



Birmingham and Solihull
Mental Health
NHS Foundation Trust



A Year of Quality Improvement at BSMHFT

2019 - March 2020



@BSMHFT_QI



<http://connect/QualityImprovement>



Contents

A History of QI in BSMHFT	p.3
Current Projects	p.7
Service User and Carer Involvement.....	p.9
Training: Building QI Capability.....	p.10
Next Steps.....	p.14
Appendices.....	p.15
Training Appendices	p.19
Projects Appendices	p.25
Communications and QI Community Appendices	p.33





A History of QI in BSMHFT

March 2017 – Where it all began

In March 2017 we reaffirmed our commitment to continuous Quality Improvement (QI) by pledging, as part of our quality accounts, to the development and implementation of a clinically driven and consistent approach to QI. Our measures of success were:-

- The appointment of an external partner with expertise in quality improvement
- Leadership capacity and capability will be in place in quality improvement methodologies and delivery
- Broader workforce capacity and capability will be in place in quality improvement methodologies and delivery



May 2018 to July 2018 – Strategic Partnership

In May 2018, following a competitive tender process we achieved our first measure of success by entering a Strategic partnership with the Institute of Healthcare Improvement (IHI). Following confirmation of the contract we immediately set out to increase our Leadership capability when our Associate Director of Governance commenced Chief Quality Officer Training.

October 2018 – IHI Diagnostic visit

A three day visit to BSMHFT from the IHI team helped to assess our strengths and areas to develop in order to ensure Quality Improvement is a success within the organisation. The key findings from this included:

- Articulate a clear and concise vision for improvement across the Trust
- Data systems
- Psychological safety
- Development of an Improvement Culture





January & February 19 – Senior Leaders Event and Improvement Advisor training commenced

A two-day IHI-led programme for senior leaders took place, which featured a series of workshops around culture development, leadership in action, psychological safety & joy in work. The organisation also had the first member of the central QI team commence Improvement Advisor training.

March 2019 – Life QI Partnership

A partnership began with Life QI to supply us with a portal that enables us to run projects centrally, create detailed reports on QI, collaborate in real time with teams remotely and record critical data all in one place.



May 2019 – Improvement Science in Action (ISIA) Wave 1

May 2019 saw our first trust wide training session on our adopted Quality Improvement methodology (The Model for Improvement). 80 trust employees from all levels and professional groups came together for three days to learn all about how to become change agents for the trust.



June 2019 – Breaking the Rules Campaign

The QI team launched the Breaking the Rules campaign in June 2019. We asked for staff across the trust to come forward with suggestions for rules in their workplaces that they wanted to break, as they feel are unnecessary or prevent them from completing their day to day work. 130 suggestions we put forward and the QI team are working to help make the changes needed to break some of the suggestions.





July 2019 – Recruitment of Central QI Team & AGM



July 2019 saw the recruitment of a further four Improvement Advisors, a Team Administrator and dedicated Communications Officer to the Central QI Team within BSMHFT. At this time, the Clinical Governance team was reconfigured to establish a blended QI and Clinical Effectiveness Team (QICE). QI also became the focus of the trust AGM, which saw us facilitate workshops on the Model for Improvement, PDSA and Co-production.

October 2019 – Improvement Science in Action Wave 2 and BSMHFT Training Academy Launched

90 more staff and one commissioner took part in Wave 2 of the Improvement Science in Action Training, further broadening workforce capability and capacity. The 30th October also saw us launch the BSMHFT Training Academy, which began with our first half day Bronze level Introduction to QI training.



November 2019 – IHI Annual Visit & Improvement Coach Wave 1

November saw IHI return for their first annual visit to the Trust. Some of their key findings from this visit were:

- The BSMHFT Board is leading the transformation of the trust well
- Pleasing to see a co-design approach across the trust on shared values
- Evidence of senior leader presence across the trust which is essential in establishing a QI culture
- Promising early shoots of QI work & Projects
- Impressed by the skills and competencies displayed by the central QI team

We also had a further 25 staff also commence on Improvement Coach training, which aims to provide a deeper look into QI methodology and provide advanced support to our QI efforts.





December 2019 – Recruitment of Head of QI & Clinical Effectiveness, Julie Romano

A nurse by background, Julie joined the BSMHFT QI Team from Walsall Healthcare Trust where she held the position of Head of Quality and Assurance - leading on patient safety, incident reporting analysis, SI investigation and risk registers. Julie is passionate about delivering high quality care and is keen to share her expertise in any way she can - as evidenced by her work for the last five years as a Specialist Advisor for the CQC, a judge for the HSJ awards for 2019 and 2020 and a member of the Q community. Julie looks forward to continuing this in her new role, leading the QI Team at BSMHFT as the Head of Quality Improvement and Clinical Effectiveness.



January 2020 until now – Quality Strategy

The early part of 2020 has been a time of consolidation for the QI team. The team have been taking stock and learning from the successes and challenges of the last 18 months.

The team have been focused on further increasing the capability and capacity of the organisation through the training academy, as well as engaging with the various professional groups throughout the Trust to help to understand their needs in relation to QI. Working with the Lead for Recovery and Service User, Carer and Family Experience, the team aim to develop a strategy to further engage our Service Users, Families and Carers in QI and increase coproduction of QI Projects in the future.

The QI team have also been using their skills and knowledge in supporting the development of the new Trust wide Quality Strategy, as well as working hard on the development of the Trust QI brand and vision. We hope the next 18 months are as exciting as the last.





Current QI Projects

There are currently 65 projects underway within BSMHFT. Since the implementation of the Quality Improvement methodology there have been an additional 21 projects commenced, which have since paused or ceased for a variety of reasons. These are primarily project ideas conceived in the early stages of the implementation of QI. Therefore, there have been 86 projects commenced in total.

The table below provides a summary of the projects which are currently underway within each service area with some key highlights.

Project Progress	
Acute & Urgent Care 14 projects currently live	<p>Projects include topics such as the reduction of wasted bed days, reducing use of PRN, rostering of staff and physical health investigations.</p> <p>The project aiming to reduce the time spent in seclusion is one of the trusts most mature projects. It started on Eden Female PICU and has tested multiple tests of change through PDSA cycles. Ideas tested have included new seclusion standards, care plan reminders, checklists and the introduction of the Broset violence risk assessment tool.</p> <p>The project aimed to reduce the average length of stay in seclusion from 96 hours. This is monitored via a run chart and is showing sustained improvement.</p>
Corporate 19 projects currently live	<p>Projects include topics such as implementing duty of candour, reducing the response time for freedom of information requests, care planning and several HR projects looking at their internal processes.</p> <p>A trust wide carers collaborative has been formed to implement the Family and Carer trust strategy, particularly improving engagement with carers. A QI collaborative has an overarching strategic project group, which supports individual projects within operational areas. The individual project groups utilise the QI process to identify how best to achieve the project aim in their area. The collaborative has recruited the first wave of teams, undertaken an initial training day and is now working to set a project launch date in April.</p>





