



# Demand, Capacity & Flow QI Collaborative

Learning Set 6  
Thursday 4<sup>th</sup> July 2024  
10.30 – 15.00



Demand, Capacity & *Flow*  
Quality Improvement Collaborative



NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH

# Housekeeping

- **No fire alarm tests** are planned for today.
- **Toilets** are located to the right of the lifts on level 1 and on the ground floor.
- **Lunch** will be from **12:40 - 13:40** and will be served in **Room 1.6**.
- **Room 1.1** is available as a **quiet space**, for anyone that needs one.
- We have two separate **prayer rooms**; a member of the team can direct you to them.
- If you need to take a phone call or tend to an email during a presentation, please kindly leave the room.

# X/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 X/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!!**

# Today's agenda

Time	Item	Speaker
9.30 – 10.30	Registration and networking breakfast	
10:30 - 10:40	Welcome, housekeeping and recap	Renata Souza, Senior Quality Improvement Advisor, NCCMH
10.40 - 11.10	The Human at the end of the Path	Professor Russell Razzaque, NCCMH Adele de Bono, Senior Quality Improvement Advisor, NCCMH
11.10 – 11.20	BREAK	
11.20 – 12.40	World Café Conversations	Jaz Seehra, Quality Improvement Coach, NCCMH
12:40 - 13:40	LUNCH in Room 1.6 (Team stories in Room 1.2)	
13.40 – 14.05	The Bowl of light	Vicky Lever, Mental Health Support Worker, Cornwall Partnership NHS Foundation Trust Adele de Bono, Senior Quality Improvement Advisor, NCCMH
14.05 – 14.50	Looking ahead: continuity through engaging people in change work	Ben, NCCMH
14:50-15:00	Feedback and close	Saiqa Akhtar, Senior Quality Improvement Advisor, NCCMH



# Reflecting on our time together

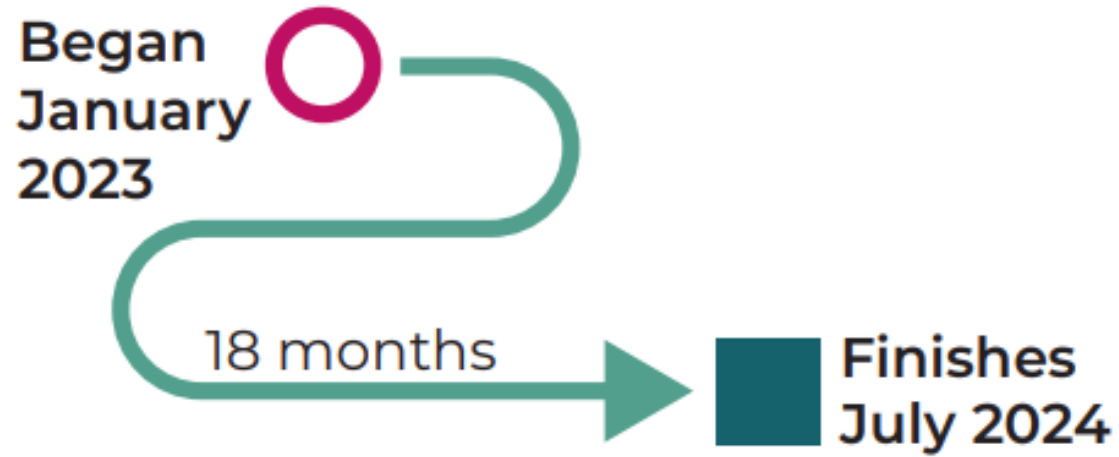
Renata Souza  
Senior Quality Improvement Advisor  
National Collaborating Centre for Mental Health



