Calling from the UK?
Please dial: 0800 389 7473
Enter participant pass code: 513 394 83#

Calling from outside the UK?
Please check the email sent with your log in details to access our global dial in codes.
Press *0 to speak to an operator if you are having any technical difficulties
TIPS FOR A SUCCESSFUL WEBEX

Use the **chat box** to ask questions and get involved in discussions.

If you’re having technical difficulties message the BT Call Manager via the WebEx chat function, or press *0 on your telephone.
If you want to get involved in the conversation, please click on the Chat icon circled in red.

Select **all participants** from the drop down menu, type your message then click send!
WHERE ARE YOU JOINING US FROM?

Please click on the pen icon, circled in red above....
WHERE ARE YOU JOINING US FROM?

Please click on the arrow icon, circled in red above....
ALL OVER THE WORLD
QI Connect: our reach

October 2016

468 organisations

@HISQIConnect
COMPETITION TIME...
OUR GLOBAL REACH
CONGRATULATIONS!
All territorial NHS Boards across Scotland are now linking in!
SPECIAL MENTION TO....

[Logos and institutions mentioned]
View recordings of previous QI Connect sessions

You can find information on our previous speakers and view recordings of sessions at the links below.

**2015**

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The QI Connect series now features as an approved resource within ISQua’s Fellowship Programme.
Session Chair:  
Dr Brian Robson  
Executive Clinical Director

Series Manager:  
Jennifer Graham  
Programme Manager

Administrator:  
Ross Stewart

Twitter analytics:  
Alex Stirling
BIG SHOUT OUT TO COHORT 9!
REMEMBER TO TWEET AS YOU LEARN!

#HISQIConnect

Follow us: @HISQIConnect
Peter Lachman
CEO ISQua
Leading and networking for change

Peter Lachman
CEO ISQua
ISQua

- Not for Profit Membership Organisation

- Mission is to inspire and drive improvement in the quality and safety of healthcare worldwide through education and knowledge sharing, external evaluation, supporting health systems, and connecting people through global networks
ISQua’s Education Programme is an online, learner-led, continuous professional development programme, tailored to suit the needs of each participant.

**EDUCATION**

- **500+ Participants from 65 Countries**
- **3 levels of study**
  - Certificate of Achievement / Associate Fellowship / Fellowship
- **Online Learning**
- **Interaction with Expert Faculty**
- **Content in 4 Languages**
  - English, Chinese, Portuguese & Japanese
- **Access to a vast library of resources**
- **Showcase your Research**
- **Mentorship and Internship opportunities**

**EVENTS**

Be part of the leading International Conference in Quality and Safety

- **4 Days / 6 Keynote Speakers / 50+ Concurrent Sessions**

**London, 1-4 October 2017**

- **1,500+ delegates**
- **Over 25 hours of networking**
- **100s of ideas to bring back to your organisation**
- **300+ expert speakers**

**Kuala Lumpur, Malaysia, 23-26 September 2018**

Help us to help you improve the quality and safety of Healthcare worldwide
ISQua offers a peer review assessment framework to support the improvement of performance and practice of health and social care standards and external evaluation bodies.

**EXTERNAL EVALUATION**

We award:

- Standards
- Organisations
- Surveyor Training Programmes

- Over 90 International Surveyors
- 60+ Client Organisations in over 30 Countries

- Standards Based Assessment
- International Best Practice
- Continuous Quality Improvement
- Peer Review
- 4-Year Cycle

**MEMBERSHIP**

Become a Member of ISQua and be recognised as part of an International Community, working together to enhance patient safety and quality improvement.

**JOIN US**

- Become part of our International Network
- ISQua Members receive discounts on our programmes & products
- Our 600+ Members are policy makers, senior healthcare professionals, medical providers and academics from over 60 countries
- Receive free online access
- Access to Experts
- Membership Certificate
Question 1

What is the real aim of high quality person-centred care?
Person Centred Care

Safe
Effective
Transparency
Efficient
Equitable
Timely
Respect
Holistic
Partnership
Compassionate
Reliable person centred care

Right care giver

The person who needs care receives the right care the first time every time

Right treatment

Coordinated and Safe

Right place

Where, how and when

Right ward

(if in hospital)

No delays

Personalised
What really matters to people

Dignity
Compassion
Respect

Coordinated

Personalised

Enabling
Question 2

Why do we accept our inability to deliver the right care at the right time every time?
The perceived problems

- Limited resources
- Overworked staff
- Increasing burden of demand
- Acceptance of status quo
- And
  - Process issues
  - Knowledge issues
  - Resource allocation
  etc.
Question 3

Why do highly performing individuals accept low quality care?

