

Quality Improvement in Tobacco Treatment (QuITT) Collaborative

Learning Set 6

10 September 2024, 10:00 – 15:00



Welcome and introductions

Ros Warby
Senior Quality Improvement Advisor

Housekeeping



- **Toilets** are located to the right of the lifts on level 1 (men's and women's toilets) and the ground floor (gender neutral and disabled toilets)
- **Lunch** will be from **12.40-13.30** and will be served in **Room 1.6** (next to the main auditorium)
- **Room 1.1** is available if anyone needs to take a break at any point or needs some **quiet space** (just outside the main auditorium)
- Please use the mezzanine area if you need to step outside for anything else
- There are **no scheduled fire alarm tests** today.

NCCMH shared principles (1)



Listen with respect and openness

We seek to value learning from different people and stay open to new ways of doing things.



Confidentiality

People may share something they wish to be kept confidential. We require everyone's agreement not to share anyone's information without their permission.

Please only take and share photos of people with their permission.

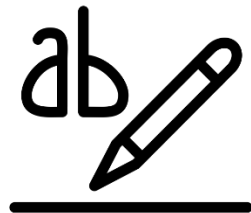
NCCMH shared principles (2)



Contribute

We seek to share ideas, ask questions and contribute to discussions. We can also choose not participate at any stage.

Please wait for the microphone before you contribute in this room.



Use plain language

We seek first to understand, then to be understood. If possible, avoid using jargon and explain acronyms if they must be used.

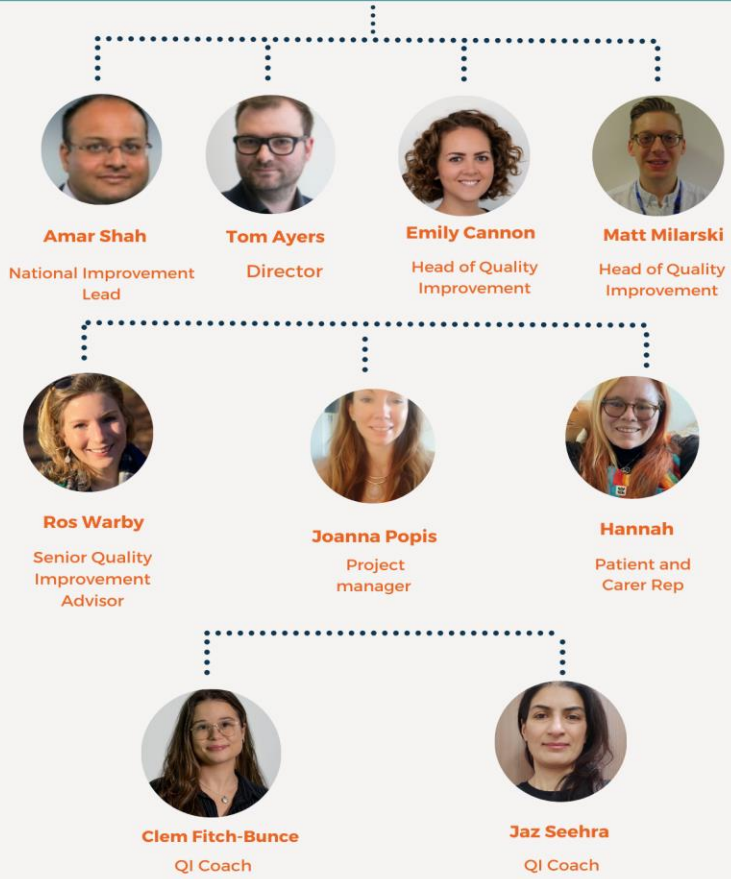
X/Twitter

- 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 **#QuitTCollaborative**
- 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!

