Whole System Transformation: What it Takes

27th Annual National Forum on Quality Improvement in Health Care

Dec 7, 2015

Doug Eby & Leanndra Ross
Jason Leitch
Göran Henriks
Policy & Politics

Aims:
To deliver the highest quality healthcare services to the people of Scotland

For NHSScotland to be recognised as world-leading in the quality of healthcare it provides
Learning System

- System level measures
- Explicit theory or rationale for system changes
- Segmentation of the population
- Learn by testing changes sequentially
- "Act for the individual, learn for the population"
- Learning during scale-up and spread & plan to go to scale
- Periodic review
- People to manage & oversee the learning system

Source: Tom Nolan
Improvement Capacity Building: Scotland’s Approach

Advanced Knowledge  Introductory Knowledge  Advanced Knowledge

Improvement Science  Leadership for Improvement

Scottish Improvement Leader (ScIL)

Quality Improvement Fellowship

Impr Science in Action

Boards on Board

Improvement Collaboratives
Communications
1. Policy & Politics
2. Learning System
3. Communications

@jasonleitch
Göran Henriks
Chief Executive of Learning and Innovation,
Qulturum, County Council of Jönköping, Sweden

“The worst loneliness is to not be comfortable with yourself.” - Mark Twain
Challenges Vertical or Network Model?

- Single Integrator
- Multiple Co-Integrators: A modernized Municipality Model

Ownership

Vertical Integration
Horizontal Integration

Vision, Principles, Collaborative, Trustable meeting places

Source: Stephen Covey and Bill Tolbert, Adapted by Dave Ford

Choluteca river bridge, Honduras
Julius Yego from Kenya Won gold in World championship in Javelin by learning from you-tube


Three Hospitals
The Basic idea – radical customer focus

What is best for Esther?

Esther... no matter where, we will be there!

www.qulturum.se
From production to knowledge transfer and service distribution

- Person centered and equal service
- Horizontal integration
- No unwanted Variation
- Big data
- Concentration of service
- Glocalisation
“Safety measurement and monitoring in healthcare: a framework to guide clinical teams and healthcare organisations in maintaining safety”
BMJ Quality & safety 2014
Charles Vincent m fl

The measurement and monitoring of safety
The Health foundation, April 2014

Figure 1 A framework for safety measurement and monitoring.
For this need new concepts and acting into new thinking is needed

- The key is not only the product but the function for the citizens and patients
- The competence base is no longer just what I do…
- ..so how can we best develop collaboration, both internally in the patient journey but also in every meeting?
- This is something profoundly different to pure production logic

Exnovation and resilience

- The day-to-day practice unfolds in a space as normal to illegal, Ref: Amalberti and colleagues
- A way the employees develops collective competence (Boreham et al., 2000) so they together can make it possible for them to design a net of safety procedures.
Needed transition in JCC

**Volume**
- Satisfied patients
- Face the problem when it comes
- Run faster or increase resources
- Hospitals and clinics that meet all needs
- Good examples

**Value**
- Person-centered care
- Working with prevention and planning next steps
- Decrease under/over use
- Highly effective collaborative processes
- Specialised units
- Rapid dissemination and equitable care

**System leadership**
- Systematic Quality Improvement
- Governance
- External partnerships
- Citizens influence
- Resultats

**Need of the citizens**
- Kontakt
- Prevention
- Egenvård
- Diagnostik
- Behandling
- Omvårdnad
- Rehabilitering
- Avslut
- Uppföljning
- Samverkan

**Support**
- Finances
- Communication
- HR
- Competence development
- Service
- Environment

*Regionfullmäktige 25 november 2014*
Patient centred process mapping

Reference: Mari Bergeling
The patient's path through ERAS*

*Enhanced recovery after surgery

Contact and decisions about surgery

Preoperative

Intraoperative

Postoperative

Follow-up

E-health

Region Jönköpings län

Fullmäktige 25 november 2014
International Developments in Self-Directed Care

Exhibit 1. SDC Participants Use More Preventive Care, Fewer Crisis Support Services

<table>
<thead>
<tr>
<th>Service Event</th>
<th>SDC</th>
<th>Non-SDC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crisis stabilization</td>
<td>8</td>
<td>25</td>
</tr>
<tr>
<td>Crisis support</td>
<td>10</td>
<td>29</td>
</tr>
<tr>
<td>Assessment</td>
<td>29</td>
<td>37</td>
</tr>
<tr>
<td>Medical incl. psychiatry</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Outpatient psychosis</td>
<td>101</td>
<td>79</td>
</tr>
<tr>
<td>Outpatient psychopharmacology</td>
<td>86</td>
<td>86</td>
</tr>
<tr>
<td>Supported employment</td>
<td>59</td>
<td>59</td>
</tr>
</tbody>
</table>


Vidhya Alakeson, M.Sc.
U.S. Department of Health and Human Services

Mobile Geriatric Team

- Film: youtube….