Whether it be not being person centred, being unsafe, tolerating lack of access etc.
Culture

Professionalism
Work as usual will not work

New ways of thinking (Deming)
- We need different ways to solve the problems

A change in culture
- Change language and the way we act, behave, learn and teach

Active changes
- Actively adopt new ways to solve challenges

Slide concept based on IHI White Paper
Juran framework for quality

- Quality planning
- Quality improvement
- Quality management
- Quality control
Theory and method

Model for Improvement

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

ACT
PLAN
STUDY
DO

GOSH-acquired CVL infections for every 1,000 line days

- UCL
- LCL
- Measure
- Mean
- Median
Front line ownership

The usual
- Leadership sell or promote ideas to get buy-in in the front line and then implementation

The future
- Ownership of the problem by the front line and then ownership of the solution
Why change is so difficult

Power

Hierarchy

Silos

Dysfunction

Tradition

Professionalism
Redefining professionalism

- Distinctive competence
- Asymmetric competence
- Some specific attributes
  - Cognitive skills
  - Moral commitment
  - Collegial commitment
  - Collective advocacy
  - Professional autonomy

Reference Paul Starr
Five System Barriers to Achieving Ultrasafe Health Care

Accept limitations

Abandon professional autonomy

All views are important

Simplify rules and processes

System oversight
Leadership

Courage

Respect

Vision

Hope

Skill

Time and Space
We cannot do this alone
We need to learn from each other
But not simply copy

Context is key
Wisdom of crowds

“groups of people are smarter than an elite few, no matter how brilliant—better at solving problems, fostering innovation, coming to wise decisions, even predicting the future.”
Develop communities of practice

“groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly.”

Etienne Wenger
Networks

Effective networks for improvement
Developing and managing effective networks to support quality improvement in healthcare

Learning report:
Leading networks in healthcare
Learning about what works – the theory and the practice
January 2013

Learning report
March 2014
The evidence base

Health professional networks as a vector for improving healthcare quality and safety: a systematic review

Frances C Cunningham, Geetha Ranmuthugala, Jennifer Plumb, Andrew Georgiou, Johanna I Westbrook, Jeffrey Braithwaite

How and why are communities of practice established in the healthcare sector? A systematic review of the literature

Geetha Ranmuthugala, Jennifer J Plumb, Frances C Cunningham, Andrew Georgiou, Johanna I Westbrook and Jeffrey Braithwaite

Net benefits: assessing the effectiveness of clinical networks in Australia through qualitative methods

Frances C Cunningham, Geetha Ranmuthugala, Johanna I Westbrook and Jeffrey Braithwaite

Patterns of collaboration in complex networks: the example of a translational research network

Janet C Long, Frances C Cunningham, Peter Causwell and Jeffrey Braithwaite
Types of networks

Developmental or learning network
- Focuses on specific issues, such as improving access to healthcare or standards of care for specific patient groups, where the members can learn and change

Agency network
- Characterised by cooperation and shared services across interdependent members

Advocacy network
- A network that advocates for change and/or a shared cause across its membership (organisations or individuals)

Managed network
- Associated with service delivery. Central leadership, hub and spoke governance, with the hub having clear authority

Social network
- An individualised network of social relationships, as opposed to formalised or structured relationships. The purpose is individual learning, connections, creating personal visibility and support

Malby B and Mervyn K (2012)
Summary of the literature to inform the Health Foundation questions. Centre for Innovation in Health Management, University of Leeds.
5 C wheel for networks

- Common purpose
- Cooperative structure
- Critical mass
- Collective intelligence
- Community building

Networks

Figure 1: Distinctive features of networks

- **Diversity**: Network membership is diverse and is collectively able to innovate and be creative.
- **Distributed leadership**: Power and leadership is distributed across network members.
- **Reciprocity**: Relationships between network members are defined by reciprocity and exchange.
- **Common purpose**: Network members have a mutual interest in a common purpose.
- **Instability**: Members' commitment, engagement and impact fluctuates.
- **Adaptability**: Networks are able to adapt to survive and thrive.
- **Knowledge**: The knowledge function is central to the networks identity and mission.

"Networks are cooperative structures where an interconnected group or system coalesce around a shared purpose and where members act as peers on the basis of reciprocity and exchange, based on trust, respect and mutuality."


Functions

- Community building
- Filtering
- Amplifying
- Facilitating
- Investing or providing
- Convening

Effective networks

- Shared purpose and identity
- Addressing big issues
- Meets member needs
- Adapted leadership
- Strong relationships and ties
- Generate helpful outputs
For us to amplify improvement we need to redesign what we do and we should network in effective communities of practice.
The ISQua Network system

Policy Development

Experts

Membership

Education Fellowship

Innovation and research

Quality Improvement and Patient Safety

IAP

External evaluation Accreditation

Accreditation Council
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Jenny Wilson
General Practice Nurse Advisor
Scottish Government Scottish Quality & Safety Fellow
George F. Kewin

Bellin Health

10 November, 4-5 pm
QI CONNECT 2016: INNOVATION & INTEGRATION

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