

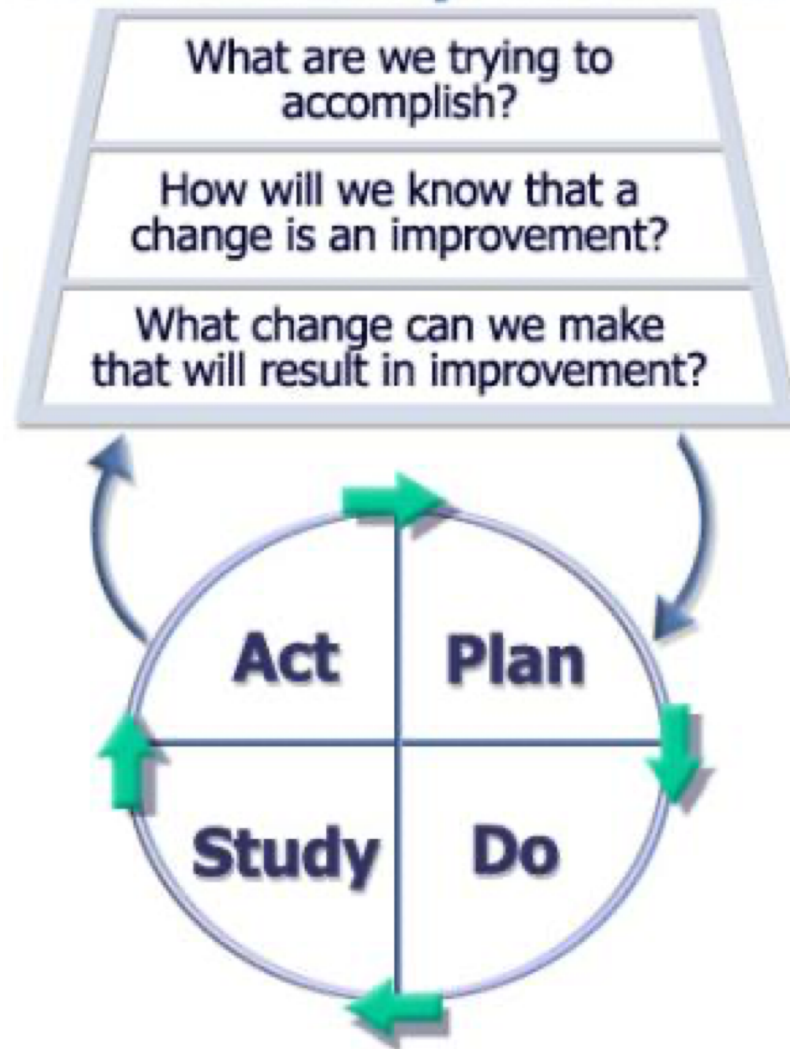


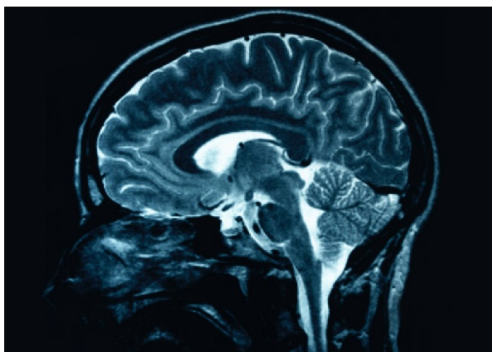
What does HAI mean to you?

- Hospital Acquired Infections ?
- Healthcare Associated Infections ?
- Hippos Are Innocent?

