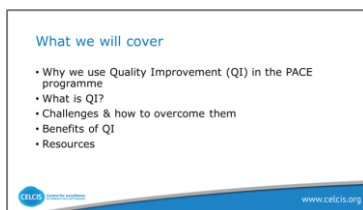


DATE: September 2020
TITLE: Using Quality Improvement in PACE
SPEAKER: Kirsty Doull, Permanence Consultant and Acting Team Lead

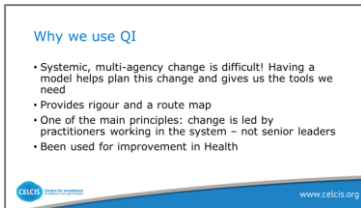
You are watching our webinar about the PACE programme from the delivery team in CELSIS at the University of Strathclyde. PACE is a Quality Improvement programme aiming to reduce drift and delay in permanence planning for looked after children these webinars were recorded in the spring of 2020 so please be aware that key changes in legislation, guidance and practice may have occurred since this time.



Hello and welcome to this webinar on using Quality Improvement in the PACE programme. I'm Kirsty Doull, a permanence consultant and acting Permanence Team Lead at CELCIS.



In this webinar I'm going to talk about what Quality Improvement is and why we chose to use it as a framework for the PACE programme. I'll also talk a bit about the challenges we found whilst delivering PACE and, importantly, how we sought to overcome those challenges. I'll close by highlighting some of the benefits we've found from using Quality Improvement and I'll also provide some links to useful resources that might be helpful if you are thinking about using Quality Improvement to improve your system or services.



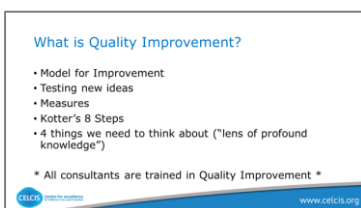
So – why did we use Quality Improvement (or “QI” as it is often known)?

Well, we all know that effecting significant change in systems is extremely difficult. And for reducing drift and delay in permanence planning – which is the aim of PACE – this involves a number of overlapping systems and the involvement of many agencies.

Consequently, having a framework such as Quality Improvement, gives us a clear model to follow. The rigour this provides is very helpful, and it can allow for the clear planning of different stages of the programme.

Another reason Quality Improvement was so helpful for PACE is that one of the key pillars of QI is that “all improvement is local”, and that “change happens where the work is”. What this means is that QI acknowledges that frontline practitioners often may know a great deal more about the blockages in systems and the challenges to positive practice than senior leaders, and QI empowers them to test small scale changes to day-to-day practice.

This chimed with exactly what PACE was about – learning from those who know best about the systems they work in – and so the QI model fitted well with the aim of PACE. We’ve also seen QI be used to make improvements in other public sectors in Scotland, particularly Health, and so it was a “tried and tested” model for effecting change in public services.



So what is Quality Improvement?

Quality Improvement gives us what is known as “the Model for Improvement” which, in turn, gives us a framework for asking key questions about what we want to improve and a framework for testing new ideas (which are also known as “change ideas”).

This also leads us to measurement – which basically means, “How will we know that any change we are making is in fact an improvement?”

For PACE, we also looked to [John P. Kotter's "8 step change model"](#) and Deming's "[lens of profound knowledge](#)". Deming is a key thinker in the QI world and his "lens of profound knowledge" outlines four things that we need to be attending to in order to effect successful change. I'll talk about each of these things in turn.

It's also important to note at this point that, for PACE, all the permanence consultants who delivered the programme with the data analysts, were trained in quality improvement through the [Scottish Improvement Leaders programme](#) (or "ScIL"). This is important as it meant that colleagues in all PACE areas were guided through QI and trained in QI by consultants who themselves were fully trained in Quality Improvement and had experience of delivering such Quality Improvement projects.



I think this is a really important quote for any QI project: "Not all change is improvement, but all improvement requires change".

It reminds us that changes in and of themselves are not necessarily improvements – which highlights the importance of having measures and gaining feedback from any changes. But it also reminds us that improvements don't just happen, by things like working longer hours and things like that – it requires fundamental change to the status quo.



