

Developing a Common Language through Quality Improvement Methodology: Learning from North Central London

An interview with Sophie Dunn, Assistant Psychologist, National i-THRIVE Programme, and Associate Quality Improvement Lead at The Tavistock & Portman NHS Foundation Trust.

Can you tell us about the work that you've been doing to support North Central London's (NCL) Integrated Care System's (ICS) implementation of the THRIVE Framework?



NCL's local transformation plan outlines the need to work in partnership to meet the needs of children, young people and families and reduce inequalities in accessing care. The THRIVE Framework was identified as one way of organising children and young people's mental health and wellbeing services in NCL according to need, moving away from the traditional tiered model of healthcare delivery towards a holistic approach. To support implementation, the National i-THRIVE Programme delivered a series of webinars to introduce the THRIVE Framework, followed by a number of workshops and training sessions. Quality Improvement (QI) training was delivered to support NCL to apply evidence based QI methodologies to measure continuous improvements to care. Subsequently, the National i-THIRVE programme facilitated three QI Forums to develop a shared QI project across the 5 boroughs of NCL: Barnet, Enfield, Haringey, Camden and Islington.

How did you incorporate the THRIVE principle of partnership working into this piece of work?



All members agreed to work on the ICS becoming more collaborative across different provider trusts and sectors, particularly where there weren't strong partnerships already. The forum was a reflective space for people to come together from across the system with a similar ambition regarding the role of continuous improvement in improving care quality to support genuine transformation. It was important that members could assert a sense of agency over the work and so key members took up a representative role for their locality, responsible for sharing the learning at a place based level.

Over twenty cross-sector representatives attended from across NCL, including commissioners, project managers and operational staff, representatives from NHS provider trusts and the local authorities, the NCL ICB, voluntary sector organisations and UCLPartners.

Why was it important for there to be a common language within NCL?

Cross-sector professionals often have different ways of referring to need and managing risk, each having their own service-specific acronyms. This can make it confusing for children, young people and their families to navigate the system of mental health help and support. It also makes it difficult for professionals to know what other agencies are offering. The THRIVE needs-based groupings provide one opportunity to develop a shared language and understanding.

How did you ensure that this work was outcome-informed?

Devising a standardised outcomes framework was an important aspect of this project. A suitable outcome measure did not currently exist to evaluate a common language, so members pulled together a list of questions to collaboratively devise a survey. Qualitative feedback included suggestions for developing a common language, to inform change ideas for the project.

Members completed this survey and distributed it to their wider networks, with 58 responses being returned at baseline. Quantitative measures included people's current knowledge of the THRIVE Framework; confidence in both describing and implementing the needs-based groupings in routine work; understanding of the current offer across the ICS, and confidence in signposting. This was



paired with data on people's familiarity with the ICS' transformation plan and the <u>NCL Waiting Room Platform</u> (a website co-designed with young people, parents, carers and professionals, helping everyone understand young people's











wellbeing options across North Central London). Barriers and successes for using the THRIVE needs-based groupings were explored to prioritise change ideas.

A focus of this work was to provide opportunities to think more about outcomes, being driven by data and putting learning into practice, to encourage people to work differently, finding new opportunities to try out different initiatives and evaluate them for continuous improvement.

What did you find to be the most challenging aspect of this piece of work?

Embedding of the THRIVE Framework requires a culture shift and whole-system commitment to change. This can feel like a difficult undertaking, due to the multi-faceted nature of the work alongside significant other pressures. We received feedback that people would have valued more consistent attendance from other ICS representatives, to maximise the opportunities for partnership working the QI Forums afforded. Engagement in the QI workshop and forums was challenged at times due to time commitments as attendees needed to manage competing demands.

In order for the forums to be more sustainable, they would have benefited from an ICS identified lead within NCL taking up a leadership position to continue the work after the three facilitated forums.

How did you overcome those barriers?

Accountability helped to ensure that members played an active role in taking this forward. Members were invited to make individual pledges about how they could take the work forward within their own areas of responsibility and beyond. As an example, a group member nominated themselves to present the QI project to the ICS senior leads meeting, which broadened the reach of the work and enabled the work to be supported at a senior level - vital for letting participants know that there was an appetite for this work and that it could continue to be supported through the ICS.

What feedback have you received on the workshop and forums? How have they landed within the system?

Participants particularly described the networking aspect of the forums as being highly valuable - having a space where they could meet with colleagues, build new and trusted relationships, and continuing those partnerships outside of the forums. Participants also described finding other tools – such as a driver diagrams and a project plan template - useful resources to build their capacity in taking this work forward. Participants described having improved skills, knowledge and competence about evidence based QI methodologies to be able to embed and measure change.



"Very helpful. Thought provoking and motivating to put things into action."

"It helps concentrate and focus on key areas of activity across the sector and stakeholders."



Is there anything that you would have done differently?

Ensuring that the voices of different sectors were better represented is one thing that could be improved. In some forums, not all boroughs were represented, and at times it felt health-represented, so we are aware of the importance of engaging colleagues from across the wider education, voluntary and community groups and social care sectors in future.

What are your hopes for this project moving forward?

As an initial piece of work, the ambition is for different aspects of the project to continue, with sustainable QI Forums. With support from NCL ICB, we aim to launch a working group to implement this work. We are also hoping to roll out more QI training to different NCL professionals in future and local ownership is key for this to be successfully taken forward.

I am passionate about QI as an approach to embed continuous improvement and am hopeful about where this work could lead. It is a fantastic opportunity for the cross-sector children's workforce to come together, using a standardised evidence based framework to evaluate change.

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