QI Power Hour with

Dr. Amar Shah

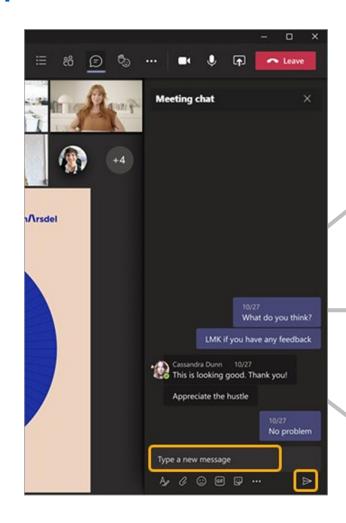
Creating Joy in Work





Land Acknowledgement

Chat Function





Share questions, comments, and ideas



Click on the **message bubble icon** to access the chat



Send to **Everyone**



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Humans Leading Humans: Human Centered Leadership is Making a

Speaker: Wendy Campbell & Katey Knott from Trillium Health Partners

Difference

What does it really take to create a culture of continuous improvement?

Speaker: Dr. Amar Shah















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FRIDAY, MAY 23

9 a.m. to 10 a.m. CST

With Dr. Coralie Darcis & Dr. Emmett Harrison



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Dr. Amar Shah



Dr. Amar Shah is Consultant forensic psychiatrist & Chief Quality Officer at East London NHS Foundation Trust where he has embedded a large-scale quality improvement infrastructure and quality management system. He is also the first National Clinical Director for Improvement at NHS England where he leads the application of improvement across England's health and care system, and the national improvement lead for mental health at the Royal College of Psychiatrists.

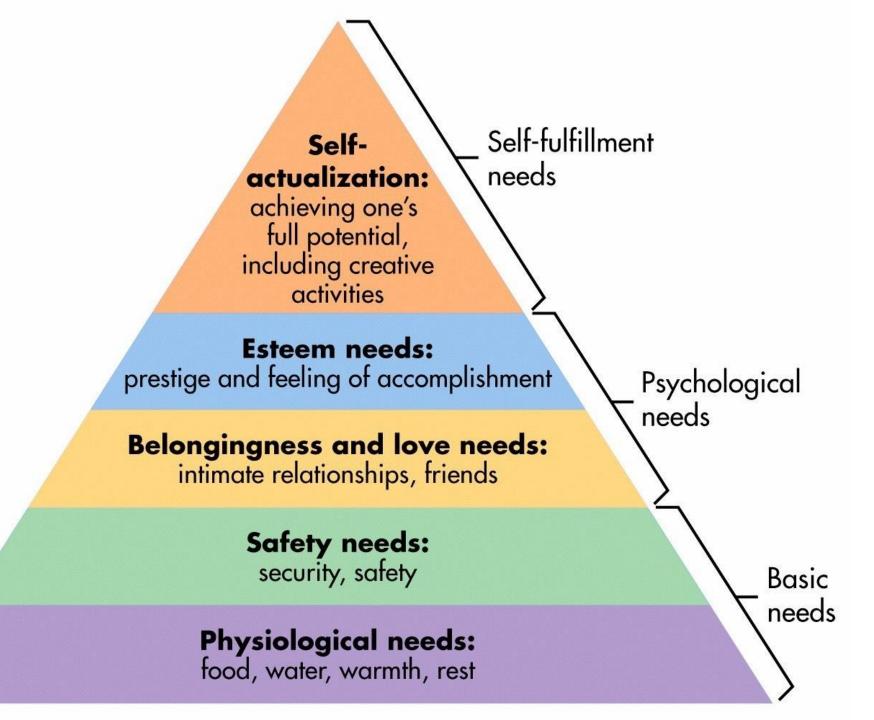
Amongst several other titles, Dr. Shah is a talented national and international keynote speaker at healthcare conferences and has published over 50 peer-reviewed articles in the field of quality management.

Joy in work

Prof Amar Shah

National clinical director for improvement, England
Chief Quality Officer, East London NHS FT
National improvement lead for mental health, Royal College of Psychiatrists





Frederick Herzberg's Two Factor Theory

Job Dissatisfaction

Job Satisfaction

Hygiene Factors

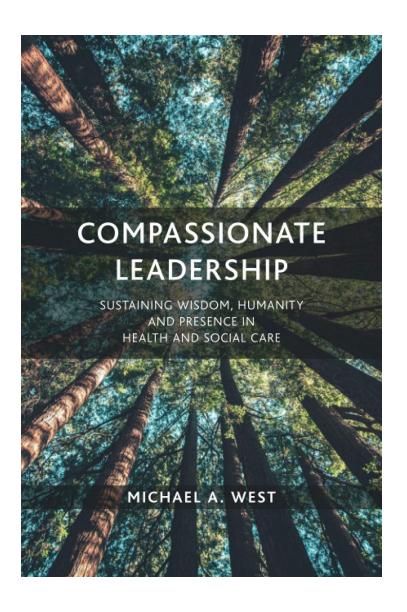
- Working conditions
- Coworker relations
 - Policies and rules
- Supervisor quality
- Base wage & salary

Status

Motivation Factors

- Achievement
- Recognition
- Responsibility
- Work itself
- Advancement
- Personal growth





Autonomy

The need to have control over one's work life, and to be able to act consistently with one's values

- Authority, empowerment and influence Influence over decisions about how care is structured and delivered, ways of working and organisational culture
- Justice and fairness Equity, psychological safety, positive diversity and universal inclusion
- Work conditions and working schedules
 Resources, time and a sense of the right and necessity to
 properly rest, and to work safely, flexibly and effectively

Belonging

The need to be connected to, cared for by, and caring of colleagues, and to feel valued, respected and supported

- Teamworking
 Effectively functioning teams with role clarity and shared objectives, one of which is team member wellbeing
- Culture and leadership
 Nurturing cultures and compassionate leadership enabling
 high-quality, continually improving and compassionate
 care and staff support

Contribution

The need to experience effectiveness in work and deliver valued outcomes

- Workload Work demand levels that enable the sustainable leadership and delivery of safe, compassionate care
- Management and supervision
 The support, professional reflection, mentorship and supervision to enable staff to thrive in their work
- Education, learning and development
 Flexible, high-quality development opportunities that
 promote continuing growth and development for all