So we are going to explore the Model for Improvement further. I would recommend the book that is pictured here to you. It is "The Improvement Guide: A practical approach to enhancing organizational performance" and it's a great companion for any QI project.

The diagram here explains the Model for Improvement which asks these three key questions:

- What are we trying to accomplish?
- How will we know that a change is an improvement?
- And what change can we make that will result in improvement?

The first question – what are we trying to accomplish? – leads us to thinking about our aim for our project. Latterly in PACE, we developed four PACE

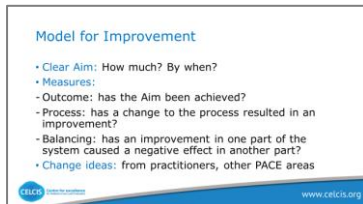
aims that each of our PACE areas worked on. This meant that each PACE area was working on 4 improvement projects. You can learn more about the PACE aims in other webinars, but they are, generally:

- Aim 1: was for children who are looked after at home
- Aim 2: was looking at the time taken from a child becoming received in to care and a permanence recommendation being made
- Aim 3: was the time taken from a permanence recommendation being made to a permanence panel or a decision by the Agency Decision Maker on a child's permanence plan
- Aim 4: was focused on the time from permanence panel or Agency Decision Maker's decision to the date an application for a legal order has been lodged in court

The second question leads us to measurement – how will we know that a change is in fact an improvement and not just a change to the system or practice that actually results in no improvement at all?

The third question – what change will we make? – leads us to explicitly articulate the new ideas (known as “change ideas”) that we will be testing.

The circle beneath of “plan, do, study, act” gives us a framework in which to test change ideas and make decisions from what we learn from this testing.



So for any QI aim, we need to be really clear about the parameters for that aim.

We need to be clear by when we are aiming to meet our aim – for example, by 31st May 2021. It can also be helpful to note a “from when” date too to outline the timeframe in which testing will take place – for example, “on or after 10th September 2020”.

We also need to be really clear about the population we are talking about – for example, “70% of children who have been accommodated in to care on or after 10th September 2020”.

So pulling all this together, a PACE aim may read: “By 31st May 2021, 70% of children who have been accommodated into care, on or after 10th September 2020, will have a permanence recommendation made within 6 months of becoming accommodated.”

The second question takes us to measurement and feedback in order that we can collect data on how the change ideas we are testing are performing.

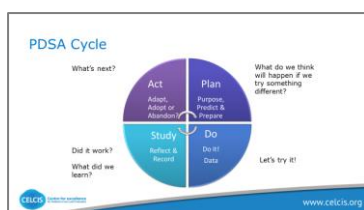
There are a number of measures. An outcome measure relates to our overall aim – has the Aim been achieved? In the example I’ve just given, we would ask “what percentage of children who were accommodated, had a permanence recommendation made within 6 months of being accommodated?”. We would then see if it was close to being our aim of 70%.

A process measure relates to a specific change idea we are testing and invites us to record data on the impact of this specific change – for example, did having a Looked After Child Review two weeks after a child became accommodated, mean that a child had a permanence recommendation made within 6 months?

We also need to have an eye to balancing measures. These lead us to pay attention to other parts of the system so that changes that have improved one part of the system, don’t negatively impact on another part of the system or to practice. An example might be, did the new report style that a social worker used take far too much time for the social worker to complete, even if it was deemed to be a useful format?

The third question is around the specific change ideas that we would test. These can come from anywhere but generally come from frontline practitioners who know from their own experience of working within the system every day what changes might improve outcomes.

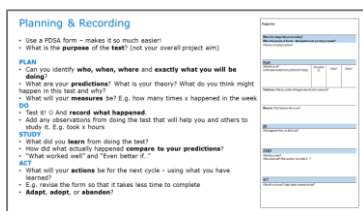
Throughout PACE we also shared ideas from other PACE areas which was a great benefit of being part of a national Quality Improvement programme like PACE.



