What can Quality Improvement Methods do for you?

Leigh Jolly, Service Manager, Aberdeenshire Council
Diana Beveridge, Scottish Government
Carol Wassell, CELCIS
Low levels of educational engagement and achievement feed into high levels of poverty, homelessness and poor mental health.

Rates of suicide and self-harm are higher than that of the general population.

In 2013 a third of young offenders had been in care at some point in their childhood.

*Children’s Social Work Statistics, Edinburgh; Furnivall, J (July 2013)*


*Prisoners who have been in care as ‘looked after children’ 2013: 14th Survey Bulletin, Scottish Prison Service, p.5*
‘Strong evidence for an innovation is necessary but not sufficient to result in its adoption.’

Mark Freeman, 2012, The International Journal of Management Education
Circle of Influence

Circle of Concern
I CHANGED ALL MY PASSWORDS TO INCORRECT

SO WHENEVER I FORGET, IT WILL TELL ME 'YOUR PASSWORD IS INCORRECT.'
Introduction to Improvement

Diana Beveridge

Leading Improvement Team
Scottish Government
Execution

Ideas

Will

Execution
"I had an epiphany."
The Typical Approach...

Conference Room

DESIGN → DESIGN → DESIGN → DESIGN → APPROVE

Real World

IMPLEMENT
The Improvement Framework Approach

Conference Room

Design

Real World

Test & Modify

Test & Modify

Test & Modify

Approve if necessary

Start to implement
The Model for Improvement

‘This model is not magic, but it is probably the most useful single framework I have encountered in twenty years of my own work on quality improvement’

Dr Donald M. Berwick
Former Administrator of the Centres for Medicare & Medicaid Services
Professor of Paediatrics and Health Care Policy at the Harvard Medical School
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?

Aim

Measures

Changes

Testing

Implementation
Aim 1

By 30/6/15 90% of children will be presented to the Adoption and Permanence Panel within 12 weeks of the LAC review recommendation to rule out rehabilitation to parental care.
By 30 June 2015 90% of children will be presented to the A&P panel within 12 weeks of the LAC review decision to rule out rehabilitation to parental care.

1- % presented within 12 weeks
2- Time taken by individual child shown by recommendation and Panel date

Draft Vision - Every child is settled and happy (Version 0.6) 14/8/14

Aim: By 30 June 2015 90% of children will be presented to the A&P panel within 12 weeks of the LAC review decision to rule out rehabilitation to parental care.

Primary Drivers: Timely Decision making and action

Secondary Drivers:
- Establish/monitor key measures/goals focused on each child
- Contact decisions shaped to child
- Confident well trained workforce
- Remove unnecessary admin
- Robust fit for purpose assessments
- Remove bottlenecks between teams
- Provide early notification
- Timely Medical assessment
- Timely legal advice

Specific changes:
- Use of individual timelines for each child with photograph
- LAC chair coordinates timeline
- Redesigned A1 (recommendation notification)
- LAC coordinator contacts LAC chair re scheduled review to prompt A1
- Specific tests being developed/undertaken by CELCIS
- Practice Improvement Officer conducts support/mentor discussion within 2 weeks of recommendation
- Use of single assessment report instead of form E
- Change idea required around legal handover
- Change idea required over streamlining admin/paperwork
- Practice Improvement Officer conducts support/mentor discussion within 2 weeks of recommendation
- E-mail LAC nurse rather than write
- Change idea required around Families Team/Permanence Team handover

Balancing:
- Average time to panel for pre-project children
- Number of pre-project children still awaiting panel
- Number of panels where recommendation not approved
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?

The Improvement Guide, API
From ideas to action

CHANGE: Support Meeting

60+ PIO meetings – planning for implementation

Testing under a variety of conditions

1 Baby

Simulated test (practice on existing case) 11/3/14

Child 1 (3 cycles: SW, health, legal) 2/4/14

21 Single plans in place, now testing with adopters

8 Timelines tested – evolved into whole new test

537x414 – planning for implementation
What does the data tell us?

Control chart showing time taken from recommendation to Panel
Shown by recommendation date

The baseline average (41.1 weeks) is calculated using April to Dec 13 data points. (pre project There are still 3 children outstanding from this period so the centre line will increase when these children (all with recommendation dates of October 13) get to panel.

There are no children outstanding from the recommendation period Nov 13- June 14. We are seeing much less variation and the average has improved to 30.4 weeks during this period.

From July 14 onwards this data is incomplete and will change as more children come to Panel - you can see numbers outstanding in chart 3. But based on this limited data we can see even more children having a panel or kinship decision within 12 weeks and we want to build on this.

Aim =12
Do ➔ Study ➔ Act ➔ Plan ➔ Do ➔ Study ➔ Act

“Do” ...

“What will happen if we try something different?”

“Act” ...

“Let’s try it!”

“Study” ...

“Did it work?”

“Plan” ...

“What’s next?”

“Adapt, Adopt or Abandon?”

