

PARTNERSHIP FOR IMPROVEMENT: FOUR SEASONS HEALTHCARE (FSHC) IMPROVEMENT WORKSHOP SESSION 23 MAY 2018



In partnership with John Kirk, FSHC Director for Scotland and Victor Dewson, Regional Manager of FSHC, the Care Inspectorate Improvement Support Team (IST) led the largest external improvement support workshop to date, with around 70 delegates from FSHC attending from across Scotland.

John introduced the day as an opportunity for delegates to hear and learn about:

- the Model for Improvement (MFI) and how to use it in a practical way to improve outcomes for people experiencing care
- the Care Inspectorate's improvement strategy
- the development of the quality framework for inspecting care homes for older people

The day was also an opportunity to build relationships that will foster collaborative working between both organisations.

The aims of the day:

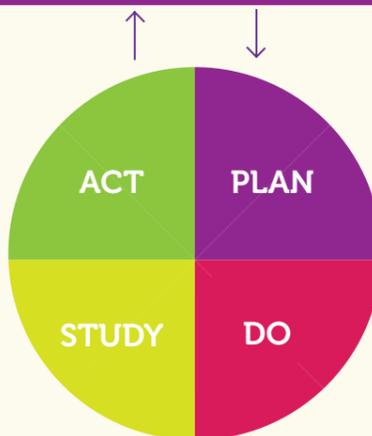
- equip delegates with beginner level knowledge and understanding in Quality Improvement (QI)
- increase confidence to use the MFI and test changes using Plan Do Study Act (PDSA)
- share experiences and learn from one another

Model for Improvement

What are we trying to accomplish?

How will we know a change is an improvement?

What change can we make that will result in improvement?

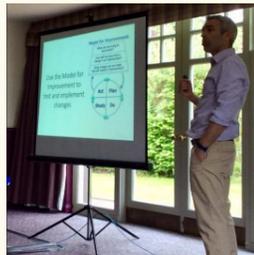


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The morning was made up of short interactive sessions that covered the history of quality improvement, how improvement collaborative can drive change using examples of practice, the human factors of change that can impact on the success of improvement projects, diagnostic tools that can be used, and finally the theory and application of the PDSA approach to improving care.

Senior Care Assistant Elizabeth Tait from FSHC and Jackie Dennis from the CI shared the continence improvement project within Campsie View Care Home between May and December 2017.

In the afternoon the PDSA approach came alive with a practical based session called the marshmallow challenge. Loads of laughter and team collaborative working. Teams tested fast, failed fast and learned fast.



Angella Fulton, Team Manager and the CI's FSHC relationship manager, gave an overview of the development of the CI's quality framework being tested in some care homes for older people.

Aidan McCrory, Improvement Adviser, covered the history of quality improvement, the model for improvement, how to use the PDSA approach to test changes and how this can be used in practice.

Jackie Dennis, Improvement Adviser spoke about the nature of collaboration and how human factors and the systems in which people work can either help/hinder service developments as well as impacting on the outcomes of people experiencing care.

Joyce Murray, Improvement Support Team manager spoke about the Reducing Pressure Ulcers in Care Homes improvement project.

Edith Macintosh, Head of Improvement Support, presented some of the outcomes to date of the Care About Physical Activity (CAPA) improvement programme

The afternoon ended with staff of FSHC being asked to discuss and respond to three questions that would help inform the CI's improvement support approach. Here are some examples of what was said:

Q1) How can the Care Inspectorate support FSHC services to improve?

Listen.
Consistency of inspections/support (standardisation). If no requirements or recommendations, what can be done to increase grades?
Sharing of good practice.
Informal contact outwith inspection.
Build relationships.
Feedback on action plans.
Website updates - send auto updates to all homes to share.

Q2) How can the Care Inspectorate support FSHC to sustain improvement?

Keep up regular visits - work with home to ensure progress maintained.
Interim evaluation points identified - agreed timescale - bite sized chunks.
Continued relationship with CI - not just re action planning.
Mentorship - updates/track alignment.
More goalposts - tramlines not guidelines.
Business constraint acknowledgement.

Q3) What are the priority areas for improvement within FSHC?

Activities - meaningful.
Formatting new care plans to fit into the new health and social care standards.
Outcome-focused.
Medication.
Person-centred approach.
Working closely with local community.
Better funding.
Involvement and participation.
Clear communication about expectations. Recognition of achievements.

How did we do?

90.5% of attendees agreed that this session provided them with the opportunity to develop an increased understanding of quality improvement.

90.5% of attendees agreed that they have an increased awareness of the improvement models which may help them to improve service delivery.

85.7% of attendees agreed that this session has increased their understanding of PDSA testing and how this contributes to development of daily practice.

90.4% of attendees agreed that this session gave them increased confidence to participate in and contribute to improvement projects in their area of work.

78.5% of attendees agreed that their perceptions of what quality improvement methodologies are have changed from before they participated in this workshop.



**care
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