QIC learn®

FocusQI

Spring 2024

QIC and the BMJ International Forum

Blog: Is my QIP doomed to fail?

QICaction: Thinking upl

Hi, I'm Nikki Davey

WOW! Whilst we have glimpses of Spring, our learners are QI energised beyond our expectations! As they gain their QI credentails and move from knowing to doing they really do #makechangehappen!

With conference presentations galore, look out for them as they showcase their work at the Royal College of Paediatrics and Child Health, the International Forum on Quality and Safety in Healthcare and Bristol Patient Safety Conference.

I’m so proud of our QIClearn team. Their commitment to creativity and excellence in the prusuit of better care for all is sensational!

TAKE A LOOK AT WHAT'S INSIDE...

BMJ International Forum - April 24

Blog - Thinking Out Loud: coping with information overload, by Heather Shearer

QICaction: Thinking Up with confidence and optimism

Q Cards

Improve ONE thing: Paediatrics

Improve ONE thing: The Full QIP

Evie Dove Foundation

Have you discovered...?

Blog - Is my Quality Improvement Project doomed to fail just like a New Year's Resolution?

Bristol Patient Safety Conference

QI Poster Gallery

Learning from Excellence Community Update

Q Community

International Forum on QUALITY & SAFETY in HEALTHCARE LONDON

10-12 APRIL 2024
EXCEL LONDON
LONDON, UK

QIC have been involved with BMJ International Forum for years! We've been able to attend, learn from speakers, network and showcase our work.

This year marks the first year one of our associates, Heather Shearer will be Co-chairing a session on Sustainability (Thursday).

PART 1: **Making environmental sustainability and quality improvement a reality: practical steps for health.**
This session, co-chaired by Heather will describe an increasing need for healthcare to address all three pillars of sustainability as part of their improvement journey, to deliver financial viability, social equity and increasingly important, environmental sustainability.

PART 2: **Greener pharmacies: working together to reduce the impact of healthcare.**
Heather will be chairing a discussion on working together to identify key areas of focus and engaged with key stakeholders to ensure the improvement work would be achievable and relevant.

International Forum on QUALITY & SAFETY in HEALTHCARE LONDON

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Heather Shearer

I am so excited to be co-chairing a session at the prestigious BMJ/IHI forum. Co-chairing with someone with lived experience matches our values of offering free parent learner places on our learning programmes. Focusing on leading for a healthier planet reflects our many learners who focus upon projects to use resources wisely

Take a look at these 2 great poster examples in more detail:

CHOOSING WISELY: MY LIVER IS FINE

Reducing the Rays

CELEBRATING SUCCESS!

Each year, we see our learners' hard work resulting in some outstanding QIP's. We encourage them to showcase their QI work and get some more credentials in submitting an abstract, and giving an oral presentation.

This year - April 2024, we are excited to announce 24 of our learners will be showcasing their work at this event.

Last year 14 QI Change Champions from London, East of England and West Midlands shared their work in Copenhagen and had a great time hearing from QI leaders and presenting their work to an audience 'silent disco style'!

Associate and QIC Director, Heather Shearer and Nikki Davey also took new QI projects to the event.

You can view some of the fabulous QI Posters showcased at previous BMJ International Forum's here:
https://qiclearn.com/bmj-forum-posters/

Blog - Heather Shearer

Thinking Out Loud: coping with information overload

I have had the great privilege of working with senior leaders in healthcare for several years. Senior managers, clinicians, nurses and midwives, board members, executive and non-executive directors, chief executives, and chairs. This is the first in a mini-series of blogs that draw from practical examples, academic literature and offer some ideas for responding to information overload at senior level.

Leaders are anxious about the quality and safety of services for which they have responsibility. They care. Their worries are often underpinned by a concern the information they have is not the complete picture. They ask questions, request reports, more paper is produced. There is a belief that more information will provide greater certainty and reduce anxiety. And yet, the anxiety felt by the senior leaders remains – and may even increase as the volume of information does.

Anyone working in this environment no doubt has experienced receiving vast piles of paperwork to read in preparation of a meeting - it's common for papers to number 400 pages. The volume of information becomes overwhelming. More staff spend more time creating these pages.

Blog - Heather Shearer

Now that these documents are mostly digital, we are taking a positive step toward protecting the environment but there is a danger that without the vast stack of paper to print or carry, we may be even less mindful of how much content we're asking people to digest.

