

Kidney Quality Improvement Partnership (KQuIP) #KQuIPYH

Quality Improvement

Training Day Two – Sharing and Learning

14th August 2019



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Housekeeping and survival



**Fire alarms
and exits...**



Car Park ...



Toilet location...



Mobiles



Breaks...



Photos...

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Welcome

**Julia McCarthy, Regional Lead
(for today)**



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Today's aims and objectives

- **Informal sharing and learning**
- **Cross pollination of knowledge and improvement ideas**
- **Applying the proposed QI tools to the project MAGIC**

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KQIP Update

Ron Cullen, KQIP CEO

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Process Maps



Process maps - instructions

- **Has any one attended a poster session during a conference?**
- **One key person stands and presents their process map to others**
- **Lets get moving around the room.**
- **Try and get to see as many process maps as you can**
- **Your opportunity to ask questions and explore possibilities**

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Baseline data – next steps

**Leeanne Lockley, KQuIP
Programme Manager**

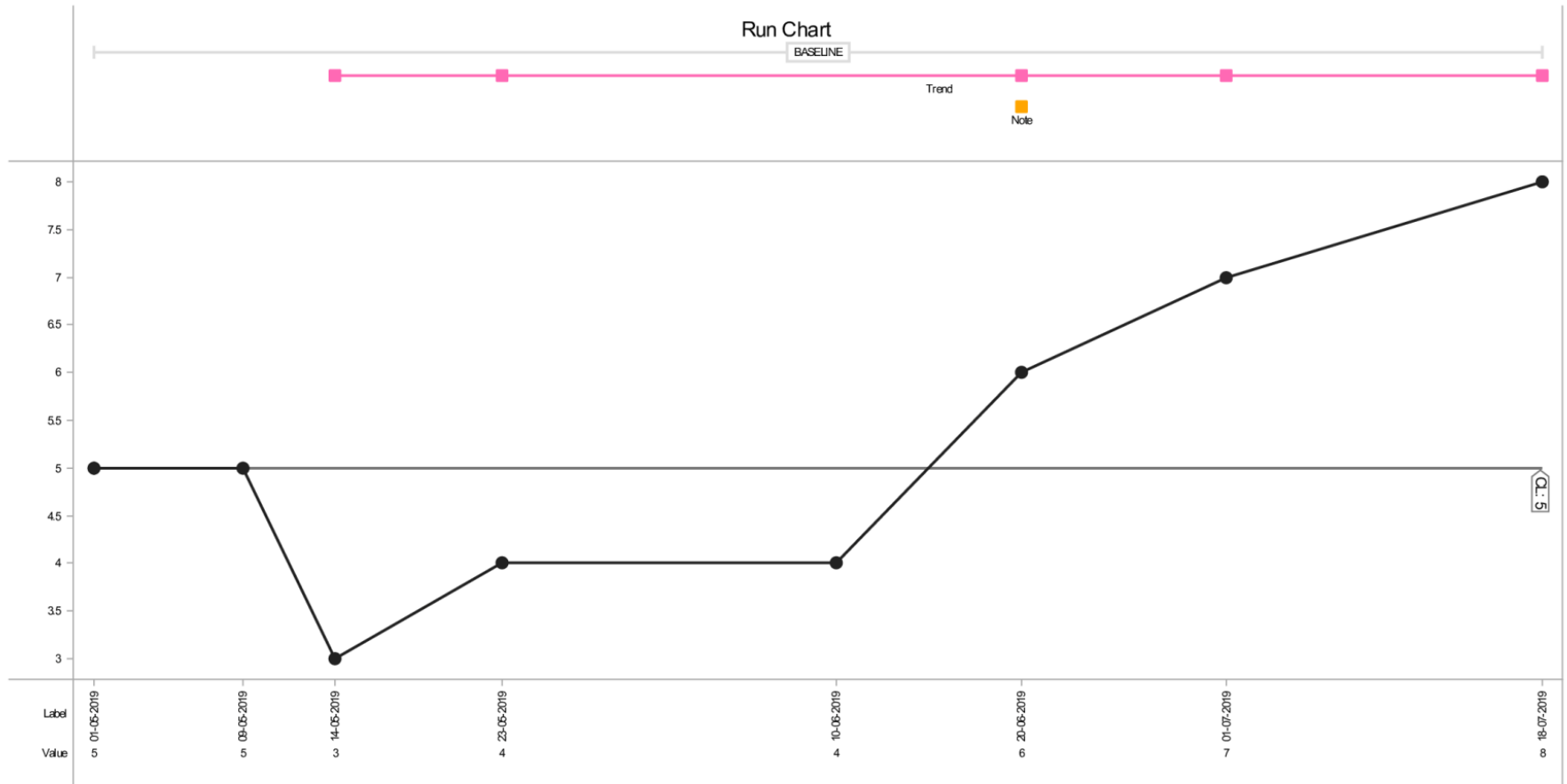


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Open discussion

- **How easy is it to collect the data and input into Life QI?**
- **What do you do with your data once you've entered it into Life QI?**

Example of Improvement on Life QI



Generated by LifeQI

‘THINK
KIDNEYS’

MAGIC AIMS to ...