Introducing the QuITT programme team

The programme team

Quality Improvement in Tobacco Treatment Collaborative



Today's Agenda

Time	Item	Speaker
10:00 - 10:30	Registration	
10:30 - 10:50	Welcome, introduction and ice breaker	Ros Warby, Senior Quality Improvement Advisor
10:50 - 11:40	World Café Conversations Networking and sharing journeys	World Café conversation host Topics: <ul style="list-style-type: none"> • Table 1. Reducing violence and aggression on the ward with our QuITT Project - Nottinghamshire Healthcare NHS Foundation Trust • Table 2. A change in Culture - West London NHS Trust • Table 3. Acknowledging and addressing the non-adherence of the Trust's smoke-free policy - Surrey and Borders Partnership NHS Trust. • Table 4. Providing NRT on Admission - Greater Manchester Mental Health NHS FT
11:40 – 11:50	Break	
11:50 – 12:40	World Café Conversations Networking and sharing journeys	Hosts tables as above
12:40 – 13:30	Lunch	
13:30 – 14:10	Co-Production The ladder of possibility	Jaz Seehra, Quality Improvement Coach
14:10 – 14:20	Break	
14:20 – 14:50	From Testing to Implementing	Clementine Fitch-Bunce, Quality Improvement Coach
14:50 - 15:00	Feedback and Close	Matthew Milarski, Head of Quality Improvement
15:00 – 15:30	Optional time to catch up with your coach	

Icebreaker



5 minutes

2028 Olympics

- The Paris Olympics inspired us all in some way or other, imagine it's now 2028 and you are off to Los Angeles to represent your country at the Summer Olympics....
- Move around the room and chat to others about which sport you are participating in, and why!

World Café Conversations: Networking and Sharing Journeys

World Café Conversations



How World Café works....



20 minutes
per round

1. Choose a table to sit at.
2. Allow the table hosts some time to introduce their topic and what they wish to talk about.
3. Discuss the project, the team journey, impact of the work and ask questions to the table hosts.
4. 20 mins per table, then move to another table.
5. 2 rotations followed by a break and another 2 rotations after the break.

Table Number	Trust	Conversation subject matter
1	Nottinghamshire Healthcare NHS Foundation Trust	Acknowledging and addressing the non-adherence to Trust smoke-free policy
2	West London NHS Trust	Changes in culture
3	Surrey and Borders Partnership Foundation NHS Trust	Reducing violence and aggression on the ward
4	Greater Manchester MH MHS FT	Providing NRT on admission

Break

Grab some refreshments and bring them back for the next round of conversations



Table Number	Trust	Conversation subject matter
1	Nottinghamshire Healthcare NHS Foundation Trust	Acknowledging and addressing the non-adherence to Trust smoke-free policy
2	West London NHS Trust	Changes in culture
3	Surrey and Borders Partnership Foundation NHS Trust	Reducing violence and aggression on the ward
4	Greater Manchester MH MHS FT	Providing NRT on admission



Lunch

12.40 – 13.30

Served in room 1.6

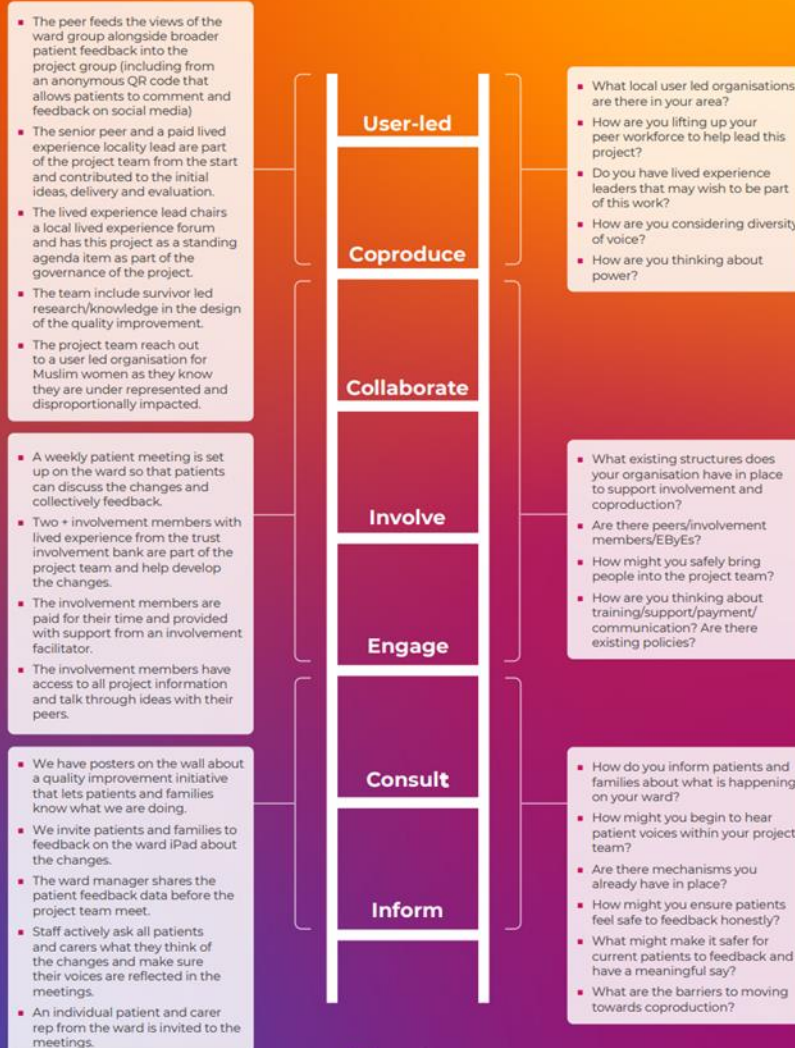
Co-Production: The Ladder of Possibility