Can we all be reading this volume of information? Sometimes people will admit that they haven't read the papers. It can often feel for those requested to produce them that no-one has bothered.

And yet…. Leaders still tell me they feel uncertain and anxious.

This has led me to question the use of 'information' and try to understand how we can tackle a problem that seems to be growing. In fact, when discussing with a friend who is the chair of a third-sector, voluntary, organization, her eyes lit up as she recognized the same issues: *"We've just started talking about this in my Board and we realized we were all colluding and not talking about the information thing".*

Looking at the information that is produced for Boards or Quality Committees for Healthcare Acquired Infections (HCAI) as an example, we can see a huge deluge of information. There are tables of numbers; huge paragraphs of text – include words like 'below', 'above', 'increase', 'decrease'; patient stories; staff stories; incidents; complaints; appointment lengths; lengths of stay; targets for reducing HCAI; costs associated with HCAI and on and on. A huge volume of data; often overwhelming and rarely wholly connected with different bits in different documents. It is hard to say for certain within this information rich pile of documents that what we're reading is accurate, can we be certain that the person recounting the patient's story has interpreted their sentiment correctly, are we reading that correctly or do we interpret the data differently to our colleague sitting next to us?

There is something counterintuitive happening. In our efforts to focus, simplify, clarify, reduce, and streamline our understanding in documentation, we are losing the connection between reality and our discussions and decisions.

Blog - Heather Shearer

Our papers are only mere representations of reality, and all of them reduce this multi-dimensional, complex experience to a 2D thing. Inevitably, something is lost. We are then making strategic decisions based upon simplified information, making assumptions that don't fully represent the patient experience.

I have recently read the most fascinating book (To Obama: A people's history by Jeanne Marie Laskas) describing the process and content of letter correspondence that went on between President Obama and American citizens during his 8 years of office.

"When you are president, so often you're talking in shorthand," Obama said "Almost always you're being reported in shorthand. You can get into habits. You forget that on the other side of any issue is a complex person, or people, or communities that are trying to sort through a whole bunch of stuff that they're dealing with."

President Obama read and responded to 10 letters every night. One of the many implications of this leadership behaviour was that other senior staff in the White House wanted to attend to the mail too.

"For me, a great letter was one that would make me feel confused about issues and expand my understanding of the implications of what we were doing." One senior staffer is quoted in the book.

These letters are not the 'papers' which I discussed early on that we are saturated with; these are first-hand accounts that led staff to accept that the job they were doing was not simple. Rather, it grounded their actions in reality; the letters did not offer a solution to a problem, they did however, provide the opportunity to accept they did not know the answer to every problem.
I think what I'm trying to say is that we can't understand the environment in which we operate from reports, data and the recounting of other peoples' stories. We can't improve and simplify our environment by producing yet another policy to outline what needs to be done in future.

Blog - Heather Shearer

We need, within our teams, departments and across all levels to think about our actions and work together to always be aware of what we're trying to do for our patients and the people that we serve.

My advice, when faced with information anxiety in the future, would be to resist commissioning a new report and instead consider: What might we learn if we switched our usual board papers to 10 letters from patients and staff picked at random? How would that change our conversations about reporting and probing for assurance?

As a senior leader: Go, see, and hear

TEAM@QICLEARN.COM

Thinking Up with confidence and optimism

As a company we draw upon decades of quality improvement experience from our team members. We apply quality improvement methods to our own learning and programmes and consultancy so we practice what we preach. Our associates often work with Board Members and Senior Leadership teams on governing for quality.

Leaders are anxious about the quality and safety of services for which they have responsibility. They care. Their worries are often underpinned by a concern the information they have is not the complete picture. They ask questions, request reports, more paper is produced. There is a belief that more information will provide greater certainty and reduce anxiety. And yet, the anxiety felt by the senior leaders remains – and may even increase as the volume of information does.