Demand, Capacity & *Flow*  
Quality Improvement Collaborative

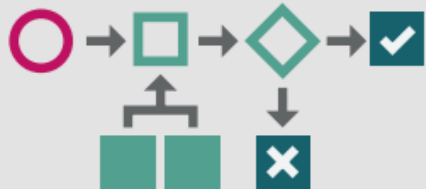


NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH



### Visualise the system

Flow chart to help understand how the service is currently operating



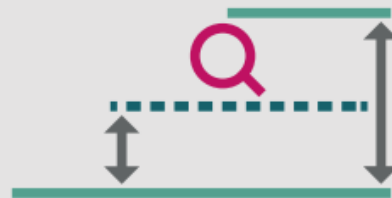
### Review data

Data to better understand patient flow and bottlenecks



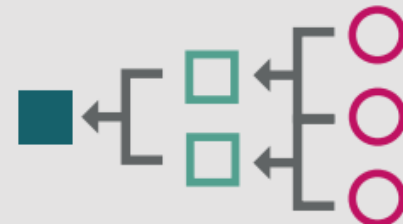
### Understand demand and capacity

Identify key areas of focus and opportunities for improvement



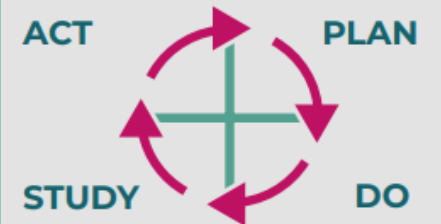
### Build theory of change

Visual strategy for tackling problems that impact patient flow

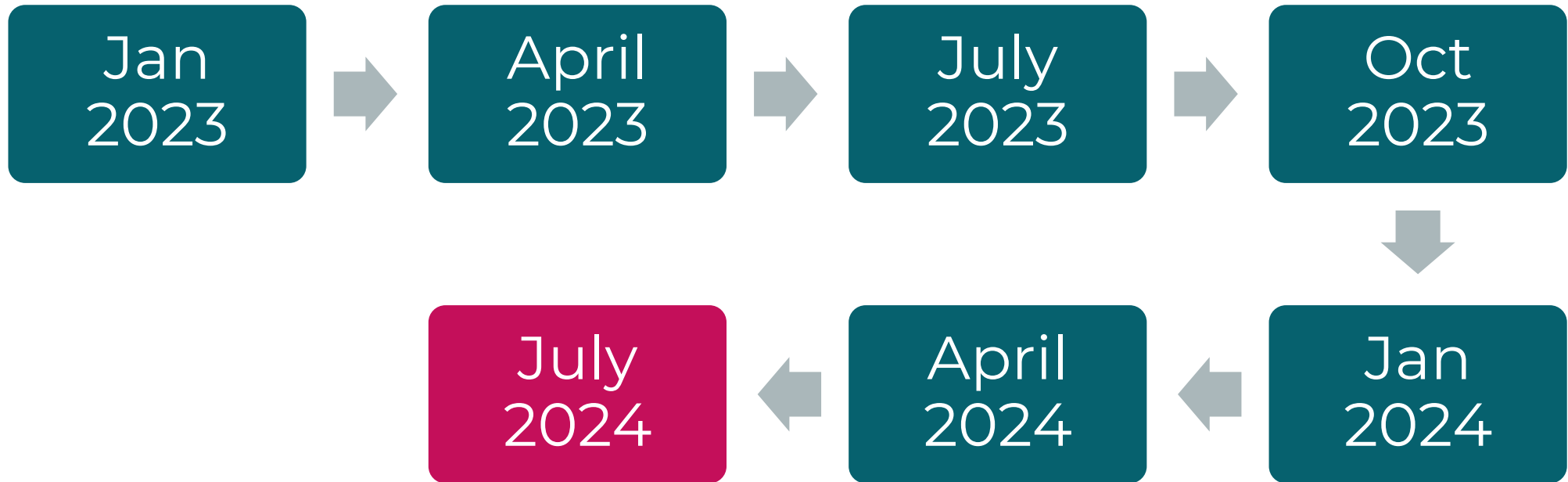


### Aim, measures, change ideas

QI approach to testing change ideas and measuring impact



# Learning sets



# January 2023 - Launch Event!



Demand, Capacity & Flow  
Quality Improvement Collaborative



NATIONAL COLLABORATING CENTRE FOR MENTAL HEALTH

# April 2023





# July 2023





# October 2023



**Change idea**

Introduce clinic model for completing assessments  
Clinic Model - Weekly allocation for all clinicians and APs together

**Predictions**

- Staff morale and capacity may be affected
- More assessments will be completed, and the discharge rate will increase
- Reduce the waiting time from referral to assessment

**What we are doing**

- Weekly allocation for all clinicians and APs together
- Job plan and capacity assessment (prioritising meetings to essential only e.g. weekly team meeting to monthly)
- Admin support relating to all aspects of booking clients for appointments, including room bookings (onsite/online slots)
- Standardising assessment (ADOS/AAA/3DI) process in terms of time and outcomes (feedback sessions and Rio outcomes)
- Efficiency model for report (template)
- Introducing DNA process (Discharged after 2 DNAs)

**How we are measuring change**

- Measuring baseline data (Jan-Mar 23) to data for each quarter of this year
- Weekly monitoring completed assessments and discharge rate (Data sent by Abir) and exploring discrepancies between this
- Monthly review of numbers by MDT during QI/Business meeting (Sarah)

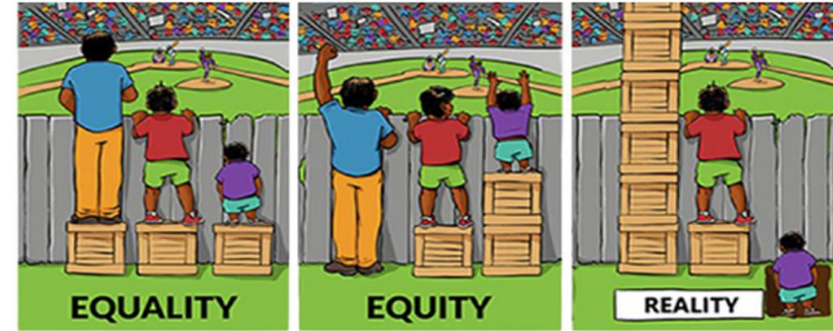
**Learning so far**

- *Clinic model was efficient and helpful in achieving more completed assessments per month*
- *Regular monitoring of data and process was useful*
- *Efficiency can be attained at each level*
- *Importance of using QI model to understand issues i.e. driver diagram*
- *Collaboration and team engagement is important*
- *Accessing weekly data allowed us to see progress and where we can make changes*

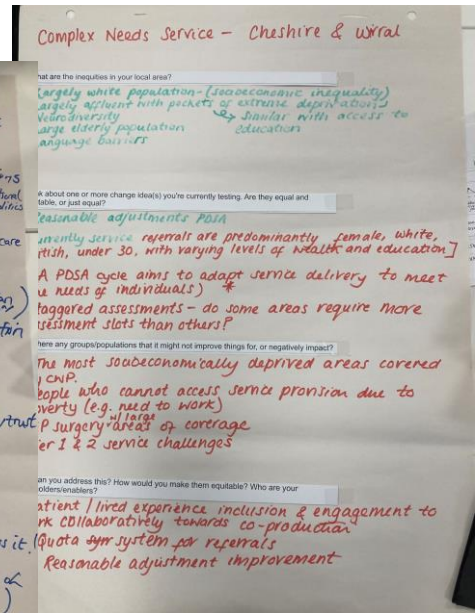
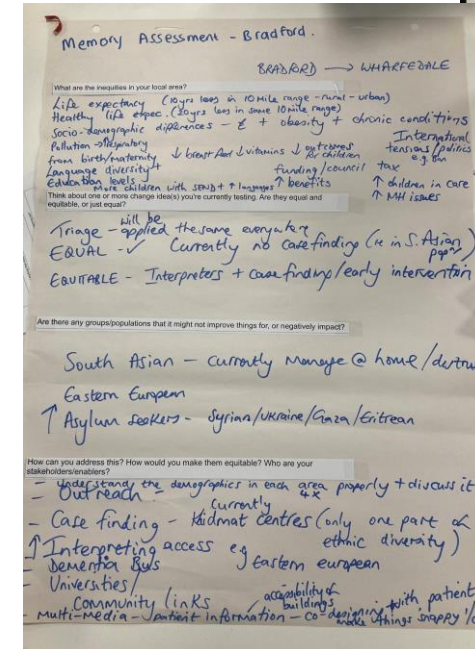
**Next steps**

- Managing clinical complexities during assessments
- AP/Trainee capacity to support qualified staff
- Working to reduce nuances between clinicians i.e. assessments and report writing

