

Episode 14

QPS TalkTime



A community of quality and patient safety improvers

Tuesday 24th October 2023 | 1pm to 2pm

Engaging staff in quality and patient safety



An Stiúrthóireacht um Ardchaighdeán
agus Sábháilteacht Othar
Oifig an Phríomhoifigigh Clínicíúil

National Quality and
Patient Safety Directorate
Office of the Chief Clinical Officer



NQPSD Resources

Join the Q Community

Apply to become a member of Q Community – find out more via the Q Website

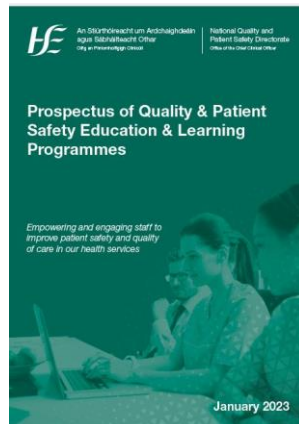


For information on how to apply contact:

qps.improvement@hse.ie

Access Education and Learning

Find out about courses available to you and your Team



World Patient Safety Day 2023

World Patient Safety Day
17 September 2023



Scan to access resources



Listen to our podcast series

Listen to seven podcasts based on the Patient Safety Strategy themes.



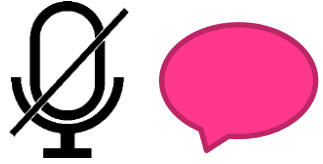
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 **YouTube**
HSE National QPS
@NationalQPS



How we are running today's session



- You will be muted but the chat is open throughout - please post any questions or comments there and we will address them after the presentation.



- If your tech fails, don't worry – we're recording it so you can watch back on the NQPSD YouTube channel and access the slides at your convenience.



- Audio is available via your PC or dial in:
+353-153-39982 Ireland Toll
+353-1526-0058 Ireland Toll 2
Access code: 2730 808 9821



Please feel free to continue the discussion on Twitter / X: **@QPSTALKTIME**
| @NationalQPS | @npsolRL | @mapflynn | @johnfitzsimons9 | @juanitaguidera |
| #QIreland | #patientsafety |



- Please help us to improve our QPS TalkTime Webinars by completing a short feedback form (pop up window before you log out)



- You will receive an email from QPS TalkTime confirming your attendance

To get started ... we invite you to

Share using the chat box

- Your name, work and where you are joining us from ...
- Finish this statements:

How are you cultivating autonomy while maintaining accountability in your role?

Patient Safety Strategy 2019-2024



Seirbhís Sláinte
Níos Fearr
& Forbairt

Building a
Better Health
Service

Patient Safety Commitments:

1

Empowering and Engaging Patients to Improve Patient Safety

We will foster a culture of partnership to maximise positive patient experiences and outcomes and minimise the risk of error and harm. This will include working with and learning from patients to design, deliver, evaluate and improve care.

2

Empowering and Engaging Staff to Improve Patient Safety

We will work to embed a culture of learning and improvement that is compassionate, just, fair and open. We will support staff to practice safely, including identifying and reporting safety deficits and managing and improving patient safety.

Commitment 2: Empowering and Engaging Staff to Improve Patient Safety

Actions

- 2.1 We will **support staff to deliver safe, high quality care** by ensuring their work environment and health care structures and processes are designed and managed to facilitate safe practice.
- 2.2 We will facilitate and co-ordinate efforts to **assess, plan and manage workforce and resource requirements**, using risk based prioritisation, to ensure safe systems of work and safe staffing levels that support improvements to patient safety.
- 2.3 Systems and processes will be further developed to **ensure that staff are effectively listened to, communicated with and are fully involved and engaged** in the planning and delivery of the services they provide and that they are supported and facilitated to raise safety concerns and improve patient safety.
- 2.4 We will **enhance the capacity and capability of health and social care services and staff to improve patient safety** by designing and delivering safety information and training to include patient safety and reliability science, systems thinking, audit, quality improvement methodologies, change management, human factors and multidisciplinary team working for safety.
- 2.5 In partnership with staff and training bodies, we will develop strategies to **promote behaviours that support a culture of safety** including collective leadership, communication and multidisciplinary team working. This will include strategies that enhance situational awareness, for example 'safety pauses' for teams.
- 2.6 We will facilitate the continued **coordination, networking, sharing and learning for patient safety** amongst patient safety leaders, staff, health care providers and external agencies such as the Health Information and Quality Authority, Mental Health Commission, Health and Safety Authority and State Claims Agency.
- 2.7 We will continue to support staff in **reporting and learning from incidents** and implement strategies to enhance and improve incident reporting and reviews.
- 2.8 We will improve and develop **supports (including psychological support) and care for staff** affected by serious patient safety incidents.
- 2.9 We will continue to **support programmes promoting a patient safety culture and person-centredness**.
- 2.10 We will **measure the culture of patient safety** across health and social care services and identify and implement actions to address identified deficits.