<p>Integrated Community and Recovery Services</p> <p>11 projects currently live</p>	<p>Projects include topics such as improving the call response rate to service users within a CMHT, the collation of communication preferences and involvement in the personalised care national collaborative.</p> <p>The Solar service, which provides community care to children and young people, has identified a need to improve sleep and reduce the use of Melatonin prescribing. Baseline data has been utilised by the project group to identify that the first phase will need to focus on training and skills for staff, and then utilising this to support parents and service users to ultimately improve sleep.</p>
<p>Secure Care and Offender Health</p> <p>8 projects currently live.</p>	<p>Projects include topics such as physical health, quality of risk assessments and reducing hatch times within HMP Birmingham.</p> <p>The Forensic Children’s Mental Health Service (FCAMHS) have been selected to participate in the National Sexual Safety Collaborative. The project team have participated in training and attended the launch date. The collaborative is currently in the baseline data collection phase, and the project are starting to formulate their plans for the first PDSA cycles.</p>
<p>Specialities</p> <p>13 projects currently live</p>	<p>Projects include topics such as improving waiting times for appointments, reducing DNA’s and improving access to the Bi-polar Service’s Mood on Track course.</p> <p>Rosemary Ward are aiming to reduce the time service users spend on level 3 or 4 therapeutic observations. PDSA’s have commenced with the introduction of 3 key questions at handover for those on observations, designing a daily huddle process and activity planners. An increase in staff establishment has also been implemented.</p> <p>Initial data is showing a decrease in both the total number of hours and the number of service users being observed each week. This will continue to be monitored for sustainability and whilst additional PDSA’s are planned and implemented.</p>





Service User and Carer Involvement in Quality Improvement

Within our team we recognise the need to include the people who receive our services, or care for those that do, is a fundamental part of Quality Improvement. Furthermore, we believe that this will greatly enhance the success of our QI projects as we can then measure improvements for staff, service users and carers. Currently, we are working closely with our Lead for Recovery and Service User, Carer and Family Experience to ensure we have the right approach to increase our service user and carer participation in all aspects of Quality Improvement.

We are using the terms **Little I** and **Big I** to differentiate the level of participation.

Little I – Means involving service users and carers at various points throughout the life of a project, the team may ask for ideas of what should be changed or about the impact changes have had to the services they receive.

Big I – Means involving service users and carers directly and continuously throughout the whole life of the QI project.



Examples of current QI projects with service user, carer participation

Mood on track

The aim of this project is to increase the referral rate into the Bi-polar service from CMHTs to access their Mood on Track programme. This is an evidence-based, NICE guidance recommended programme for individuals with a Bi-polar diagnosis. The project team have met with service users who have previously accessed the programme to discuss their experiences of referrals and asked for their suggestions for improvement.

Sexual safety collaborative

The aim of this collaborative is to increase the percentage of service users and staff who feel safe from sexual harm within mental health services. The projects teams have met with service users to discuss their experiences and feelings around their sexual safety on the wards, and will continue to consult with them around potential changes ideas.

Family and carer pathway collaborative

The aim of this collaborative is to increase engagement with carers across the organisation, primarily by increasing the use of an identified tool and then looking at the outcomes of the engagement with this tool. There is Big I involvement, with a carer leading continuously throughout the project's life.





Training: Building QI Capability

Looking Back: Our Year in Review

In the short time we have been up and running, the organisation has developed a strong foundation of QI capability to put continuous improvement at the heart of what we do.

Our core team of 5 Quality Improvement Leads have completed the Improvement Advisor Professional Development Training delivered by the Institute for Healthcare Improvement (IHI). The team are now equipped to provide expert, technical support and guidance in the science of improvement.

Kickstarting the organisational QI learning, Improvement Science in Action (ISIA) has been delivered in two waves by IHI, in May and October 2019. 170 members of staff were trained over 3 days each wave, giving capability and autonomy to our clinical and corporate services to start making improvement in their local areas.

In November 2019, our first QI Coach programme commenced, with 25 senior staff enrolled. This cohort completed their 6-month development programme in March 2020, and now have the skills to coach QI projects and champion QI across the organisation. But the learning and coaching is ongoing, with regular Masterclasses and Learning Forums to share experiences and learning.



Development of BSMHFT QI Academy

Our first year of training in the organisation has had core delivery by IHI, but as our internal team has developed capability, we have launched our BSMHFT QI Training Academy.

Staff of any band or background can attend our Bronze and Silver training, and we feel strongly that projects are diverse. In addition, we are currently scoping ways that we can capture the equality and diversity of our delegates, to ensure our training remains as accessible as possible to all who are interested.

Throughout this journey, we have been collecting evaluation of the training in the interest of making our training effective and enjoyable for those attending. The feedback we have received from the training we provide has been overwhelmingly positive, with delegates sharing that the training really supported their understanding and confidence with QI.

“First time in four years I feel VALUED”
– ISIA Wave 2, October 2019

“Tasks were really good and facilitated understanding, and made a QI project less daunting” - Bronze Training, February 2020

“Feeling that QI is supported and achievable. Confident that I can engage in the process” – Bronze Training, January 2020

“Fantastic starting point to know how to proceed with QI” – Bronze Training, January 2020