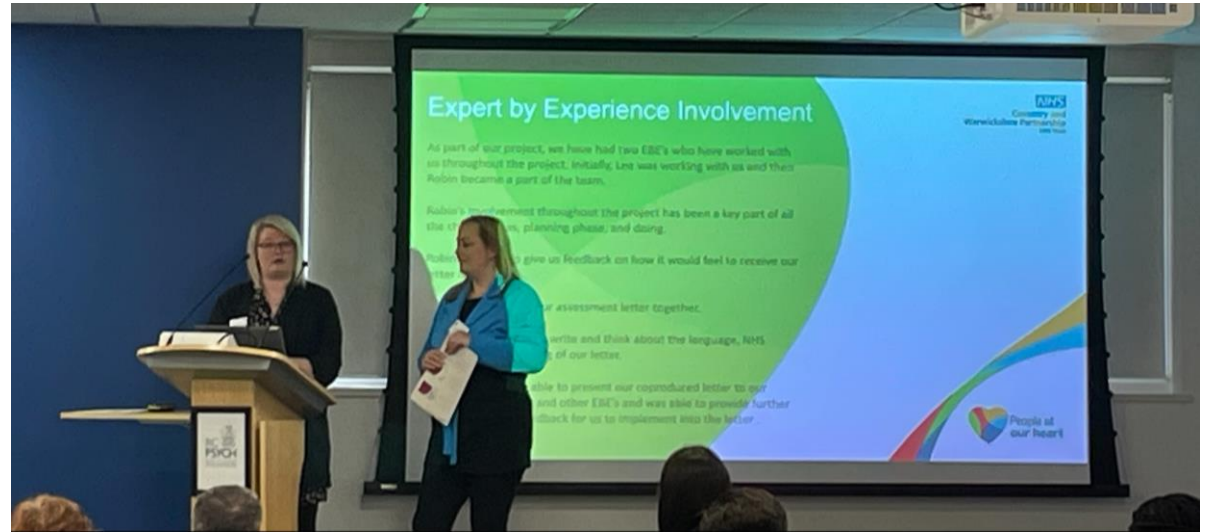
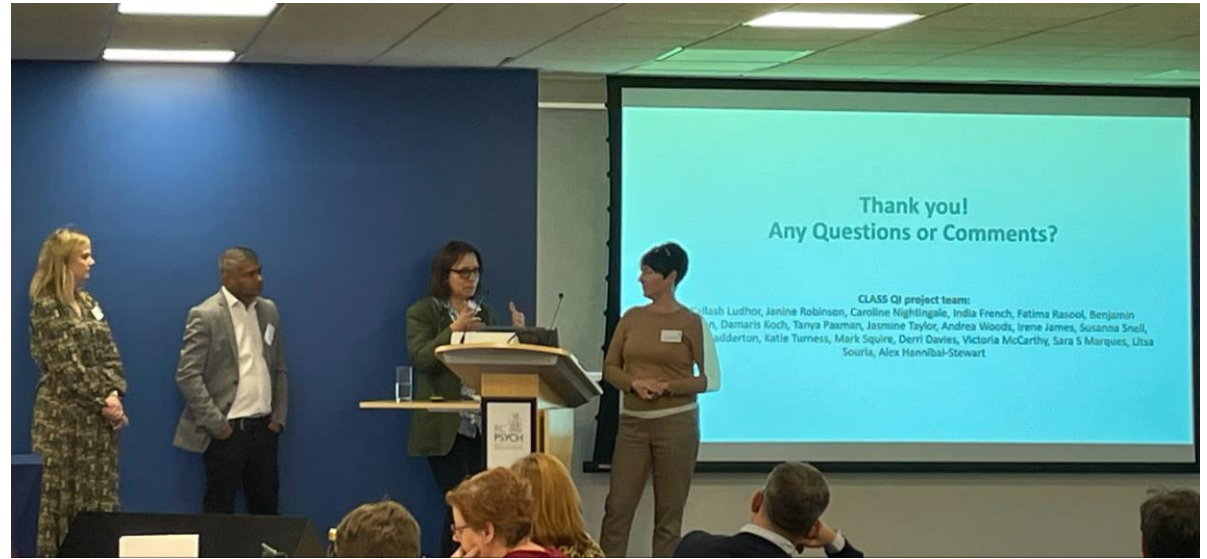
# January 2024



This has been motivational for staff at our service. **To get an outcome timely way for people waiting – and to see it rise from 75% to 96%!** It personalizes things for the team who are bogged down and busy with referrals and data, it really helps, sometimes the team are data driven and there can be disconnect (understandably), this success allows us to connect to how this meaningfully impacts people's lives.... – *Hounslow talking therapies*



# April 2024



Learning day 3 of the @NCCMentalHealth demand capacity and flow collaborative - great to share change ideas with other teams and to hear progress in the different projects #DCFQI

Quality Improvement Collaborative

### Demand, Capacity and Flow Quality Improvement Collaborative Learning Set Agenda

Date: Monday 9th October 2023, 10:30 - 15:00  
Venue: Room 1.7, Royal College of Psychiatrists, London

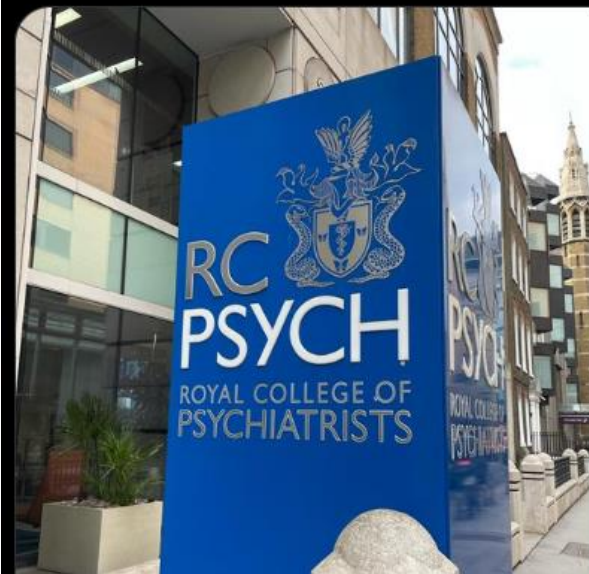
Time	Item	Speaker
10:00-10:30	Registration and refreshments	
10:30-10:45	Welcome, housekeeping and recap	Emily Cannon, Head of Quality Improvement
10:45-12:10	Change ideas: What is being planned and tested? DCFQI teams share their progress, successes, and challenges so far.	All
12:10-12:30	Sharing learning from the change ideas session	Amar Shah, National Improvement Lead
12:30-13:15	LUNCH	
13:15-14:15	Working with people with lived experience in your DCFQI project  This session will include a panel discussion with people with lived experience from Cheshire and Wirral Partnership NHS Foundation Trust and Bradford District Care NHS Foundation Trust	Sarah Markham, Patient and Carer Representative, NCCMH
14:15-14:50	Equity lens on demand, capacity and flow	Tom Ayers, Director, NCCMH Satwinder Kaur, Patient