4 For example: Values in Action Programme, Staff Health and Wellbeing Programme, the National Healthcare Communication Programme and the National Programme to Enable Cultures of Person-centredness.

2.3 Systems and processes will be further developed to **ensure that staff are effectively listened to, communicated with and are fully involved and engaged** in the planning and delivery of the services they provide and that they are supported and facilitated to raise safety concerns and improve patient safety.

2.5 In partnership with staff and training bodies, we will develop strategies to **promote behaviours that support a culture of safety** including collective leadership, communication and multidisciplinary team working. This will include strategies that enhance situational awareness, for example 'safety pauses' for teams.

What does the evidence base tell us?



Staff Engagement is the greatest indicator of organisational performance
As well as being the ethos we want to create for our staff... where staff engagement is higher or services support staff wellbeing the results are:

**lower patient
mortality**

**reductions in the
number of incidents**

**improved clinical
care**

**improved patient
experience**

**improved staff
wellbeing**

**lower absenteeism
rates**

**improved staff
retention**

**reductions in
financial waste**

**reductions in hospital
acquired
complications**

**reductions in hospital
readmissions**

QPS TalkTime



A community of quality and patient safety improvers

QPS TalkTime Ep.14

What is the session about?

- Meet one of the co-founders of Liberating Structures, Keith McCandless, Prof. Rob Cunney, Consultant Microbiologist and QI and Clinical Safety Lead and Matthew Mezey, systems convener extraordinaire
- Explore how you can engage creatively with people to improve quality and patient safety
- Hear, observe and participate in a sequence of LS designed to tap the wisdom of crowds
- Find out where you can access resources to help you



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QPS TalkTime



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Today's speakers



Prof. Rob Cunney

Consultant Microbiologist
and QI/Clinical Audit Lead
at Children's Health Ireland



Matthew Mezey

Q-Community, community
manager and systems
convener extraordinaire



Keith McCandless

Co-developer of
Liberating Structures



Bernie Austin

Programme Lead,
Community Healthcare West



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We will use a
tiny bit of
structure to
liberate!

Introducing The Deliberate Irony of Liberating Structures

with Keith, Rob, Matthew, Bernie, and Juanita



LIBERATING STRUCTURES

LS we will
use today...

LS Menu 	Wicked questions 	What³ debrief 	Min specs 	Heard, seen respected 	What I need from you 	Integrated autonomy 
Design elements 	Appreciative interviews 	Discovery and action dialog 	Improv prototyping 	Drawing together 	Open space 	Critical uncertainties 
1-2-4-All 	TRIZ 	Shift & share 	Helping heuristics 	Design storyboards 	Generative relationships 	Ecocycle 
Impromptu networking 	15% solutions 	25 : 10 crowdsourcing 	Conversation café 	Celebrity interview 	Agree/certainty matrix 	Panarchy 
9-whys 	Troika consulting 	Wise crowds 	User experience fishbowl 	Social network webbing 	Simple ethnography 	Purpose to practice 

A repertoire of 33+ protocols for shaping next steps and the future that include & unleash everyone