Use the
Model for
Improvement
to test and
implement
changes

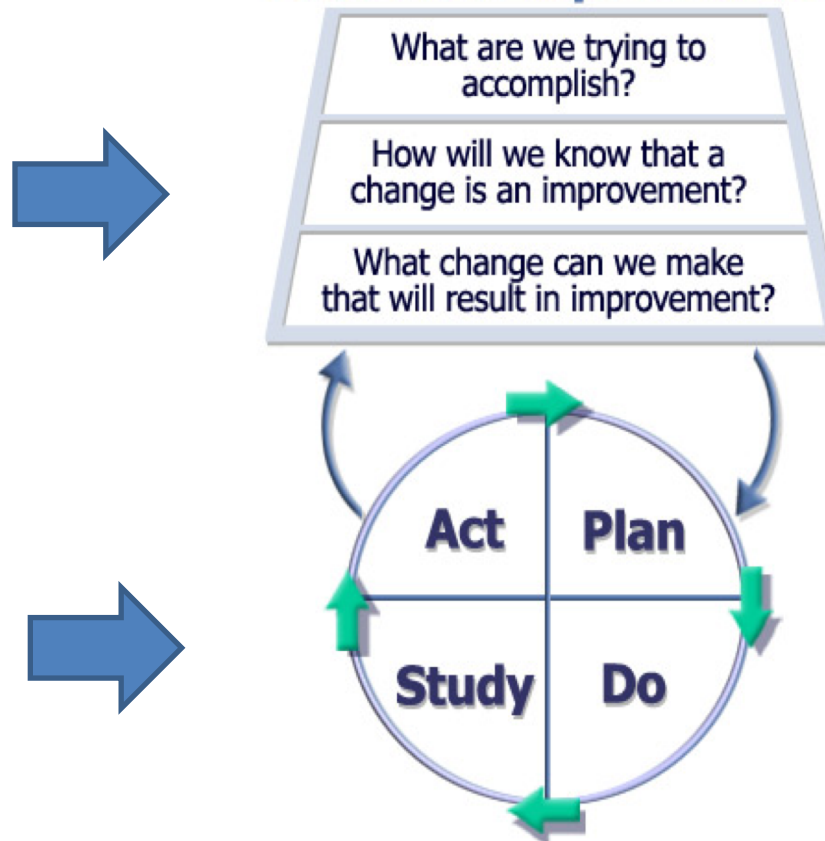
Model for Improvement



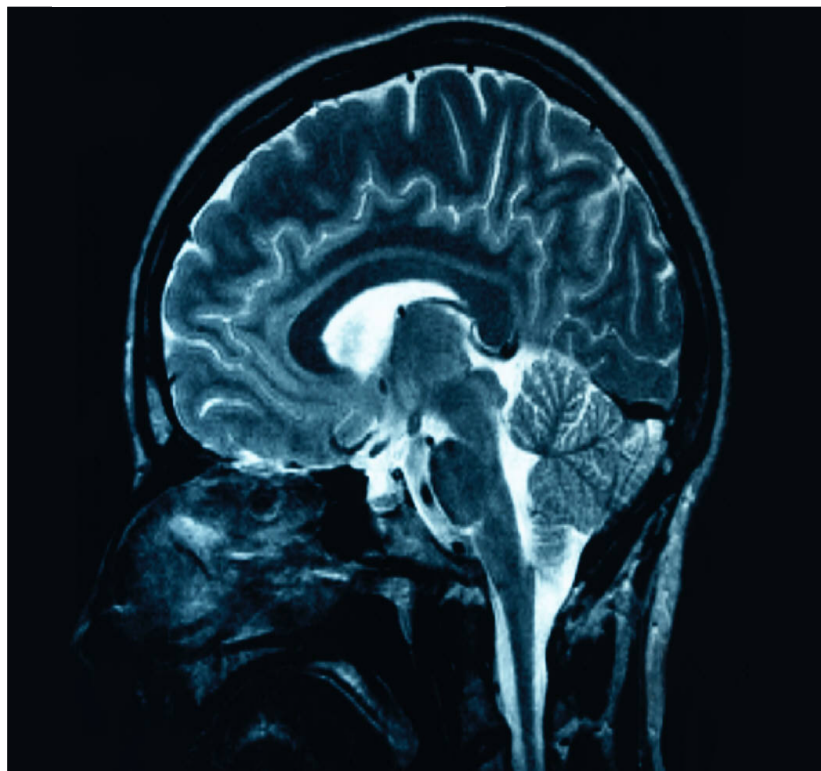


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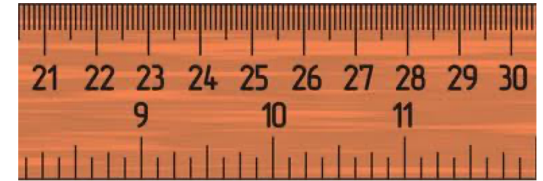
Model for Improvement



The thinking part – 3 questions



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



What are we
trying to
accomplish?
Setting an
aim



Where
does this
aim come
from?