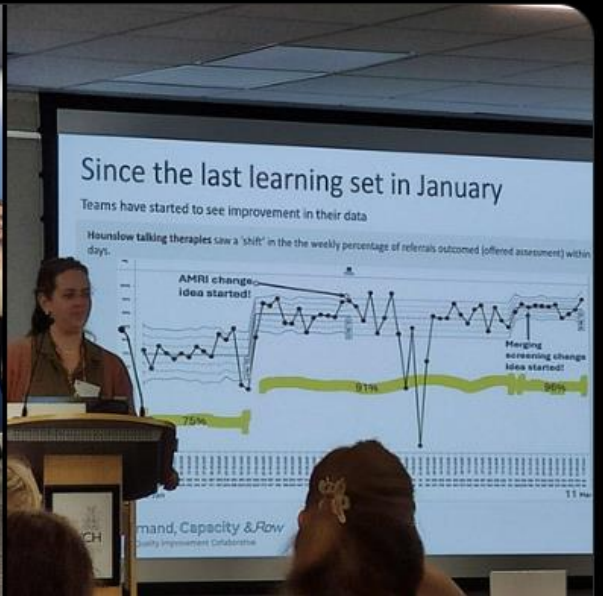
Some excellent examples of visualising the system, with teams starting to identify the bottlenecks in the pathway and areas that need new ideas #DCFQI #QITwitter



Launch day for @NCCMentalHealth Demand, Capacity & Flow collaborative @LingerClare @ugopat4u @Nurse4lifeKelly @RoisinM\_QI #DCFQI



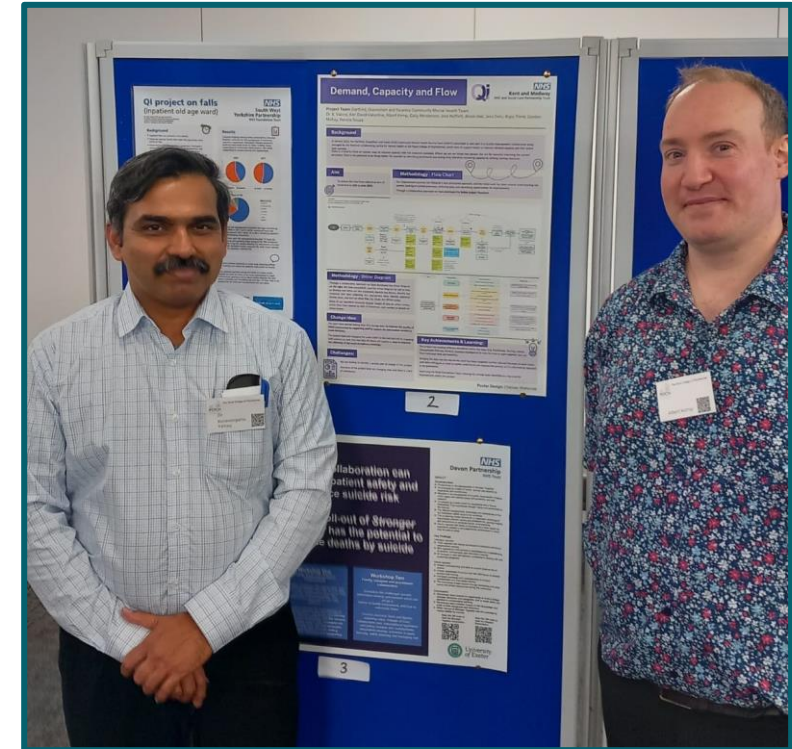
Great day at penultimate @rcpsych Demand, Capacity, Flow learning set with @westlondonnhs Ealing MINT teams & Hounslow Talking Therapies (look at those data shifts!) #DCFQI #qualityimprovement @QIWestLondon @Derektracy1 @saraQiNHS @neilsm73 @That\_Data\_Fairy



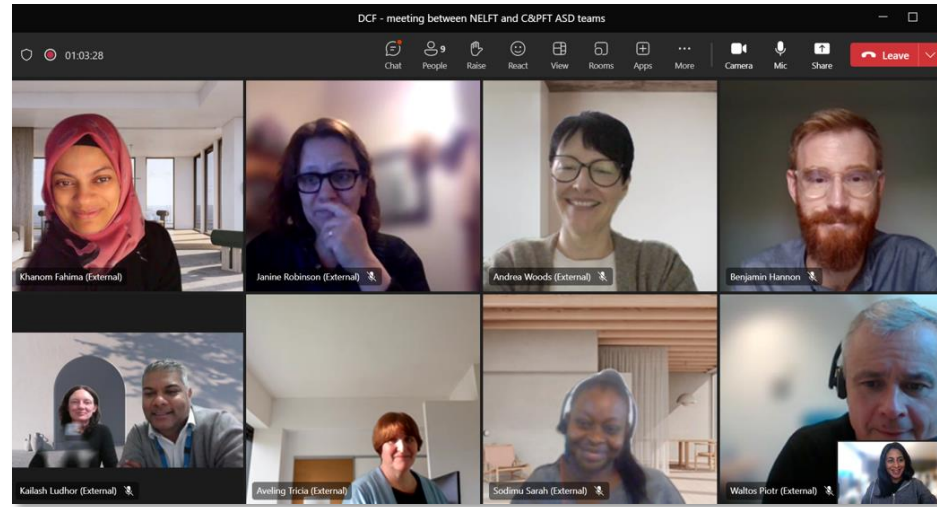
## The Cambridge and Peterborough team at the RCPsych international congress in June 2024



