

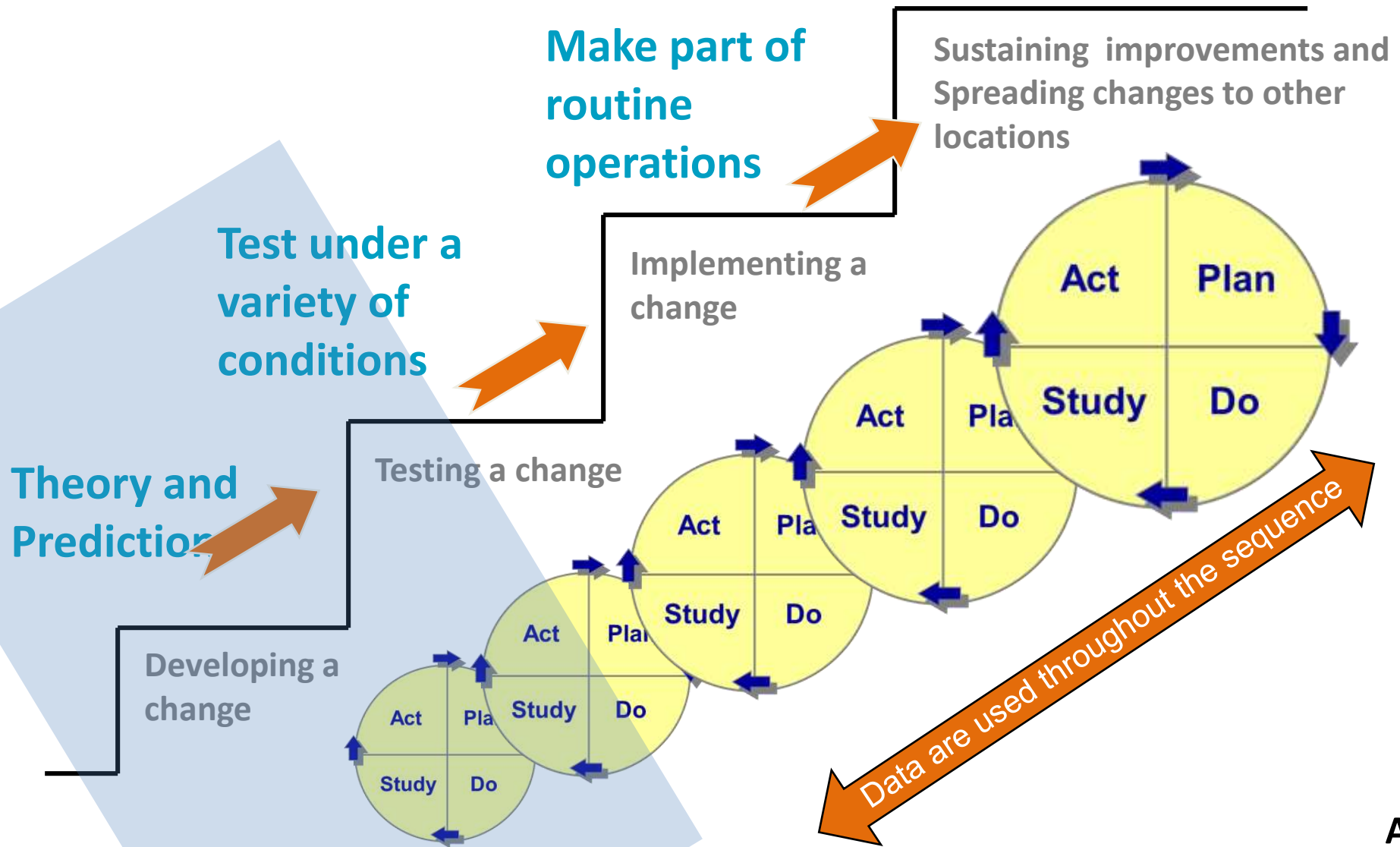
# Scale Up and Spread

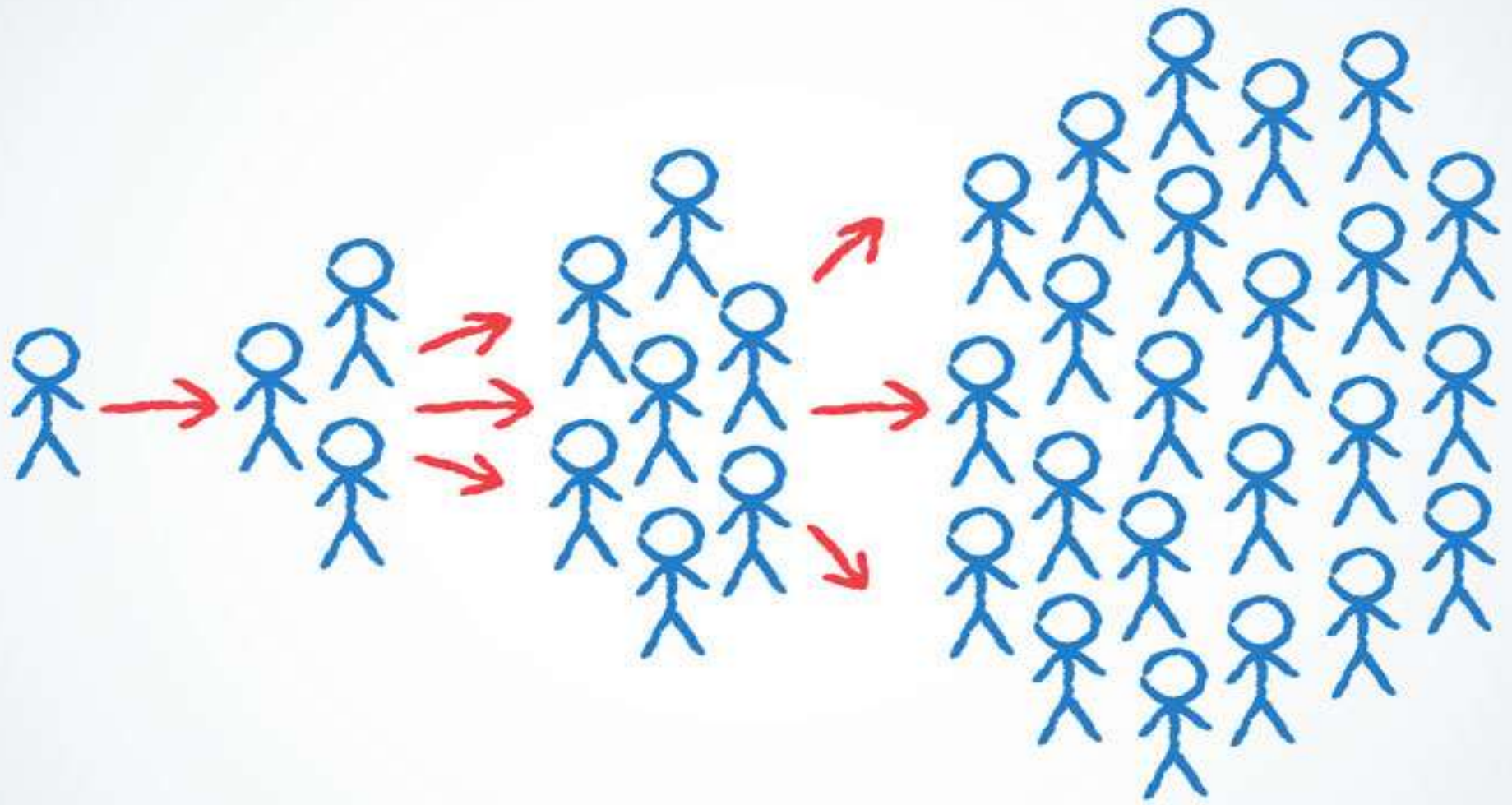


#Qlconf

# The Sequence of Improvement

## Scale-up and Spread





## Spread

New working methods developed in one setting are **adopted**, perhaps with modifications, across an organisation



