carers as active members of the team?
- 

Why involve patients and carers?

- ▶ Shared decision making
 - ▶ Improve safety and quality of care
 - ▶ Minimise adverse events –
miscommunication
- 

The patient is the only member of the team who is present at all times during their care !



Microsystems

PATIENT CENTRED

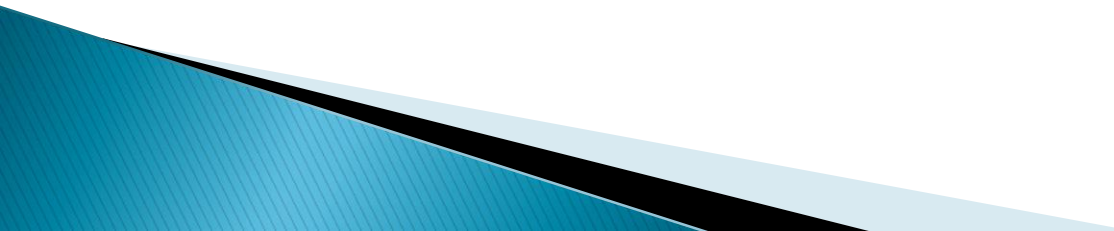
PATIENT FOCUSED



The teams



Improvement Initiatives

- ▶ Wheelchair project
 - ▶ Handover in department
 - ▶ Triage efficiency
 - ▶ Communication with patients
 - ▶ Patient information
 - ▶ Waiting area improvement
 - ▶ Medication information
 - ▶ Medication reconciliation
- 

Let's Celebrate

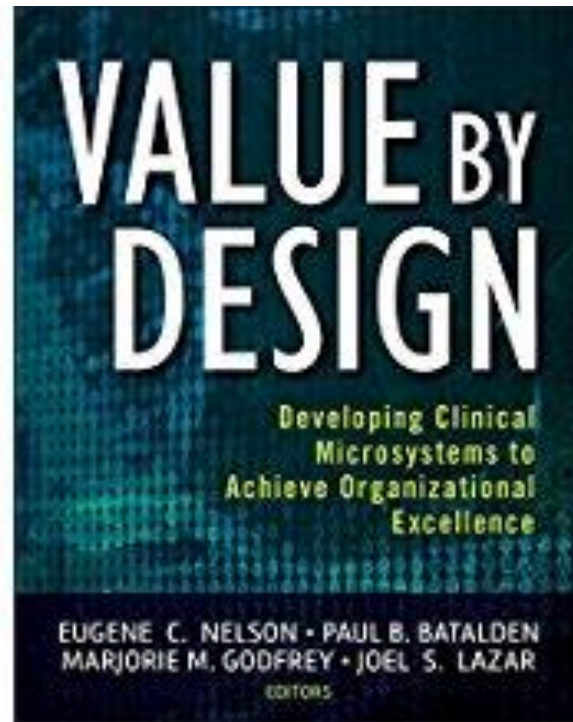
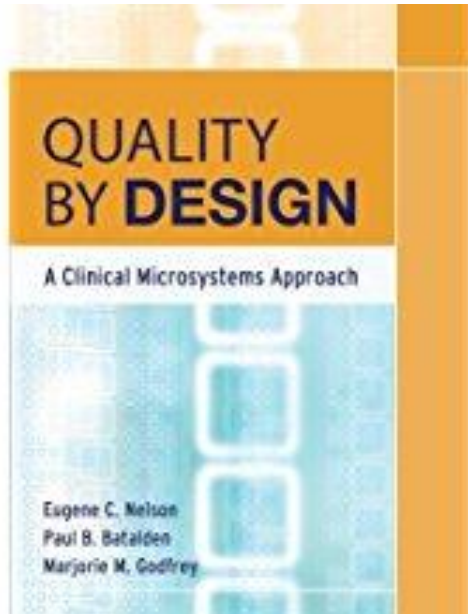








Some Reading

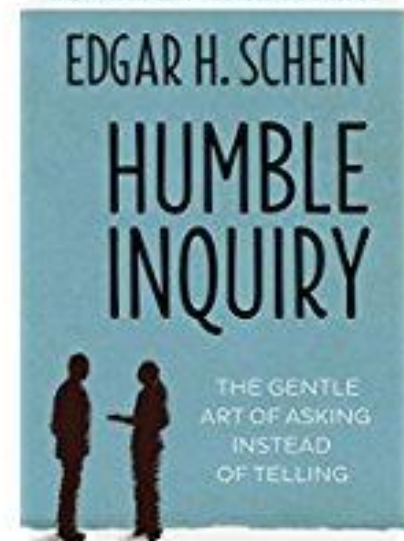


HELPING



HOW TO OFFER, GIVE, AND RECEIVE HELP
Understanding Effective Dynamics in One-to-One, Group, and Organizational Relationships
EDGAR H. SCHEIN

WALKING POSITIVE RELATIONSHIPS AND BETTER ORGANIZATIONS



QUESTIONS WELCOME



For further information

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 - ▶ @EMPMicrosystems
 - ▶ www.qualityimprovement.ie
- 

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Watch recorded webinars at your convenience on HSEQID QITalktime page

1pm Tues March 20th:

Change in schedule – stay tuned

Thank you from all the team
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QI TALK TIME

Building an Irish Network of Quality Improvers

Helpful links

Framework for Improving quality
www.qualityimprovement.ie



Improvement Knowledge
and Skills Guide



<http://www.hse.ie/eng/about/Who/QID/aboutQID/>