## The Kent and Medway team at the RCPsych QI annual conference in November 2023



# Coventry and Warwickshire team story - captured at the Trust's QI conference



North East London and Cambridge and Peterborough joint meeting

QI leads sessions



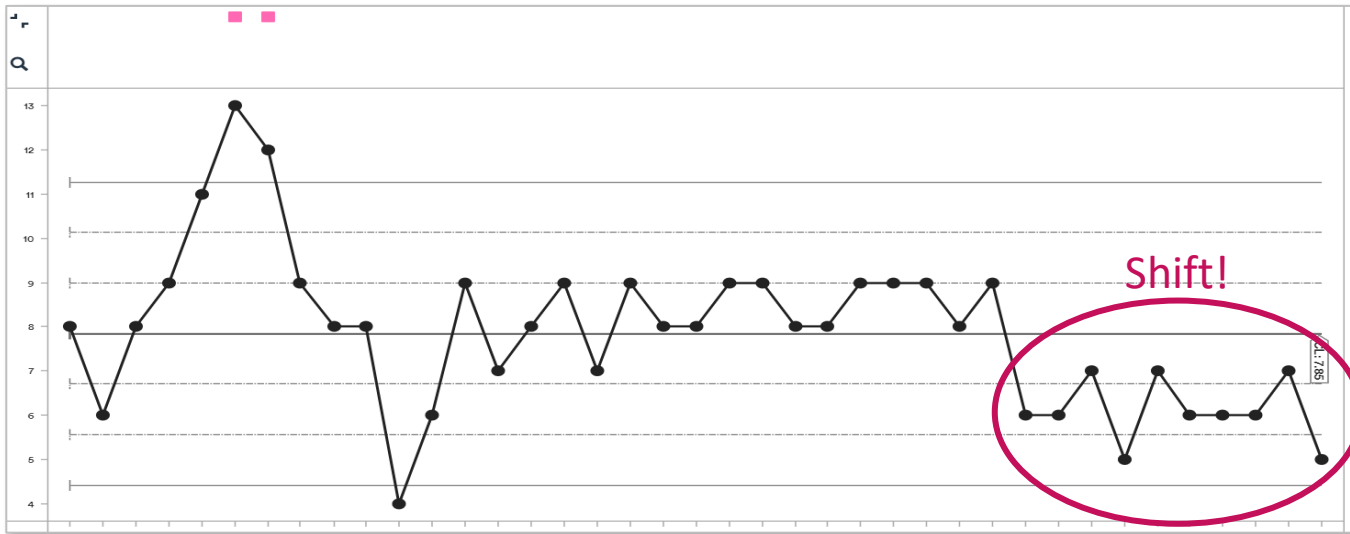
# The impact of your work!

Changes in data

Collaboration and ways of working

Impact on people using your services

Average time (days) taken from access hub referral to first original appt



## Ealing Acton MINT – Our story

We have a real sense of joy, and excitement about our ideas moving forwards. We've been really flexible and now this work is held with 'local government' and not top down, we are confident in our abilities after the collaborative.

Our next steps are to train and support our colleagues to offer patients on our waitlists 4 types of intervention in the hope this will reduce any distress and help them feel contained. We also predict this will give the team a sense of mastery, development and an opportunity to learn a new skill.

# “The human at the end of the path”



An opportunity to learn to reflect and anchor your work in somebody's story

Professor Russell Razzaque and Adele De Bono



Demand, Capacity & Flow  
Quality Improvement Collaborative



NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH

# recording

2024-06-12 13:07 UTC

Recorded by

Adele de Bono

Organized by

Adele de Bono

# Connecting with the stories



- 5 mins: Read the story.
- 5 mins: Two people on the table reflect on what they heard. Everyone else listens.
- 10 mins: Group reflection.

Discuss how you feel about the stories you have just heard

- What did you hear?
- How did this make you feel inside, in your core?
- Does any of it resonate with your own life?

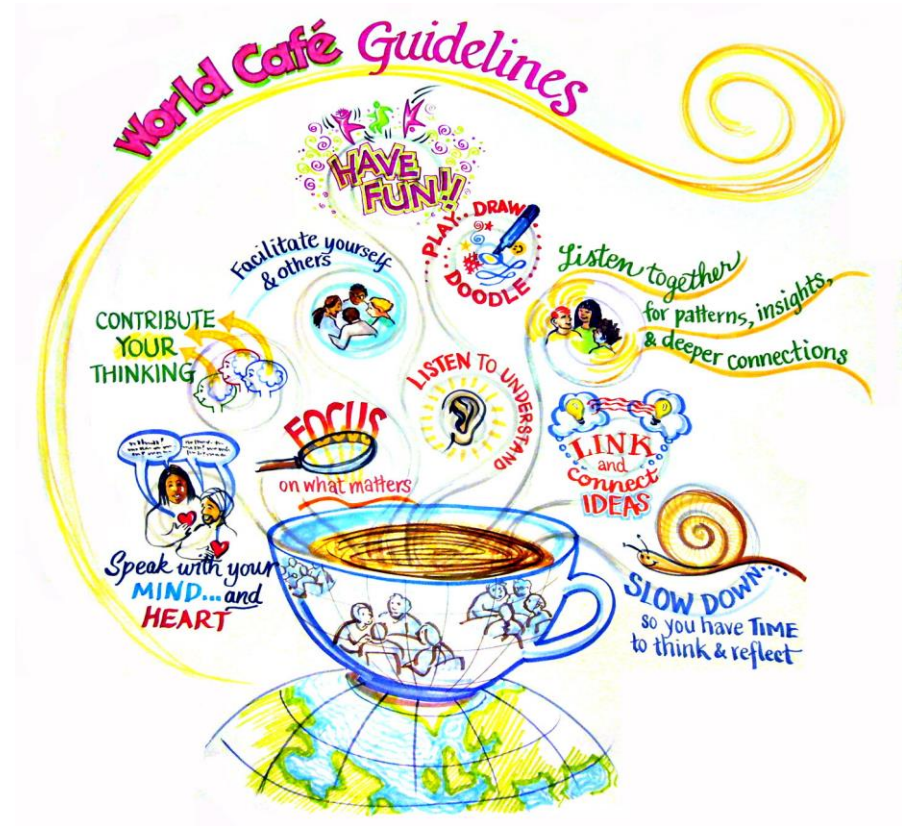
# Break 11.10 – 11.20



Grab a tea/coffee/water and bring it back for the world café session.