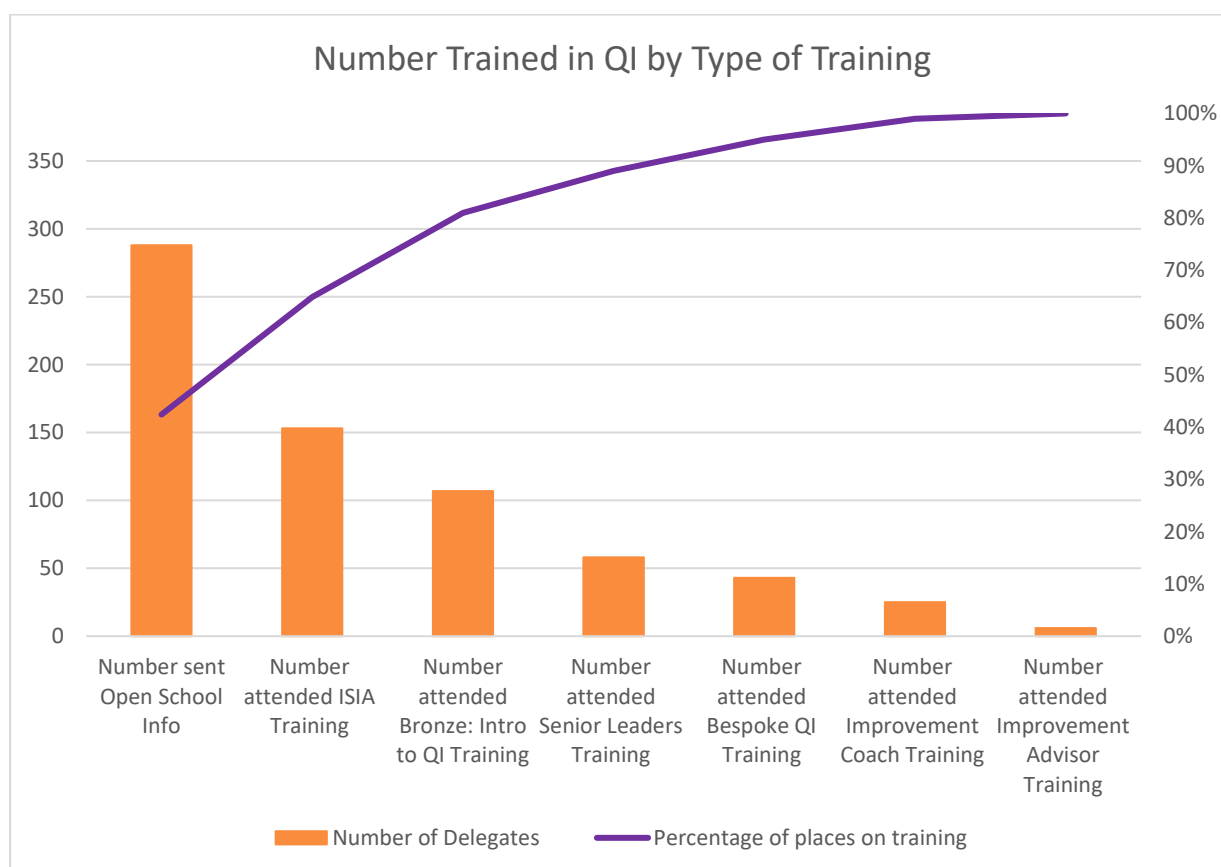


Where We Are Now

At present, we have successfully trained 322 delegates from across BSMHFT in Quality Improvement, with initial support from IHI. As previously mentioned, these delegates have participated in either our Bronze: Introduction to QI training, the IHI Improvement Science in Action Training, the IHI Improvement Coach Programme, or a bespoke Quality Improvement workshop from our QI Team. Each individual who attends our QI Training has also been sent access information to the IHI Open School, so they have the resources to refresh their learning about QI in their own time.

In addition to the 322 delegates trained, 58 of the Trust's Senior Leaders have also received a bespoke training on QI and Culture Change from IHI. Including our qualified Improvement Advisors, this brings our total number of trained individuals to 385 delegates.

Figure 1.1: A pareto chart displaying the number of delegates trained in each type of QI training offered by BSMHFT between April 2019 and March 2020.

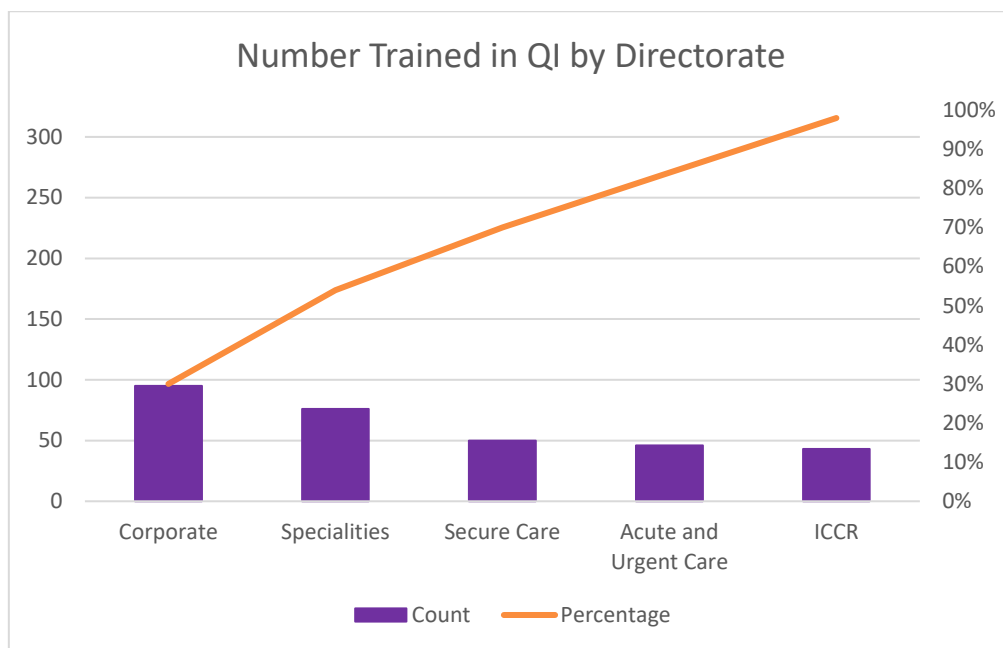


The delegates who attend our training come from across all the Trust's Directories (see Figure 1.2). Currently, the majority of trainees who express interest and attend our Quality Improvement training are Corporate staff members; however, going forward our team plan to diversify this by reviewing our training promotion and using targeted approaches for areas with lower engagement.