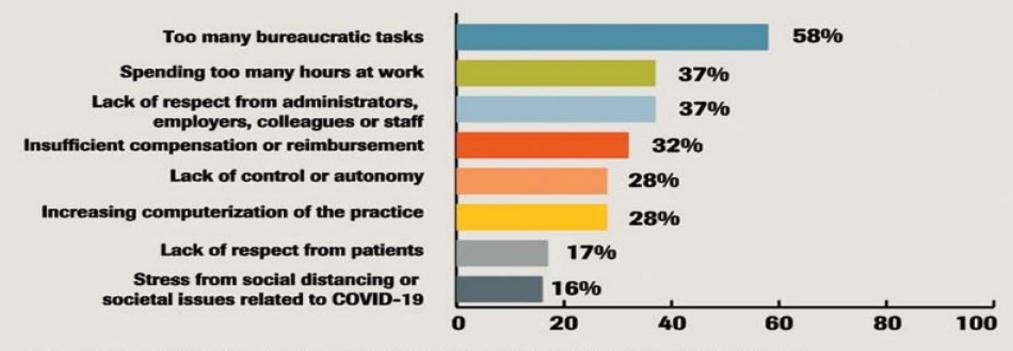
Critical Components for Ensuring a Joyful, Engaged Workforce Interlocking responsibilities at all levels



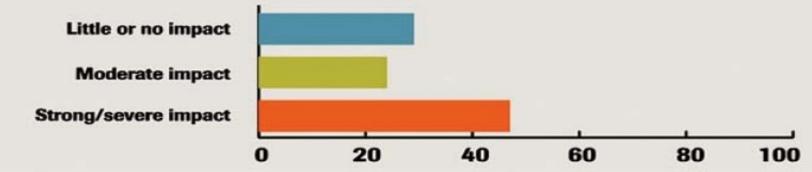


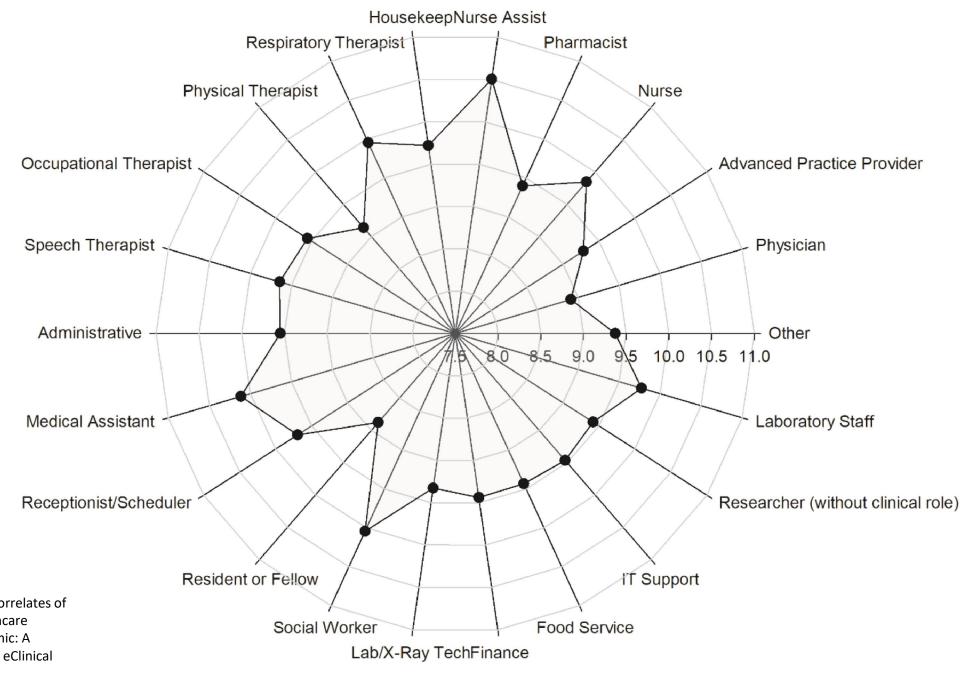
Doctor burnout

A survey this year of more than 12,000 physicians nationwide by Medscape, a website that provides continuing education for physicians and health professionals, identified what's causing physician burnout. Here's a look at what physicians answering the annual survey told Medscape most causes burnout:



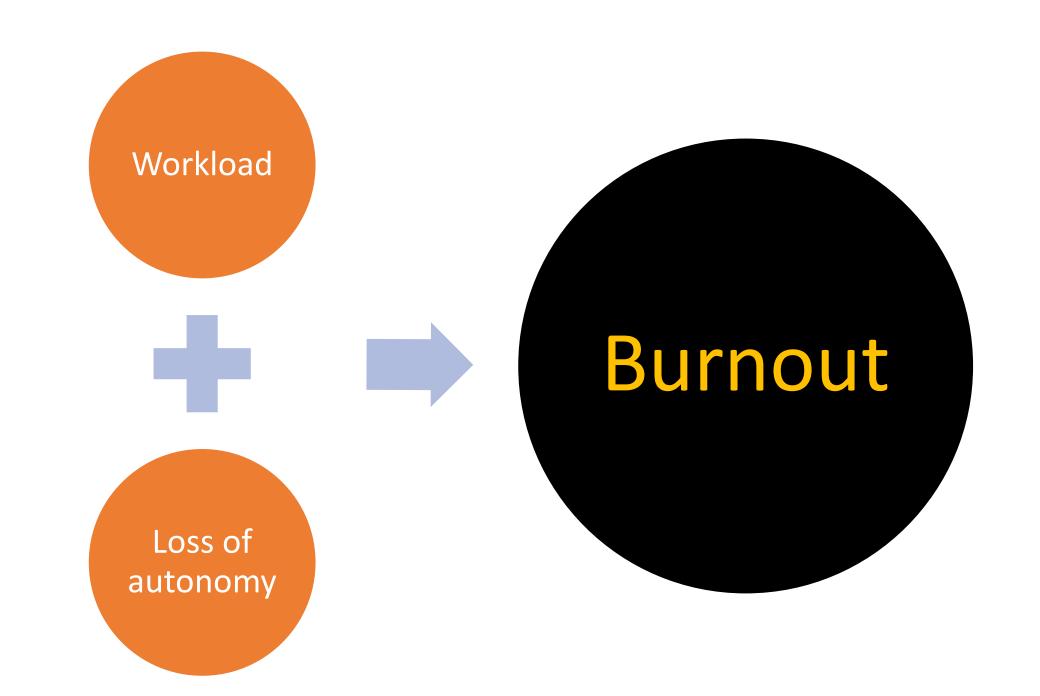
The Medscape survey also asked physicians to rate the severity of their burnout on their lives:





Prasad et al. (2021) Prevalence and correlates of stress and burnout among U.S. healthcare workers during the COVID-19 pandemic: A national cross-sectional survey study. eClinical Medicine, Vol 35 (1 May 2021)



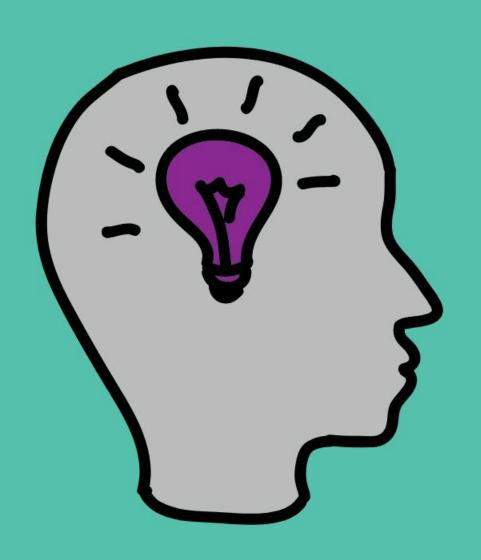




Sphere of Influence

Sphere of Control

2



Autonomy

Autonomy is our ability to make decisions and have a say in the direction of our lives.



Shared Purpose

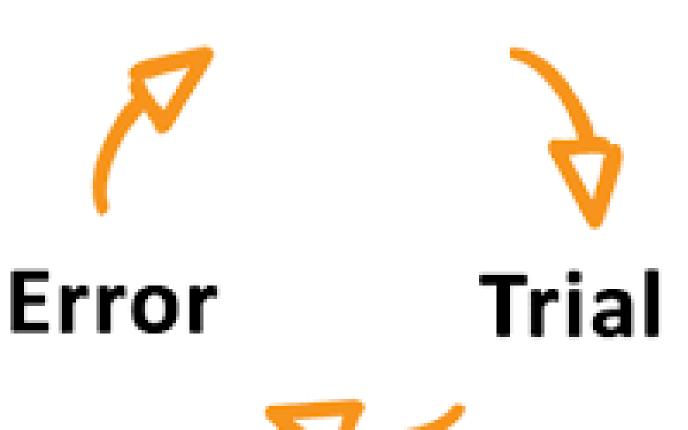
Co-production Co-design **Engagement** Consultation Informing **Educating** Coercion

Doing with
in an equal and
reciprocial partnership

Doing forengaging and
involving people

Doing to trying to fix people who are passive recipients of service

Learn













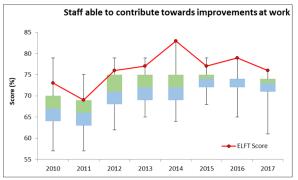


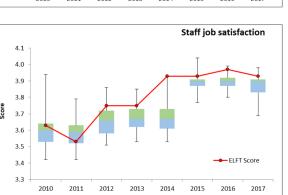
People participation

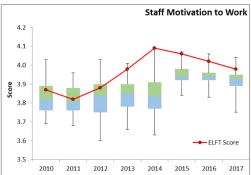


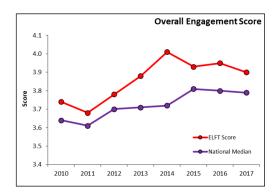












Prototyping... 2016-17

5 teams from different contexts

Co-designed the aim & theory of change

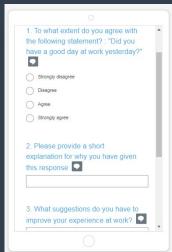
Tested different potential measures

Tested different data collection systems

Provided support from improvement advisor & sponsor









Aurelio M, Ballingall N, Chitewe A et al. Using quality improvement to deliver a systematic organisational approach to enjoying work in healthcare. British Journal of Healthcare Management. 2022. https://doi.org/10.12968/bjhc.2022.0072



Using quality improvement to deliver a systematic organisational approach to enjoying work in healthcare

Marco Aurelio Nicola Ballingall

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Abstract

Staff wellbeing is increasingly linked to good outcomes for service users in healthcare. Therefore, it is important for organisations to find ways to focus on wellbeing and staff experience at work. This article shares learning from 5 years of using the Institute for Healthcare Improvement's joy in work framework, coupled with quality improvement methods to enhance staff experience and wellbeing. This demonstrates how teams were brought together in a collaborative learning system to apply quality improvement to enhance joy in work. Key steps are shared for other organisations wanting to undertake this work, including the application of improvement methods to empower teams locally to develop, design and test change ideas, and measure their impact. The design of systems and structures required to meaningfully bring teams together and the type of leadership that enhances this work are also considered. Key learning points for other organisations include the need for improvement principles to iterate the organisational approach, make measurement simple, encourage a bias to action and make the work fun.

Key words: Healthcare; Learning organisation; Quality improvement; Staff wellbeing

Submitted: 24 May 2022; accepted following double-blind peer review: 1 August 2022

Introduction

Healthcare workers have higher rates of sickness, absence and burnout compared to other industries (Shanafelt et al, 2012). This can affect staff retention and turnover, which comes at financial cost, with increasing evidence highlighting the association between poor staff wellbeing and negative patient outcomes (Hall et al, 2016).

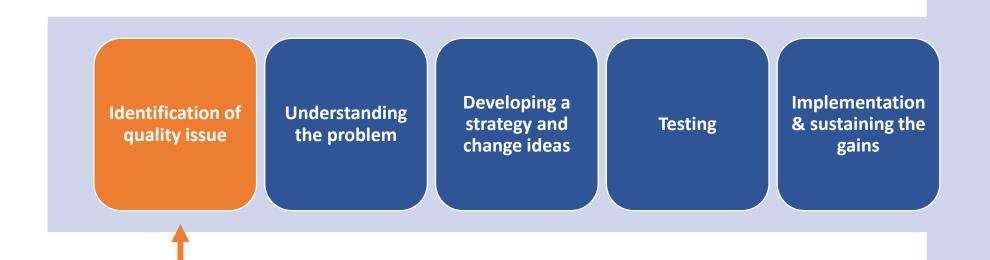
The Boorman (2009) review into NHS staff wellbeing called for a systematic approach to tackling this issue, including system-level and local interventions where staff have autonomy to develop and make changes. Quality improvement has been increasingly used in healthcare to facilitate this, providing a means of devolving autonomy to those closest to the issues at hand, to develop and test solutions for complex problems (Drew and Pandit, 2020).