A G E N D A

(Re) Connecting Participants

Welcome and Introductions

Setting The Context

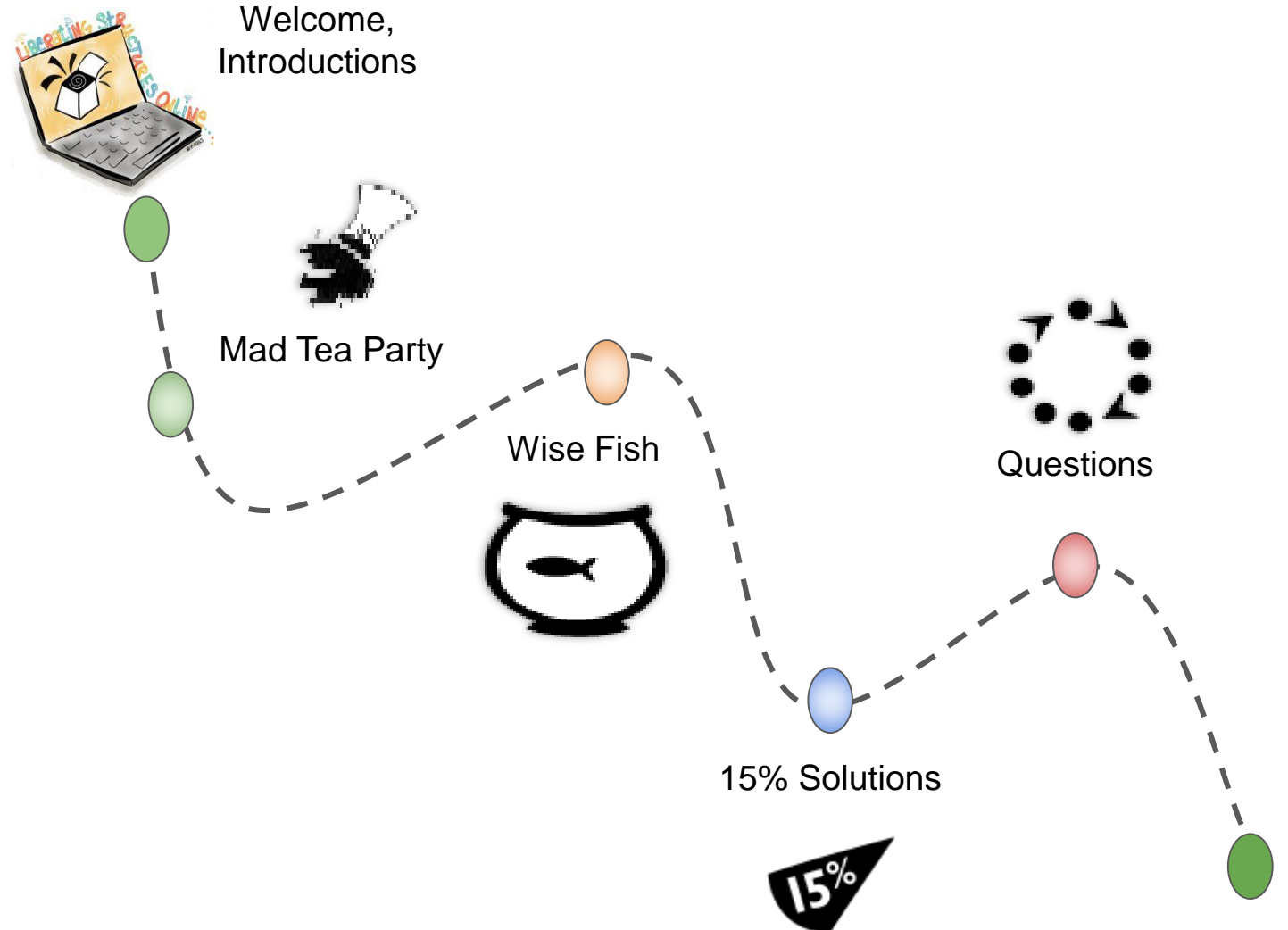
Wise Fish

Action Ideas

15% Solutions + Mad Tea Party

Closing + Next Steps

Questions and Evaluation





Purpose: Liberating Structures exist to...