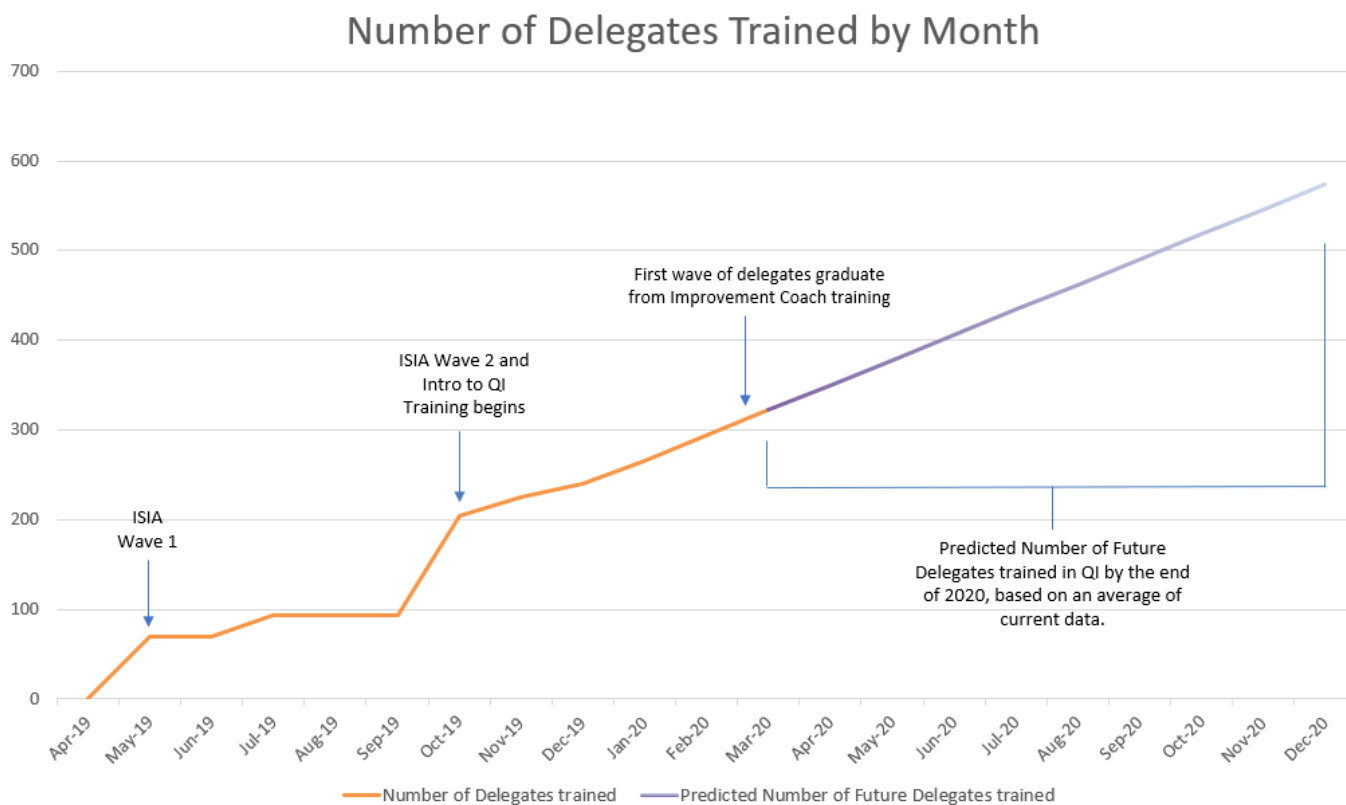


Figure 1.2: A pareto chart displaying the number of delegates trained in QI training by directorate between April 2019 and March 2020.



If we continue to train delegates at our current average rate, we predict that we will be able to train approximately 600 individuals in QI by December 2020.

Figure 1.3: A line chart displaying the number of delegates trained in QI between April 2019 and March 2020, and the predicted number of delegates to be trained in QI between March 2020 and December 2020.





Looking Forward: Expanding and Embedding

Looking to the year ahead, we will embed the BSMHFT QI Academy, and continue to build capability and skill to deliver QI projects. Expanding the Academy over the next year, we are planning training delivery to specific staff groups to further unleash capability and engagement in QI. In addition, we will be opening our training up to services users, families and carers involved in QI projects.

BSMHFT QI Academy

Bronze: Introduction to QI	<p>A half day introduction to the Model for Improvement, and how the QI approach is different to approaches used in the organisation. The session runs monthly and has been consistently fully booked.</p> <p>This training equips delegates with sufficient knowledge and skills to support QI projects in their area, and to be able to use the methodology.</p>
Silver: QI into Action	<p>Our Silver training is a conversion of the three days originally devised by IHI, staggered over a 6-month period to enable delegates to deliver a real QI project in their local area.</p> <p>With 2 full days at the start and midpoint of the programme, the QI Leads support projects with bespoke consultations in between workshops.</p> <p>Delegates must have completed the Bronze training and attend with a minimum one other project team member to ensure there is sufficient capacity and support to have a meaningful and sustainable impact.</p> <p>At the end of the 6 months, delegates will present the results of their project at special graduation event with poster and in person presentations.</p> <p>The Silver: QI into Action is to run twice per year, with intakes in May and September.</p>
Gold: Improvement Coach	<p>Our Gold: Improvement Coach Training course is our 6-month professional development programme, designed to give leaders within the organisation the tools to guide and support QI projects in the Trust as a Coach.</p> <p>Improvement Coaches are aligned to projects, meeting with them regularly and using their deeper knowledge of improvement to support the learning.</p>





The Next 12 Months for Quality Improvement in BSMHFT

Strategy

Development of and alignment with the Trust Quality strategy, supporting Trust-wide priority/strategic projects

Development of our Quality Improvement team strategy

Continued development of our Communication strategy, including the development of a unique QI brand

Community

Building capability through our newly developed training academy

Develop our service user and carer engagement and increase co-production in Quality Improvement

Develop and build our QI community

Partnership

Support our future involvement in developing actions and response to CQC findings

Continued partnership with the Institute for Healthcare Improvement (IHI) and other external partners





Appendices

Appendix 1: Useful links to our QI Social Media and Trust Intranet page.

- QI Twitter Feed: https://twitter.com/BSMHFT_QI
- Connect pages: <https://connect/QualityImprovement/>
- YouTube video: <https://www.youtube.com/watch?v=N5Q-Wy3OMxg>

Appendix 2: A poster explaining the Quality Improvement method, which is displayed throughout locations in the Trust.

The poster is titled "What is Quality Improvement (QI)?" and features the NHS Birmingham and Solihull Mental Health NHS Foundation Trust logo. It is divided into four numbered sections, each with a description and an icon:

- 1** QI is a structured approach of testing different solutions and ideas to make our services better for our staff and service users.
- 2** It's a way of giving all staff, service users and carers a voice and tools to make improvements happen.
- 3** It uses data to see if your changes are working, helping you understand where, when and how improvement is occurring.
- 4** It uses the Plan Do Study Act (PDSA) cycle to test change ideas on a small scale to see if they work, and scale up as they show improvement.

For more information please visit
[HTTP://CONNECT/QUALITYIMPROVEMENT](http://connect/qualityimprovement)

@BSMHFT_QI bsmhft.qualityimprovementteam@nhs.net





Appendix 3: A set of three posters which aimed to increase awareness and visibility of the Quality Improvement Team within the Trust.

3i) A general poster promoting Quality Improvement.



Quality Improvement

Empowering staff to take the stones out of their shoes and improve quality of care for service users at BSMHFT.

 @BSMHFT_QI  bsmhft.qualityimprovementteam@nhs.net





3ii) A poster promoting the Quality Improvement Leads within the Trust.


Birmingham and Solihull
Mental Health
NHS Foundation Trust

Your QI Team


Meggan Jarvis
Quality Improvement Lead,
Integrated Community
Care and Recovery


Shelley Wreford
Quality Improvement Lead,
Specialties


Heather Hurst
Quality Improvement Lead,
Corporate


Nick Conway
Quality Improvement
Lead, Secure Care and
Offender Health

Contact email:
nick.conway1@nhs.net


Catherine Richards
Quality Improvement Lead,
Acute and Urgent Care

Contact email:
c.richards@nhs.net

 **@BSMHFT_QI**  **bsmhft.qualityimprovementteam@nhs.net**





3iii) An example of a poster promoting the Quality Improvement Lead for the Integrated Community Care and Recovery directorate and the projects in this area. An equivalent of this poster was created for each of the 5 directorates within BSMHFT.


Birmingham and Solihull
Mental Health
NHS Foundation Trust

"Quality Improvement is the vehicle to make our services run smoother, deliver better care and make staff feel good at work."

Meggan Jarvis
Quality Improvement Lead,
Integrated Community
Care and Recovery

Contact email:
meggan.jarvis@nhs.net

Some of the ongoing projects happening in your service area aim to:

- Improve access and function of duty nurse service
- Reduce waiting time to allocate care coordinators
- Improve personality disorder pathway
- Increase sleep quality in SOLAR service users


 @BSMHFT_QI  bsmhft.qualityimprovementteam@nhs.net





Training

Appendix 4: A poster advertising the Bronze: Introduction to QI training on offer, which is displayed throughout locations in the Trust.





Introduction to QI Training

A half day of practical learning that will support your involvement in quality improvement across the organisation, with fun and engaging exercises to develop your skills and understanding.

