



Demand, Capacity & Flow QI Collaborative

Launch Event

27 January 2023



Demand, Capacity & *Flow*
Quality Improvement Collaborative



NATIONAL
COLLABORATING
CENTRE FOR
MENTAL HEALTH



Twitter

- We will be live tweeting this event so you may see the QI coaches on their phones during some sessions. Please also find and follow us **@NCCMentalHealth** or search for **#DCFQI**.
- We encourage use of Twitter and social media to share the work that you are doing throughout the collaborative.
- However, we kindly ask you not to tweet people's names, photographs of people's faces or their talks without their permission.

Thank you!

Agenda

Time	Item	Speaker
11:10 – 11:25	Icebreaker	
11.25 – 11.55	Demand, capacity and flow through a patient, family, and equality lens	Sarah Markham and Ben, Patient/ Carer Representatives
11.55 – 12.55	Understanding demand and capacity, and why it is important to optimize patient flow	Amar Shah, National Improvement Lead
12:55 – 13:40	Lunch	
13.40 – 14.10	Improving access to Hackney Integrated Learning Disability Service	Laura Checkley, East London Foundation Trust Kirsty Haberland, East London Foundation Trust
14.10 – 14.55	Next steps for your QI project	QI Coaches
14.55 – 15:00	Close	Tom Ayers, Director of NCCMH



Demand, capacity and flow through a patient, family, and equality lens

Sarah Markham and Ben
Patient/Carer Representatives



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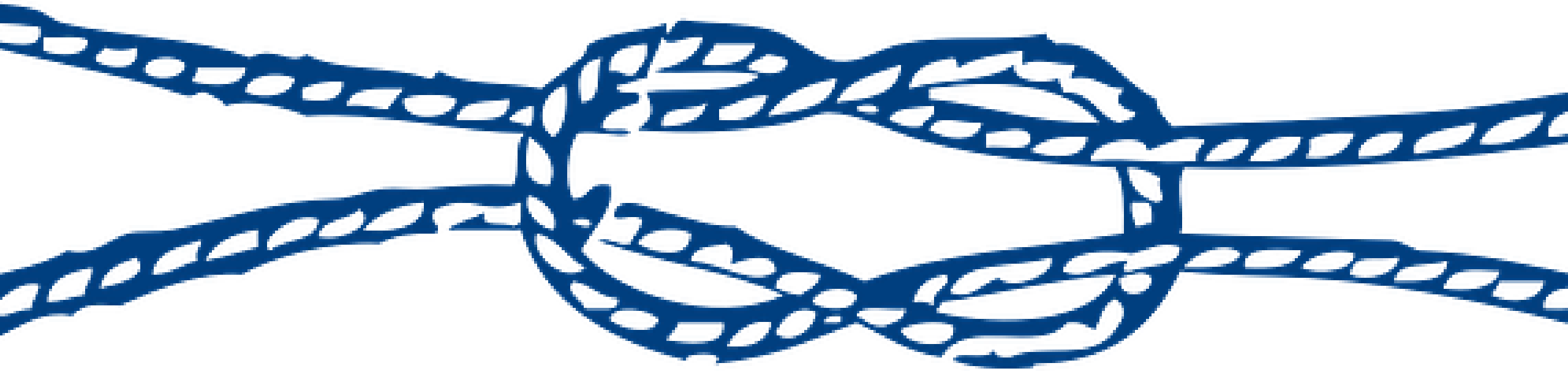
Demand, capacity
and flow through
a patient and
equality lens

Ben

DCF Project Team

Equality Advisory Group Psych
Liaison Accreditation Network

advancing equality



improving mental health services

Some 'determinants' of worse mental health

In a minoritized group (but not homogenous)

Poverty

Homelessness

**Having a
"severe mental
illness"**

Being LGBT+

Experiencing
care

Being deaf;
other
disabilities

**Being a woman
(different ways)**

**Being a man
(different ways)**

My privileges in getting help when I need it

Privilege

Privilege

Privilege

Having a
“severe
mental illness”


Privilege

Privilege

Privilege

Privilege

Being a man
(different
ways)



We're all
learners -
listen to
people
with lived
experience

Advancing
equality in
all the work
we do

Mental health 'provision' as social justice work

Un(der)employment

'Choosing not to engage'