Include and unleash
everyone
to work at the top
of their intelligence

Replace
unwitting practices
that exclude, stifle
innovation, and over-control

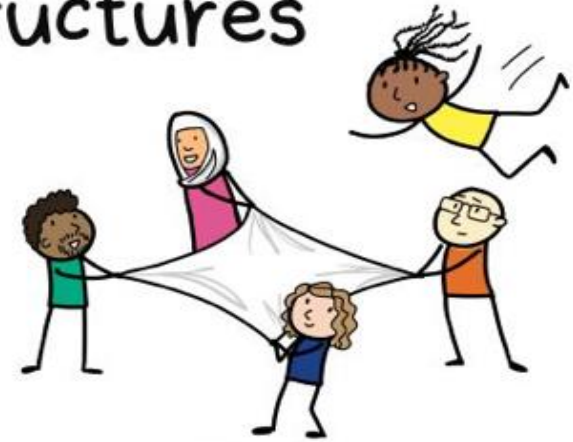
The 10 principles of Liberating Structures



1 Include and unleash everyone



2 Practice deep respect
for people and local solutions



3 Build trust as you go



4 Learn by failing forward



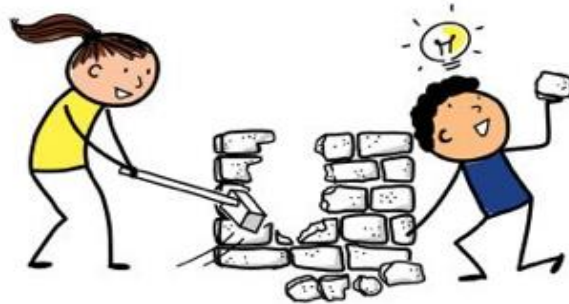
5 Practice self-discovery
within a group



6 Amplify freedom AND responsibility



7 Emphasize possibilities:
believe before you see



8 Invite creative destruction
to enable innovation



9 Engage in
seriously-playful curiosity



10 Never start
without clear purpose

Attributes of Liberating Structures



Expert-less



Results-focused



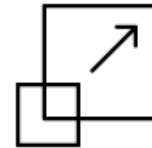
Rapid cycling



Seriously fun



Inclusive



Multi-scale



Self-spreading



Modular

Q DNA: Micro-Organizing Design Elements



? Make an Invitation



Distribute Participation



Configure Groups



Arrange Space & Materials

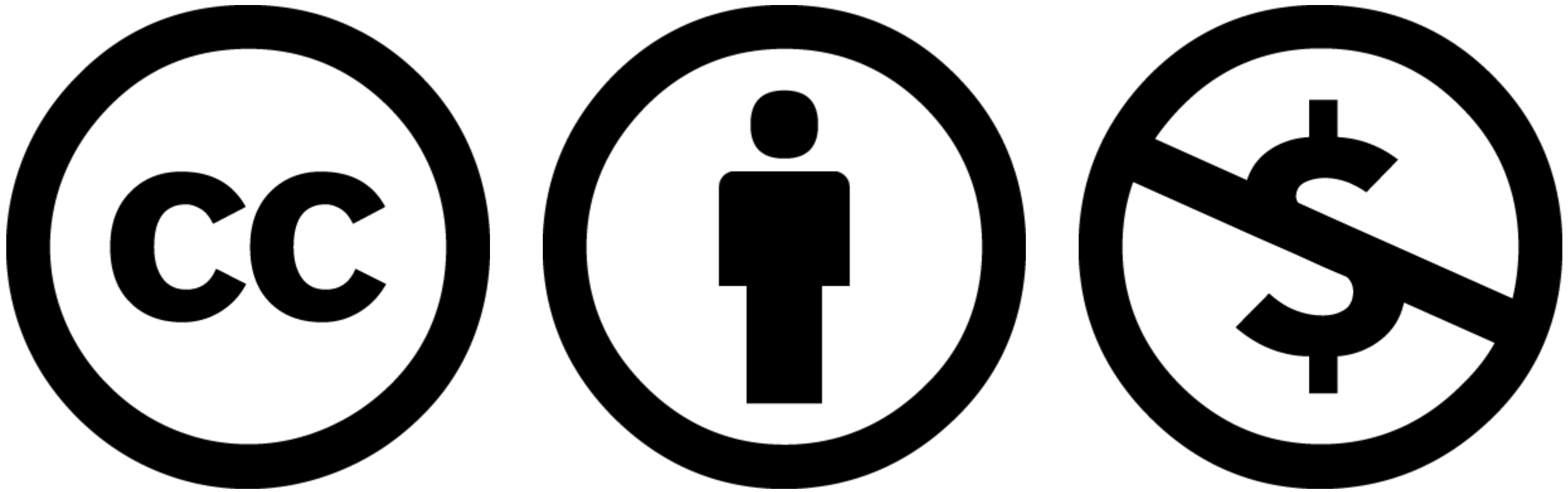


Sequence & Allocate Time



Graphics by Barish Golland, UBC

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You can use 'em, share 'em but you can't sell 'em