Session includes:

- An introduction to the theory and tools behind quality improvement.
- How to identify a QI project.
- How to test changes on a small scale.
- How to measure your improvements using run charts.

For more information (including how to apply) please visit:
connect/QualityImprovement/QITraining

 @BSMHFT_QI  bsmhft.qualityimprovementteam@nhs.net





Appendix 5: An example of the Certificate of Achievement presented to delegates who attend the Bronze: Introduction to Quality Improvement Training Session.



Appendix 6: A electronic banner advertising the Silver: QI Into Action training on offer, which is displayed on the BSMHFT Staff Intranet.





Appendix 7: A poster advertising the Silver: QI Into Action training on offer, which is displayed throughout locations in the Trust.



QI Into Action Training

Our 6 month programme of practical learning that gives you the tools and expertise to deliver a quality improvement (QI) project on an issue that matters to you.

Programme includes:

- 2 face to face workshops – 4th May & 26th June 2020
- Bespoke project consultations in between workshops with a dedicated Improvement Advisor
- Present your project results at graduation showcase

For more information (including how to apply) please visit:
connect/QualityImprovement/QITraining

Deadline for applications is 3 April 2020

 [@BSMHFT_QI](https://twitter.com/BSMHFT_QI)  bsmhft.qualityimprovementteam@nhs.net





Appendix 8: A photograph of some of our delegates completing an activity during Wave 2 of the Improvement Science in Action Training, October 2019.



Appendix 9: A photograph of the delegates who attended the Improvement Science in Action Training, October 2019.





Appendix 10: A photograph of the delegates who attended and graduated from the Improvement Coach Programme, March 2020.





Projects

Appendix 11: A template of our project charter, which projects are requirement to complete before registration.

Quality Improvement (QI) Project Charter- Registration

The QI project charter provides a rationale and a road map for your proposed project. Please complete and return to the bsmhft.qualityimprovementteam@nhs.net before you start.

The Project Improvement Team	
Your name	
Your Role	
Email	
Phone Number	
Summary of your QI training	
Project Title	
Team(s) participating in the initial project	
Teams to be involved in scale up and spread	
Service Area	
Sponsor	
Has the sponsor agreed? Y / N	

Your Project Team		
Name	Their profession / role	Have they received any QI training? If yes please provide a brief description





What are you trying to accomplish?

Topic or issue you would like to improve (2-3 sentences)

Aim statement (improve what by how much and when?)

Why is this an important issue to tackle? Why does it matter to your service users/staff/directorate?

How will you involve service users and/or carers in your project? (Will a service user or carer be on your project team? Will you use surveys, focus groups, patient related measures?)

How will you know that a change is an improvement?

What data will you use to measure improvement? How will you collect the data, and how often?

	Measure	Source of information	Collection frequency
1			
2			
3			





What changes can you make that will lead to improvement?

What potential change ideas would you like to test? *(Must have more than one)*

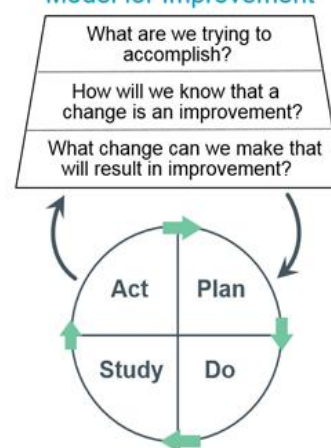
Are there any barriers that you can identify in the project?

Checklist

Is your Improvement Idea 'QI'?	
Has your line manager agreed?	
Do you have a project sponsor?	
Has your project sponsor agreed?	
Have you and your team had QI training (or booked on)?	
Have you discussed your idea with the QI team?	

QI	Not QI
<ul style="list-style-type: none"> • Multiple change ideas or approaches to test • A multidisciplinary project team • Tracking data regularly throughout project e.g. weekly • Solution is unclear • Requires learning, and not every change may work • Changing processes and ways of working 	<ul style="list-style-type: none"> • A singular change • Solution is clear and agreed • Relies on 1 staff member • Only measures results before and after project implementation • We've done it before • Implementing training • Area of focus currently undergoing major changes already • Any project expecting an IT solution

Model for Improvement



Please return to: bsmhft.qualityimprovementteam@nhs.net





Appendix 12: BSMHFT QI Team’s Role Definitions and Descriptions, to clarify the responsibilities of individuals involved in QI Projects.

<p>Project Lead</p>	<p><u>Definition:</u> A Project Lead is a member of an Improvement Project Team who is responsible for coordinating the improvement work, championing and leading the project and ensuring day-to-day progress and delivery. A Project Lead can be any member of the project team from any background; however they must have attended the <u>“QI Into Action” Training</u>.</p> <p><u>Roles:</u></p> <ul style="list-style-type: none"> • Lead a QI project day to day, engaging team members and stakeholders, working in a collaborative way. • Accountable for project outcomes • Can be any member of the project team from any background <p><u>Responsibilities:</u></p> <ul style="list-style-type: none"> • Engage the appropriate members for their improvement team, this should be multidisciplinary and involve service users, families, carers and experts by experience wherever possible • Co-ordinate regular team meetings • Ensure the project follows QI methodology of having a SMART aim, well defined measures; data recorded over time, carefully planned and executed PDSAs. • Meet with project QI coach and/or QI Lead where appropriate, and involve team sponsor • Monitor progress of the project, providing progress updates to the team coach, sponsor and QI team • Ensure project information is recorded on Life QI system and updated on a monthly basis as a minimum. • Ensuring service-user, family and carer involvement within the Project.
<p>Project Team Member</p>	<p><u>Definition:</u> A Project Team Member is someone who is participating and included within a Quality Improvement Project. They are responsible for attending project team meetings, and carrying out actions and tasks relating to the project’s progress. A project team member can be from any background.</p> <p><u>Roles:</u></p> <ul style="list-style-type: none"> • Contributing to the planning and progression of the QI project they are participating in. • Accountable for project actions which have been assigned them. <p><u>Responsibilities:</u></p> <ul style="list-style-type: none"> • To regularly attend and contribute to Project Team meetings. • To follow through on assigned actions or tasks relating to the project, and report progress or updates to the Project Lead. • To record updates on the Life QI system where appropriate.