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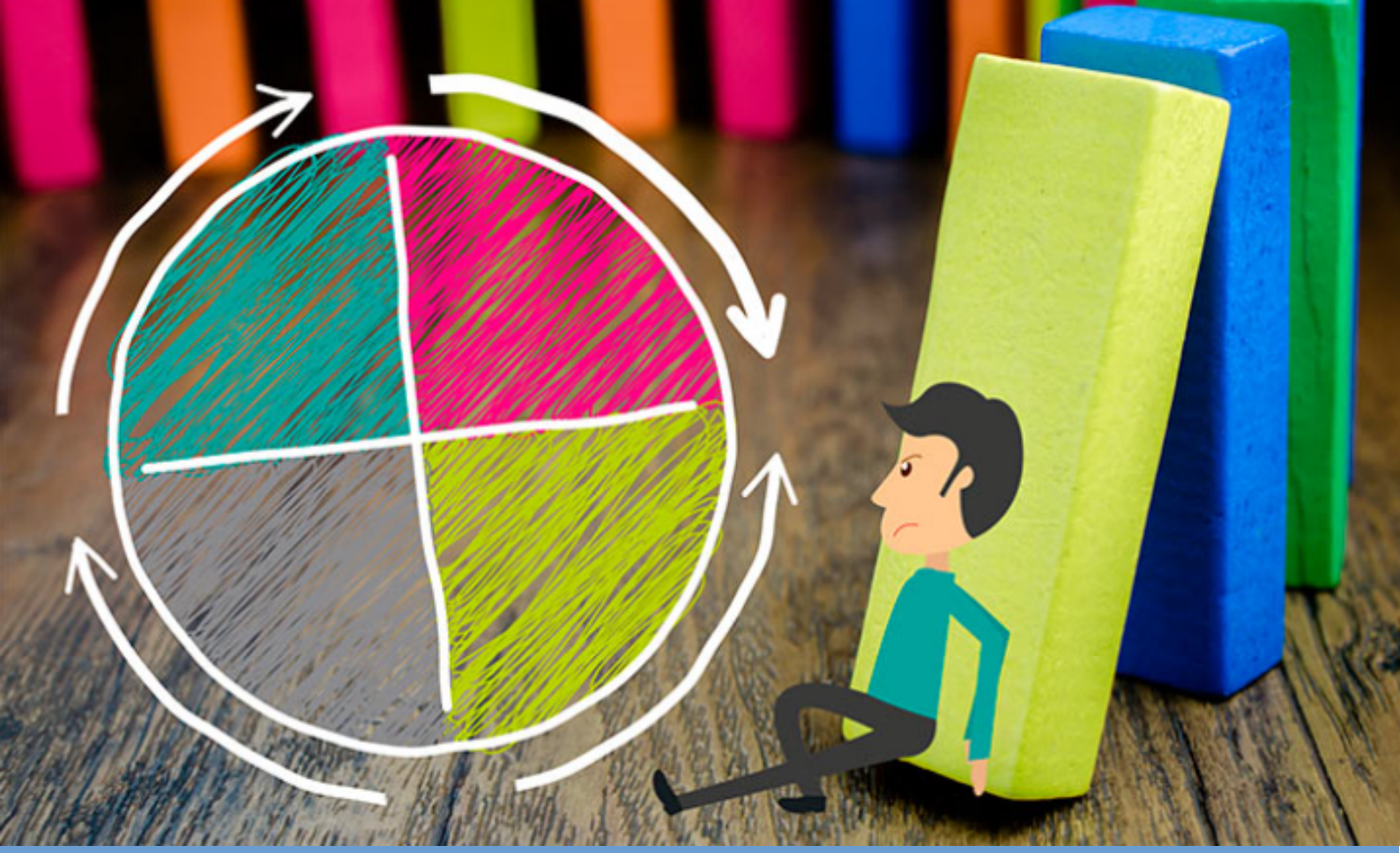
Our coaches offer 1:1 coaching and bespoke organsational consultancy.

In choosing us, we will be a cost-effective partner and a reliable partner with sessions that won't get cancelled. Visit www.qualityimprovementclinic.com

TEAM@QICLEARN.COM



Want to create a ripple effect?
Want to change ONE thing?
Not sure where to start, or what questions to ask?
Are you short on time?

'Should we abandon this now?'

Check out our Q cards for prompts to generate productive conversations around change in your department

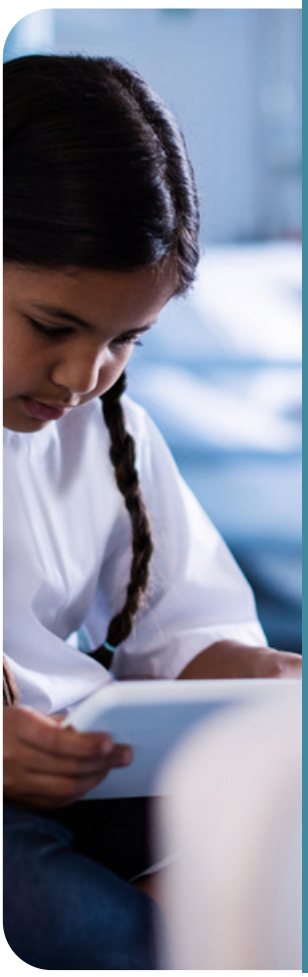
Change your conversation, change your outcome.