Jaz Seehra

Quality Improvement Coach

The Ladder of Possibility

Ladder of Possibility



There are printed copies of the ladder on your tables for you to look at.

What is Co-Production?

NHS England's website states this.....

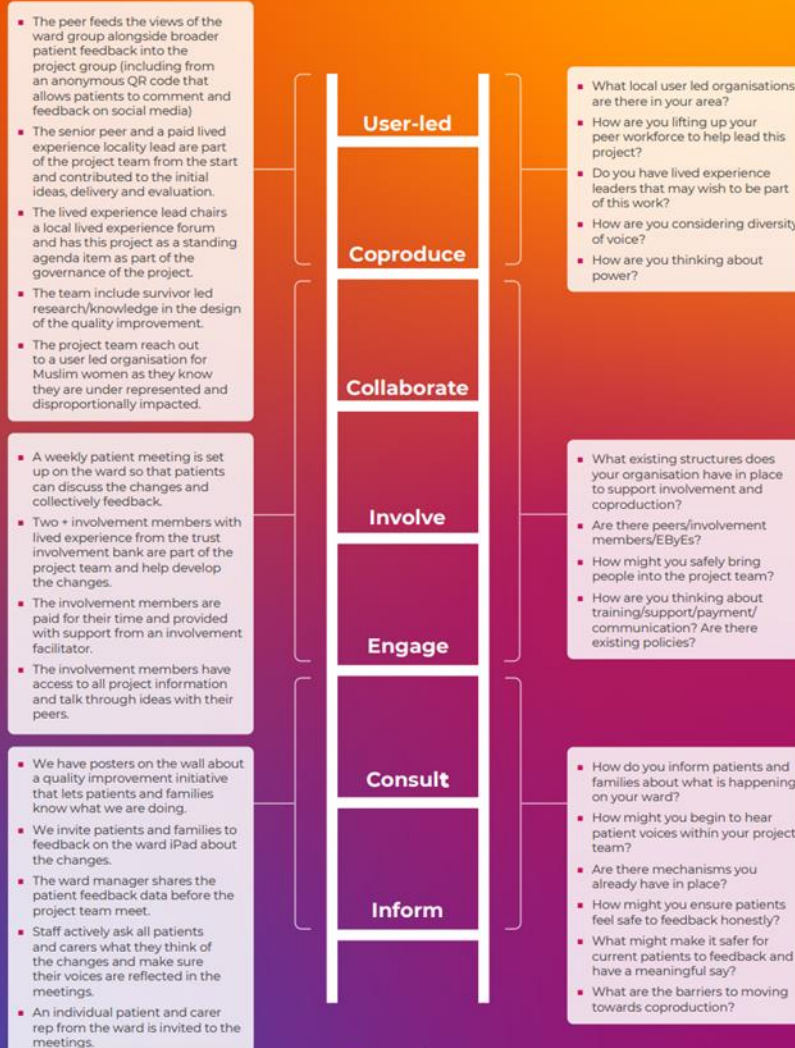
“Co-production is a way of working that involves people who use health and care services, carers and communities in equal partnership; and which engages groups of people at the earliest stages of service design, development and evaluation.”