Improve AVF and AVG rates through preserving live span of existing AVF/ AVG

- Missed cannulation (weekly)
- Ropeladder/ Buttonhole use (weekly)
- AV access use (monthly)
- Lost AVF/ AVG (monthly)
- New AVF/ AVG (monthly)
- Infections (monthly)

Improve patient experience of needling

- PREM score for needling (weekly)

Mean PREM Score for Needling

Operational definition:

Patients are asked about their needling experience, using the PREM needling question:

‘How often do the renal team insert your needles with as little pain as possible?’.

Patient rate this on a score of 1 to 7.

1 means they ‘Never’ make an effort to insert needles with as little pain as possible, 7 means they ‘Always’ make an effort to insert needles with as little pain as possible

The scores are then collated into a mean.



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Revisiting Driver Diagrams

**Leeanne Lockley, KQuIP QI
Programme Manager**



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Driver Diagrams

The Kings Fund describe a driver diagram as a “Visual model that highlights all the factors that influence the patient’s experience, to enable you to structure your thinking about how to affect the experience. It helps you to identify existing improvement initiatives that could influence the experience, and to select current and future priorities for action.”

A driver diagram illustrates a “theory of change” that can be used to plan improvement activities.

A visual display of a team’s theory of what drives or contributes to achievement of a project aim

Translates a high level goal into a logical set of related goals and sub-projects