So the PDSA cycle is the model for testing change ideas to see if they are improvements. It basically asks us to plan a test – what is the purpose of the test (what are we trying to improve)? What specifically will we do and when, and who will be involved? Then we need to just crack on it and do it! And, importantly, we want to record at this stage what happened – for example, was it successful? What was the feedback from people who were involved in it, especially from children and families?

Then we want to study the test. For PACE, we would often do this in the champions group to benefit from the multi-agency input that this group brought. We would look at what the data and feedback told us about the test. This would then be used to inform how we would act – do we need to adapt the test, building in what we’ve learned from this first test? Do we have enough evidence to abandon it as we already know it is not meeting our purpose? Or do we have enough evidence to adopt the change idea as normal business; this usually only happens once the idea has gone through a number of PDSA cycles to really hone the way in which the change idea can work.

This idea of iterative testing – testing a change idea in a number of different ways, settings, and with adaptations from what has been learned in previous cycles – is fundamental to the QI approach. It means that we don’t simply roll out a new idea across a whole organisation or system without first testing it in a number of environments and understanding what the data and feedback tells us about the tests so that we can clearly evidence that the change is in fact an improvement.



I’ve put on this slide, to the right, a copy of a PDSA template. You can find a copy of this on the webpage if you want to download it.

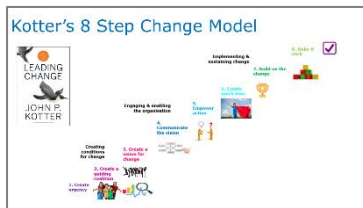
As I said, it’s really important to record what happens in each cycle of a testing a change idea. This helps build up the evidence you might need to perhaps convince senior leaders that this new idea should be part of “business as usual” and normal practice.

In essence, the PDSA template asks the other questions on this slide. Hopefully this slide could be used as a bit of an aide memoire when you are planning and evaluating your test. For example, in the “plan” stage, it’s also helpful to note down your predictions, both positive and negative; for example, “we think this report format will be really useful for a Looked After Child Review but we also think it will take social workers far too long to complete”. This really helps to get other people on board with a new idea when you can say “oh yes, we thought that might happen too but here’s what *actually* happened when we tested it and it was actually better than we thought”.

When you are “doing” the test it’s really helpful to write down any information that would be useful for the next person testing the idea; for example, it took me four hours to complete the report in the new format.

Again, in the “study” part, compare what the data and feedback was compared to your predictions – did it go better than planned? Were there any positive or negative unintended consequences? What does this tell us about what we need to do in the next cycle? And when it comes to “acting”, be really clear about what will happen next; what specific adaptations will be made, for example, and who will be involved.

When you have all this evidence from your many cycles of testing change ideas, you will feel really prepared to evidence that your change is in fact an improvement – and all of this helps to get people on board and to ensure that this new idea becomes part of daily practice.



So stepping away from the Model for Improvement for a moment, I just want to mention [John P. Kotter's "8 Step Change Model"](#). Again, I would recommend the book that is pictured here but he does have a number of books on this theme.

When we started PACE in any new area, we had an eye on these 8 steps in order to ensure we were attending to all these key things in order to effect organisational change. The three main themes of the steps are:

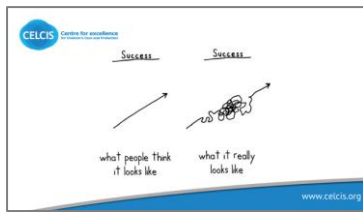
- Creating the conditions for change
- Engaging with and enabling the organisation (or, in our cases, many agencies)
- Implementing and sustaining change

Creating the conditions included getting senior leadership buy in from all the agencies involved and creating the champions group.

Engaging and enabling the organisation involved empowering frontline practitioners to come up with and then test new ways of working.

Implementing and sustaining change was when we had built up enough evidence to say that these changes were improvements and working with the PACE area to successfully implement this new way of working as “business as usual”.

I would recommend that you keep an eye on these 8 steps in planning any QI project.