The Institute for Healthcare Improvement's (IHI) joy in work framework provides an approach to tackling the complex issue of staff experience using quality improvement methods (Perlo et al, 2017). Drawing parallels with the earlier Boorman (2009) review, the joy in work framework proposes interventions at individual, team and system leadership levels (Perlo et al, 2017). The framework consists of nine components related to joy in work, and a series of steps, starting with asking the question 'What matters to you?' identifying the impediments to joy in work, adopting a systems approach and applying quality improvement to support teams to test and measure ideas in a systematic way (Figure 1).

East London NHS Foundation Trust (ELFT), which provides community health, mental health, primary care and specialist services to approximately 1.8 million people across Bedfordshire, Luton and East London, has been applying quality improvement across all areas of its operations since 2014, with support from the IHI. This has included large-scale quality improvement programmes on topics such as reducing violent incidents on inpatient mental health wards and improving access to services (Taylor-Watt et al., 2017; Shah et al., 2018). The intentional shift towards a quality improvement approach to solving problems, involving collaboration between staff and service users at the point of care, has led to an

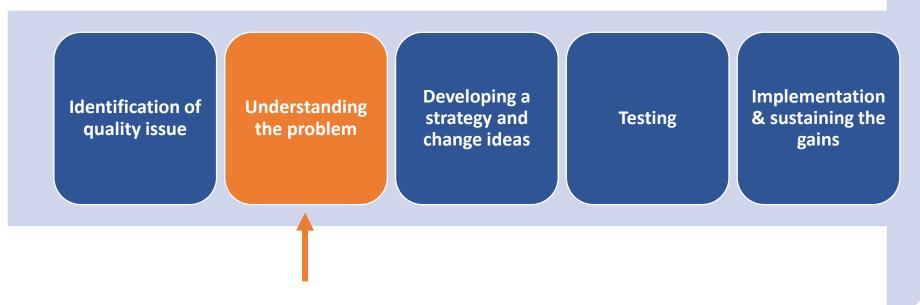
2022 MA Healthowelld

How to cite this article:



Commitment from team and leadership to participate

Teams volunteer to join the learning system



Appreciative inquiry to identify the strengths in the team.

"What makes a good day?
"What are the pebbles in your shoe?"

Baseline data collection to understand variation

HOW DO WE KNOW

keep it simple.







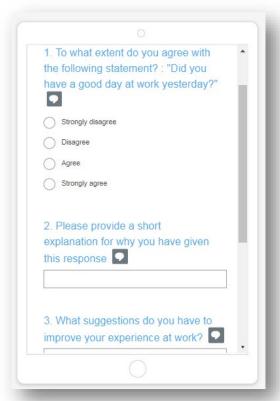


Measure it regularly

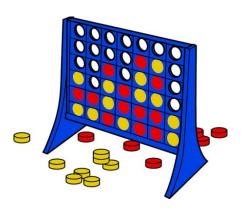
Share the data to spark conversation and curiosity

Take action – develop ideas, and test

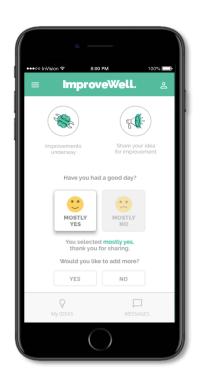














Tokens to be emptied each morning at 8am and recorded in the table for the day before

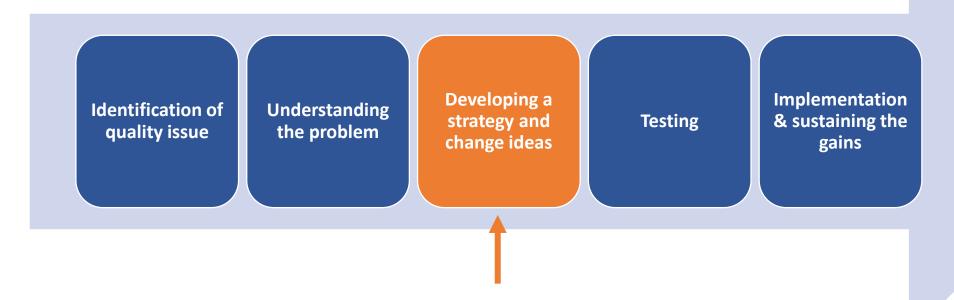
Day/date	Good day	Bad day	Total
Friday 25/1/2019	1		1
Monday 28/1/2019			
Tuesday 29/1/2019	3	1	4
Wednesday 30/1/2019		-	-
Thursday 31/1/2019			
Friday 1/2/2019	2	-	2

Day/date	Good day	Bad day	Total
Monday 4/2/2019	1	-	10001
Tuesday 5/2/2019	1		
Wednesday 6/2/2019	1		
Thursday 7/2/2019			-
Friday 8/2/2019			

2

QI Team - P Chart

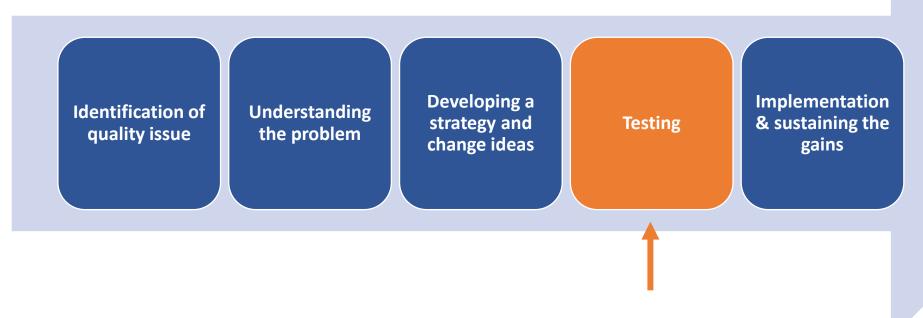
10 - 12/12/17 11 - 22/12/17



Team develops its own driver diagram, and generates its own change ideas

Joins the learning system to enable sharing and connection with other teams doing this work



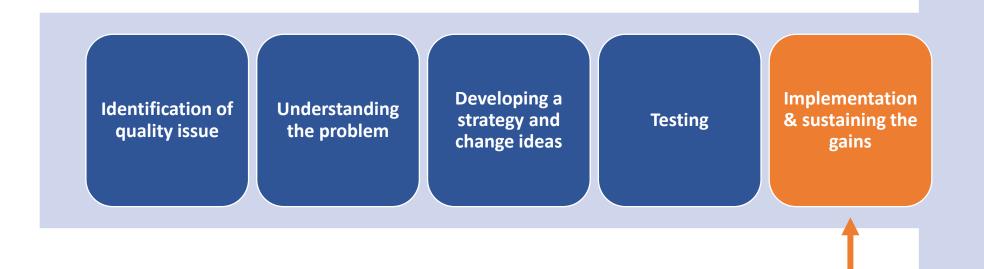


Using the Model for Improvement and PDSA cycles to test ideas.