Improve ONE thing: Paediatrics

Find out More!

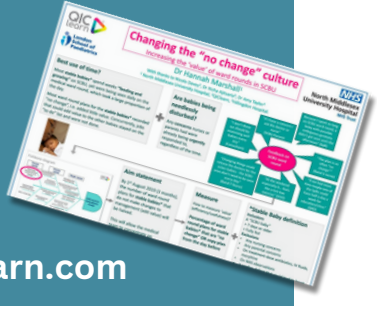
The huge success of Improve ONE thing: Paediatrics for London School of Paediatrics (LSP) is in large part due to the amazing engagement and support that we have had from the School itself.

Successive Heads of School have sponsored over 250 London trainees in 12 cohorts over 6 years. Teaching is a true collaboration between QIClearn and Dr Jane Runnacles, Dr Alice Roueche, Dr Emma Parish and Dr Richa Ajitsaria and the 12 LSP QI Mentors whom we have trained after they have completed their own QI project on the course to become QI change Champions.



Achievements of trainees go way beyond completion of the course, with many winning prizes for their work and presentations at national and international competitions, leading sessions for other trainees in their placements and across the whole of London, publishing their work in leading journals.

A significant number have gone on to work on more ambitious change projects, and some have spread their original QI work to a regional and national level. Many trainees say this is one of the best courses they have taken throughout their training, often using their QI story in their Consultant Interview to demonstrate the added value they bring to future employers.



Take a look at the course in more detail **here**

View some of their QI Poster outputs **here**

Want to talk to us about it? Email **team@qiclearn.com**

The Full QIP

QIClearn are experts in Quality Improvement and work across the UK with Trusts to MAKE CHANGE HAPPEN

- Fed up of choosing something far too big and getting swamped in data?
- Feeling overwhelmed when thinking about QI?
- Running up against ethics?
- Told you must do audit and not sure how to navigate?
- Not able to get help/advice/support you want?
- Time poor?
- Need something for your portfolio?

We hear you!

Improve ONE thing: The Full QIP – is an innovative course designed for professionals working in all specialties.

We support you to design, test and implement meaningful improvements in 4 months.

The Improve ONE thing ethos is about providing the right balance of theory and practice. So, we focus on the practical elements of improvement science and how improvement works on the ground in your healthcare context.

Earn bragging rights with your peers as you share award winning QI posters and abstract submissions as have many of our learners.

Our courses offer real, practical steps, a structured pathway and illustrations of real changes to progress your QI learning.

WE HAVE A SMALL NUMBER OF PLACES AVAILABLE FOR SPRING 2024
BOOK HERE

VISIT: WWW.QICLEARN.COM/COURSES

THE EVIE DOVE FOUNDATION

Are you a paediatric professional looking for support and funding to develop your clinical skills?

The Evie Dove Foundation was set up in memory of incredible Evie to provide grants and bursaries for NHS staff working with sick children.

The Foundation aims to be very flexible, providing financial support for any staff wishing to develop their clinical skills and accepts applications from all professional groups – doctors, nurses, AHPs and others (such as play specialists and nursery nurses) and we can turn applications around quickly if required.

You can see the range of wonderful people they have supported in year 1 on their website https://theeviedovefoundation.org/ourheroes/

The link to the website for people wishing to apply is as follows https://theeviedovefoundation.org/applications/ and there is also a short video on the origins and purpose of the Foundation on the home page https://theeviedovefoundation.org/

If you have queries, please contact the Foundation who will be happy to help info@theeviedovefoundation.org

Have you discovered....

Have you discovered the Handbook of Quality Improvement in Healthcare by Peter Lachman?

Published by Oxford Professional Practice

This book...

- Translates the theories of implementation science and improvement into practical action
- Provides the methods that can be implemented to improve healthcare
- Addresses the challenges of climate change, equity, and person-centred care
- Makes quality improvement tangible and accessible, using real-world clinical case studies

Oh .. and by the way...