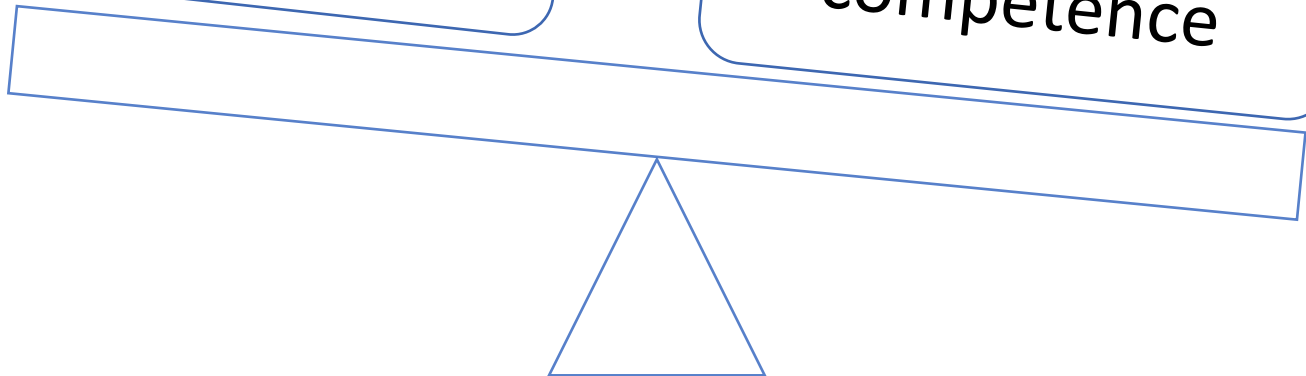
Implicit ablism

Help to sustain person's job or education

Considering impact of racism when engaging

Disability competence

Better society





Flow

My experience

(Some) others

Inform questions
on DCF

My two main 'flows' of care

First becoming unwell

Psych Liaison

Outpatient  Psychiatry (7 years)

GP for 4 years

GP

"**Twilight zone**"