AUDIT DATA



A HUNCH



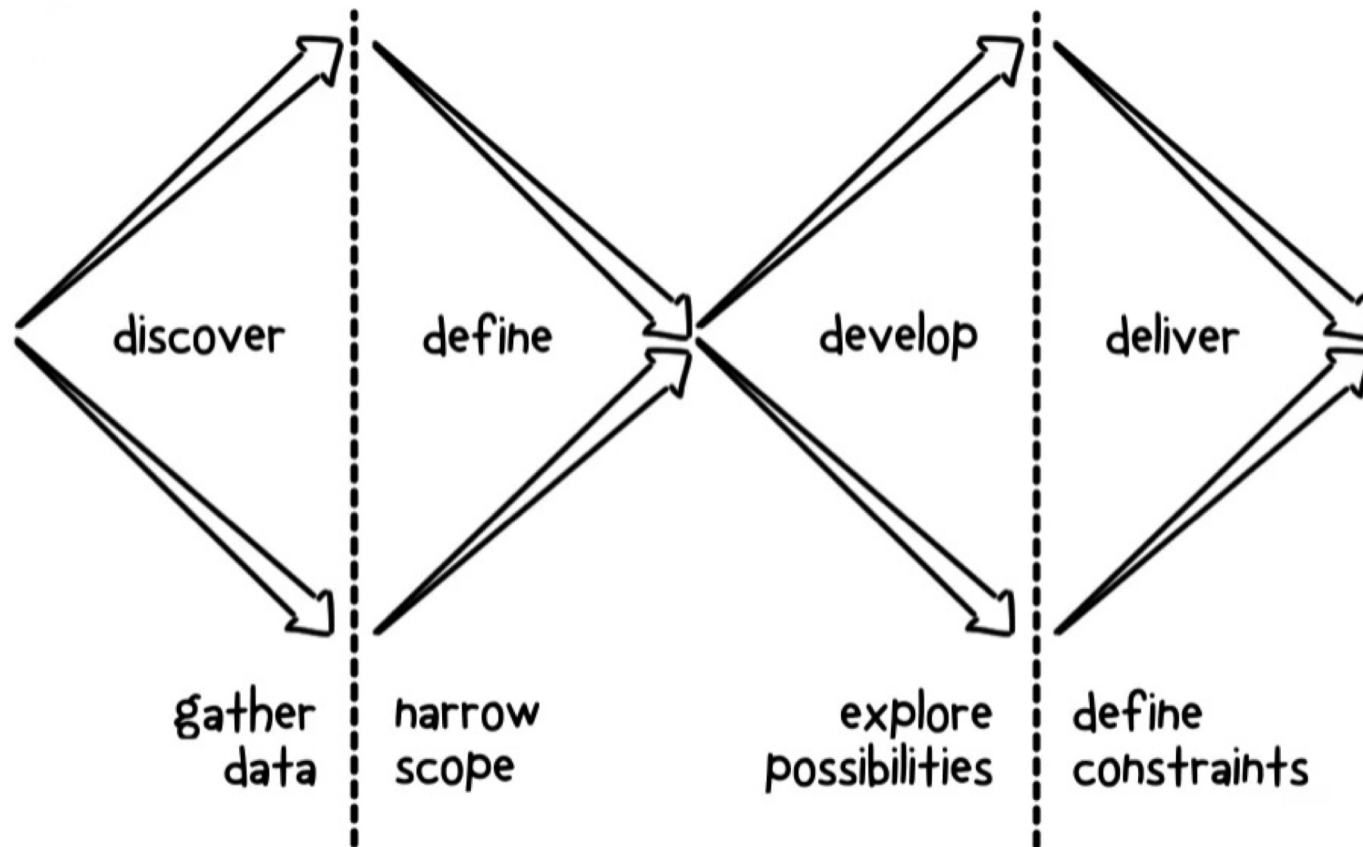
OBSERVATIONS



INTERVIEWS



EXTERNAL
SOURCE – CI



Double Diamond

What evidence do we currently have?

- What exists
- What doesn't
- Why are we collecting useless info



AIM/OUTCOME :


- To reduce Falls in Care home X by 50% by December 2020.
- Specific
- Measurable
- Achievable
- Relevant
- Timely



How will we know that
change is an improvement? |

Measurement