## Scale-up

**A more conscious, deliberate process in which new working methods are tested by an increased number of teams, increasing degree of belief they work and overcoming system/infrastructure issues that arise.**

# System View: Population + Administrative Unit

---

e.g. 2 million people: 16 hospitals

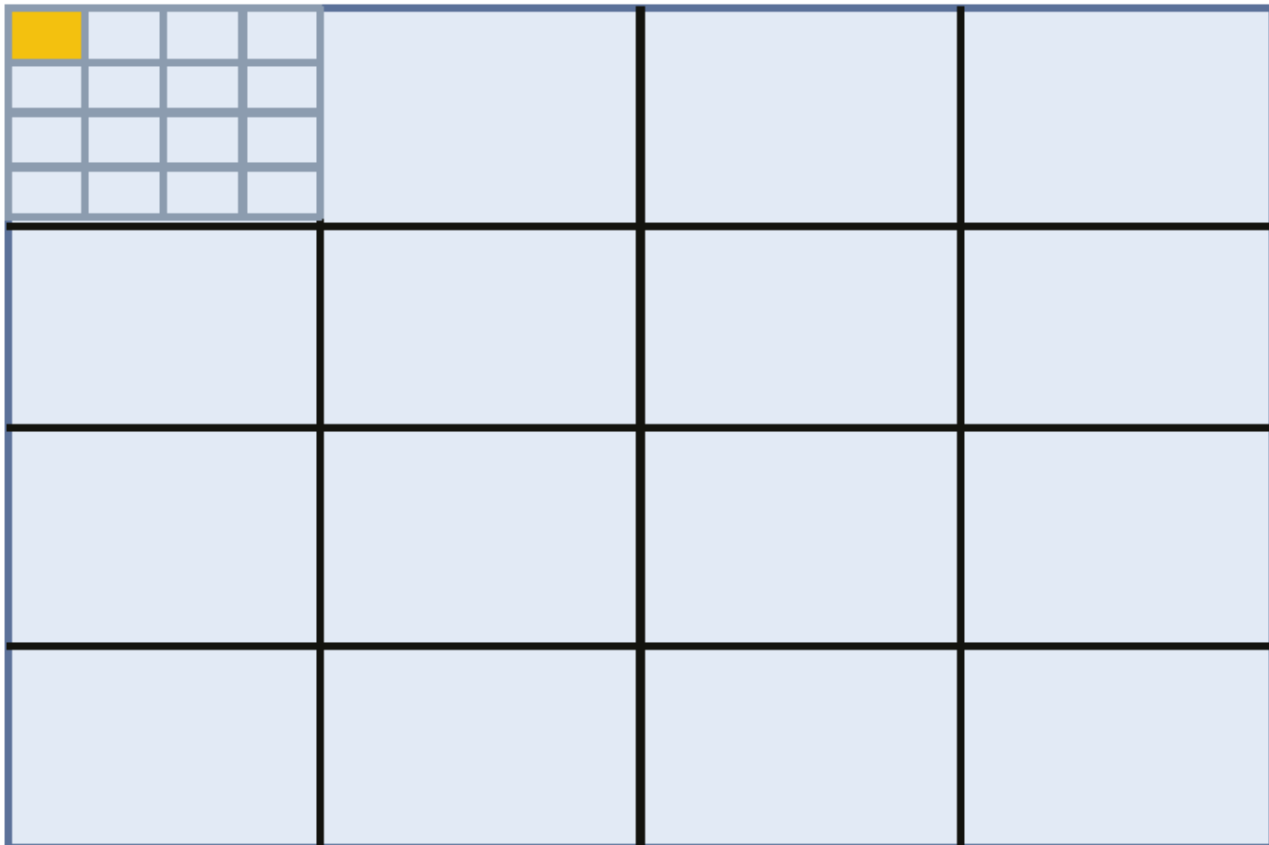
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# System View: Population + Administrative Unit