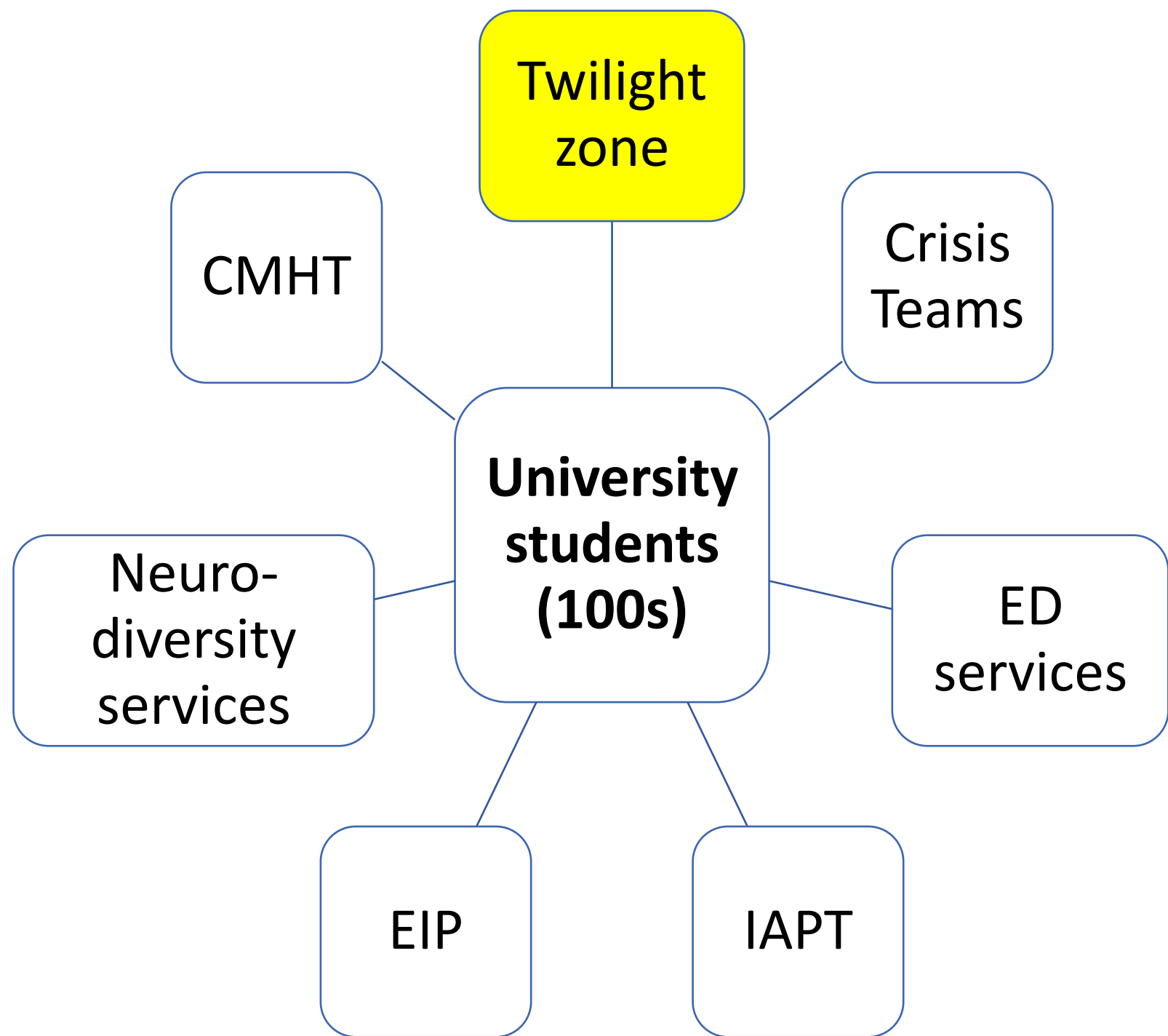
Primary Care Recovery Service

Flow &...

“a situation...that is characterized by being undefined, intermediate, or mysterious”

The
TWILIGHT
ZONE

Some
other
patient
'flows'



Demand

Does managing demand through restricting eligibility actually work (even on its own terms)?

In the process, do patients internalise 'I matter less'?



Capacity

Do we match capacity to how need in our areas fluctuates?

Do we consider what people really want – especially early on?

(empathisers...navigators...people who'll listen, understand and show respect)?




Flow

Are we inclusive in how we communicate?

How do we benefit from patients' creativity and wisdom in finding solutions?





Understanding demand and capacity, and why it is important to optimize patient flow

Amar Shah, National Improvement Lead



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A Quality Improvement Journey

Hackney Integrated Learning Disability Service

Dr Laura Checkley

Kirsty Haberland

Capacity, Flow and Demand QI Projects

- Our journey
- Top tips
- Examples of our work
- Service user involvement

My QI journey

- I was completely new to QI in 2018
- Improvement leaders programme
- Enjoyment at work project co-lead
 - Conference posters
- QI coaching programme
- Improving Access project
 - BMJ publication
 - Award nominations
- Right services right time (capacity, flow and demand) project
 - Big I service user involvement
 - Conference workshops



Success in Quality Improvement- top tips

- Quality Improvement Training
- Support from your trust/ organisation
- Is this suitable for QI?
- An enthusiastic team!
- Regular meetings (every week)
- Systematic QI approach
- Platform to record your progress (Life QI)





Project 1: Improving Access to the Hackney LD Service

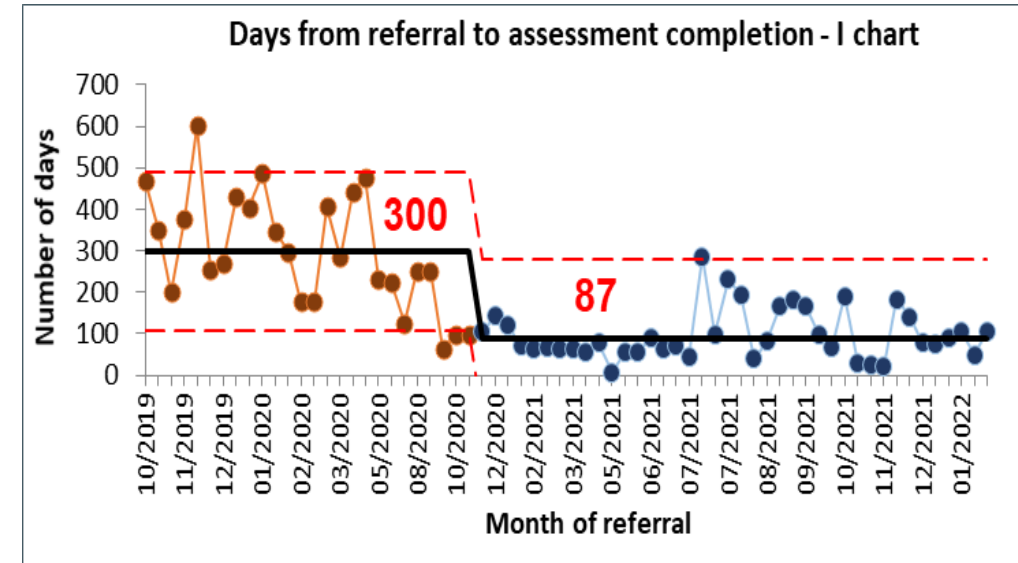
- **Setting:** An Integrated Community Learning Disability Service in East London
- **Aim:** Reduce the time taken to complete eligibility assessments for new service users by 50% by April 2021, whilst improving service user and staff experience over the same time frame.
- **Results:**
 - 93% reduction in time from referral to allocation
 - 77% reduction in time from referral to completion of eligibility assessment
 - Improved staff satisfaction – staff confidence and empowerment
 - Service user and carer satisfaction – video