# World Café Conversations

- Choose a table to sit at.
- You will have 20 mins per table.
- Discuss the project, the team journey and the impact of your work.
- Rotate to another table.
- 3 rotations.

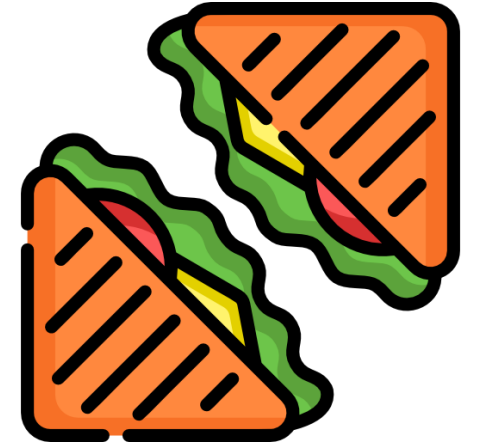
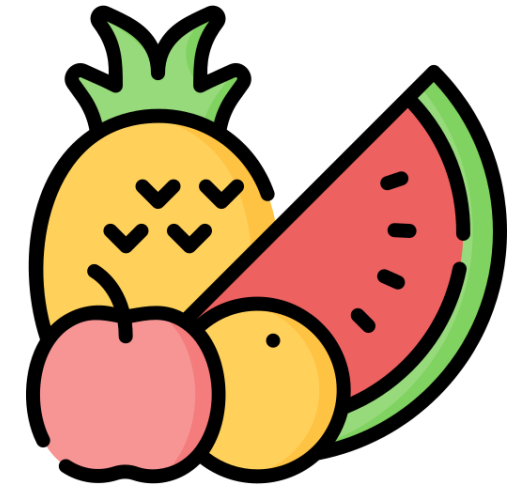


# World Café Conversations

Table Number	Team	Service
1	Avon and Wiltshire	North Somerset Psychological Therapies Service
2	North East London	Havering Child and Adolescent Mental Health Service
3	Bradford District Care	Child and Adolescent Mental Health Service
4	Cheshire and Wirral	Complex Needs Service
5	Bradford District Care	Memory, Assessment and Treatment Service
6	Cornwall Partnership	Kerrier CAMHS
7	North East London	Waltham Forest Mental Health and Wellness Team

# Lunch

12.40 - 13.40  
Served in Room 1.6



Videos shown in Room 1.2 from 1pm

# Networking over lunch:

Please take some time to look at team posters up on the blue display boards.

We will also be showing videos from 3 teams during lunch from 1pm, in room 1.2:

<b>1.00pm - 1.10pm</b>	<b>North East London Foundation Trust - Havering Mental Health and Wellness Team:</b> <i>The teams' journey through the collaborative.</i>
<b>1.15pm - 1.25pm</b>	<b>North East London Foundation Trust - Adult Autism Spectrum Disorder Service:</b> <i>The teams' journey through the collaborative.</i>
<b>1.30-1.35pm</b>	<b>Cheshire and Wirral NHS Foundation Trust - Complex Needs Service:</b> <i>A short video from Tom, a patient, talking about his experiences of the service.</i>





# The Bowl of Light

Vicky Lever  
Mental Health Support Worker  
Cornwall Partnership NHS  
Foundation Trust