<h2>Project Sponsor</h2>	<p>Definition: A Project sponsor is an individual with seniority within the organisation, who can provide resources and liaison with other areas of the organisation and overcome barriers on behalf of the team. The Sponsor is not a day-to-day participant in the project but should review progress on a regular basis.</p> <p>Roles:</p> <ul style="list-style-type: none">• Visibility – Oversee project progression• Champion – Champion the work and support the team in securing necessary resources and help unblock barriers• Accountable for project progression <p>Responsibilities:</p> <ul style="list-style-type: none">• Understand key success factors and likely risks/barriers for the team and project and support the team to overcome those barriers.• Receive regular progress updates from Project Lead, QI Coach, QI Team and as required the project team.• Ensure the team’s work is appropriately considered by the relevant forum/committee within the service area.• Ensure the team is recording learning on Life QI and considering how to share/disseminate knowledge.• Show enthusiasm for the team’s work, championing it to them and others.
<h2>Quality Improvement Coach</h2>	<p>Definition: An Improvement Coach has knowledge of quality improvement concepts, methods, and tools. They can assist QI Projects by helping teams to gather ideas, coach staff in how to apply the Model for Improvement to projects and provide advice around development measures and data analysis. The QI coach is not responsible for doing project tasks and is not a subject matter expert. Individuals in this role must have attended the Quality Improvement Coach Training.</p> <p>Roles:</p> <ul style="list-style-type: none">• To regularly meet and coach 2-3 QI Project Teams throughout the organisation and support them in applying the QI methodology to their project• Dedicate around ½ day per week to QI Coaching.• Understanding the Science of Improvement and using the Model for Improvement as a roadmap for improvement projects• Champion QI across the Trust and support the development of QI structures and processes. <p>Responsibilities:</p> <ul style="list-style-type: none">• Contacting and meeting with their project teams regularly.• Support the project teams in using QI methodology, including driver diagrams, PDSAs and measures / data over time.



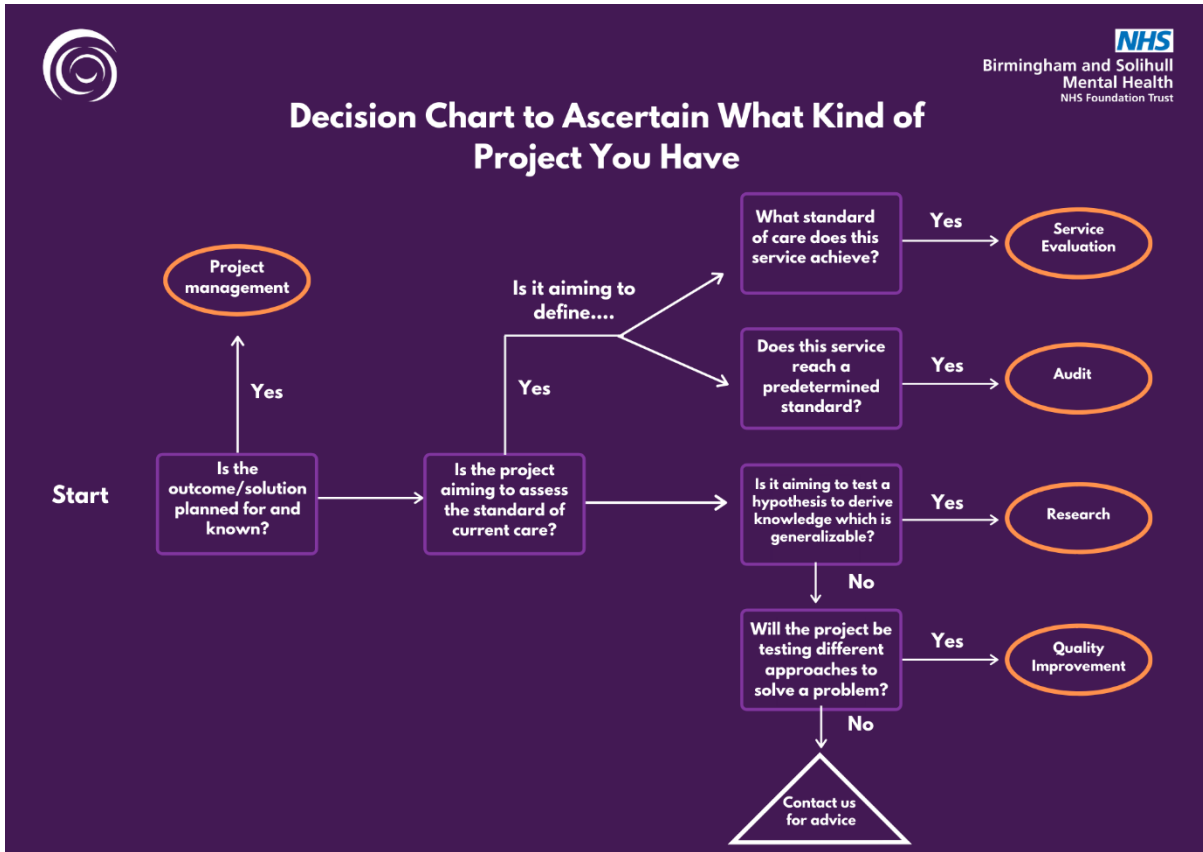


	<ul style="list-style-type: none">• Support project teams with team dynamics and human element of completing a QI project.• Monitoring the progress of their projects and provide regular updates and communication with QI Team.• To attend support sessions from the QI team• Manage own continuing development in improvement and as a coach
<p>Quality Improvement Lead <i>(also known as Improvement Advisor or IA)</i></p>	<p>Definition: An Improvement Advisor is highly trained in Improvement Science Methodology, and is responsible for helping to identify, plan, and execute improvement projects throughout an organization. They assist projects to deliver successful results and spread changes across the entire system. Individuals in this role must have attended the IHI Improvement Advisor Professional Development Program.</p> <p>Roles:</p> <ul style="list-style-type: none">• Act as a central point of expert support, guidance and advice within the Trust on quality improvement and effectiveness.• Oversees Quality Improvement Projects across one or two service areas• Establish excellent relationships with a range of internal and external stakeholders and partners to support delivery of high-quality outcomes.• Be visible to staff and regularly undertake quality improvement activities to engage colleagues at all levels to generate commitment to continuous improvement <p>Responsibilities:</p> <ul style="list-style-type: none">• To communicate effectively with senior management to summarize progress and potential barriers on improvement projects• To support the organisation to develop and implement strategic improvement plans• To advise and guide Quality Improvement sponsors and coaches in developing their activity in line with Trust’s change cycle framework• Deliver training to staff across the Trust in Quality Improvement

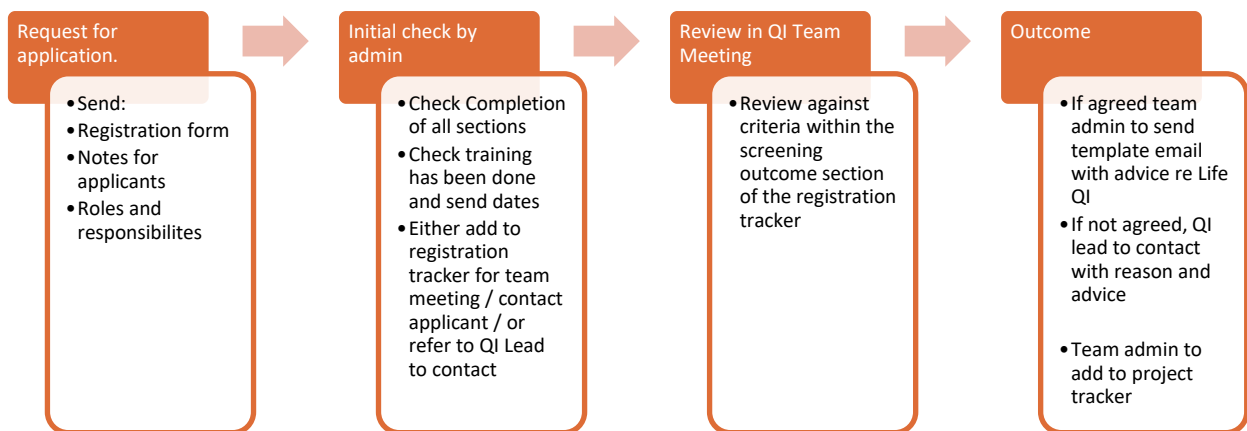




Appendix 13: BSMHFT QI Team’s Decision Chart to help individuals interested in beginning a project establish which improvement method would suit their project. This displays how the QI team are working with the Clinical Effectiveness Team, Research and Innovation Team, and the Project Management Team to encourage improvement and assurance projects across BSMHFT.