1-2-4-All

**Step
Sequence**

1 minute
alone, 2 in
pairs, 2 in
foursomes, 5 in
whole group

**Groups
Configured**

Face to face in
pairs and
foursomes

Invitation

What do YOU
see or suggest
or need to
learn?

Space, Materials

Equal time &
opportunity
for everyone

**Participation
Distributed**

Everyone
starting with
individuals

1-2-4-All

Generate and
sift many ideas
in rapid cycles



Mad Tea *Etiquette*

Rearrange a richer, deeper, funner context for taking a next step

1. Stay curious, dig deep, have fun.
2. Don't over think answers
3. Finish each of the open sentences with a short phrase!
4. We won't mention individuals or specific cases.
5. If you don't want to have your name attached in the public chat, you can share it in a direct message to Juanita



In Chat

*Spelling and grammar
amnesty is in play!*

**Wait until you hear “Go”
before answering the
next question!**

**Start your answer with
the number of the
question!**

Given our purpose to generate more positive engagement...

#1

One thing I do to spark more
positive engagement in meetings
about quality and patient safety is...

Given our purpose to generate more positive engagement...

#2

One thing that inhibits me from
engaging with your colleagues at
meetings about quality and patient
safety...

Given our purpose to generate more positive engagement...

#3

One thing that helps me get my “mojo”
back is...

Given our purpose to generate more positive engagement...

#4

A place where I have more
freedom and responsibility for
results is...

Given our purpose to generate more positive engagement...

#5

All I want is...



**What did the
Mad Tea
make
possible?**

Where else might you use this Liberating Structure?



WiseFish

A riff on UX Fishbowl and Wise Crowds



Instructions & Steps

We will turn video on and off and use Chat to achieve similar results.

1. Arrange chairs in a fishbowl format - with 4-6 chairs in the inner circle and the remainder outside. Invite someone who has a challenge they would like help on to volunteer and sit in the center circle. [1 min]. Bernie has volunteered!
2. Invite 3-5 participants to join the center circle as consultants. If necessary, the client can describe the challenge / offer context around the situation and the help they want [2 minutes]



Instructions & Steps

3. Consultants ask clarifying questions *only*. [3 mins]
4. Client turns their back on the consultants (or turns off camera and goes on mute) and listens in on the advice, recommendations, and suggestions being generated between the consultants. [8 mins]
5. Client turns back around and shares what was useful or not. [2 min]