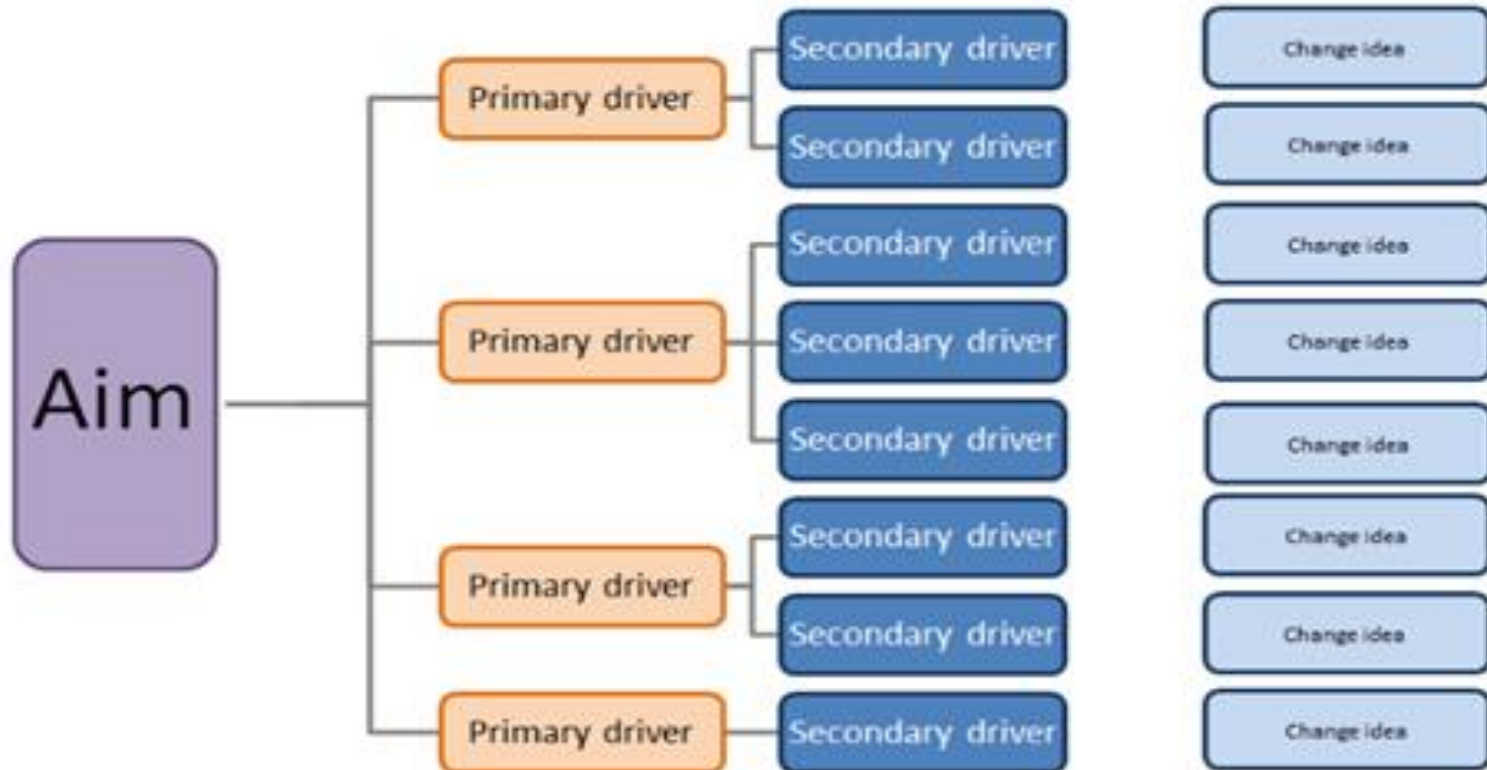
Driver Diagram Template

AIM

PRIMARY DRIVERS

SECONDARY DRIVERS

CHANGE IDEAS



What is it?

An aim statement is documentation of what you want to achieve from your project.

How to develop an AIM statement?

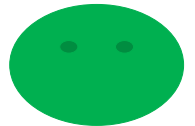
- Is it SMART? Specific; Measurable; Achievable; Relevant; Time bound
- Define your population and scope
- Don't include solutions in your statement
- Be fluid with your AIM as it can change over time

Driver Diagram – AIM Examples

We aim to reduce harm and improve patient safety for all of our internal and external customers



By June 2020, we will reduce the incidence of pressure ulcers in the critical care unit by 50%



To promote good cannulation practice and improve the patient experience of cannulation



95% of all CKD5 patients will have a documented transplant decision by March 2020



Driver Diagram

Primary Driver – The HOW

- Big topic areas
- Key areas of the system that you need to influence within your project

Secondary Driver – The WHAT

- What needs to be in place to positively influence primary driver
- Help to identify change ideas

Change ideas – The DO

- What you and the team are going to do, test and measure

Driver Diagram - your turn

For the next 40 mins work on your driver diagram

Think about the:

- **AIM** – is it Specific, Measureable, Achievable, Relevant, Time bound
- **The PRIMARY DRIVERS (the HOW)** needed to achieve your aim?
- **The SECONDARY DRIVERS (the WHAT)** that will achieve the primary drivers?
- **What IDEAS** do you have to make the aim reality?