Appendix 14: BSMHFT QI Team’s Flow Chart of the QI Project Registration Process





Appendix 15: The template of the Progress Note which QI Teams are required to complete in preparation for meetings with their Quality Improvement Leads and Coaches.



QI Progress Note

Date of Contact:	Current Activity:
Attendees:	
Purpose of Contact:	Challenges and Barriers:
Project Score:	
Actions to be achieved:	
QI Recommendations:	





Communications and QI Community

Appendix 16: An example of “Eye on QI” – BSMHFT’s monthly QI newsletter



By Joshua Rochelle-Bates, QI Communications Officer

Welcome to the first issue of the BSMHFT Quality Improvement Newsletter! Your regular communication about all the happenings within the world of QI at our Trust.

Team Updates

First off, we are very pleased to be welcoming our new Head of Quality Improvement & Clinical Effectiveness, Julie Romano!

A nurse by background, Julie joins us from Walsall Healthcare Trust. Over at Walsall, she held the position of Head of Quality and Assurance, leading on patient safety, incident reporting analysis, SI investigation and risk registers.

Julie has a keen interest and expertise in Learning from Excellence and Appreciative Inquiry and has won national awards in the field through her work on positive reporting.

Julie is passionate about delivering high quality care and is keen to share her expertise in any way she can.

We'd also like to congratulate Julie on recently becoming a member of the Q Community, an initiative connecting people with health and care improvement expertise.






In other news the wonderful Shelley Wreford, Improvement Advisor to Specialties, has left us on maternity leave. The whole team wishes her all the best with her foray into motherhood and we can't wait for the baby photos.... and for her to return to work of course!

In the meantime, any enquiries relating to QI within Specialties should be referred to Meggan Jarvis, who will be covering the service area in her absence.

Silver: QI Into Action Training registration now live!

This April, the QI Team are excited to be starting our first cohort of QI Into Action Training.

Our Silver: QI Into Action Training is a 6 month programme of practical learning that gives you with the tools and expertise to deliver a quality improvement (QI) project on an issue that matters to you.

Over the course of the 6 months you and your team will be working towards turning your improvement ideas into reality with two full days of training, plus bespoke consultations in between with a dedicated Quality Improvement Lead.

The end of the 6 months will culminate with you showcasing your findings and presenting the successes of your work at a special celebration.

To take part in the training, we recommend that you attend and complete our Bronze: Introduction to QI session, and that a minimum of two project team members attend.

Deadline for applications is Friday 3 April, for more information (including how to apply) please visit our recently launched Connect page (connect/qualityimprovement) or email us at bsmhft.qualityimprovementteam@nhs.net.





QI Coaches out in full force



After 5 months of training and workshops administered by the Institute for Healthcare Improvement (IHI), we are very excited to be presenting our first cohort of QI Coaches, who as of 3 March 2020 have now taken the Gold and are now out in force across our Trust.

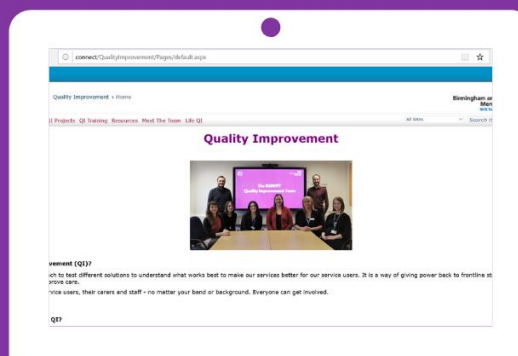
Julie Romano, Head of QI, said: "We are very proud of our first ever coaching cohort and the hard work that they have been putting in since November last year. We're excited for them to be providing their insight and expertise to the many great improvement projects we have going on across the Trust.

"Also, myself and the QI team would like to say a massive thank you to IHI, who have provided such excellent training and resources over the past few months and have in general been such nice people to work with and be around!"

Quality Improvement Connect Page now live!

We have a brand new Connect site available for you to dive into!

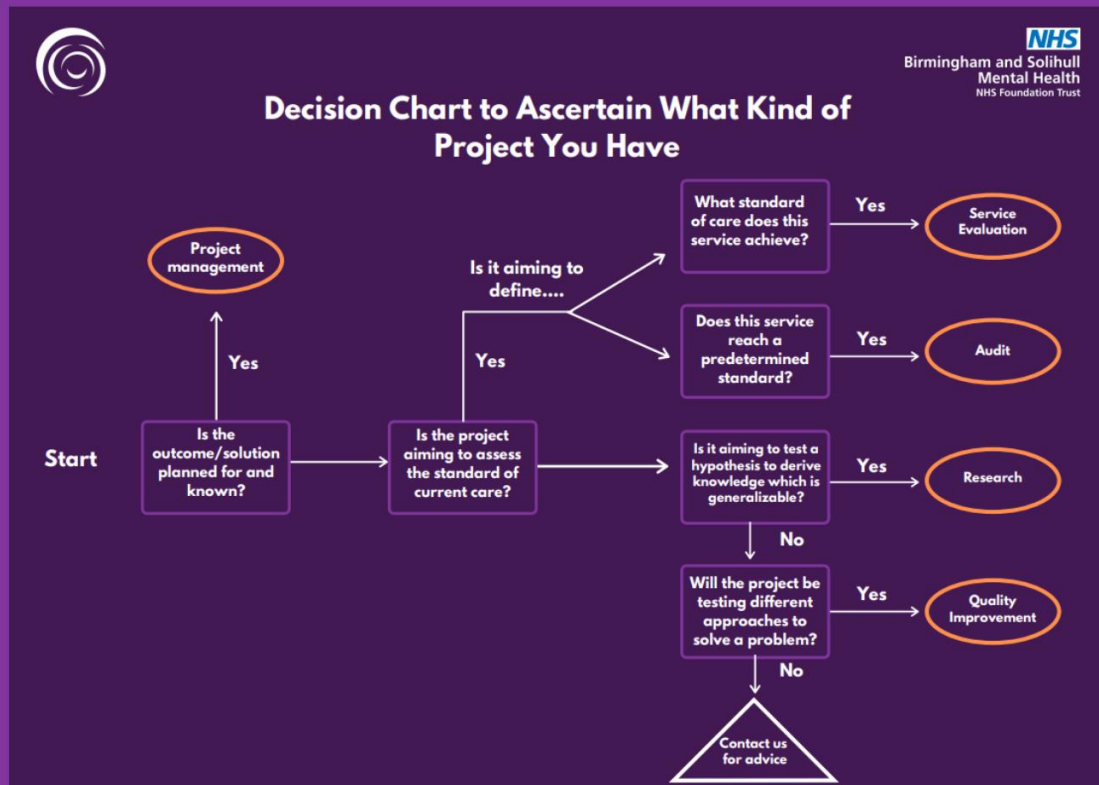
Whether you want more information on QI, to get involved with training as part of our new QI Training Academy, to access resources to help you with your projects or to just be in the know with what projects are happening across BSMHFT you can access it all by using the following URL:
(connect/QualityImprovement)