What is Co-Production?

Co-production acknowledges that people with 'lived experience' of a particular condition are often best placed to advise on what support and services will make a positive difference to their lives. Done well, co-production helps to ground discussions in reality, and to maintain a person-centred perspective. Co-production is part of a range of approaches that includes citizen involvement, participation, engagement & consultation."

The Ladder of Possibility

Ladder of Possibility



There are printed copies of the ladder on your tables for you to look at.

The Ladder of Possibility

As a team think about.....

What level of Co-
production do you have in
your project?

Please come and stand at the
ladder of possibility to show where
your project currently is.

Discussion

Turn to others around you to discuss your experience in getting to this point.

Think of just 1-2 tangible things you could do, next week, to further embed coproduction in your project.



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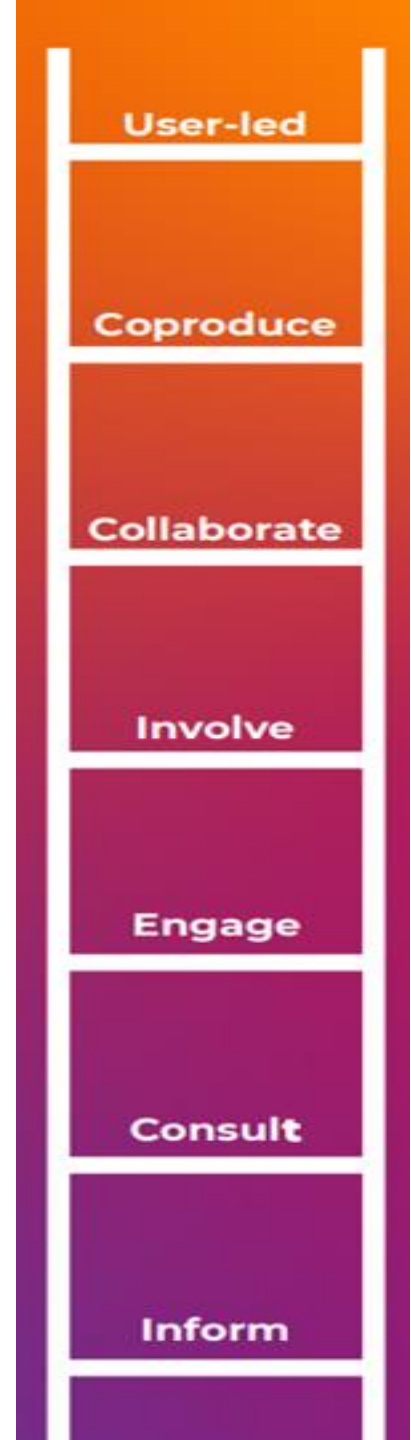
**Please take a seat back at
your table....**

**There are worksheets for you
to jot down your ideas.**

Overcoming barriers and challenges to coproduction

Have you met barriers to coproduction?
How have you managed those?

Jot down, in your teams, 1-2 tangible things you can do to address any challenges/barriers to having coproduction in your service development..



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Thank you for all your participation and engagement.

I hope you found the session useful and you have some practical/tangible things to take away and action in the coming weeks.