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Identifying where to start

**Ranjit Klare, KQuIP Programme
Manager**



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Date for the diary

QI Training Day 3 – 11th December

- **Sharing and Learning**
- **How to maintain momentum**
- **Measurement**

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Fishbone Diagram

**Ranjit Klare, Quality Improvement
Programme Manager**

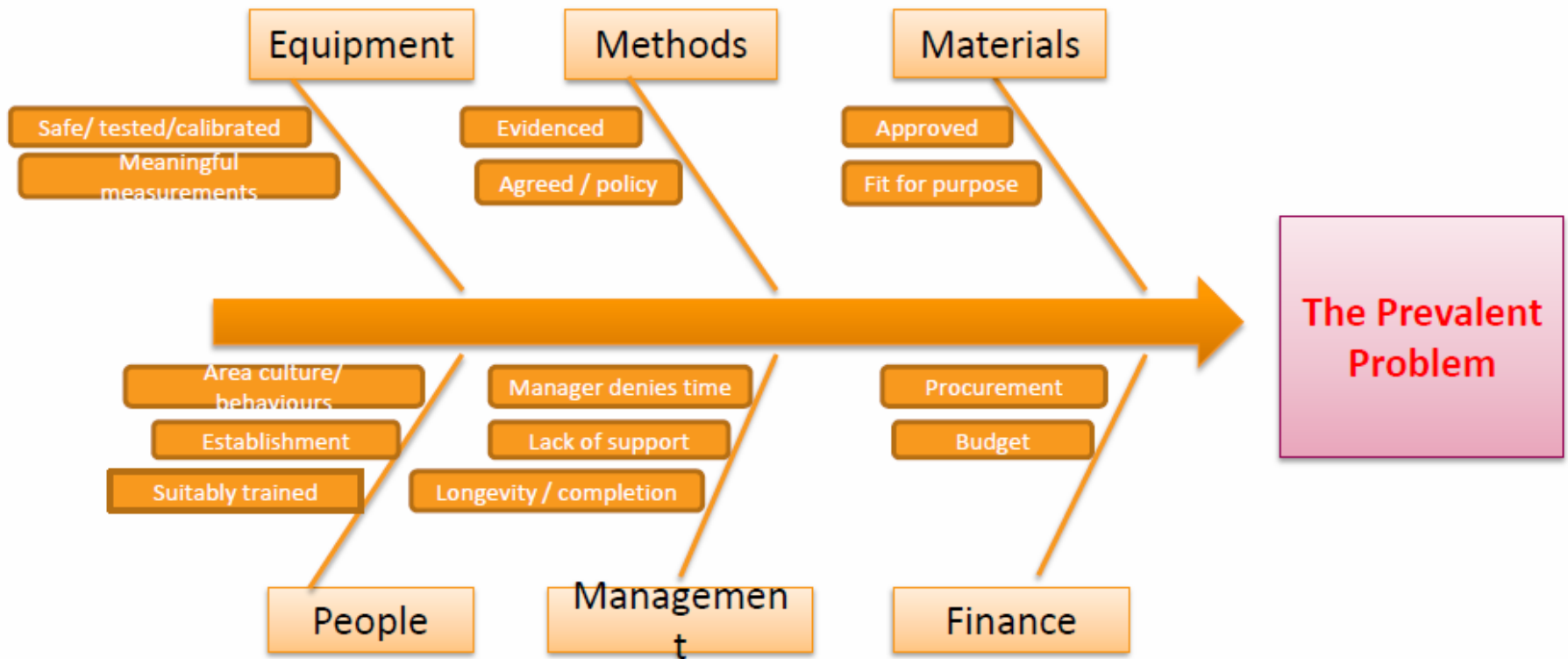


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What is the Fishbone Diagram & Why do we use it?

- It is a tool/visual diagram to review the cause and effect of any problem we need to resolve
- Look at the problem
- Look at the possible causes
- Generate ideas into categories to consider an outcome
- It is a Root Cause analysis of the problem

An example – How to develop your own fishbone diagram



Tips

- Engage you team to agree the problem statement, include as much information as possible in the “what” “when” “where” and “how much” of the problem. Use date to specify the problem if possible.
- Aim to construct the diagram with the people involved in the project.
- You can use the cause and effect diagram as a working document that is updated as and when you collect more data, or to test possible solutions.
- Produce your diagram on paper so that it can be transported.
- Ideally, causes should appear in only one category although some causes may overlap.

Team exercise – Create your own fishbone

- Start with the problem
- Choose a category for each bone e.g. People
- Choose sub-categories e.g. ideas/possible causes
- Discuss why these problems occur
- You can add and remove problems as you dig deep into them to determine their probability.
- Focus on the problem not the symptoms of the problem

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Thank you for listening



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5WHY's?????