When we did it: Against the Odds

- **Ambition: the challenge and context**

- Time taken to reach eligibility decision
 - at start of project: Mean 300 days!
- Pandemic
- Virtual working
- Digital poverty
- Cyber-attack





How we did it: Significant and sustainable improvements using a structured quality improvement approach

- **Training** in QI methodology - rapid learning
- **Testing change ideas** with multiple PDSA cycles - is a Change an improvement? Data!
- **Implemented changes**: eligibility screening checklist, staff training, allocations system, referral form, GP training, template letters and drop-in sessions.
- **Dissemination of our success to be replicated in other services**
 - talks at regional meeting and conferences, conference posters, publication in BMJ Open Quality



Project 2: Getting the right support at the right time for people with learning disabilities in Hackney

- **Aim:** To reduce the waiting times for all disciplines and make sure people with learning disabilities get the right support at the right time, whilst also improving staff and service user satisfaction
 - Increased demand - part of covid-19 recovery work
 - Reduced capacity in some areas
 - Variable flow
- **Ambition:**
 - Big I service user involvement
 - Rigorous QI approach
 - Managing unintended consequences of the previous QI project



How can we involve service users and carers in improvement?

Involvement with a **little i**

Regularly
consult during
the lifetime of
a QI project

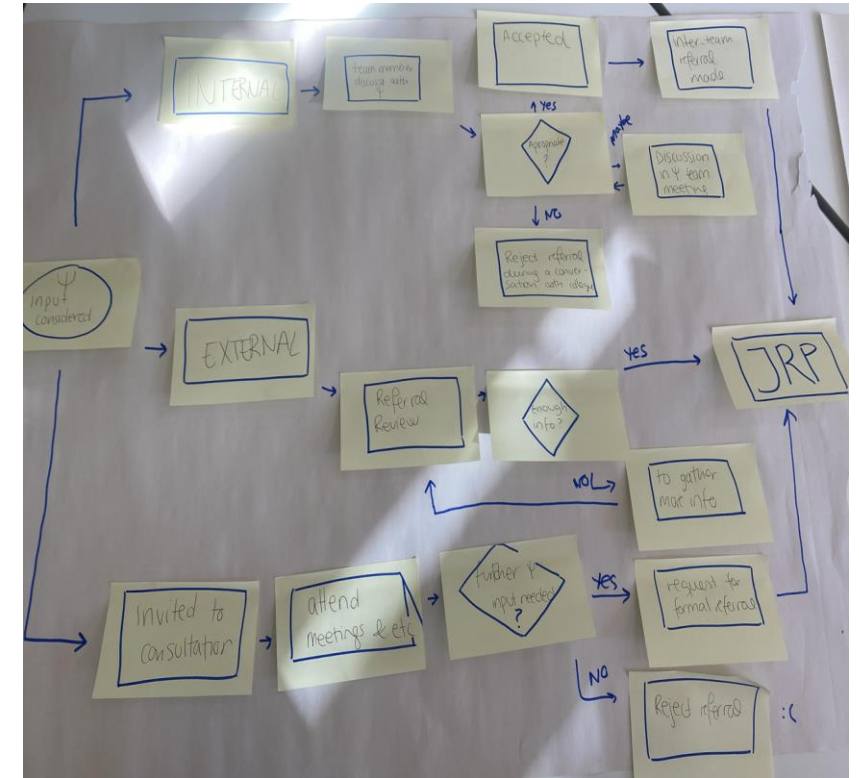


Involvement with a **BIG I**

Act as a full
member of
the
QI project
team

Where we are now

- Baseline waiting times data (demand)
- Staff time tracker (capacity)
- Staff questionnaire
- Service user questionnaire (63 responses)
 - Easy read
 - Text reminders
- Service user and carer focus group
- Big I service user involvement
- Process maps