“Purpose, Predict & Prepare”

“Study” ...

“Reflect & Record”

“Do” ...

“Data”
The Skittle Challenge
The Skittle Challenge

• **Aim** – to be left with one Skittle at the end
• **Measure** – number of Skittles left (outcome)
• **Changes**  – which one to remove first?
  – what order to remove them in?
  – how you work as a team?
• **Execution**
  – Put a Skittle on each circle
  – Remove one to start
  – Jump over one at a time and remove it
  – Keep going until you can’t jump over any more
  – How many are left?
  – Each round lasts four minutes
  – Think about how it went and what you could improve next round
  – DO NOT EAT the Skittles
<table>
<thead>
<tr>
<th>PDSA #</th>
<th>Plan – what do you think will happen?</th>
<th>Do – what actually happened?</th>
<th>Study – were your predictions right?</th>
<th>Act – what should we do differently next time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A solution....

6 → 1, 4 → 6, 1 → 4,
7 → 2, 13 → 4, 2 → 7,
11 → 4, 14 → 5, 10 → 3,
3 → 8, 4 → 13,
12 → 14, 15 → 13
PDSAs – KEY POINTS

- Cannot be too small
- One PDSA will almost always lead to another
- Help you to be thorough & systematic
- Help you learn from your work
- Can produce rapid results
What change idea will you test?
The power of data

“Oh ****...
I’ll get my P45”
Permanence and Care Excellence

A whole system approach to improvement

Leigh Jolly
Social Work Manager
Aberdeenshire Council

www.celcis.org
April 2011 – child accommodated on a CPO - Age 9 months
Permanence Panel approves plan July 2013 - Aged 2 years
November 2013 – placed with Adoptive family (3 years 4 months)
Why is Early Permanence important?

• Evidence shows...early stability and permanence...for children...can aid development of secure attachment and leads to improved life chances.

• MORE than good practice, it’s about improving children’s lives.
Permanence Cases - Dec 14

POAA- Permanence Order with Authority to Adopt
14 live (25 children)
Date accommodated to Date Permanence Plan made at LACR

Average – 11.5 months
Longest – 26 months
Shortest – 3 months

PO- Permanence Order
19 cases live (21 children)
Date accommodated to Date Permanence Plan made at LACR

Average – 15 months
Longest – 38 months
Shortest – 5 months
Permanence Cases – Dec 14

Permanence Order – Kinship Care
5 live cases (10 children)
Date accommodate to Date Permanence Plan made at LACR

Average 25 months
Longest - 41 months
Shortest - 14 months
PACE leads in Aberdeenshire

Contributors

Social Work – Child & Families, Fostering, Adoption & Permanence
Children's Hearing Members – Convenor & Depute Convenor
SCRA – Principal Reporter
Education – Service Development Officer & Ed Psychologist
Health – LAC Nurse
Data Person
CELCIS
Scottish Government Improvement Team.
PACE Aim 1: To reduce the time taken from child being accommodated to the options appraisal meeting (OAM)

<table>
<thead>
<tr>
<th>Aim</th>
<th>Primary Drivers</th>
<th>Secondary Drivers</th>
<th>Specific change ideas</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vision</strong></td>
<td>each child lives in a stable, safe, secure and happy home, where they know they will stay until independent and where they can make lifelong connections.</td>
<td></td>
<td>In development for test</td>
</tr>
<tr>
<td><strong>90% of children</strong></td>
<td>accommodate before their 12 birthday will have a permanence plan within 9 months by the end of January 2016 (milestones may also be required)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>System wide culture</strong></td>
<td>that puts the child at the centre</td>
<td>Clear child history (multi agency)</td>
<td></td>
</tr>
<tr>
<td><strong>Assessment</strong></td>
<td>and timely decision making</td>
<td>Clear measurable MAPM plans-ID of type of assessment</td>
<td></td>
</tr>
<tr>
<td><strong>People</strong></td>
<td></td>
<td>Tracking/monitoring process of children’s journeys including early identification of entry into the system</td>
<td></td>
</tr>
<tr>
<td><strong>Early planning</strong></td>
<td>(timescales) which is communicated to parents</td>
<td>Early planning (timescales) which is communicated to parents</td>
<td></td>
</tr>
<tr>
<td><strong>Robust, evidence based</strong></td>
<td>assessment</td>
<td>Workload management</td>
<td></td>
</tr>
<tr>
<td><strong>Streamline reports</strong></td>
<td>and reduce duplication (BAAF, CAPR, parallel working)</td>
<td>Partners communicate, share urgency, and understand roles and responsibilities</td>
<td></td>
</tr>
<tr>
<td><strong>Information</strong></td>
<td></td>
<td>Robust, evidence based assessment</td>
<td></td>
</tr>
<tr>
<td><strong>Early warning</strong></td>
<td></td>
<td>Early warning scorecard/template (e.g. older children, children with disabilities and carefirst warning flags)</td>
<td></td>
</tr>
<tr>
<td><strong>Joint consultation</strong></td>
<td></td>
<td>Joint consultation with SCRA, CHS, SW &amp; L&amp;G around guidance on assessing contact.</td>
<td></td>
</tr>
<tr>
<td><strong>Questionnaire</strong></td>
<td></td>
<td>Questionnaire to adopters/foster carers about education experiences to inform change ideas</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Parental Consent template for Sect 11s following OA.</td>
<td></td>
</tr>
<tr>
<td><strong>Hold child’s plan</strong></td>
<td></td>
<td>Family meeting held by 6 week review</td>
<td></td>
</tr>
<tr>
<td><strong>tracking/monitoring</strong></td>
<td></td>
<td>Questionnaire to gauge staff confidence and training needs in permanence planning. Joint training with SCRA</td>
<td></td>
</tr>
</tbody>
</table>