- How are you defining a fall? Falls / falls with harm / near misses
- What data are you going to need ? Number of falls
- How are you going to collect it?
 - Who, when, what and where? Support worker ? Clinical staff ? Daily? One group? safety cross?
- Needs to be clear who is responsible for data collection? Specific role or multiple.
- Frequency - Weekly/Monthly



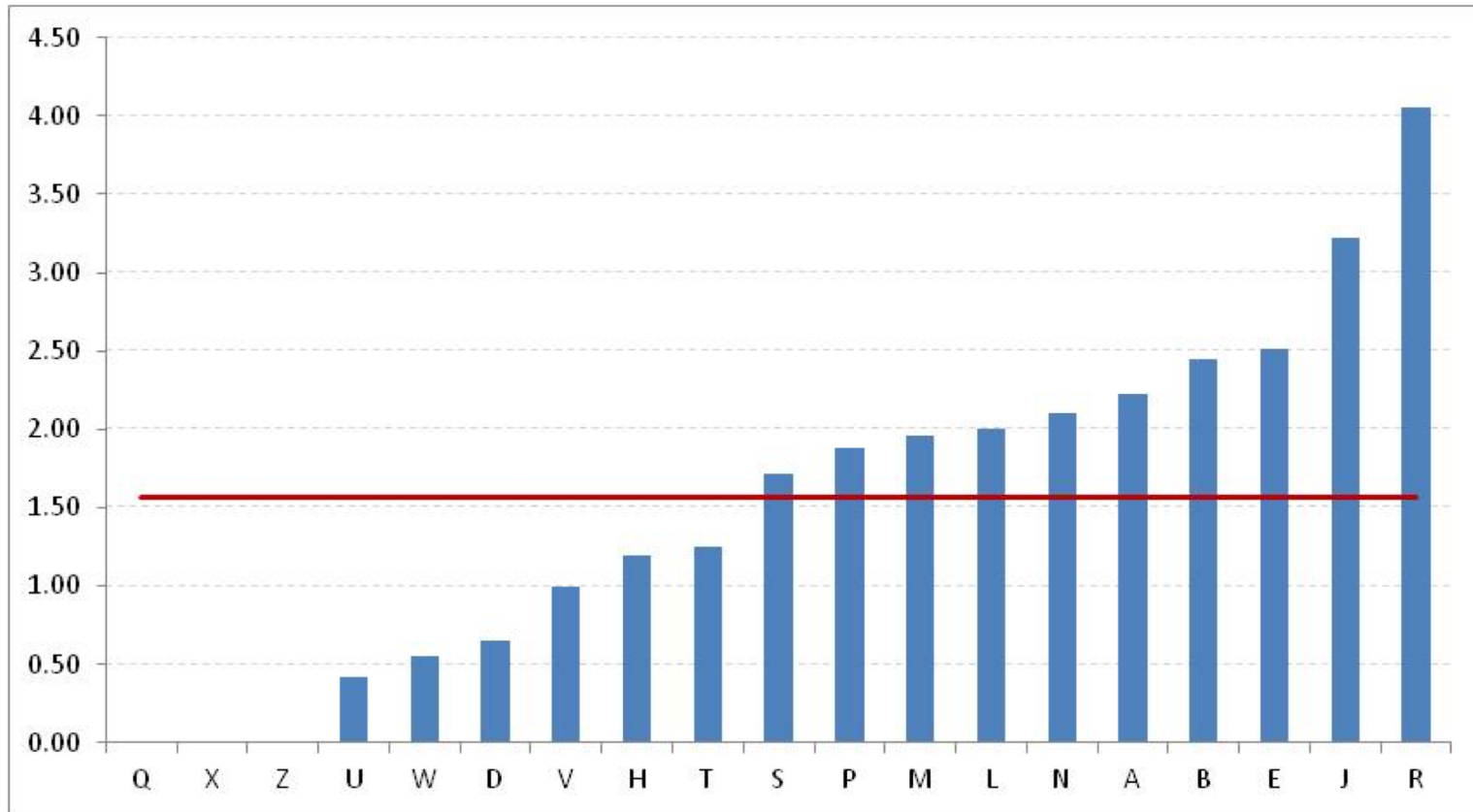
In God we trust; all
others bring data.