Anette Abrahamsson, Annmargreth Kvarnefors and Göran Henrik
Senior alert
- a Swedish national quality registry for Care prevention of the elderly
Qulturum Region Jönköping county

The care preventive process of Senior alert

Follow the process to be sure it makes difference, Reflect results and do improvement work
Risk assessments

**Malnutrition**
Mini nutritional assessment, MNA
(Rubenstein LZ 2001; Barone, Milosavljevic et al. 2003; Guigoz 2006).

**Pressure ulcer**
Modified Norton Scale

**Fall**
Downton fall risk index, DFRI
(Rosendahl, Lundin-Olsson et al. 2003)

**Oral Health**
Revised Oral Assessment Guide, ROAG
(Andersson P. 2004; Hassel AJ et al. 2008)

**Incontinence**
Swedish network Nikola
(www.nikola.nu, 2015)
Team work

Large scale spread 2010-2014

- Part of a national program 2010-2014 – Better life for sick elderly
- Staff in Qulturum
- 25 hired coaches 2010-2011, 10 hired coaches 2012 and fw
- 1200 region koordinators all around Sweden
- 5000 in Basic education
- 900 improvement teams in micro study circles
- 250 Webinars: over 2500 participants
  for example: To register, the preventiv process, measure, improvement work, good examples, oral health,
- 2000 in inspirations days
- Daily support by phone and e-mail
- www.senioralert.se
- Social medias
Improvement collaboratives

Learning goals
improvement teams 2011-2014

1= rated lowest knowledge 10= rated highest knowledge
Risk of fall, pressure ulcers, malnutrition, bad oral health (+ 65 yrs) (n= 1,200,000)

- Risk of fall 66%
- Risk of malnutrition 59%
- Risk of bad oral health 47%
- Risk of pressure ulcers 23%
- No risk 18%

2011-2014
Percentage risk assessments including interventions in municipalities of Sweden (nursing homes)
Persons with risks who has got at least one preventive action

Pressure ulcers are reduced
Weightlosses >5% are reduced

Municipalities who works with oral health and interventions have less weight loss >5% vs the municipalities who don’t work with oral health
Are we doing the right things?
The most common preventive actions 2014

<table>
<thead>
<tr>
<th>Fall</th>
<th>Malnutrition</th>
<th>Pressure ulcers</th>
<th>Oral health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alert/extra supervision</td>
<td>Extra meal</td>
<td>Skin control</td>
<td>Assistance during toothbrushing</td>
</tr>
<tr>
<td>Assistance in moving</td>
<td>Nutritional drink</td>
<td>Extra meal</td>
<td>Lubricate the lips</td>
</tr>
<tr>
<td>Assistance with personal care (get</td>
<td>Reduce overnight fast</td>
<td>Decubitus equipment</td>
<td>Moisten the oral mucosal membranes</td>
</tr>
<tr>
<td>dressed, showering etc)</td>
<td>Weigh every three months</td>
<td>A good position in the chair and bed</td>
<td></td>
</tr>
<tr>
<td>Walking exercise</td>
<td>Encouragement and warnings</td>
<td>Reduce overnight fast</td>
<td></td>
</tr>
<tr>
<td>Go through drug list with a doctor</td>
<td></td>
<td></td>
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Oral health

- Assistance during toothbrushing
- Lubricate the lips
- Moisten the oral mucosal membranes
Follow the preventive care online

Get started  Follow the process  The outcome

Keep track of Prevention
- for every one, every day

Every line is one person.
Green is good, yellow OK and red indicates that it’s not done or not completed.

Region Jönköpings län
Check in at your table:
• Is contextual customization vs. standard bundles an “either/or” or a “both/and” scenario?

Time: 15 minutes

Group Discussion & Response
Mobilize Staff at Scale

Göran Henriks
Chief Executive of Learning and Innovation,
Qulturum, County Council of Jönköping, Sweden
How to ignite

ENERGY FOR CHANGE

...a tribute to my colleagues but most of all to Helen

How to develop Energy for change

The capacity and drive of a team, organisation or system to act and make the difference necessary to achieve its goals
Dreamhack, Jönköping

Virtual reality
The Care Center

https://www.youtube.com/watch?v=ZTbZGAeJ374
78 133 has seen the Hand washing video

Develop the robust microsystem
Togetherness, passion, inspiration, patient centeredness

About hand disinfectant, gloves and robustness
Attention economy and the new emotional bridges