Collecting data to see if they make a difference.

Making the work (data and changes) visible to all

Raise awareness again of survey in daily team huddles (06/07/2018) Run Chart: Zumba Attendance (weekly) Testing new Improve Well App for data collection Raise awareness of survey in New Kanban board with daily team huddles (5th Monthly Pareto charts of Good February, 2017) - ended after day and bad day themes and 1 week by project lead biweekly data Sharing out data collection Implementation risk and analysis responsibility Using Kanban Board to illustrate identified when key with trainees Psychologist change ideas/tasks completed, initiator is away (9/01/2017) planned, in progress. Team agreed to implement Zumba as Dual word cloud for each response Central Data Display Board standard weekly type following comments from team updated weekly (05/12/2017) fixture around confusing use of wordcloud. (5th December, 2017) Planned: review 9th Using online data collection March with Single word cloud displayed for following concerns raised by attendees through all responses (1st December team around anonymity feedback form (task) 2017) (27/10/2017) Friday Zumba Collect Qualitative data classes (19th around good day/bad day Token drop system January) contributing factors September 2017 (October 2017) 2) Promote communication PDSA 1: Develop 3) Build camaraderie and ownership of project reliable data and teamwork (2nd data/Increase response s (2nd collection system Driver) Driver)



New ideas that have been shown to work embedded into routine practice

Implementation steps using PDSA

Create visual management system and control system

YOU SAID / WE DID

26 July



- * Fons in all looms
 Fons have been ordered and
 should be with us soon
- y You asked for the Monagos to sign in each morning
 - They of do this now
- * The keys on the teyboard in lm1 foded we pot a new beyboard in Rm1
- * Need comfy Itherapy chairs in Room 101.

 we put x2 bucker chairs in Room 101
- * New head.sets
 These were ordered and feelige history
- * New 2nd screens in Admin - X3 were supplied
- A WHITEBOARD PENS IN THE THERAPY LOOMS
 - we corried out an Bodt on all rooms and new pens and board lubbers were put into the rooms that needed them ad more ordered for back-ur

* more comfortable / better work chais

Derek has made available new chairs in Room 205.
He has also carried out an assessment of the chairs on the ground from and will make changes where needed — Thanks Derek!)

* You asked for a "Chill out"

Room 102 is now available to Lws staff only to chill out

15 Aug

YOU SAID / WE DID

18 Oct



- * You asked for the "Chill out" room to be left open.
 - the morning and Admin will lock @ the end of the day
- * New board robbers in all rooms
- * Take excess firmiture from Room 105 Dorek has done this and added theopy chais
- & x2 bucker chairs in Room 103
- # floom 101 take out excess
 funitue Delek has done this
- + +3 new phones 1- Nabile, 1- Room 103 + 1- Room 207
- * fons in all Rooms + besis



To enhance staff wellbeing and create joy in work



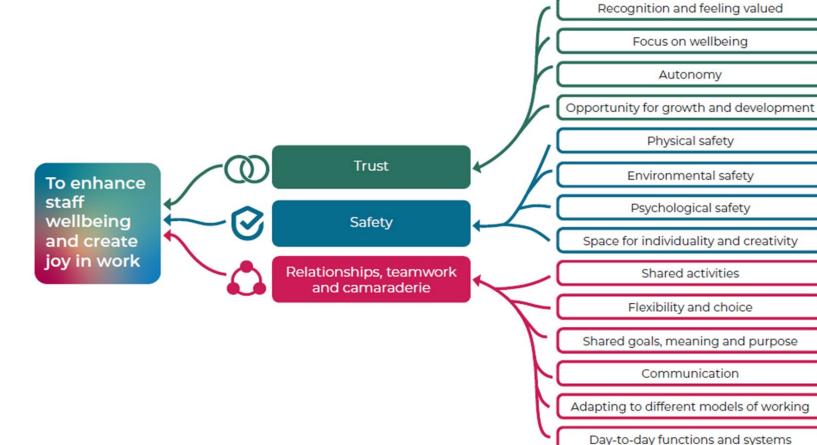
Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?











Outcome measures

Collected weekly

- ► Joy in work
- Burnout
- Recommending team as a place to work

Staff were also asked to complete two validated surveys at the start and end of the programme to measure staff burnout (Mini Z survey) and staff engagement (Gallup's Q12 survey)



In the	past week at work, h	ow often have	you enjoyed	being at wo	rk? Please	select one
of the	following*					

- O Not at all
- O Hardly at all
- O A few times
- O Fairly often
- Frequently

Feelings of burnout

Using your own definition of "burnout", please select one of the options below*

- O I enjoy my work. I have no symptoms of burnout
- I am under stress, and don't always have as much energy as I did, but I don't feel burned out
- O I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion
- The symptoms of burnout that I am experiencing won't go away. I think about work frustrations a lot
- O I feel completely burned out. I am at the point where I may need to seek help

Recommending as a place to work

How likely are you to recommend your team as a place to work? Please select one of the following*

- O (not at all likely)
- 0 1
- 0 2
- 0 3
- 0 4
- 0
- 07
- 0 8
- 0 9
- O 10 (extremely likely)



MENTAL HEALTH





How we worked with teams



Appreciative inquiry session to explore what matters to the staff and the team, and what contributes to good days at work

Nominal group technique to generate and select change ideas to test

Fortnightly project team meetings to support teams with their PDSAs and data collection

Bi-monthly learning sets, bringing teams together to share learning







Change ideas



Approximately 145 ideas tested Common themes:



Sharing appreciation e.g. positive feedback box; thank you boards



Making wellbeing business as usual e.g. discuss concerns in team meetings



Time and space for reflection e.g. introducing reflective practice



Increasing connections within the team e.g. coffee roulettes; in person away days