W. Edwards Deming

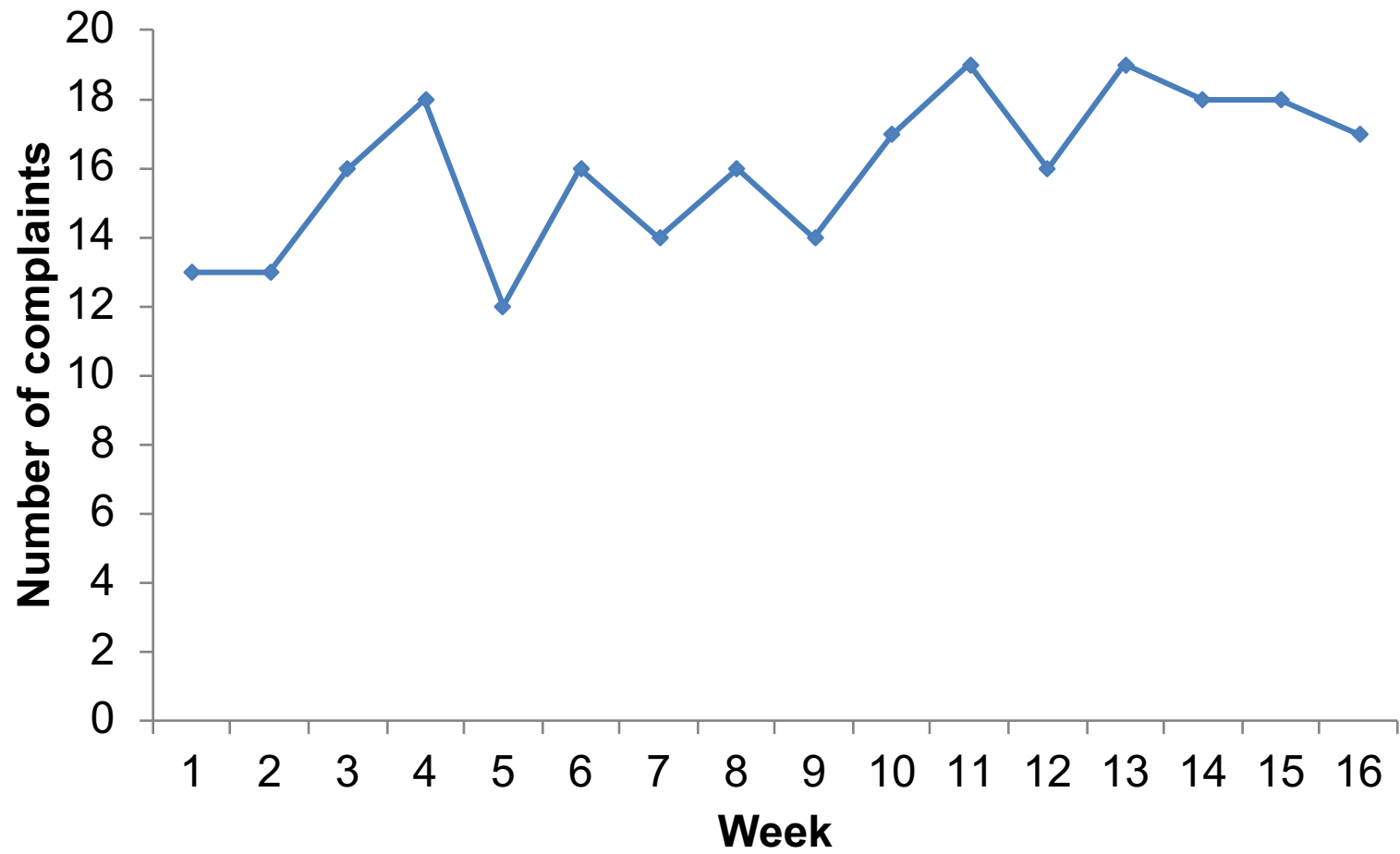
Alphabetical		Ranked	
A	2.22	Q	0.00
B	2.44	X	0.00
D	0.65	Z	0.00
E	2.52	U	0.42
H	1.20	W	0.56
J	3.23	D	0.65
L	2.00	V	1.00
M	1.96	H	1.20
N	2.10	T	1.25
P	1.88	S	1.71
Q	0.00	P	1.88
R	4.05	M	1.96
S	1.71	L	2.00
T	1.25	N	2.10
U	0.42	A	2.22
V	1.00	B	2.44
W	0.56	E	2.52
X	0.00	J	3.23
Z	0.00	R	4.05

