

# PACE self-sufficiency and continuous quality improvement template

# **PACE Team/Leads Group**

- PACE Lead and Data Lead identified (crucial)
- Who else in team do they need? e.g. Solicitors, Reviewing Officers, other agencies
- Is there a Lead for each Aim? Aims groups?
- How often will the group meet? How often will Aims groups meet?
- Data for all/most meetings to track progress
- Do we still have strong "distributed leadership" at all levels with colleagues who are still generating and testing new change ideas?

## **Governance**

- Governance and senior leadership structure who and how often do they report? Need this for getting past any barriers and communication about new change ideas, testing and implementation of new processes/practice
- Is PACE seen as part of service planning? Part of local authority structure?

### Relationship building

- Do relationships exist between people representing all agencies? (social work, CHS, SCRA, local authority legal team, health, education, third sector)
- What relationships do we need to build?
- Do we have a targeted approach to building these relationships and working towards having a PACE/QI mind-set?

#### **Data**

- Ongoing collection for every/most meetings and for governance updates
   we need to understand what the data is telling us
- Is data for all key permanence milestones being collected? Is everyone clear on who is responsible for this?
- Do we have a team available to pull the data (which isn't reliant on one person to do it)?
- Who else in other parts of the service/agencies can support this?

### Listening

- Do we actively seek to understand the experiences of infants, children, young people and families?
- Do we place real weight on these lived experiences of care/the edges of care?
- Do we have a toolbox of participation resources which enables us to listen really well?



- Are we strengths-based in our focus; working alongside families where possible?
- Do we actively seek those "quieter" voices (such as infants or nonverbal children, to name a couple of examples but not an exhaustive list)
- Do have a clear feedback loop? In what ways are we getting feedback from children, carers and families? How are we learning from them what the barriers are to the system?
- Do we really welcome feedback?

#### Communication

- Newsletter? Intranet? Meeting other parts of service/agencies?
- Need to be able to get ideas of barriers and change ideas, and also share what is being tested and any new processes/practice to be implemented
- PACE email box to collect ideas?
- How will PACE/QI become part of normal practice?
- Do we have PACE as a standing agenda item for meetings?
- Frequent sharing of permanence/improvement work with other areas (both within own local authority and across Scotland)
- How do we have regular communication with our governance structure and/or corporate parenting board? And with groups representing the views of children and young people with care experience?

## Aims

- Refresh Aims on a regular basis to bring back focus, momentum and to have a clear improvement plan
- Monitor Aims on a regular basis at PACE group meetings, using data and info from testing
- Remind of what is needed for setting new Aims clear, %, from and by when, etc.
- Outcome measure how will this be recorded/analysed and who will do it?
- Set local Aims and not just PACE Aims

### **Testing**

- What did we learn from innovations as a response to Covid? Do we want to keep testing or implement these?
- How are we making sure we are hearing from everyone who has an idea of a change to test?
- Focus on key change ideas to test where do you think you will make the biggest impact?
- Use PDSA forms can do Plan, Study and Act as a group if helpful, with people who have been tested
- Have time at Leads groups to reflect on testing and decide next steps ("Study" and "Act")
- Identify who is leading on each change idea to be tested (helps to coordinate evidence)



- Capture qualitative data (feedback etc.) from children, parents, carers and colleagues where at all possible – e.g. how did it feel? Was it easier/more helpful? Did it take too long?
- Lead and Aims groups lead to be kept aware of all testing
- Spread and scale: has it been tested in enough settings? Across all localities? Any other adaptations to be done? Do we have feedback from everyone who would be affected by it?
- Don't rush to implement without capturing the necessary evidence and testing in a variety of situations

## Implementation of change ideas

- Do we have innovations as a result of Covid that we want to implement? Do we have enough data/feedback to do this?
- Look at evidence from PDSAs/feedback/data etc. and agree as PACE group if should implement
- Get approval from whoever needs to may be many service leaders
- What is in your "change package"? e.g. flowchart of new process; written guidance on why new process being introduced and what it is; who to contact for more info about it; links to where key resources are kept; etc.
- Clear flowchart of new processes and/or clear outline of what is involved in new practice shared
- Consider: standardization of approach; documentation; training; measurement; and appropriate resourcing for implementation
- Are colleagues aware/trained in the new innovation? Coaching for this?
- Communication: tell all who needs to know of new process/practice; where to find resources/more info; why it is such a positive new way of working; and what date will it start on?
- Who should colleagues contact for more info/feedback?
- Periodic self-audits can be useful determining if new practices are being followed

## Quality Improvement ("QI") knowledge

- Are we committed to continuous improvement?
- Do we have a good knowledge of QI across the local authority area and multi-agency team? If not, how do we build this?
- How do we make links within our local authority with colleagues who are trained in QI?
- Do we have people ready to learn about QI as part of their ongoing continued professional development?

## **Sharing knowledge across Scotland**

- How can we use our networks to share what we've learned and learn from others across Scotland?
- How can we use our QI knowledge to tackle other challenges?

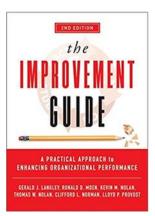


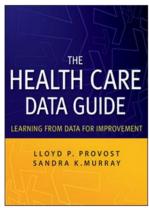
## **CELCIS**

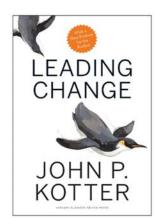
• Information on the CELCIS website - <a href="www.celcis.org">www.celcis.org</a> - with PACE legacy info/resources and we will be in touch when this goes live

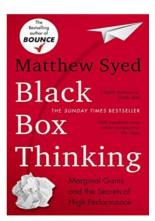
## **RESOURCES**

- www.celcis.org
- Scottish Government's Three Step Improvement Framework for Scotland's public service: <a href="https://www.gov.scot/publications/three-step-improvement-framework-scotlands-public-services/">https://www.gov.scot/publications/three-step-improvement-framework-scotlands-public-services/</a>
- Institute for Healthcare Improvement: www.ihi.org
- Scottish Government's publication, The Scottish Improvement Journey: <a href="https://www.gov.scot/publications/scottish-improvement-journey-nationwide-approach-improvement-compiled-2016-17/">https://www.gov.scot/publications/scottish-improvement-journey-nationwide-approach-improvement-compiled-2016-17/</a>
- YouTube videos on QI (Robert Lloyd's are very helpful)









Permanence and Care Team CELCIS
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