It features work examples from learners on our courses:

Dr Anna Rzeskiewicz
Dr Hajera Sheikh
Dr Segn Nedd
Dr Melody Bacon

CLICK HERE

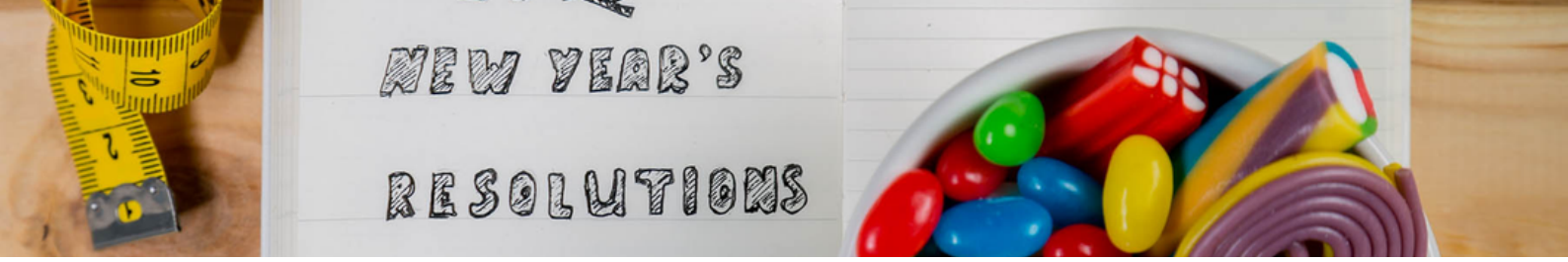
Is my Quality Improvement Project doomed to fail just like a New Year's Resolution?

By Becci McKone

When I was crafting our QIClearn social media message for new year, it got me thinking about resolutions and why they so often fail. I realised that a New Year's Resolution is a personal Quality Improvement Project and so the same conditions should be created to guarantee success. Research suggests that most New Year's Resolutions are abandoned by March, so I can see why many people view QI as an insurmountable task. Many of our learners are in 6-month placements so enacting change and getting it to stick once they leave seems virtually impossible. Whilst others may wonder how we've found an effective way to help them succeed we're happy to share what we've learnt.
When looking at the reasons why so many projects and resolutions fail the list is almost identical and these pitfalls can be avoided when you know what to look out for.

Under Pressure
When approaching the festive period, I find I'm constantly asked if I'm making any resolutions, I often feel under pressure to produce something – so I pull some big grand plan out of the air or I'm led by other people's resolutions. What do they want to change about themselves? Is what I'm changing in line with what is expected of me? This results in an idea of change that you're not invested in, there's no excitement for it.

It's Too Big!
Do you plan to join a gym and exercise 4-5 a week when you've previously done very little movement? Are you going to lose weight, drink less, sleep more? All of these are HUGE lifestyle changes.



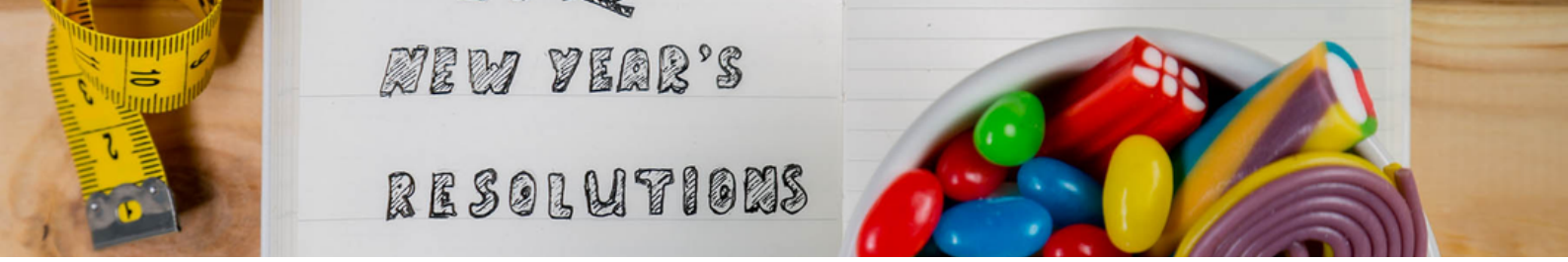
Try going smaller – can any of these things be broken down into smaller, less daunting and more achievable aims? Absolutely! Incremental changes are much more likely to be sustainable. Small changes are much more likely to become part of your new habits.