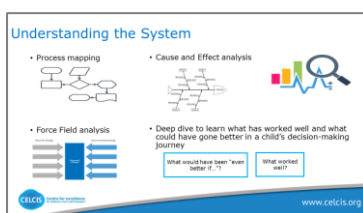
I think it's important to note here that, whilst we may look at things like [Kotter's 8 Steps](#) as being quite a linear process, we know that change takes a long time and can often feel like "one step forward and three back". It often looks like the diagram on the right, which can be frustrating, but it is also important to remember that success is possible, even if the process of getting there feels messy.



I'm going to talk a bit about the "[lens of profound knowledge](#)". This was created by a QI expert called W. Edwards Deming to make sure that we attend to key things when undertaking any QI project. These key four things are:

- Understanding the system you are trying to improve
- Understanding what variation within the system is telling us
- Having a change theory – which is essentially a plan of the ways in which we will meet our project aim;
- And – crucially – being alert to the human side of change and that making improvements to a system can be really difficult.

So I'm going to talk a bit about each of these in turn.



The first thing we need to do when starting a QI project is to understand the system we are trying to improve. If we don't know the current system, how can we fully understand what needs to improve and also if we have in fact made any improvements?

To help with this, we get baseline data to understand, in the case of PACE, how quickly or otherwise children are moving through the system that

makes decisions about where they will live. You can hear more about how important data is in QI in other webinars.

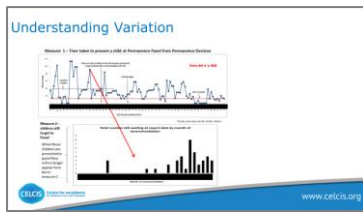
We also use a number of QI tools, many of which you will likely be familiar with, in order to really get to the nitty gritty of how the system operates.

We tend to start by using a force field analysis to really understand what helps and what is hindering certain parts of the process. Frontline practitioners are crucial to this process as they know all the intricacies of how the system operates on a daily basis.

We then tend to do some process mapping. This usually involves a number of Post-its or a big blank piece of paper and we plot, in detail, all the key steps that make up a process. This is a really useful tool, especially in a multi-agency champions group, as it helps everyone get on the same page about how the system operates and also allows practitioners to get a fuller understanding of other agencies' roles in the process. It's also a great way to come up with change ideas of ways to improve the process. I have not yet facilitated a process mapping exercise where the group have not come up with any new ideas. This can be really empowering for people involved in your project.

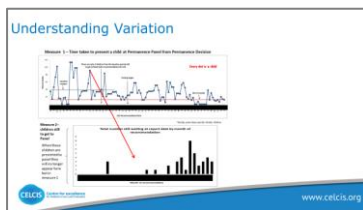
We also use a cause and effect, or fishbone, diagram to really drill down in to a specific (often problematic) part of the process. For example, if the force field analysis has highlighted that lack of communication between social workers and solicitors has been a challenge, then we might spend some time on a fishbone diagram exercise to really understand why this is the case and then come up with ideas to improve the situation.

We also ask key questions, using the data, about certain children's journeys. For example, we might look at a really positive journey through the system and learn from what worked well in that case in order to apply these things to our overall system. Likewise, we might look at a journey that perhaps took longer than we would have liked to understand what the barriers were to this and so, in that way, understand where we need to focus our improvement efforts. We also like to ask the questions of "what worked well" in these situations and what could have been "even better if..." to understand the barriers in the system and to identify areas of positive practice. I would recommend these basic questions to you in all your improvement projects.



The second thing is understanding variation. Like I said earlier, there is another webinar on the use of data so I won't labour this point. However, it is important that we use data in QI to understand not only our baseline (how the current system is operating) but also how the system changes in its operation over time. This is really helpful in terms of understanding if our change ideas are having a positive effect (an improvement) on how our system operates.

To do this, we use run charts to show data over time – this can be used to show children who have, for example, had a permanence recommendation made about them and the time it took for this to happen. We also use bar charts to keep a track of children how are still waiting for such a recommendation to be made.