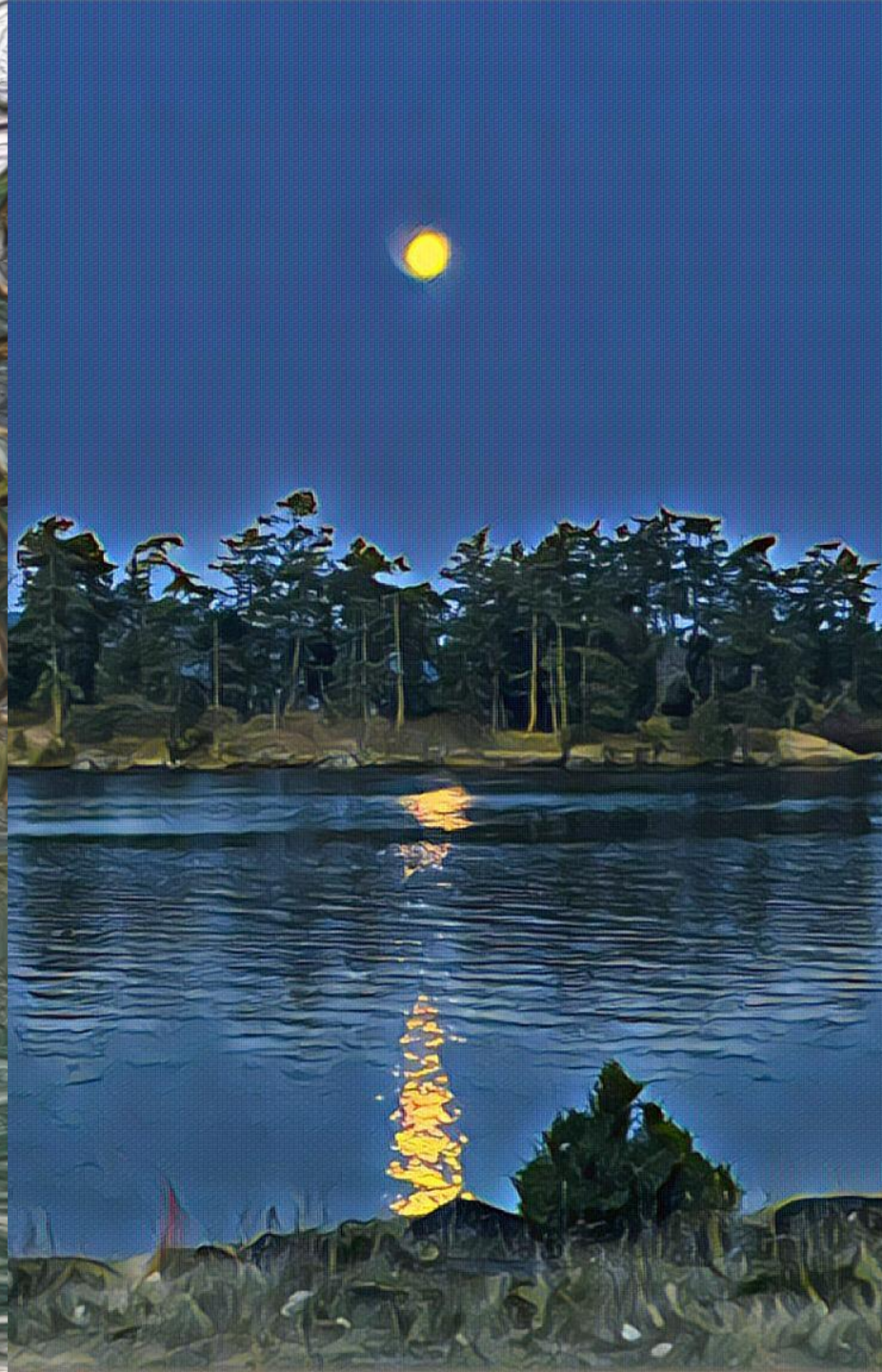


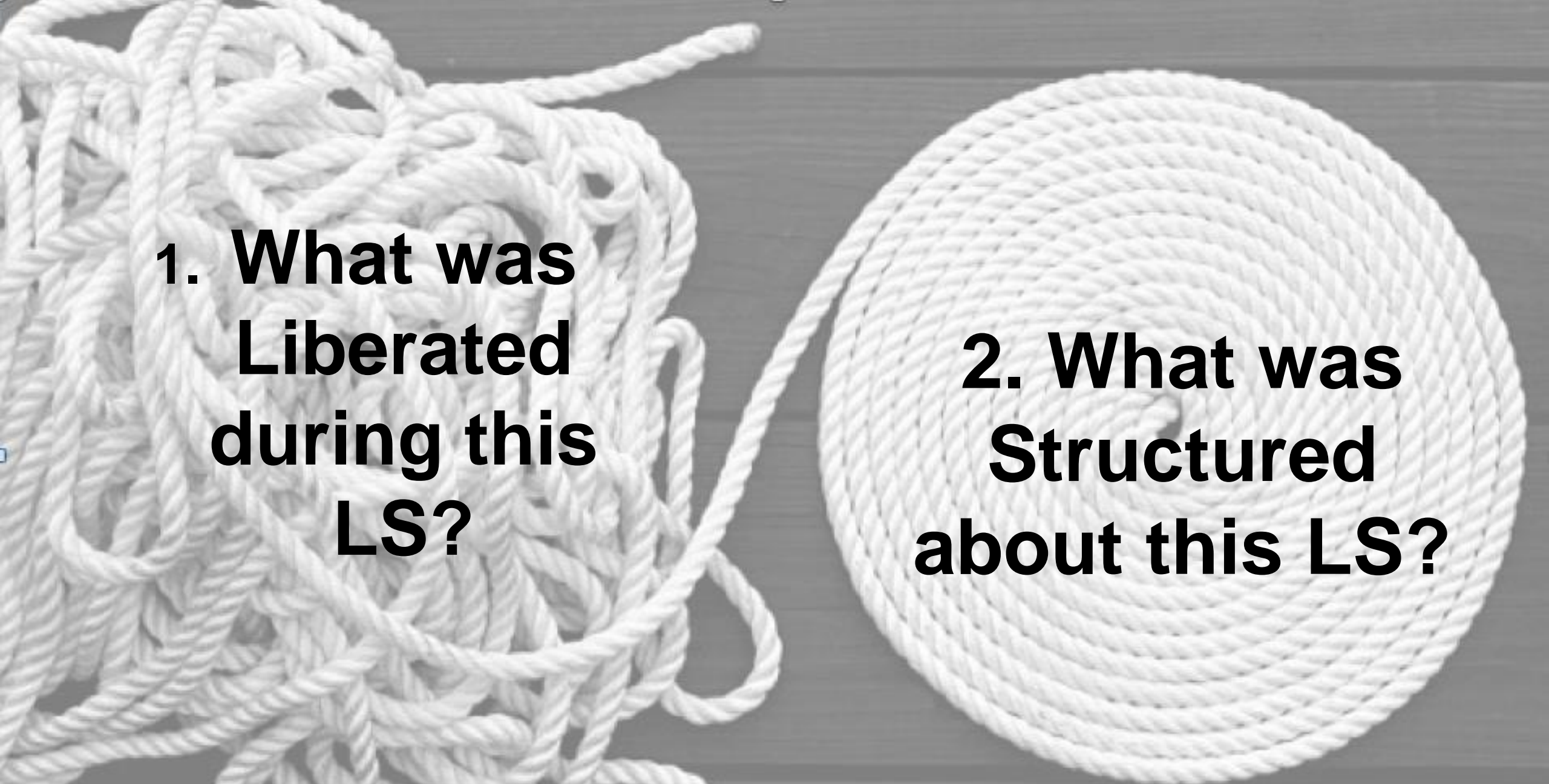
Additional instructions & Steps

8. Invite everyone on the outside circle to turn to a partner and discuss anything that they want to add or amplify from the initial consultation. [4 mins]
9. Outer circle pairs share their ideas. [5 mins]
10. Client finishes by following up on additional ideas that have been contributed. [2 mins]

You can invite participants to use Chat (*private* and *to all* messages)







**1. What was
Liberated
during this
LS?**

**2. What was
Structured
about this LS?**

3. Where else might you use this Liberating Structure?



15% Solutions

Discover And Focus On What Each Person Has The
Freedom And Responsibility To Do Now



A 15% Solution is something you can do right away **without** needing any more freedom, resources, permission, authority, or control.

Given what we've talked about today, what's one thing you can do right away where you have discretion to act right now.



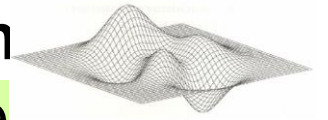
Machine Metaphor

How To Organize

1. **Role defining** – specify job and task descriptions
2. **Conflict management** – restore order in each part
3. **Tight structuring** – use formal chain of command
4. **Simplifying** – prioritize and limit the number of actions
5. **Socializing** – seek homogeneous values and ideas
6. **Decision making** – find the “best” or optimal choice
7. **Knowing** – decide and tell others what to do
8. **Controlling** – tightly managed execution with maximum specs
9. **Planning via forecasting** – plan and then roll out
10. **Staying the course** – align and maintain focus