Understanding the Problem
Why do you want to sleep more or drink less? Both things are solutions (as New Year Resolutions are meant to be!) but it's much more likely you can stick to these solutions if you've fully understood the problem. What are the contributing factors that lead you to drink 'too much' or sleep 'too little'? Try listing out the reasons why you want to do these things and this may help you aim smaller too.

Get specific!
In my experience, we tend to move the goal posts. If you want to drink less, you may say 'oh I won't drink in the house' but this may change to 'I won't drink in the house unless we have friends round' or 'I won't drink in the house on a weekday' OR you could end up changing your habits entirely and spending more time in the pub – an own goal perhaps? If you are specific with your aim and you have appropriate measures in place then there is much less chance of your plans going awry.

No one is an Island
How will you to keep a change going when everyone around you is doing it the same as they always have? It can be so disheartening! I'm not saying that everyone close to you needs to have the same resolution to support you. I'm saying that discussing the change that you want to make early in the process can help bring people on board. Help them understand the problem and nurture an environment where the change can thrive AND most importantly, be sustained.

In a QI project, the change must be something you can achieve and that's within your sphere of influence. The project rarely affects one team though, there's nurses, doctors, ward staff, intensive care units, receptionists, care assistants etc that all need to be on board.



This is a much easier process if you involve them when you're formulating ideas for change – you may even be given some great ideas from a whole new perspective. Sharing your project is such an important step in getting a change to last once you're gone and it is all too often overlooked.
So whether you're considering a New Year's Resolution, made one already that may need some tweaking in order to succeed or starting a Quality Improvement project, remember these key points:

- Don't stress
- Go smaller
- Go deeper
- Be clear
- Don't go it alone

Change can become your new habit

TEAM@QICLEARN.COM

BRISTOL PATIENT SAFETY CONFERENCE
15 MAY 2024
BOOK NOW!

QIC Director, Nicola Davey is delighted to be a speaker at this year's event. She will be kick-starting the afternoon programme with Fail safe, learn fast, improve more.

You can secure your place now by clicking here

Here are a few winning QI posters at the Bristol Patient Safety conference:

2021 - In the Know or in the dark?- Keeping parents updated on their babies' results
North Middlesex University Hospital
Jeanne Uhiriwe, Akudo Okereofor, Nicola Davey
In the know or in the dark? - QIClearn

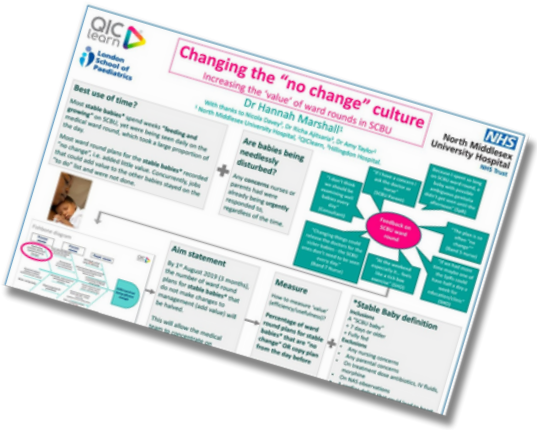
2021- Will I leave work on time today?
Dr Hajera Sheikh1, Nicola Davey2, Dr Emma Parish3
Will I leave work on time today? - QIClearn