Protected time to focus on wellbeing e.g. weekly wellbeing hour



Changing ways of working e.g. improving handover; communication tools



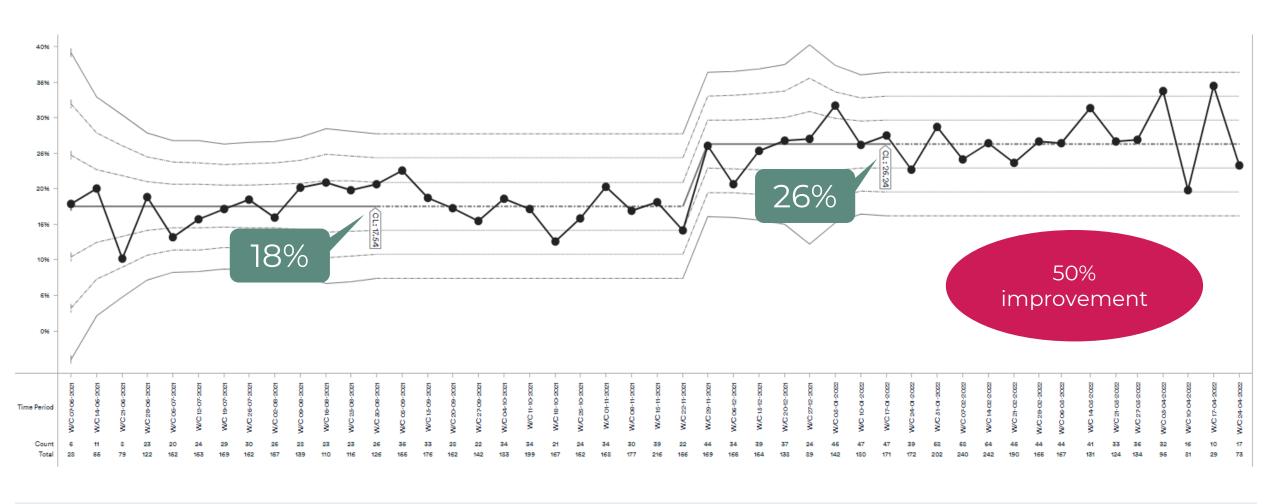




Enjoying work



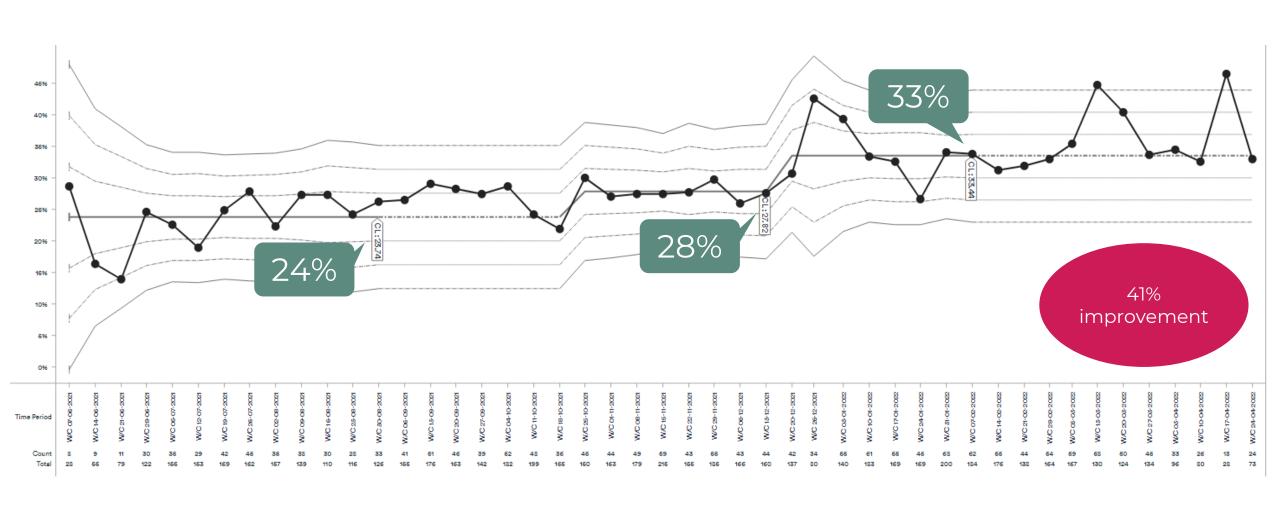
% people who have enjoyed being at work frequently



Feelings of burnout



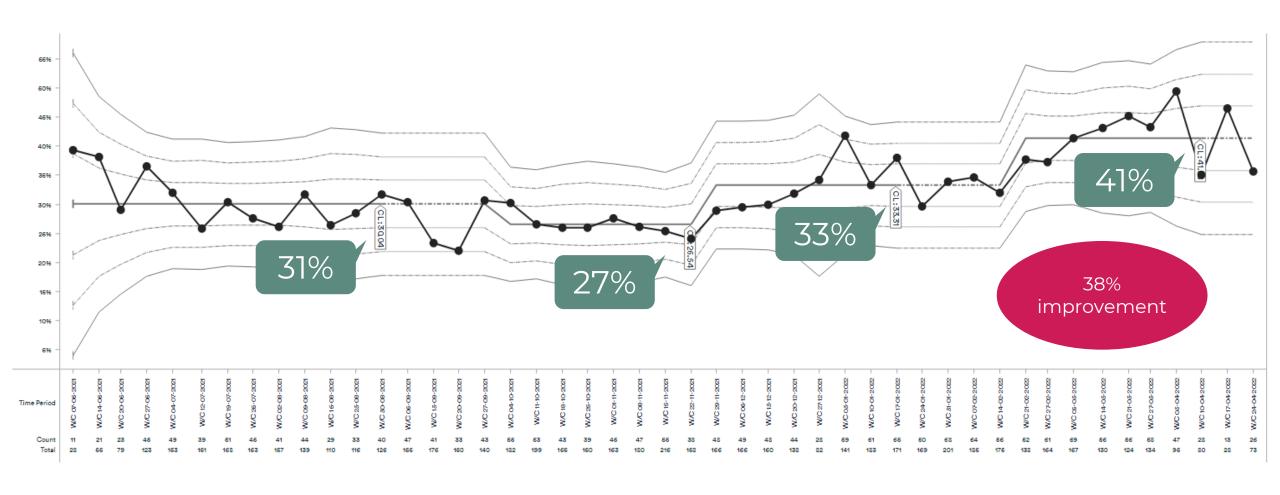
% people who experience no symptoms of burnout



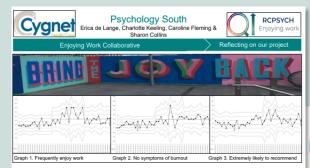
Recommending team as a place to work



% people who are **extremely likely** to recommend their team as a place to work (9 or 10 out of 10)