Ecosystem Metaphor

How To Organize



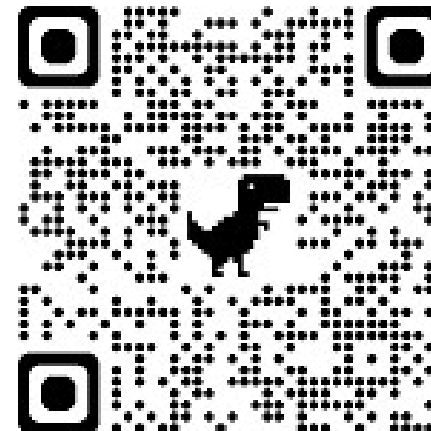
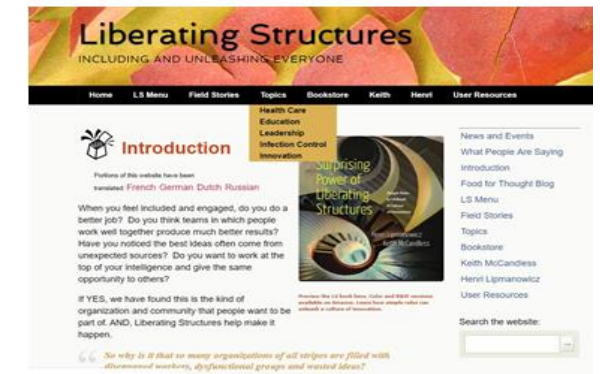
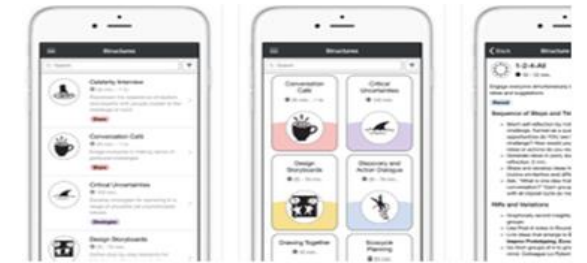
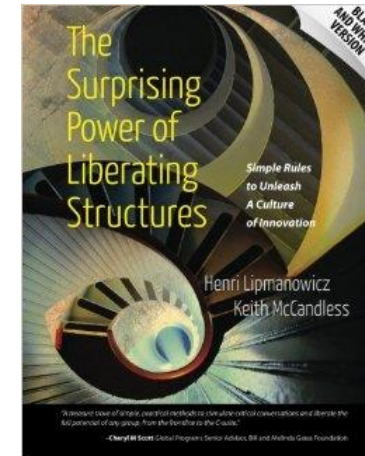
1. **Relationship building** – work with & shift interaction patterns
2. **Uncover paradox** – draw out difference as a source of creativity
3. **Loose coupling** – work with informal communities of practice
4. **Complicating** – add more degrees of freedom & multiple actions
5. **Diversifying** – draw out variation & exploit difference
6. **Sense making** – seek many right answers in different local contexts
7. **Learning** – act/learn/plan at the same time
8. **Structured improvising** – acting in an instant w/ minimum specs
9. **Co-evolving** – gain from surprise and disruption
10. **Noticing emergent direction** – build on what is possible now

Bonus Materials

- 1. Learning resources
- 1. Complexity science inspiration

Learning Resources

- Read the [Liberating Structures book](#)
- Join a [Liberating Structures User Group / Q Community User Group](#)
- <https://q.health.org.uk/community/groups/liberating-structures-in-healthcare/>
- Join the [LS Slack](#)
- [Liberating Structures Website](#)
- Get the LS app
[Apple Store](#) or [Google Play Store](#)
- Articles by Keith <https://keithmccandless.medium.com>
- [Tiny Tweaks](#) to guide you when using LS article by Barry Overeem



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Episode 15

QPS TalkTime



A community of quality and patient safety improvers

Tuesday 7th November | 1pm to 2pm

Hospice Friendly Hospitals

"QI approaches to improve End of Life Care"

Scan me!



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Let us know how we did today

Reminder: Short questions (pop up) as you sign off, please help us to improve our QPS TalkTime Webinars by sharing your feedback

We really appreciate your time, thank you.

*Thank
you*

Contact: Kris.Kavanagh@hse.ie to be included on our mailing list to receive QPS TalkTime invitations