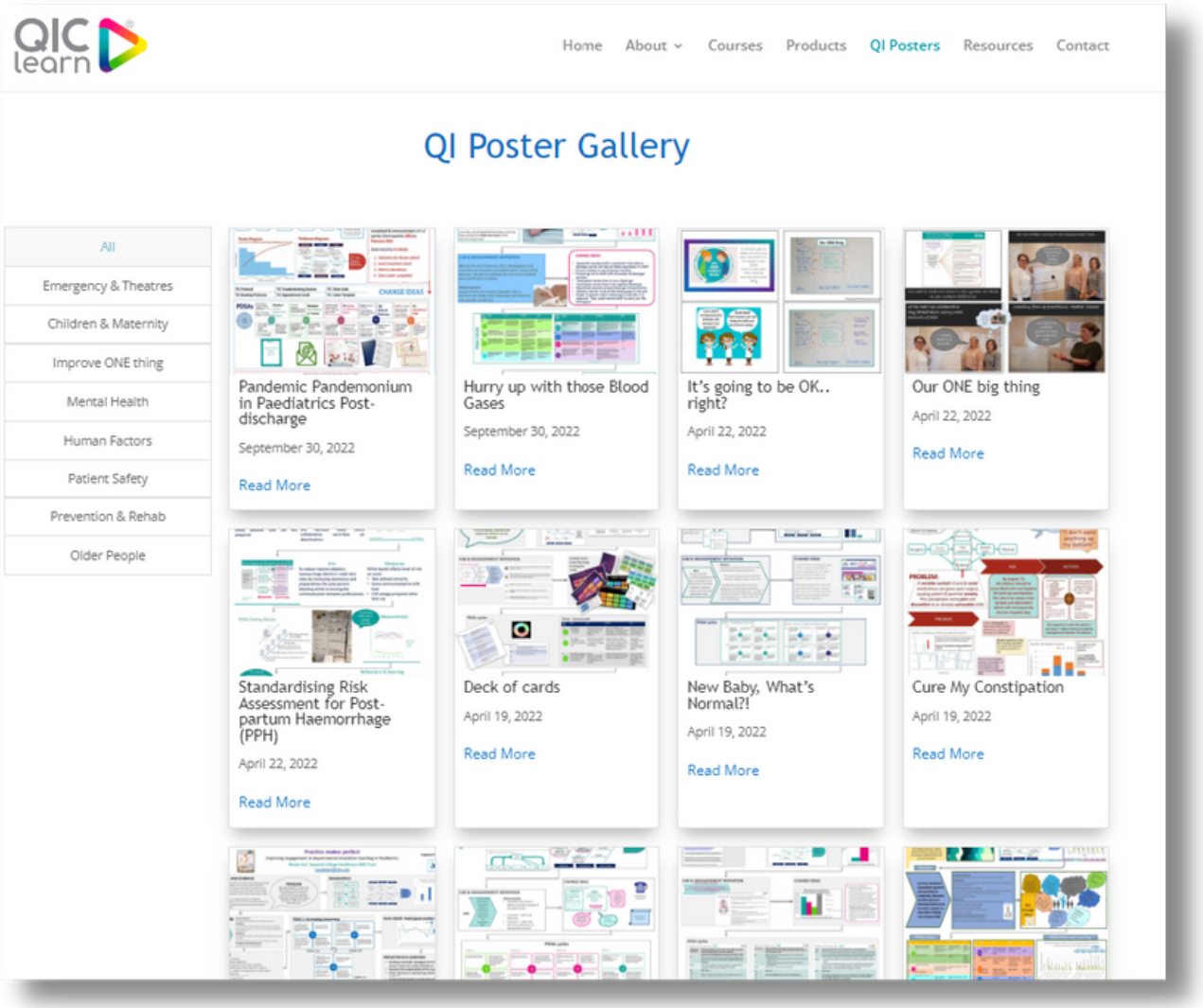
2020 - Gotta Lose The Baby Wait
Dr Segn Nedd, Paediatric ST5, Newham Hospital
@Segn_Nedd
Gotta lose the baby wait. - QIClearn

QI Poster Gallery

After each of our courses, we capture all the QI projects we've supported in a **searchable gallery** You can view posters via specialty, Trust or diagnostic. Including:

- Emergency & theatres
- Children & Maternity
- Mental Health
- Human Factors
- Patient Safety
- Prevention & Rehab
- Older People





LEARNING FROM EXCELLENCE COMMUNITY UPDATE

Check out their Podcast:

“We have now started to publish the second series of our podcast with Civility Saves Lives. This series features "long form" interviews with our guests from #LFE5. So far, we have released the recordings with Janet Leighton (Timpson's director of happiness) and Bob Klaber (founder of Kindness in Healthcare).

Both episodes broke our previous download / streaming records, so we it seems that our little platform is getting bigger.

You can find the podcast by searching for "Being Better, Together" on all the usual platforms, or by visiting the site here:

https://learningfromexcellence.com/bbt/

Connect. Grow. Contribute.

Take the next step in your improvement journey, join Q to drive positive change in health and care.

Make real-world change by bringing your improvement challenges and helping others solve theirs. Connect, share, and discover with a group of like-minded people while contributing in a way that suits you.

Whether you have years of experience or are looking to build on your improvement skills, there's a place for you in the community.

To help decide if Q is for you, we've answered some of our most frequently asked questions:

What is Q?

