

Snapshot

Overcoming challenges to improving quality

*A summary of the lessons from the Health Foundation's
improvement programme evaluations and relevant literature*

Identify Innovate Demonstrate Encourage

Introduction

For nearly ten years, the Health Foundation has been working with the NHS to deliver improvement through service and staff development programmes. In this time there have been a number of successes and we would like to thank everyone involved for their effort and commitment. However, there have also been some areas where initiatives did not achieve the results that were hoped for, and we are learning from these experiences.



In a unique contribution to advancing the field of improvement, the Health Foundation has ensured that each of our improvement programmes is evaluated. We evaluate our programmes to provide sound evidence of their impact, and to better understand how it has been achieved.

In 2011, a team of researchers, led by Professor Dixon-Woods of the University of Leicester, undertook a synthesis of learning from 14 of the Health Foundation's improvement programme evaluations. The full report of their findings is published in *Overcoming challenges to improving quality: Lessons from the Health Foundation's improvement programme evaluations and relevant literature*.

The researchers found that a number of important issues emerged across the evaluation reports. While there are other ways in which the same material could be organised, in an effort to achieve clarity, the researchers organised their analysis into the following three broad themes.

1. Design and planning
2. Organisational and institutional contexts, professions and leadership
3. Sustainability, spread and unintended consequences

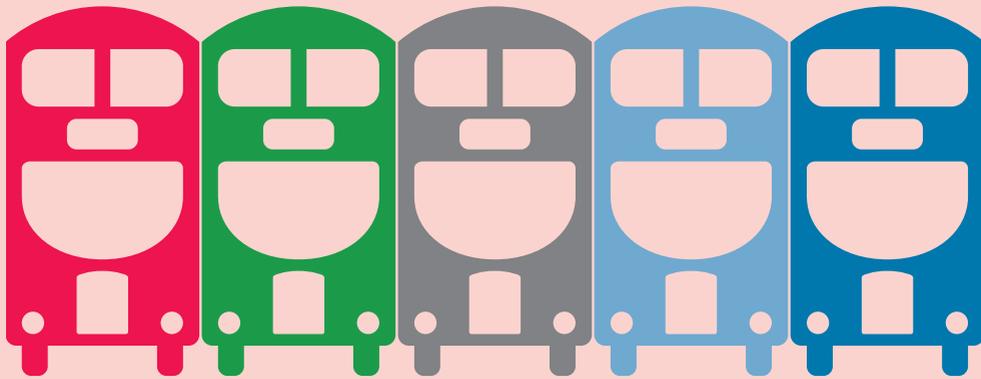
Within the three themes, the researchers identified 10 key challenges to improvement that consistently emerged in the programmes evaluated.

This Snapshot gives a brief overview of these challenges, and the researchers' suggestions for how to overcome them.

Theme 1

Design and planning

Rigorous design and planning of improvement interventions is crucial to their prospects of success.



Challenge 1:

Convincing people that there is a problem

Use hard data to demonstrate the extent of the problem and patient stories and voices to secure emotional engagement. Use peer-led debate and discussion.

Challenge 2:

Convincing people that the solution chosen is the right one

Come prepared with clear facts and figures, have convincing measures of impact, and be able to demonstrate the advantages of your solution. Involve respected senior figures.

Challenge 3:

Getting data collection and monitoring systems right

This always takes much more time and energy than anyone anticipates. It's worth investing heavily in data from the outset. External support may be required. Assess local systems, train people, and have quality assurance.

Challenge 4:

Excess ambitions and 'projectness'

Over-ambitious goals and too much talk of 'transformation' can alienate staff if they feel the change is impossible. Instead, match goals and ambitions to what is realistically achievable and focus on bringing everyone along with you. Avoid giving the impression that the improvement activity is unlikely to survive the time span of the project.

Theme 2

Organisational and institutional contexts, professions and leadership

Organisational and institutional contexts, including leadership and professional behaviour and culture, can have a profound impact on the prospects of improvement efforts. It is important to ensure that these enhance, rather than inhibit, improvement.

Challenge 5:

The organisational context, culture and capacities

Staff may not understand the full demands of improvement when they sign up, and team instability can be very disruptive. Explain requirements to people and then provide ongoing support. Make sure improvement goals are aligned with the wider goals of the organisation, so people don't feel pulled in too many directions. It is important that the organisational culture supports learning and development.