+  
○ ●

# Creative Visualisation



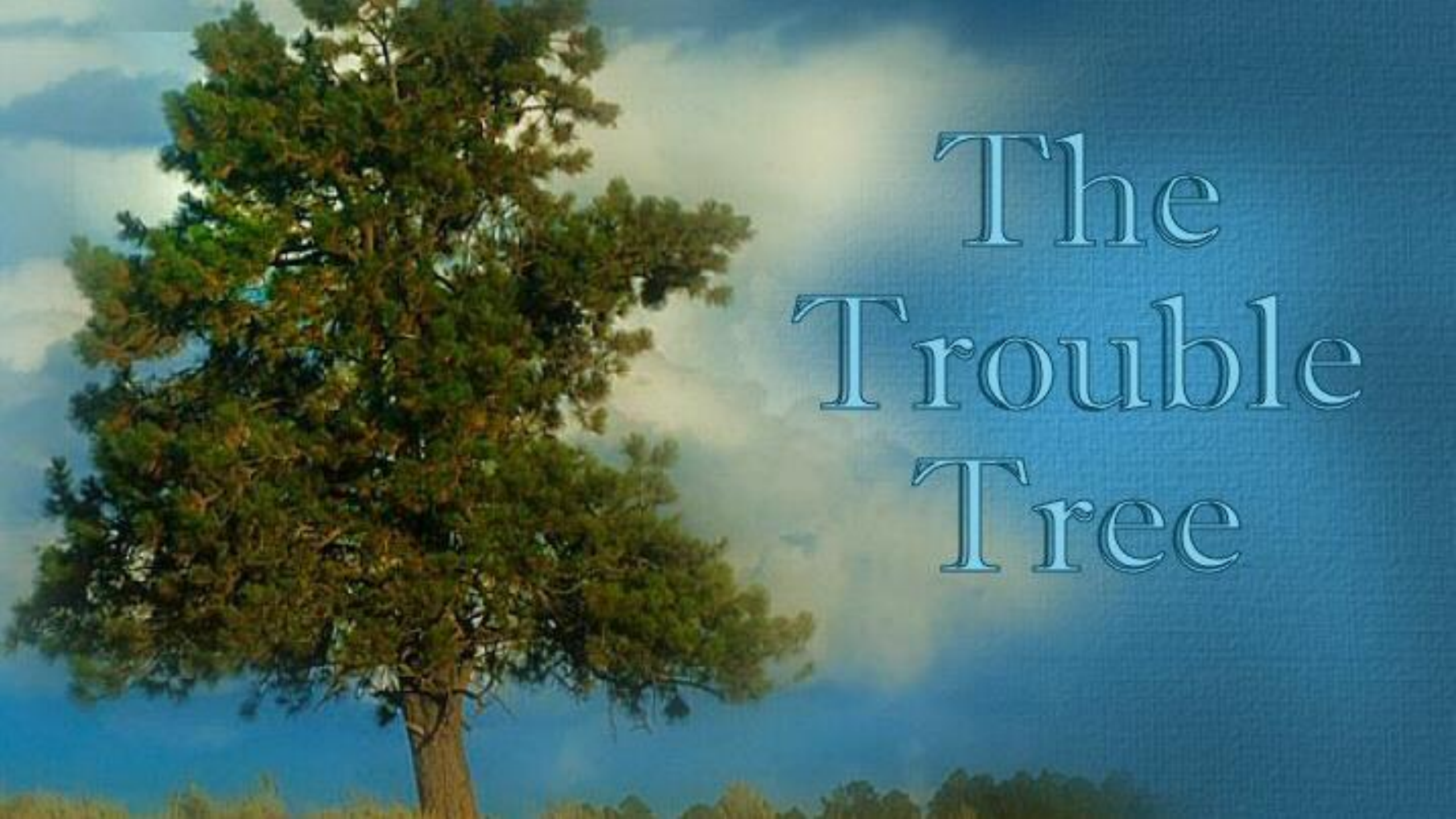


Get Comfy  
Relax  
and  
Breathe



# Your Favourite Place





The  
Trouble  
Tree

+

○


●

# The Path and the Garden Gate





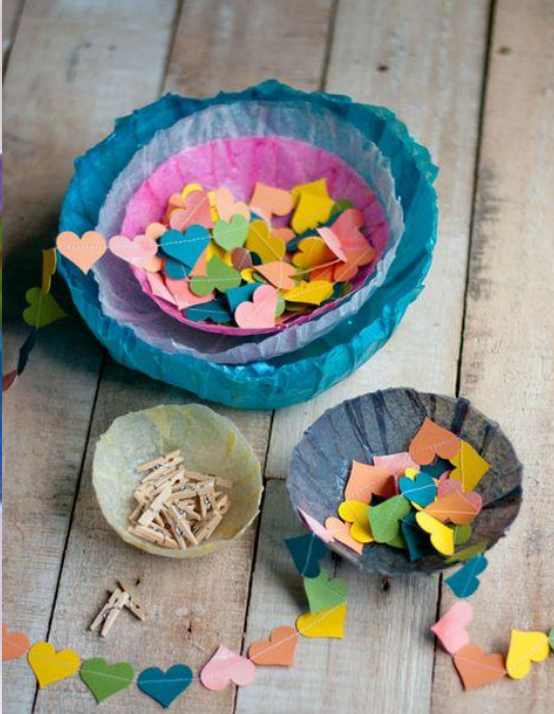
Imagine

A close-up photograph of a shallow, light-colored bowl filled with smooth, dark, rounded stones. One single, smooth, light-colored stone is prominently placed in the center of the bowl, contrasting with the surrounding dark stones. The lighting is soft, highlighting the textures of the stones.

Light and Stones  
Cannot Hold the  
Same Space



Tip  
out  
the  
Stones



Create Your  
Bowl of Light

Thank you for  
taking part



Enjoy creating  
your imagination



NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH



# Embrace the messy!

---

Working with people with lived experience in  
quality improvement work

**Ben, NCCMH**

# Today



---

1. (One) patient take on quality improvement
  2. What makes services engaging?
  3. Embracing messy (working with people with LE)
  4. Allyship in co-production
  5. Final thoughts (and goodbye!)
-

(One) patient  
take on  
quality  
improvement

A service  
thing

“you’re not  
one of ours”

Assess you to  
assess you

“others have  
it worse”

A me thing

1. “We’ll help  
you”

2. “What do  
you need”

3. “Here’s the  
help”





Straightforward  
help



Emotional and  
practical labour  
of getting help

# Culture of learning from patients

<b>Hearing from patients</b>	<b>Learning from patients</b>
Tell us what you think (on our terms)	Tell us what matters in your terms
Gives us information to go away and review	Can we start a conversation with you?
Tells us how we've cared for you	Seeks wider lessons for everyone
Was what we did good/bad/OK?	What could we do entirely differently?

## 2. What makes services engaging?

**Learn**

from day-to-day encounters with patients

**Change**

based on this learning

**Get the**

enduring impact - past experiences of support

**Tackle**

mental health stigma including from services

**3. What  
does messy  
mean?**  
(working  
with people  
with LE)

---

A. Everyone's life is messy!

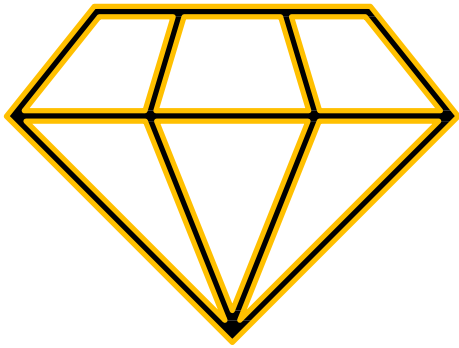
---

B. ..we'll all contribute  
differently at different times

---

C. ..& that's OK! But let's be  
allies for change

Messy in practice =  
everything can be valuable



A single  
powerful  
contribution

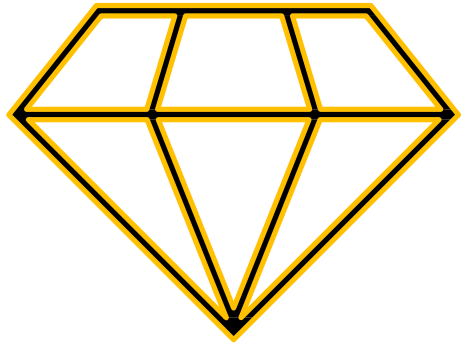


Fixing  
specific  
things  
together



Building  
things  
together  
(co-pro)

- Team hearing via complaint patient lacked clear info after discharge



- Team learns (not just hears from...) from patient about what happened
- Harnesses story to gain funding for link worker for post-discharge support

- Team member notices patient's gift for structured and clear communication
- Invites them to be involved in QI work around team > patient comms
- Offer allyship by giving recognition, reward, providing new opportunities



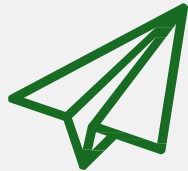


- Patient blogs about mental health. Care Coordinator supports them to present to Trust leads
- Team supports person to take on Trust patient involvement role
- Person later takes national policy role. Writes guidance informing team's work

But where  
are the  
people we  
can work  
with?