Teams' stories



During the Enjoying Work Collaborative we tested six change Change idea 1: Face to face meetings for better relationships. connectivity and understanding of roles Change idea 2: Physical movement increased well-being, joy,

creativity and reduction of stress

Change idea 3: Improve Well App response rate improved by

Change idea 4: Informal chat forum improved relationships

Change idea 5: Attending conferences to present, a team won an award for best poster at conference

Change idea 6: Visiting at sites improved connectivity sharing

ur reflections on taking part in the project

We have the best ideas when we get together and this has been noticed by the senior team. The team performance has significantly increased and this is noted in governance and heads of department meetings. This has increased our clinical effectiveness in the hospital sites. Other teams have noticed the changes and have mirrored by creating similar changes. The level of comfort to take part in a project or start something

new, knowing the team will support the project, awareness of the presence of the team support is valued. As a regional team there was a real commitment to developing QI ideas across different sites in the broader London & South region.
The focus on well-being has enhanced our team cohesion. We can ask questions, this strengthens relationships and quality

We have seen significant changes in all three measures of data as seen in the three graphs above. Measure one changed from a mean of 20% to 46 58% (26 58% increase) equently enjoy being at work, measure two from 13.33% to 38.17% (24.84% increase) no symptoms and measure three from 34.67% to 57.58% (22.91% increase) extremely likely to recommend the team as a place to work. The team feels cknowledged and happy and they are able to maintain a halanced work-life approach as professionals. The team members were able to express their need for support and fel safe to be open regarding their feelings. We saw an increased awareness of wellbeing and the culture is more onen and supportive. Increased connectivity in the team and husiasm to get together, this is rewarding for the team.

Some of our challenges included changing the time of our biweekly meeting upon the request of team members in the region who could not attend, although this did not necessarily improve attendance numbers, it did improve regular attendance of core team members. New starters to the team needed to receive induction into the QI project and orientation to the Improve Well App. These were provided on a one to one basis. The large geographical area of the regional team was a challenge and zoom was used to overcome this.

Our advice to other teams would be: Small changes can make a BIG difference. Talk about QI, make it part of your discussions, this creates a presence and a culture shift. Go

The change ideas have been implemented within the London & South regional Psychology team and have generalised into the site teams. Example of Friday team meetings where the site team comes together for informal lunch. Conferences are planned for attendance during the coming year extending the change for the future, regional teams are meeting together and visiting a sites, the informal chat forum is implemented regionally and continues to support team members and to build relationships. QI projects are being launched at local sites and reviewed on a quarterly basis. Monthly discussions are taking place in team meetings regarding QI and wellbeing and there is a good sense of looking after ourselves and each other.

There is training available on QI and QI coaches to support future projects. Cygnet has launched a QI hub on the Cygnet webpage, there is a QI newsletter and a QI conference to look forward to. Thank you to our coach and the EWC.

Corporate Communications Health Education England Caroline Higgs, Belle Yeung, Charlotte Evans, Matthew Gray



Enjoying Work Collaborative

Reflecting on our project



- Meeting agendas: We trialled using question based agendas to help us be more productive and stay on task. We found this a great way of ensuring we didn't get side-tracked
- Reflection hour: Everyone was encouraged to use a reflection hour at any point in their week which they could use for some desktop study, watching a webinar, catching up on training or just allowing a little buffer between meetings. Not everyone managed to do this every week, but it was a handy option to use as required.
- One primary communications method: We tried out using MS Teams instead of email as our primary channel for ommunicating. We discovered this did not work for everyone in the team and we now employ a mixed approach. Fast 15 catch ups: Our Internal Communications team has adopted a daily 15 min call, which is a mixture of work and wellbeing
- Shorter meetings: We've trialled, and pretty much adopted, 20 or 50 minute meetings (instead of 30/60 mins) to allow for
- comfort breaks and cups of tea on those really busy days. Themed dress days: We trialled having our last full team meeting of the month as a themed dress event.
- Future ideas: We've got a list of future things to test out which we asked everyone to vote on, ranging from walking meetings to support barometers for those in need of a bit of TLC.

ne of the great things about this project has been us as a eam focusing on our needs, rather than how we are pporting the rest of the organisation.

Ve've talked more together and individually, we've shared deas, we've spoken candidly about our issues, we've had the support of managers...we are in a really good position (and have a list to work from!) to carry on making those small changes to help us all enjoy work that little bit more.

We've learnt that we all work a hit differently within our sub-teams and that one size won't always fit all. We are now a bit more mindful that not everyone will be able, or

One of our biggest challenges was balancing how busy we are with devoting time to this project.

We've embedded some of our ideas into how we work now, found others were nice to try but didn't really work for

We all feel confident that anyone, at any time, can say "hey, how about we try doing this?" and just give it a go, It's been a great start to what we all hope will continue to be us making the effort to make small changes to help us enjoy work a bit more. Thank you for letting us be involved.





Ward name

IPU 11-17 North Warwickshire recovery email.

Cleo Maynard and Helen Owen

Share your story

Which change ideas did you test and what did you learn from them?

- Step challenge

The team have been more mindful to take more regular breaks from their desk. We recognise trying to change people's mindsets have been difficult due to workload pressures. The majority of people have said they saw the purpose of the step challenge. Some people can see how it works for others, but it just didn't work for them. There were different reasons for people joining, for some it was for the challenge and the prize and for others it was mindfulness of taking breaks, it wasn't just about getting the steps in.

We learnt the importance of wellbeing and how it can contribute in enabling the team to be more productive. It helped to create and tighten the camaraderie within the team. Which was highly important with the stress of the last 2 years during the pandemic.

- Improving assessment rota so staff can effectively take annual leave

Staff were reporting that they find it stressful to take annual leave because the responsibility of getting their mental health assessments covered was

We were met with barriers for this change due to how rigid the process was and management not allowing cancellations for assessments.

We required input from our senior sponsor who supported us to prepare an have meetings with our general managers.

We prepared by gathering all the views of the staff who complete assessments and came up with solutions to resolve the issue.

Quality Team - HEE Wessex

RCPSYCH Caroline Lee, Juliet Borwell, Nikkie Marks and Sarah Lang Reflecting on our project

Fab Five Minutes!

Enjoying Work Collaborative

Monday Huddle

This project has encouraged us to reconnect with what brings us joy, meaning and purpose in our work, and not focus entirely on productivity.