* Clock starts when child accommodated and stops when a Permanence Plan is agreed at the Options Appraisal (OA).
**People**

- Worker confidence/skills
- Capacity
- Reduce duplication in paperwork
- Complete reports/assessments earlier (by OA/LAC review)
- Well managed transitions
- Joint early Planning
- Clear agreed timescales aligned to purpose (outcome for child)
- Continuous focus on progress

**Streamline work**

- Training
- Mentoring support
- Staffing levels
- Contingency arrangements

**Child Focus (system wide)**

- PACE Driver Diagram 2: Reduce time taken from the child’s Permanence Plan being agreed at the Options Appraisal Meeting to the Panel ratifying the recommendation

**Vision** – each child lives in a stable, safe, secure and happy home, where they know they will stay until independent and where they can make lifelong connections.

<table>
<thead>
<tr>
<th>Aim</th>
<th>Primary Drivers</th>
<th>Secondary Drivers</th>
<th>Tertiary drivers</th>
<th>Specific change ideas</th>
</tr>
</thead>
<tbody>
<tr>
<td>All children under 12 with a PO/POAA Plan will be presented to Panel within 12 weeks of the Plan being agreed</td>
<td>Worker confidence/skills</td>
<td>Clear agreed timescales aligned to purpose (outcome for child)</td>
<td>LAC Manager sets date for Permanence Panel</td>
<td>Match identified at an earlier stage for child</td>
</tr>
<tr>
<td></td>
<td>Capacity</td>
<td>Joint early Planning</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Reduce duplication in paperwork</td>
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<td></td>
<td>Well managed transitions</td>
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<tr>
<td></td>
<td>Training</td>
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<tr>
<td></td>
<td>Mentoring support</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Staffing levels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Contingency arrangements</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Tests**

- Team manager sets timescales for completion of social work task
- Specific change to be worked up around Form E - learning to be taken from another authority
- Match identified at an earlier stage for child
- Children and Families Team and Permanence Team meet/work together before LAC options appraisal
- LAC Manager sets date for Permanence Panel
Chart – outcome measure % of children who had an OA within the quarter that got there within 9 months

<table>
<thead>
<tr>
<th>Quarter</th>
<th>No. at OA</th>
<th>Within</th>
<th>Outwith</th>
<th>% in time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct-Dec 13</td>
<td>15</td>
<td>5</td>
<td>10</td>
<td>33%</td>
</tr>
<tr>
<td>Jan-Mar 14</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>50%</td>
</tr>
<tr>
<td>April-June 14</td>
<td>6</td>
<td>2</td>
<td>4</td>
<td>33%</td>
</tr>
<tr>
<td>Jul-Sep 14</td>
<td>12</td>
<td>2</td>
<td>10</td>
<td>17%</td>
</tr>
<tr>
<td>Oct-Dec 14</td>
<td>11</td>
<td>2</td>
<td>7</td>
<td>18%</td>
</tr>
<tr>
<td>Jan- Mar 15</td>
<td>8</td>
<td>2</td>
<td>6</td>
<td>25%</td>
</tr>
<tr>
<td>Apr-Jun 15</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td>80%</td>
</tr>
</tbody>
</table>
Time from Accommodation to OA by individual child shown by OA Date
(shows all children who have had an OA since January 2013)

Centre point mean = 11.2

Aim = 9 months
Number of children accommodated for 9 months or more still to have their OA

- May-15: 20
- Jul-15: 19
Number of months children (accommodated for 9 months or more) who have still to get OA have been waiting.
Aim 2 - % of children reaching Panel within 12 weeks of their Options Appraisal. Shown by quarter in which options appraisal held

Aim = 90%

need to double check the data here
What have we learnt...

- You can’t solve a problem if you don’t know what the problem is.
- Data and ‘an understanding of data is really important’
- Testing change allows for tinkering or scrapping of ideas
- Change ideas come from the heart of the workforce
- Keep only what works
- Measuring improvement is a must
- Multi agency buy in is key!
- Change doesn’t happen overnight 😞
- But change does happen...😊