They're within the  
1000s of people you  
support



Go to places meeting  
unmet needs. Try, 'fail',  
try again

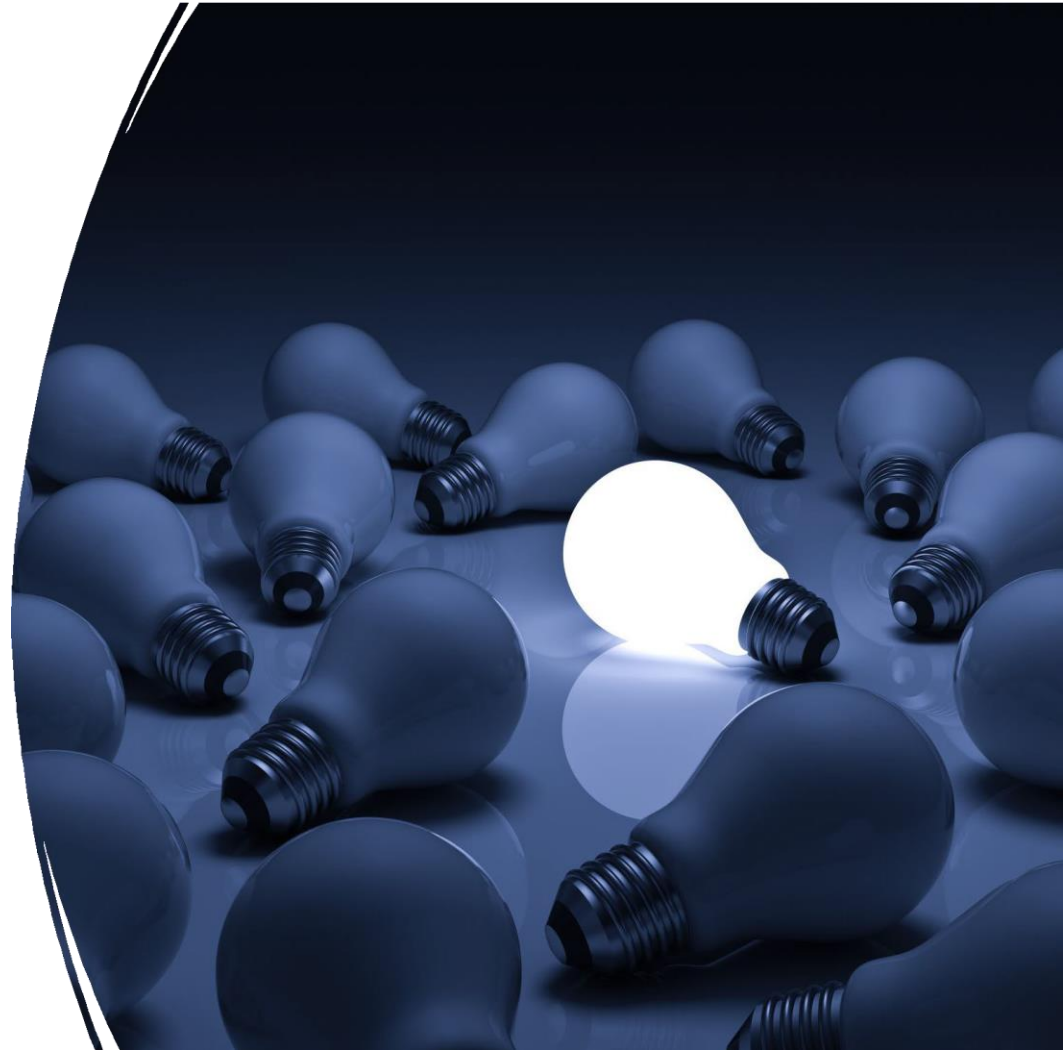


Value everything. Be  
an ally


# What is an ally?

---


- Someone who recognizes their privilege and power as a mental health professional with power...
- ...and uses that power to increase the power of people living with mental illness



# What is this 'mental health system' anyway?



Something run by professionals for people with mental illness?

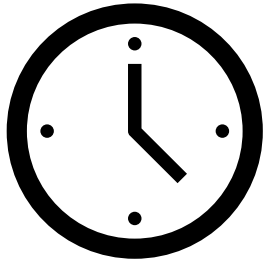


A societal good for everyone to build and sustain together?

- How has what we've done on DCF reduced patients' emotional and practical labour in getting help?
- We have our Trust's involvement policy – but how can we still work in a 'messy' way?
- How can our services be more like the sort we'd want to help us or someone we cared deeply for?



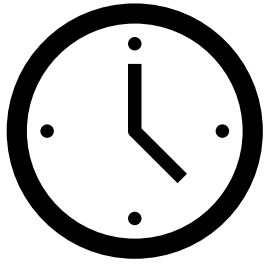
# Reflection



5 minutes

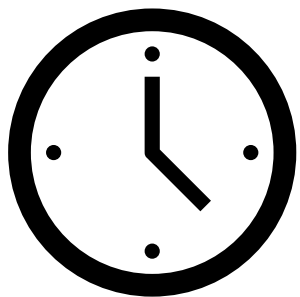
How has taking part in the QI collaborative helped shape how you view a patients journey on your pathway, or experience of your service?

# Reflection



5 minutes

How has your approach to improving patient experience changed given what Ben has discussed here?



15 minutes

- How has what we've done on DCF reduced patients' emotional and practical labour in getting help?
- We have our Trust's involvement policy – but how can we still work in a 'messy' way?
- How can our services be more like the sort we'd want to help us or someone we cared deeply for?



Demand, Capacity & Flow

Quality Improvement Collaborative



NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH

# Feedback and close

- We value your feedback as this helps us to continue to improve these events.
- **Please use the QR displayed here:** or the paper copies on your tables.