Q is a community of thousands of people across the UK and Ireland, collaborating to improve the safety and quality of health and care. We share our knowledge and support with each other to tackle challenges. Together, we make faster progress to change health and care for the better.

The Health Foundation

Q is led by the Health Foundation and supported by partners across the UK and Ireland

Why should I join Q?

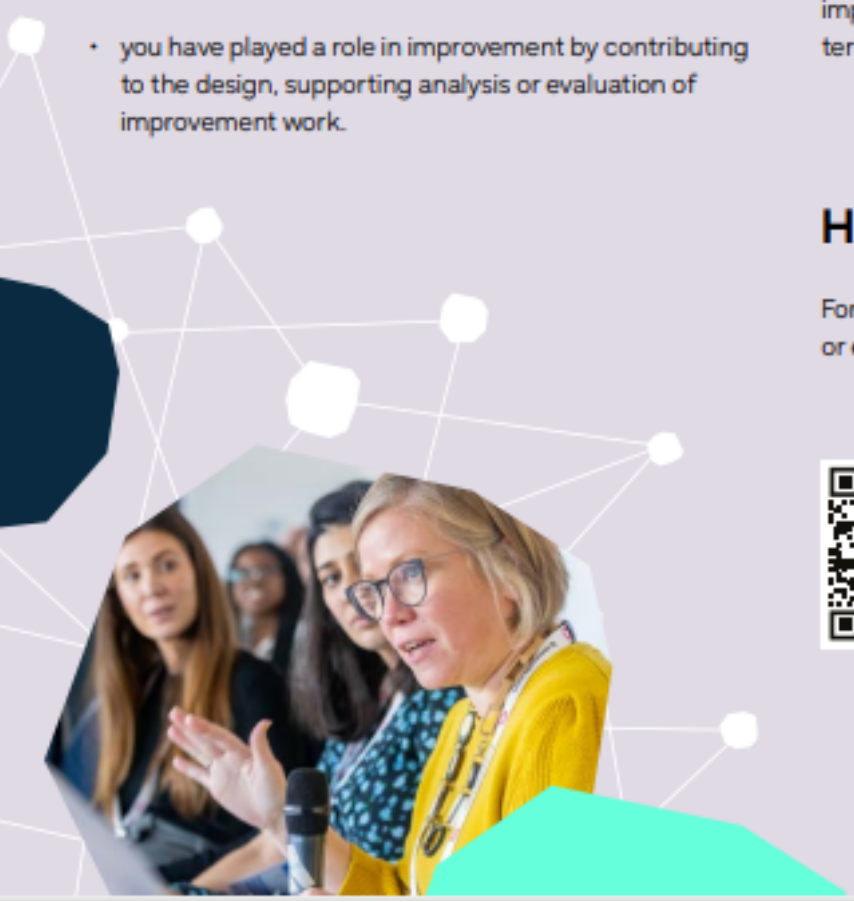
Becoming part of our community enables you to:

- connect with others carrying out improvement work with access to free events, networking, and learning resources
- learn, grow, and share ideas with a community dedicated to driving positive change
- take a flexible approach to contributing and help improve health and care
- join for free and get access to member-exclusive funding opportunities, with no ongoing membership fees.

Who can join the Q community?

You don't have to be an expert or come from a certain career path or background, Q could be for you if:

- you're interested in collaborating to improve health and care
- you understand some of the structured improvement approaches like co-design or Systems Thinking
- you have played a role in improvement by contributing to the design, supporting analysis or evaluation of improvement work.



Do I have to pay to be a member of Q?

No, there are no joining or ongoing fees to become a member of our community. It's free membership for life.

How can I join Q?

Joining our community is simple, just go to **q.health.org.uk/apply-q** and submit an application through our online portal. You'll be asked to write about your experience in improvement and why you want to join Q. Once you've submitted your application it will be assessed, and you should hear back within six weeks.

What makes Q different from other initiatives, networks or programmes?

Our community is designed to complement other improvement initiatives you're part of. Q makes it easier to collaborate, providing resources and platforms to connect and support each other and making it easier to understand what improvement work is being done, by whom, and where, whilst influencing the context of improvement. Q is aimed at individuals and provides long-term support throughout your improvement career.

How can I find out more?

For more information about Q just visit **q.health.org.uk** or email our team on **Q@health.org.uk**

Join the Q community, visit **q.health.org.uk/apply-q**