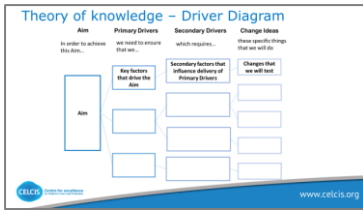
The third thing we need to be thinking about is having a theory of change for each of our aims.

This change theory is essentially a plan of all the things we think we need to be thinking about and testing in order to achieve our aim. This can be shown visually in a driver diagram and I've shown a basic outline of the key points in a driver diagram here.

We have the aim at the left hand side. Then we have the primary drivers – usually about 3 or 4 of these – which are the overarching things we think will help meet our aim. These can usually be found from the force field analysis exercise.

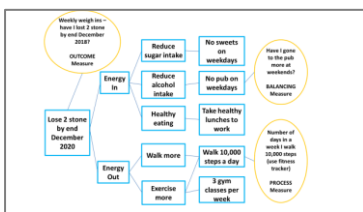
Then we have secondary drivers which drills down in to the specifics of the primary drivers.

We also then, on the right, have the specific change ideas that we will be testing in order to make these changes.

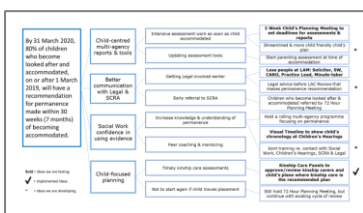


I've put here a very simple driver diagram about weight loss just to illustrate how a driver diagram can be used. I won't tell you how well I am achieving this particular aim... But we all know, the key things we need to be looking at in order to lose weight in a healthy way, are to eat less and move more.

I've then drilled this down in to some more things about this – for example, reducing alcohol intake and walking more. However, reducing alcohol and walking more aren't specific enough to be change ideas. So these are then drilled down even further to "no pub on weekdays" and "walk 10,000 steps every day". The yellow circles are illustrations of different measures relating to outcome, process and balancing that I thought about for this example.



This slide shows a real driver diagram from a PACE area about their Aim 2. You can see some of their specific change ideas and also a key that showed which ideas we were testing, and which we had implemented. It's important to note that a driver diagram is a living document and will naturally change over time as you come up with new ideas, and then test and implement or abandon them.

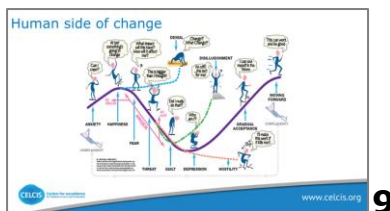


The fourth thing we need to be thinking about is extremely important – the human side of change.

Massive change to systems do not happen in isolation and relationships are absolutely key to any QI project. This comes from having engaged senior leaders who empower their colleagues to come up with these ideas and test them; from multi-agency colleagues coming together to be really honest

about the problems in the system; and also having someone with QI knowledge to help lead and support the improvement efforts.

No improvement project is without its ups and downs – and many people will find themselves at different points in this diagram throughout the project. If you are a key leader or member of a project, you need to be constantly aware of this and keep all lines of communication open – whether that be with your improvement team or champions group, other colleagues who you want to become involved in testing new ideas, and also in your governance structure for your project.



9

In PACE, we have used Quality Improvement to improve systems for the benefit of children in most of Scotland’s local authority partnerships. This has given us a wealth of knowledge as to how to effect multi-agency and wide systemic change – but it has not been without its challenges and it would not be right for me not to acknowledge these.

Within the systems we were working in for PACE – local authority internal systems, Children’s Hearings System, and up to lodging an application in court – there are limited opportunities for testing. For example, in a health setting, you might be able to test a new way of recording symptoms in patients and be able to test this with perhaps 30 patients every day. For children going through a permanence process, it might necessarily take many weeks and months between point A and point B in the process (for example, from a child being received into care to the date they receive a permanence recommendation) and this understandably limits the opportunities to test change ideas.