Challenge 6:

Tribalism and lack of staff engagement

Overcoming a perceived lack of ownership and professional or disciplinary boundaries can be very difficult. Clarify who owns the problem and solution, agree roles and responsibilities at the outset, work to common goals and use shared language. Intermediaries, such as training staff, are likely to have a role here. Protected staff time may help to secure engagement.

Challenge 7:

Leadership

Getting leadership for quality improvement right requires a delicate combination of setting out a vision and sensitivity to the views of others. 'Quieter' leadership, oriented towards inclusion, explanation and gentle persuasion, may be more effective. This may require additional training.

Challenge 8:

Balancing carrots and sticks – harnessing commitment through incentives and potential sanctions

Relying on the intrinsic motivations of staff for quality improvement can take you a long way, especially if 'carrots' in the form of incentives are provided – but they may not always be enough. It is important to have 'harder edges' (sticks) to encourage change, but these must be used judiciously and are likely to require the support of senior executives, professional bodies and those designing reward structures.

Theme 3

Sustainability, spread and unintended consequences

Sustainability and spread of improvement initiatives are key challenges. Improvement is vulnerable to an 'evaporation effect', particularly once projects have been completed.

Challenge 9:

Securing sustainability

Sustainability can be vulnerable when efforts are seen as 'projects' or when they rely on particular individuals. From an early stage, projects need to identify future funding sources, or identify ways to use resources more efficiently in order to sustain improvements. Successful outcomes should be written into standards, guidelines and procedures to ensure they are embedded in routine activities.

Challenge 10:

Considering the side effects of change

It's not uncommon to successfully target one issue but also cause new problems elsewhere. This can cause people to lose faith. Be vigilant about detecting unwanted consequences and be willing to learn and adapt.



Conclusion

Improving quality in healthcare is intrinsically a good thing to do. With the increasing demand and reduced resources currently facing healthcare, improvements in safety, effectiveness and patient experience are more important than ever.

However, as those actively involved in improvement work will know, bringing about the changes in behaviour and practice necessary to improve quality can be hard and slow. Despite the many successes of the programmes we have supported, teams have frequently encountered barriers to achieving their original goals.

By reviewing the evaluations of our improvement programmes, we have been able to identify some of the key challenges facing people doing improvement – and what has been shown to work, both in practice and in the wider literature, to overcome them.



This Snapshot gives a brief overview of these challenges. The full research report, *Overcoming challenges to improving quality: Lessons from the Health Foundation's improvement programme evaluations and relevant literature*, is available at www.health.org.uk/overcoming-challenges and is the recommended next step for anyone carrying out or leading improvement work.

Health Foundation evaluation reports reviewed

Safer Patients Initiative

- Safer Patients Initiative phase 1, February 2011
- Safer Patients Initiative phase 2, February 2011
- Learning report: Safer Patients Initiative, February 2011
- The journey to safety: a report of 24 NHS organisations undertaking the Safer Patients Initiative, unpublished

Leadership programmes (2008–11)

- What's leadership got to do with it?, January 2011
- Evaluation of the Shared Leadership for Change programme (Shared Leadership), June 2009

Leadership programmes (2003–08)

- A review of the Health Foundation's leadership programmes 2003–07, October 2008
- Leadership Fellows pilot scheme, September 2006
- Leaders for Change evaluation report, August 2006

Engaging with Quality Initiative

- How do you get clinicians involved in quality improvement?, August 2010
- An evaluation of the Health Foundation's Engaging with Quality Initiative, March 2009
- An evaluation of the Health Foundation's Engaging with Quality Initiative, October 2007

Engaging with Quality in Primary Care

- Engaging with Quality in Primary Care evaluation of the Leading Improvement Teams Programme, March 2011

Co-creating Health

- Co-creating Health evaluation, in press

The Health Foundation is an independent charity working to continuously improve the quality of healthcare in the UK.

We want the UK to have a healthcare system of the highest possible quality – safe, effective, person centred, timely, efficient and equitable.

We believe that in order to achieve this, health services need to continually improve the way they work. We are here to inspire and create the space for people to make lasting improvements to health services.

Working at every level of the system, we aim to develop the technical skills, leadership, capacity and knowledge, and build the will for change, to secure lasting improvements to healthcare.

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