Project Decision Chart

We get it. Quality Improvement isn't the first 'incentive' that has swept across the Trust that is being hailed as "the new way of doing things" that it is going to "singlehandedly help to improve the Trust." Although we very much know that those things will be delivered by Quality Improvement, we understand that there is also a lot of great work happening across the Trust that isn't QI and is equally as capable of doing those things too. So, to help guide you towards support for those big ideas for improvement and change, we've created this handy little guide to help point you in the right direction, which you can also find on our Resources page on Connect ([connect/QualityImprovement](#)).



**For more information
please visit**

[HTTP://CONNECT/QUALITYIMPROVEMENT](http://connect/qualityimprovement)



@BSMHFT_QI



bsmhft.qualityimprovementteam@nhs.net





Appendix 17: A variety of materials from our Service User QI Brand Focus Group, conducted on 29 November 2019. The aim of this focus group was to capture insight and commentary on how the QI team can best communicate with service users and develop a 'tone of voice' for this moving forward.

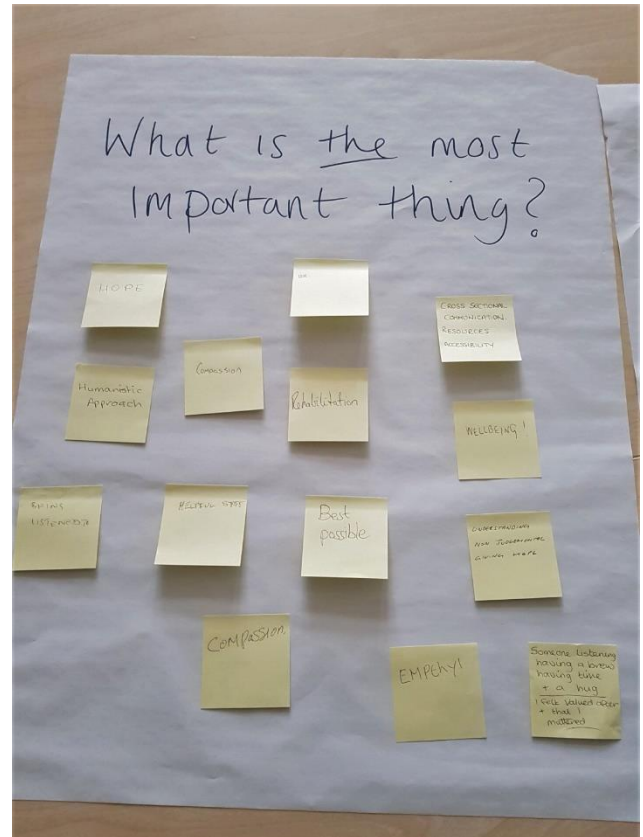
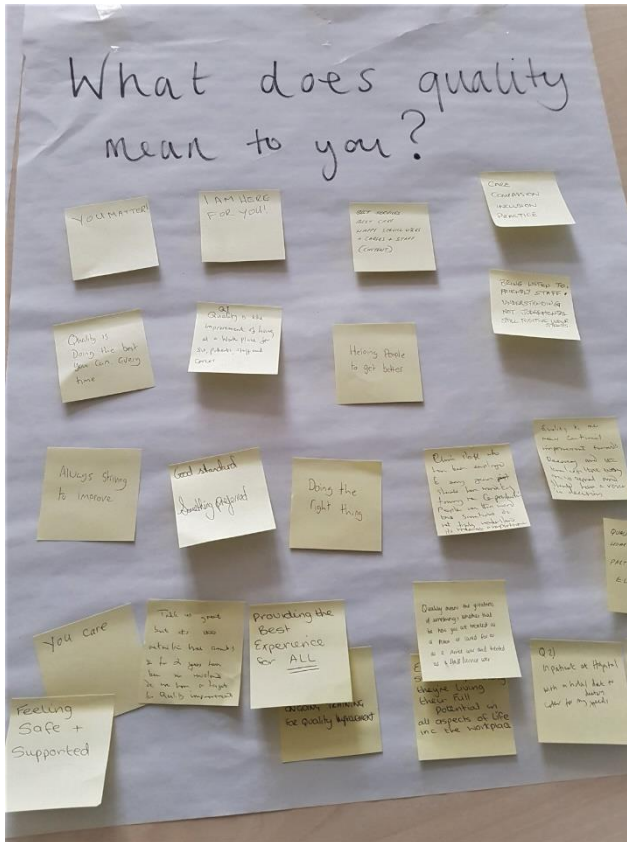
17i) The agenda from the Service User QI Brand Focus Group.

Time	What	Lead	Resources
10:00 - 10:25	Why we are here Welcome, Introductions, Ice breaker	CR	Claim forms Register Name badges PowerPoint
10:25 - 10:30	Setting Ground rules	CR	Flipchart Pens Sticky tape
10:30 - 10:45	Trusts QI journey so far	CR	PowerPoint
10:45 - 11:00	Q1. What does quality mean to you? (Service users recorded answers on post it notes and discussed afterwards)	CR and JRB	Post it notes Flip chart
11:00 - 11:30	Q.2 Explore an example of a time that you have received the best quality of care? How did it make you feel? (Open discussion where service users discussed examples)	CR and JRB	
11:30 - 11:45	Q.3 What is the most important thing to you in receiving quality care? (Service users recorded answers on post it notes and discussed afterwards)	CR and JRB	Post it notes Flip chart
11:45 - 11:55	Look at current posters/imagery What do you like and dislike? (Service users were shown current materials and asked to provide feedback)	JRB	PowerPoint posters





17ii) Photographs of the feedback from a activity during the Service User QI Brand Focus Group around the questions “What does quality mean to you?” and “What is the most important thing?”



17iii) A word cloud summarising the vocabulary used within the Service User QI Brand Focus Group session.





Appendix 18: A poster advertising our Staff QI Brand Focus Group, scheduled for 30 March 2020.



QI Brand: Staff Focus Group

Have your say on the identity of Quality Improvement (QI) and how we communicate to staff, carers, service users and beyond.

14:00 - 16:00, 30 March, Uffculme Centre.

To register your place please email us at bsmhft.qualityimprovementteam@nhs.net

 @BSMHFT_QI  <http://connect/QualityImprovement>