Reflection - we have found it challenging to put reflection in place. Supervising a student on placement prompted some reflection, but we also explored individual reflection. which can't be timetabled. Monday huddles prompt reflection, we also naturally think about the week at the end of the week. Regular touchpoints together are important. If one person wants to discuss something, we can ask each other, when it's needed. We scheduled time together after updates on HEE Transition, and will continue to do this: it will become more useful as more information

Team meeting huddle - quadrant for meeting has been helpful, focus and visual prompt without an agenda. Discussing Little Wins has been positive, helps us notice the small positives that might not have been noticed

Fab five minutes - setting meetings automatically for 25 mins instead of half an hour and using the 5 minutes in between productively. Activities included DIY, talking to the dog, doing the washing, standing up, dancing, looking out of the window (good for our eyes)... MS Teams reminding us when there's 5 mins remaining really helps, and now it sets all meetings scheduled to allow the breaks.

The increased awareness of jobs well done and improved recognition via the little wins quadrant from our Monday huddle and during Thursday team lunches has helped create a notitive and more contented work environment

It's been useful, often too busy to think about the team's wellbeing, there's no lull in the year anymore. Welcomed the chance to think about how we work, rather than focus on the content. Interesting to compare the differences with other organisations. Other HEE teams have been interested in the Huddle quadrants, and the team Thursday lunches.

"We are human beings, not human doings" - we don't do joy, we be joyful. This project has encouraged us to reconnect with what brings us joy, meaning and purpose in our work, and not focus entirely on productivity.

"Being happy in life isn't having what you want, it's wanting what you have."

It's been challenging to make time for the project when the team are stretched and short of a person

The structure of the academic year, holiday times, family ommitments, challenges of working from home as working mothers (which has positives too) - the productivity can't be sacrificed, but focusing on our joy in work has sometimes had to be sacrificed.

The biggest challenge has been keeping momentum perseverance is key

We want to continue the Monday Huddle, and might revisit the quadrants in future as part of continues improvement.

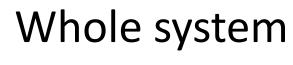
We want to continue the Fab Five minutes, and IT is set up to continue this. In the Summer we can go outside for 5 minutes!

Key learning...

It is possible to apply the systematic method of QI to joy in work

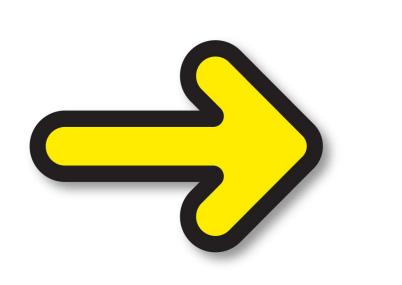
Measurement is a challenge

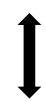
Importance of the whole team being part of the work





Organisation





Team



Individual

Key learning...

It is possible to apply the systematic method of QI to joy in work

Measurement is a challenge

Importance of the whole team being part of the work

Role of leaders is even more critical (and exposed) The change ideas are highly localised, but the process is scalable

Dunstable CAMHS Enjoyment at Work 2020



The start..





Appreciative Enquiry

Measurements

The results



Birthday Celebrations



Bulb Planting



Dancing



Walk



Well-being Corner



Indoor plants



Yoga



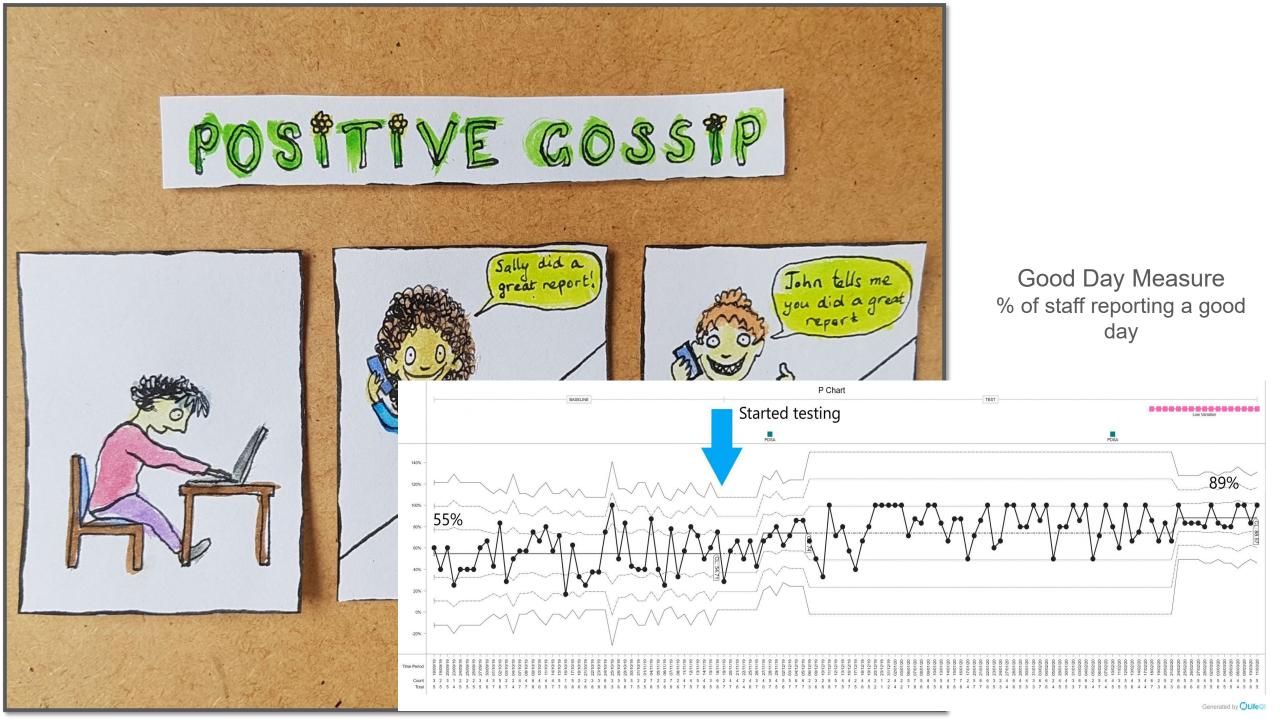
Weekly Team Tea



Dog at work



Craft Session



Key learning...

It is possible to apply the systematic method of QI to joy in work

Measurement is a challenge

Importance of the whole team being part of the work

Role of leaders is even more critical (and exposed) The change ideas are highly localised, but the process is scalable

Doing this type of work entirely virtually is less joyful



With Thanks





