

CITY & HACKNEY QI FACTSHEET 6 - Becoming a Project Lead & starting a new QI Project

If you think you might be interested to start a new QI project, the steps to move forwards in City & Hackney are:

1. Talk to your manager or director and review the list of City & Hackney QI priorities in section 1. If you're in agreement that you may have a suitable idea to take forwards that fits within these priorities, have a think together about the questions shown in the diagram below. These are some of the key things the directorate will need to think about to determine the readiness and suitability of the issue and team for QI project. If you think you are ready to proceed, get in touch with a C&H QI Sponsor, QI Coach or Improvement Advisor.



2. Have a discussion with a QI sponsor, QI coach or Improvement Advisor about the area you think might be suitable for a QI project¹. If they think it is ready to go as a provisional idea to the City and Hackney QI Forum, they will support you to complete a short form with these questions to take to the Forum². Please see the next section below with some further notes about questions on this form. Once you have completed, send this to the Improvement Advisor.
3. The Improvement Advisor will let you know the date of the next QI Forum to attend and discuss your proposed project.
4. If the QI Forum supports this to move forwards and become a QI project, they will give you steers on how to develop the project and allocate you a provisional sponsor and coach to help you do the thinking required to create a full project charter on the QI Life system.

¹ Current sponsors and coaches for City & Hackney are listed on the QI Microsite at https://qi.elft.nhs.uk/help-support/find-your-local-support/?fwp_directorates_drop=city-hackney-adult-mental-health

² <https://qi.elft.nhs.uk/collection/starting-a-qi-project/>

5. When completed, the charter will then come back to the QI Forum (usually a month or two later) for agreement and further steers, and your ongoing coach and sponsor will be confirmed (usually the same people who were allocated on a provisional basis).

Note you will then be invited back to the QI Forum within 3 months to update on progress and receive further support. This is because we know from experience that the first stage of the project is the most difficult in terms of maintaining momentum, developing engagement and understanding how to use QI methodology. The QI Forum therefore wants to do its best to support you to get your project through this and into the testing phase. The flowchart on the following page shows the 'Development and agreement of QI projects' process in detail, as well as what happens if it is decided that the project is not suitable to move forwards.

Step 1: Identifying a QJ Issue

Staff member/patient has idea to improve quality

Discusses idea with a local QJ coach, QJ sponsor or QJ Lead

Directed to QJ Lead who provides and supports person to complete "Identifying a QJ issue" form/questions

Step 2: QJ Forum 1: provisional idea

Provisional idea taken for discussion and agreement at QJ Forum



If QJ Forum believe it could be appropriate, QJ Lead or QJ coach to provide support to develop further. If not, leadership may decide to take forwards through other local processes/methods other than QJ

Step 3: Detailed project development (Charter & Driver Diagram)



QJ Forum gives steers on project development and composition and allocates provisional QJ sponsor and QJ coach

Provisional sponsor takes idea to DMT (same day) for ratification to proceed

Project team accesses QJ Microsite guidance and develops charter and driver diagram on QJ Life with the support of allocated coach (and QJ Lead, if needed)

Charter and driver diagram submitted on QJ Life

Charter and driver diagram comes to next QJ Forum for agreement

If QJ Forum believe it could work as a QJ Lead/ QJ coach/ QJ sponsor to provide support to develop further. If not, leadership may decide to take forwards through other local processes/methods other than QJ

Step 4: QJ Forum 2: Detailed project plans (Charter and Driver Diagram)



- Following approval, to progress, project then:
- receives regular coaching from QJ coach/ QJ Lead
 - updates sponsor and receives support from sponsor to unblock barriers
 - attends QJ Forum when requested for further support and learning

QJ Forum provides further steers on development of project and confirms sponsor and coach

Sponsor takes project to DMT (same day) for final ratification

Project starts

START

Identifying a Quality Issue and Starting a QI Project Form

Is this right for a QI project?

Not everything needs a QI project – more simple things can often be resolved with approaches you are probably already more familiar with (e.g. action-planning, team discussion, line management, etc).

Instead - and we think this is the good news - QI is there to help us with the more complicated issues in healthcare; perhaps the things that we've struggled to make progress on in the past, the things that can feel 'impossible', like reducing violence on inpatient wards or halving waiting times in community services during a period when referrals are more than doubling (something else that has been achieved in City and Hackney – see box 6). Sometimes these issues are referred to as 'Wicked Problems'.

Saying all this, we believe areas for improvement exist on a scale in terms of complexity, and some issues that are moderately complicated, rather than mind-bogglingly complicated, may still really benefit from this methodology - so don't be immediately put off if you think your issue is perhaps a 6 or a 7, rather than a 10 on the 'complicated scale'.

We think that 2 key 'Litmus Test Questions' to think about first of all to decide whether to take your project forwards using a QI approach are:

- 1. How complicated is your problem? and**
- 2. Will the problem and/or solution need learning to understand what's going on and what will help?**

If it's a yes to both of those, it's highly likely QI could be a good approach for you. Some other things to think about are shown in the diagram below.

Signs your problem is right for QI	Signs another approach is needed for your problem (not QI)
Problem requires learning	Problem is clear
Solution requires learning	Solution is clear
No one knows the answer!	Knowledge, skills resident within organisation. Clear task within existing job roles.
May need to learn new skills and approaches	Work often sits with authority
Works sits with stakeholders	Generally linear / cause & effect
Non-linear, can be unpredictable	We've done it before
May be a new situation / scenario	Success is usually resolution or finite
Success is often just about making progress – may never be completely solved	No change in values, beliefs, loyalties or priorities necessary
Values, beliefs, loyalties and priorities may need to shift	

Scope & Project Design

Sometimes it can be difficult to decide what level to work on and what the scope of projects should be. Most projects in City and Hackney work at team or service level (e.g. an inpatient ward, a community team, etc).

It is also possible for projects to work on a larger scale, but this does obviously make them bigger, involving more stakeholders. These types of projects therefore tend to be developed directly by the DMT and QI Forum and will include additional structures to ensure they move forwards.

For example, the City & Violence Collaborative has involved 7 wards testing different ideas to reduce violence. This has required project leadership on ward level, but also overall leadership from the Associate Clinical Director for Inpatient Services and DMT. Each team has met regularly on the wards to take testing forwards and representatives have also come together at a 6 weekly Collaborative meeting to share and learn together.

City & Hackney DMT / QI Forum has also recently launched a project to focus on ensuring our service users are only in hospital when they really need to be, through addressing problems in admissions and discharge processes, as well as potential efficiency and improvement of care processes when people are on the wards. A key outcome measure of this project will be bed occupancy.

This project has huge potential scope, as it touches all parts of the adult mental health system in City & Hackney, including all inpatient wards, community teams, Home Treatment Teams, Homerton Psychological Medicine and partners beyond ELFT, such as housing and the police. For this reason, sponsors have thought in detail about the structures needed to manage this project (including a core senior leadership group, broader engagement of stakeholders via the bed management meeting and testing units at ward and partnerships of ward/community team level. This project will need close attention and involvement from senior leadership throughout, so will also have a standing slot at DMT.

Something more common may be if you choose an issue that affects your team and another team you work with closely; like for example if you wanted to improve the experience of discharge from a ward, you would definitely need to have both the ward team and the community mental health team involved in the core team of the project.

Crucially, whatever the issue you choose, you need to make sure the key people who are involved in that issue are involved. Without this, the project simply won't work, so you would really need to think twice about starting it at all.

If the issue does involve a lot of stakeholders, it will need closer leadership from QI sponsors and DMT and further thinking about structures needed to ensure it progresses.