



**A Basket/Selection of Useful Improvement
Tools and Models.**

Briefing/Update October 2010

Introduction

A JIT review of improvement tools to establish whether any are particularly suitable for use in partnerships revealed an array of different on-line and published tools. Testing their applicability to partnership working across health, social care, housing and the voluntary sector has been less easy to establish as has researching the evidence base for their use.

Two JIT workshops allowed associates and members of other organisations to review the JIT development tools – POPIT and partnership briefing notes, their use and application. They were also introduced to other of the generic on-line improvement models and supports. It became clear that there is a wealth of material readily available to support improvement, but the choice and routes into access some of this can be bewildering.

We attempted to distil a small selection of useful tools for our Associates/partnerships which might be underpinned by evaluation at some future stage by QIS/IST.

The range of tools reviewed is in the matrix overleaf with an indication of the application of the tools. It should be noted that the toolkits identified to date were sourced through a non-exhaustive literature review and are likely to be incomplete.

	Skills development	Governance Partnership	Development Partnership	Integrated Teams	Improvement Process/Service	Problem Solving	Information Integration	Quality & accreditation	Partnership Networking	Project Management
Briefing Notes	✓	✓	✓			✓				
CHAIN			✓						✓	
Communities of Practice									✓	
East Midlands Improvement Network	✓				✓	✓				✓
FAME		✓	✓				✓			
Governance for Joint Services		✓	✓	✓						
Institute for Healthcare Improvement Model					✓					✓
IST Improvement Toolkits					✓					✓
JIT Sample Partnership Development Questionnaire		✓	✓	✓			✓			
LEAP		✓	✓		✓					
Learning to Improve					✓			✓		
NHS Networks									✓	
Partnership Readiness Tools		✓		✓						
POPIT							✓			
PSIF							✓	✓		
QIS Systematic Review					✓			✓		
Smarter Partnerships	✓									
Supported Self Evaluation		✓			✓			✓		
Visualisation Table			✓			✓				✓

The hyperlinks in the table link to the relevant web site.

Criteria for Selection

The following criteria were suggested for selecting a short-list of the tools, however, applying all of these was found to rule out most tools, given their qualitative nature, and to favour the high-profile, top-end consultancy driven solutions which then becomes expensive and less easy to DIY:

- A breadth of material aimed at partnerships or which has particular relevance to the specific practical issues relevant to partnerships: What are they? – Margaret/Martin

(without straying into programme specific areas e.g. telecare, commissioning, SBC, which are well covered elsewhere)

- Material which has an evidence base in the literature *or* which has been tried and tested through JIT work or that of its partners (experiential).
- Easy access and utilisation for all stakeholders within a partnership – i.e. not dependant on registering through a particular organisation domain (.nhs or .gov)
- An outcomes rather than process focus wherever possible
- Cost to implement – Cost Efficient/ Value for Money
- Focus on change rather than evaluation (there are many self-assessment models already available including our own)
- Understandable/logical from client/patient/practitioner perspective - not management speak
- Translatable to public sector context
- Not top-down – able to be implemented at whatever level appropriate
- Flexibility for local operation
- Scalability
- Tools that help partnerships identify and get rid of non-core, distracting activity
- Including links to demonstrations and case studies

Previous work in this field

Two reviews have looked at improvement tools, but both in the context of single organisations (one focussing on the NHS and one on Councils):

- A QIS review – (A systematic narrative review of quality improvement models in health care - Powell, Rushmer and Davies Feb 2009) - examined evidence for the success of five models of quality improvement:

- 1: TQM/CQI
- 2: Business Process Reengineering (BPR)
- 3: IHI and rapid cycle change
- 4: Lean thinking
- 5: Six Sigma

...and 5 system-wide multi-model approaches:

- 1: Jonkoping County, Sweden
- 2: Kaiser Permanente
- 3: The VA and QUERI
- 4: The 'Organising for Quality' case successes
- 5: The IHI's '100,000 Lives Campaign' and related initiatives

....and

- the PMMI (Performance Management Measurement and Information) project, IDeA (January 2006), reviewed the following models and tools :-
 - Balanced Scorecard
 - The Big Picture
 - Business Process Reengineering
 - Charter Mark
 - EFQM Excellence Model®

- EFQM Excellence Model™ - Dolphin
- Investors in People
- ISO9001 Quality System
- Kaizen Blitz
- Performance Prism
- Practical Quality Assurance System for Small Organisations
- Public Service Excellence Model
- Six Sigma
- Statistical Process Control
- Value Management

They both came to similar conclusions:

- The different models have considerable similarities in implementation and there is no one right method or approach that emerges above the others as the most effective.
- Few approaches were found to have been externally validate
- Whichever model chosen needs to be sustained with HR and senior managerial support consistently over time
- The approach chosen has to be relevant (or made relevant) to the local context
- Neither review aimed to accredit or endorse any particular model

Next Steps

It is proposed to identify examples of practical problems that partnerships want help with (using JIT and other partners' existing knowledge; the recent QIS CHP work and the review of CHPs) and then to identify appropriate methods and tools which may support solutions to these problems. It may be possible, perhaps together with QIS, to evaluate the success or otherwise of the interventions by working with specific partnerships.