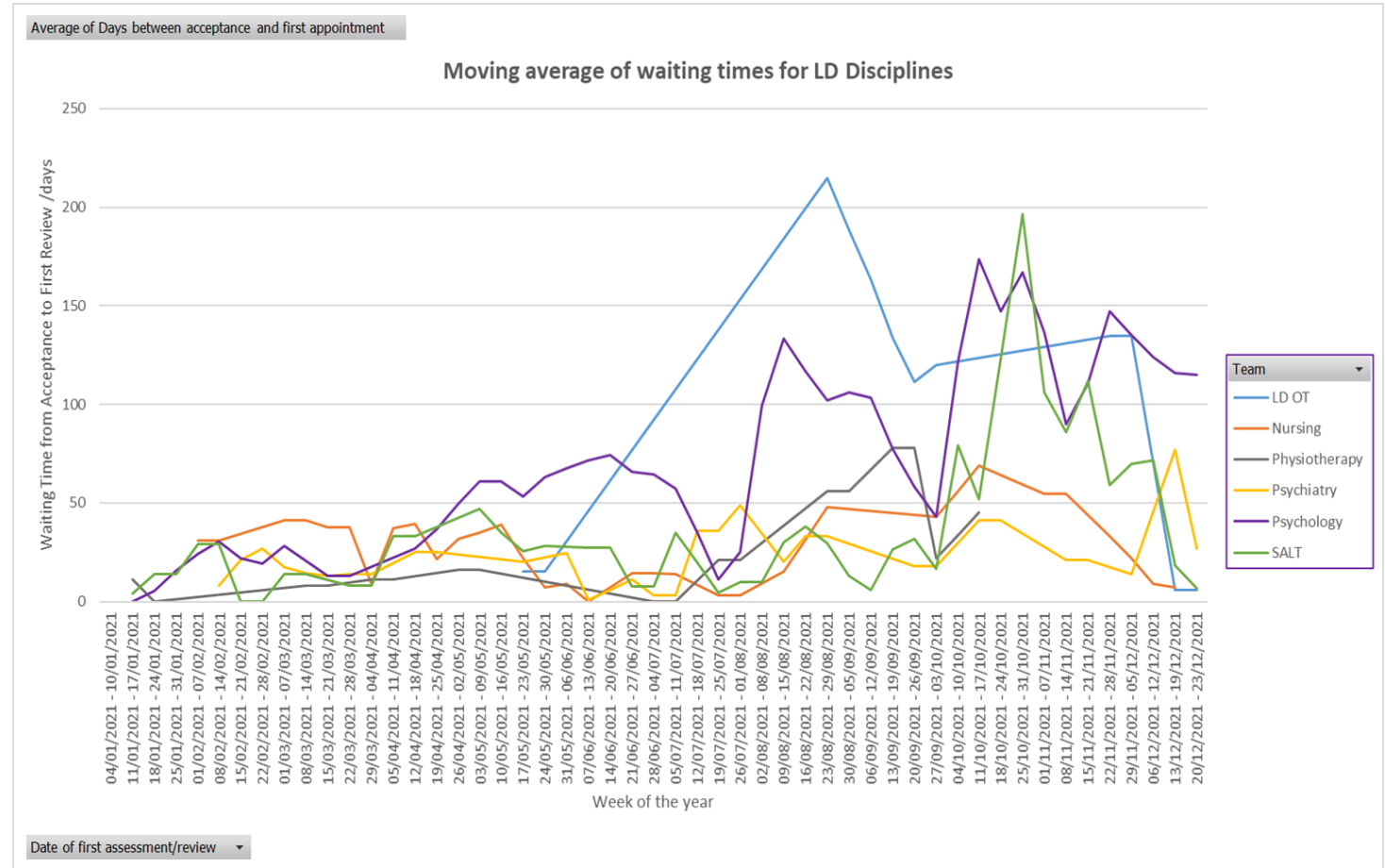
Involvement
with a little **i**

or

Involvement
with a **BIG I**

Where we are now

- Testing change ideas
 - Quick wins
 - Test small
 - Collect data



Any Questions?



Next steps for your QI project

Begin your flow charts



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Close

Tom Ayers, Director of the NCCMH

We value your feedback as this helps us to continue to improve these events and ensure topics covered are meaningful and relevant to you.

