What is this session?
Who am I?

- Not a clinician
- Not an academic

CityCare
Building Healthier Communities

East Midlands Clinical Audit Support Network
What is quality improvement?
Why do we do it?

If you do
what you've always
done,
you'll get
where you've always
got.
The process:
What do we want to improve?

“Start with what drives you crazy”
Who should be involved?

- Those who do the work
- Those who can champion the changes
- Different levels of involvement

When are we going to do this?

- Consider reporting deadlines or events to promote at
- Consider what is realistic
- Times of year to avoid
What does ‘good’ look like?

Example: NICE NG97
1.4.2 Offer group cognitive stimulation therapy to people living with mild to moderate dementia
1.4.5 Do not offer acupuncture to treat dementia
What is happening here and now?

• Do we already know enough? (performance, incidents, patient surveys, previous clinical audits etc.)
• If not what do we need to find out?

Ask patients/ carers/ staff

Collect data from records (only what you need)

Choose one case and dig deep to find out what happened and why

Map the process start to finish
What **exactly** do we want to improve?

- What measure are you going to improve?
- How much?
- By when?

Setting your improvement aim at this stage will keep you on track with your changes
What are we going to try?

• Get together to look at ‘what is happening here and now’ compared to ‘what good looks like’
• Think about what changes you could make, keeping your aim in mind

• Only change one thing, in one area, to test if the change idea works to help you meet your aim
Does that work?

- Make a graph, along the bottom will be the dates and up the side is the results
- Include your results from before you made the change and afterwards, making a note of the change date on the graph
- Frequent measurements is best, as there can be some movement up and down but several in the right direction shows the way it is going
What are we going to try next?

- “It didn’t work” – choose another idea to try
- “It kind of worked but not enough” – tweak it or add another change
- Try your next change idea and add the results to the graph

- “It worked great” – if you are meeting your aim you are ready for the next step
Can we spread this?

• You have found a change idea that works for one team/clinic/site to meet the improvement aim, now try it somewhere else
• As before - introduce one change, measure the impact, then decide if you need to adapt it
How do I share the success?

- Clinical networks/ events
- Posters
- East Midlands QI Network
- Competitions e.g. Clinical Audit Support Centre
- Journals
- National conferences
- NQICAN Forum
What does QI really look like?
What does QI really look like?
Where can I get support from in my organisation?

- Quality Improvement Team
- Clinical Audit Team
- Clinical Effectiveness Team
- Quality & Safety Team
- Improvement and Transformation Team
- Clinical Audit and Improvement Team
I work in one of those teams, where can I get support?

East Midlands Clinical Audit Support Network
casnet1@outlook.com