Break

14.10 – 14.20

From Testing to Implementation

Clementine Fitch Bunce
Quality Improvement Coach

From testing to implementing



Applying Quality Improvement

Theory and Prediction:

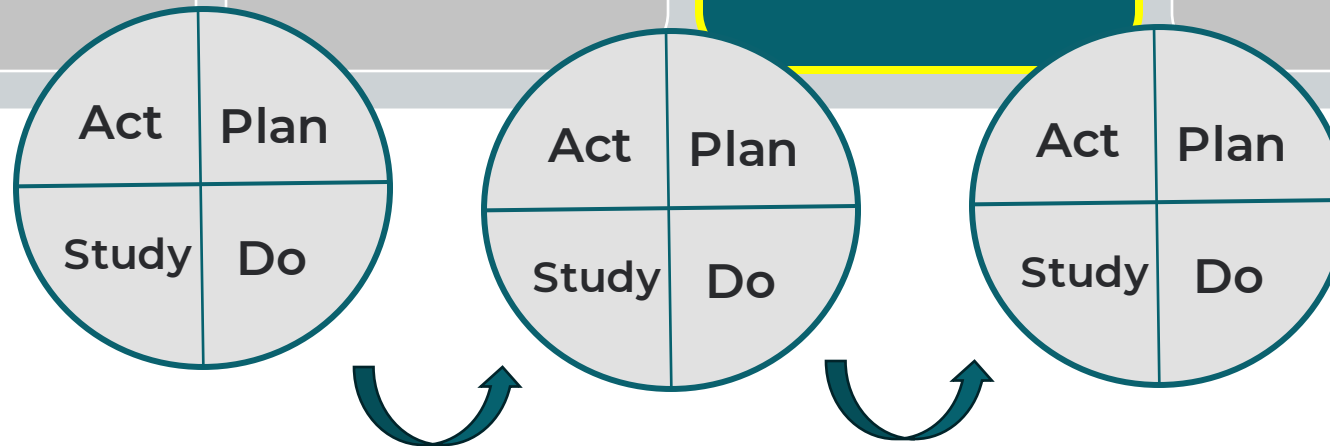
- Identification of quality issue
- Understanding the problem

Developing a strategy and change ideas

Testing under a variety of conditions

Implementation a change

Sustaining improvements and spreading changes to other locations



What is Implementation?

- You've tested changes to find the ideas that work.
- You've developed a high degree of belief that your changes work and now, it's about holding onto that, and really embedding it into your practice.

What is Implementation?

- Implementation is about making a change a part of your day-to-day operation of your system.
- A great way of testing how embedded your changes are, is to ask yourself: *how confident are you that the change you've made would continue, even if you or your leads were away from the team, for a month?*

Drivers of implementation

1 & 2. Standardisation & documentation- *make it part of process and policy*

3. Measurement and quality control- *over time and data shared with teams*

4. Staff education/training/induction/support- *up-skill and train new staff coming into your service, to the new way of doing things*

5. Resources and funding

6. Maintaining engagement across the team- *support the continued engagement and collective leadership of the work*

Implementation

Some of you may not be at the implementation stage however, it's helpful to think about the steps to consider, when you get to this stage.

Implementation checklist



25 minutes

- On your table is a scenario
- Read through it, and work through the sheet provided on your tables
- Alternatively, you can use one of your own change ideas, and apply it to the sheet

Drivers of implementation

1 & 2. Standardisation & documentation –
make it part of process and policy

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- up-skill and train new staff coming into your service, to the new way of doing things

5. Resources and funding

6. Maintaining engagement across the team
– support the continued engagement and collective leadership of the work

Examples

- Flow chart to map out the new process
- Information saved in a specific file on the ward

- Data from Trust dashboard
- Noticeboard

- Peer training
- Integrated in HR process for new starters

- Discuss with senior staff

- Standing item in meetings
- Posters on the ward
- Away day

Feedback and Close

Matt Milarski (he/him)
Head of Quality Improvement

Next Sessions

1. Your next meeting with your QI coach

2. Development Network (online)

Thursday 26 September, 11am-12pm

3. Online Workshop

Thursday 24 October, 2pm-3pm

4. Development Network (online)

Wednesday 4 December, 11am-12pm

End of QuITT QI Collaborative Programme

Tuesday 21st January 2025, 10.30-15.00 at RCPsych

How did you find today's event?

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

Please use the QR code here or on your name badges to access the online form. Paper copies are also available on your tables.

Feedback Form: Quality
Improvement in Tobacco
Treatment QI Collaborative