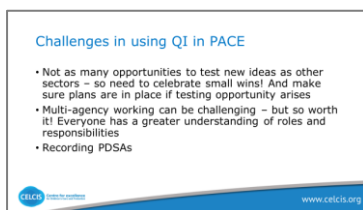
In order to get around this, we focus a lot on being really on top of preparing our plans for any testing – so that we don’t miss any opportunity that might arise because we hadn’t thought through what testing would look like. We also made a point of celebrating small wins – or quick wins – which are relatively simple and easy change ideas that can be tested quickly. This helps to teach QI principles and also to maintain momentum and enthusiasm for the project.

We also found that, sometimes, multi-agency working can be challenging, whilst also providing huge benefits. In leading a multi-agency QI project, it is important to ensure that all voices are heard but also strategically plan all agencies’ involvement so that no-one feels that they aren’t suitably

contributing. The benefits of having multi-agency perspectives far outweigh any challenges.

In PACE, we also found that there sometimes – not always, but sometimes – there was a bit of hesitation in completing PDSA forms in order to record data and feedback from testing change ideas.

To get around this, as consultants we would sometimes do PDSA sessions as a group in order to get a multi-agency viewpoint and also to further emphasise the teaching of how to record PDSAs and the importance of them. However, we did still manage, through data et cetera and other ways, to always be able to evidence successful change ideas so that these could be implemented.

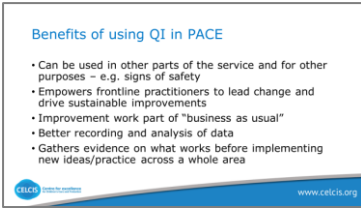


But, of course, there were many benefits of using QI in PACE and I've noted just a few of them here.

One of the big benefits, was that many local authority colleagues used the QI knowledge they had learned from PACE and applied it to other aspects of their practice. There is another webinar in this series where colleagues in Dumfries and Galloway speak about how they applied their QI knowledge to their "Signs of Safety" approach.

One of the key benefits we saw was that using QI in PACE really empowered frontline practitioners to suggest, test and then be part of implementing improvements to the systems they work in every day. It also allows for evidence to be collected and scrutinised before any change is implemented as part of existing processes.

This is great to see because I think we have all been in that situation when we know the things that need to change but often don't have the method of doing so. QI and PACE provided that method and plugged that implementation gap between what we knew we wanted to change, and actually making that change happen. This all led to improvement work becoming part of the day job in many of the areas we work with, with PACE and other improvement work still continuing even after CELCIS' involvement has come to an end.



I've noted here some of the key resources that we would recommend to you if you want to know more about QI and data, or are thinking of embarking on your own QI project.

The Improvement Guide and Leading Change I mentioned earlier – the Improvement Guide is a constant companion for any improvement project so I would strongly recommend it to you!

The Healthcare Data guide is particularly important if you are interested in supporting the data work in your project.

Black Box Thinking provides really inspiring stories of how thinking differently can lead to really positive improvements.

The links here give a bit of background around how QI came in to being in Scotland and some useful resources for undertaking a QI project.



I hope this webinar has helped give an overview of Quality Improvement in general and the ways in which we used it as a framework for our PACE programme.

If you have any questions, please drop us an email at celcis@strath.ac.uk.

Thank you for listening.

Other resources:

CELCIS Knowledge Bank:

<https://www.celcis.org/knowledge-bank/>

Independent Care Review and The Promise:

<https://www.carereview.scot/>

Institute of Healthcare Improvement:

<http://www.ihl.org/>

Kotter's 8 Step Process:

<https://www.kotterinc.com/8-steps-process-for-leading-change/>

Lens of Profound Knowledge:

<https://improvement.nhs.uk/documents/2127/lens-profound-knowledge.pdf>

Scottish Government's Three Step Improvement Framework for Scotland's Public Services:

<https://www.gov.scot/publications/three-step-improvement-framework-scotlands-public-services/>

The Scottish Improvement Journey:

<https://www.gov.scot/publications/scottish-improvement-journey-nationwide-approach-improvement-compiled-2016-17/>

Scottish Improvement Leaders Programme:

<https://learn.nes.nhs.scot/813/quality-improvement-zone/learning-programmes/scottish-improvement-leader-programme-scil>