Julia McCarthy



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PDSA Cycles

**Leeanne Lockley, KQuIP
Programme Manager**



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Fundamental rule

All improvement will require change,
but not all change will result in improvement
Therefore we need to 'test' change
It is more efficient to 'test' change in small scale rapidly

[PDSA Video](#)

PDSA on Life QI

Managing Access by Generating Improvements in Cannulation - MAGIC in Yorks and Humber

Only members can view

General

Driver diagram

Measures & charts

Pdsas

Discuss

Actions ↓

Pdsa ramps

New pdsa ramp +

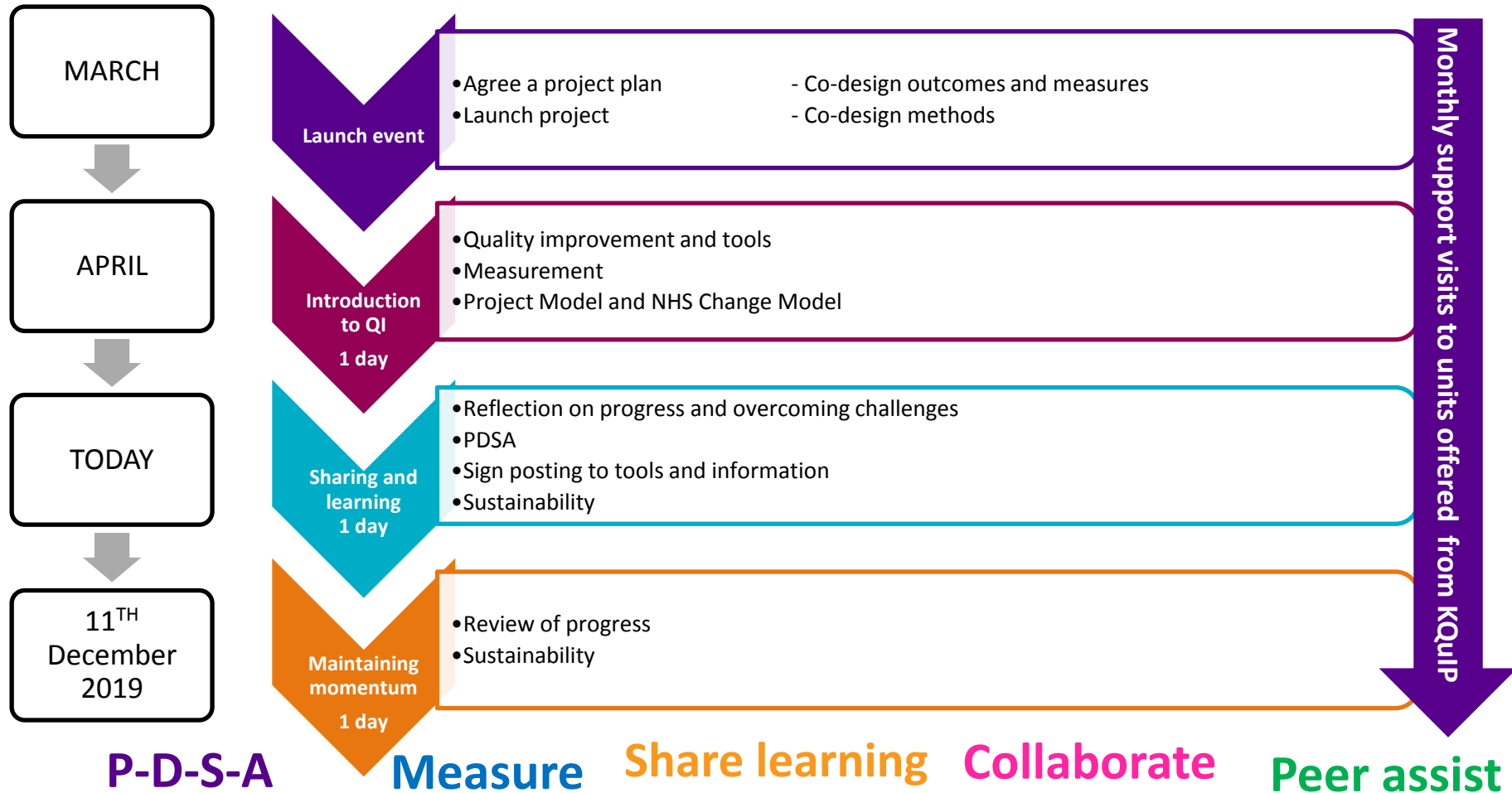
- Supports shared learning
- Allows links to driver diagram and measures
- Supports with extracting reports

For the next 50 mins plan your PDSA cycle.

Think about:

- **The aim of the cycle**
- **Predict what you want to see happen**
- **Who will collect the data**
- **Who will lead and be responsible**
- **When will it happen and how long will the test take?**
- **What tasks do we need to do**

Project phase





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**Thank you for coming today
Travel safe**



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