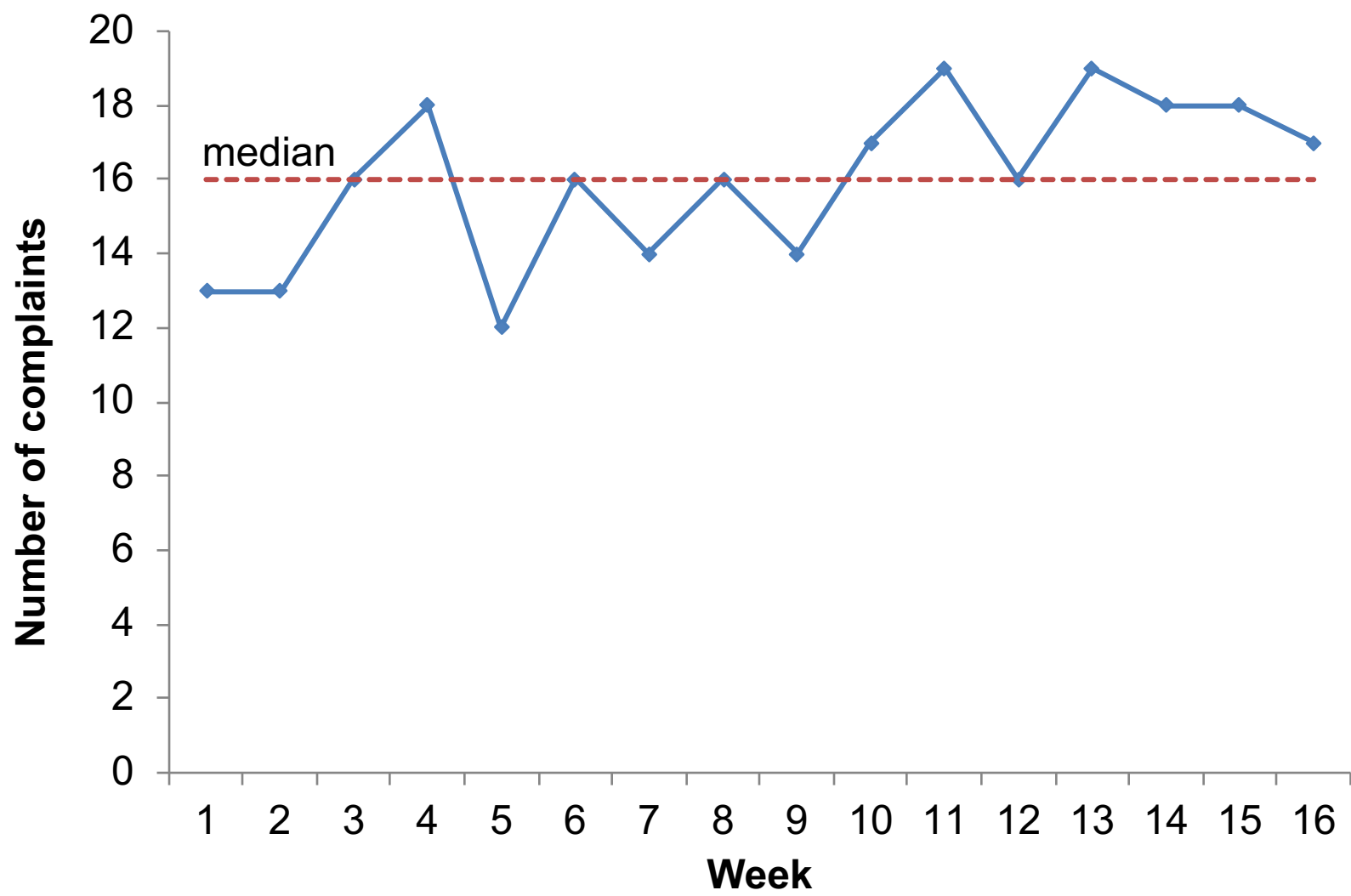
Interpreting data

It is often difficult to see
variation when looking at data in a table




Bar charts help us to understand some variation








Improvement: Sharing your improvement story



In some cases you might have ideas you want to test- being proactive and using the model for improvement can lead to lasting positive improvement

Where did you start?


What was the problem and what did you want to change? Why was it important to sort it out?



Question 1: What are we trying to accomplish? This requires you to understand the problem and what you want to achieve, understanding the "aim" and outcomes you want to focus on

What did you do?

What did you do to tackle the problem, how did you do it and who did you ask for help? Was there a reason you decided to tackle the problem in this way?




Question 2: How will we know change is an improvement? This means what evidence or data will prove or let you know you have achieved your aim+ outcomes? What can you collect or use to show this?

How do you know you made a difference?

Measuring the changes means you can prove that what you did made a difference. So, what did you measure to show an improvement and how did it change? How did it make a difference to those experiencing care?



Improvement: Sharing your improvement story



... your idea becomes a tested success with data to prove it. But sometimes change might not be an improvement-learn from it and change direction until you get there.

What did you learn from the experience?

Reflecting on what happened is important if you want to use this approach again. What went well? What would you maybe change next time? Is there anything you are really pleased about? How did you keep going?



Empower others in your team to also try testing new things-create a culture that promotes improvement thinking. Let them learn and explore new ideas

How are you going to keep this going?

This is the 'what next' question! Now that you've made a positive change, how are you going to keep it going, and are there things you can now do to build on this? Did you share this experience with others in your service?

NOTES



Care Inspectorate data



INSPECTION
GRADES



COMPLAINTS



NOTIFICATIONS



REGISTRATION



ANNUAL
RETURNS



ANECDOTAL

So what do you gather?

- Do you collect data for improvement ? Or data for compliance ?