e.g. 2 million people: 16 hospitals

Start with  
1 ward out  
of 16



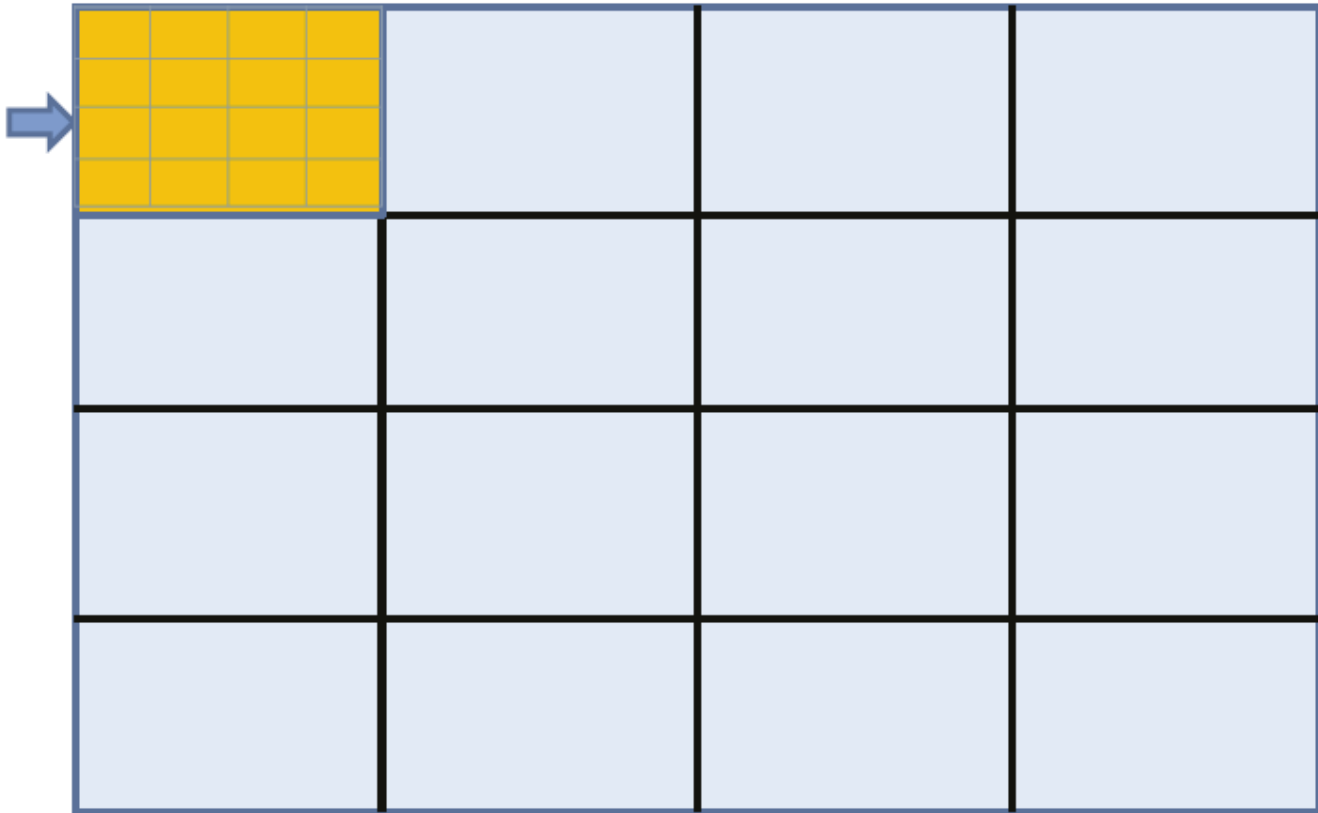


# System View: Population + Administrative Unit

---

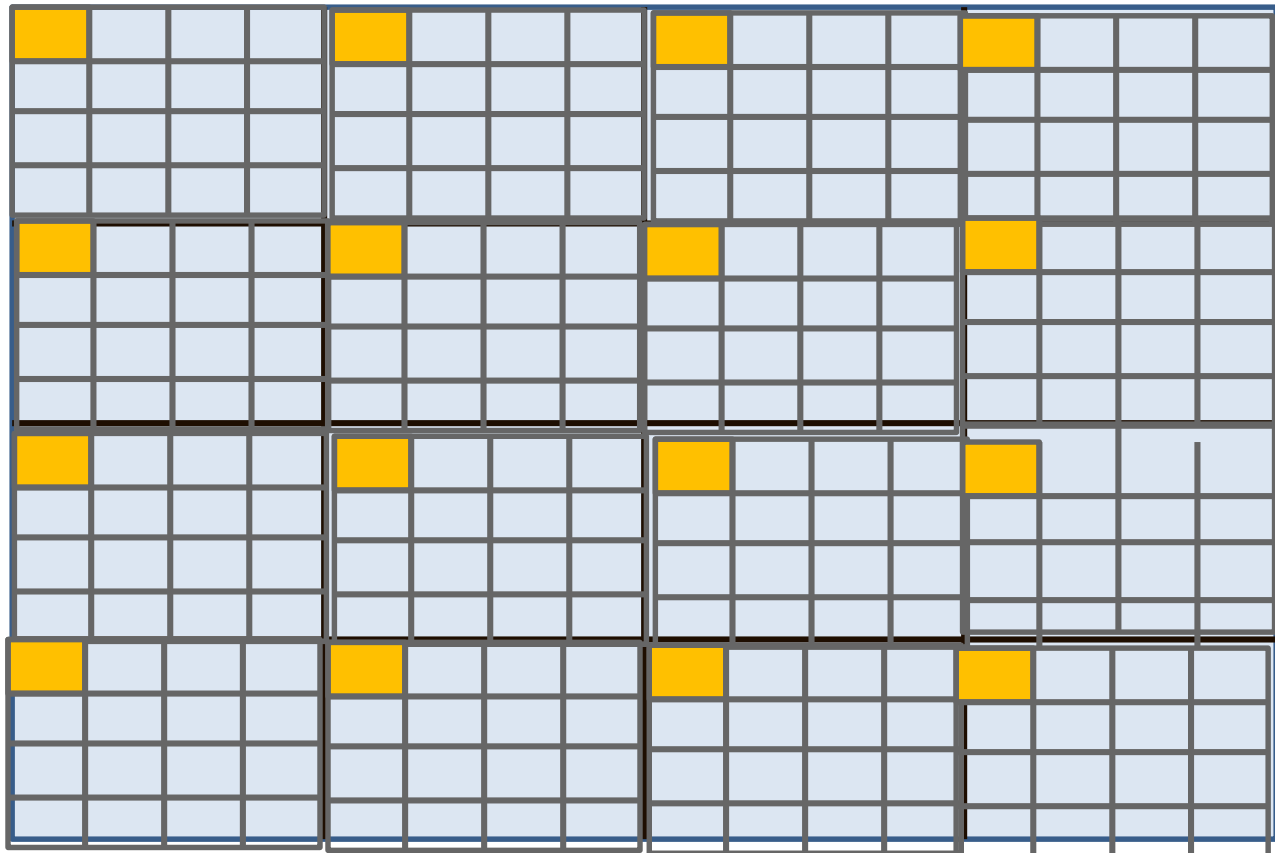
e.g. 2 million people: 16 hospitals

Scale up task 1:  
scale up to all  
wards in  
hospital



# System View: Population + Administrative Unit

e.g. 2 million people: 16 hospitals



Scale up task 2:  
seeding scale up  
across region

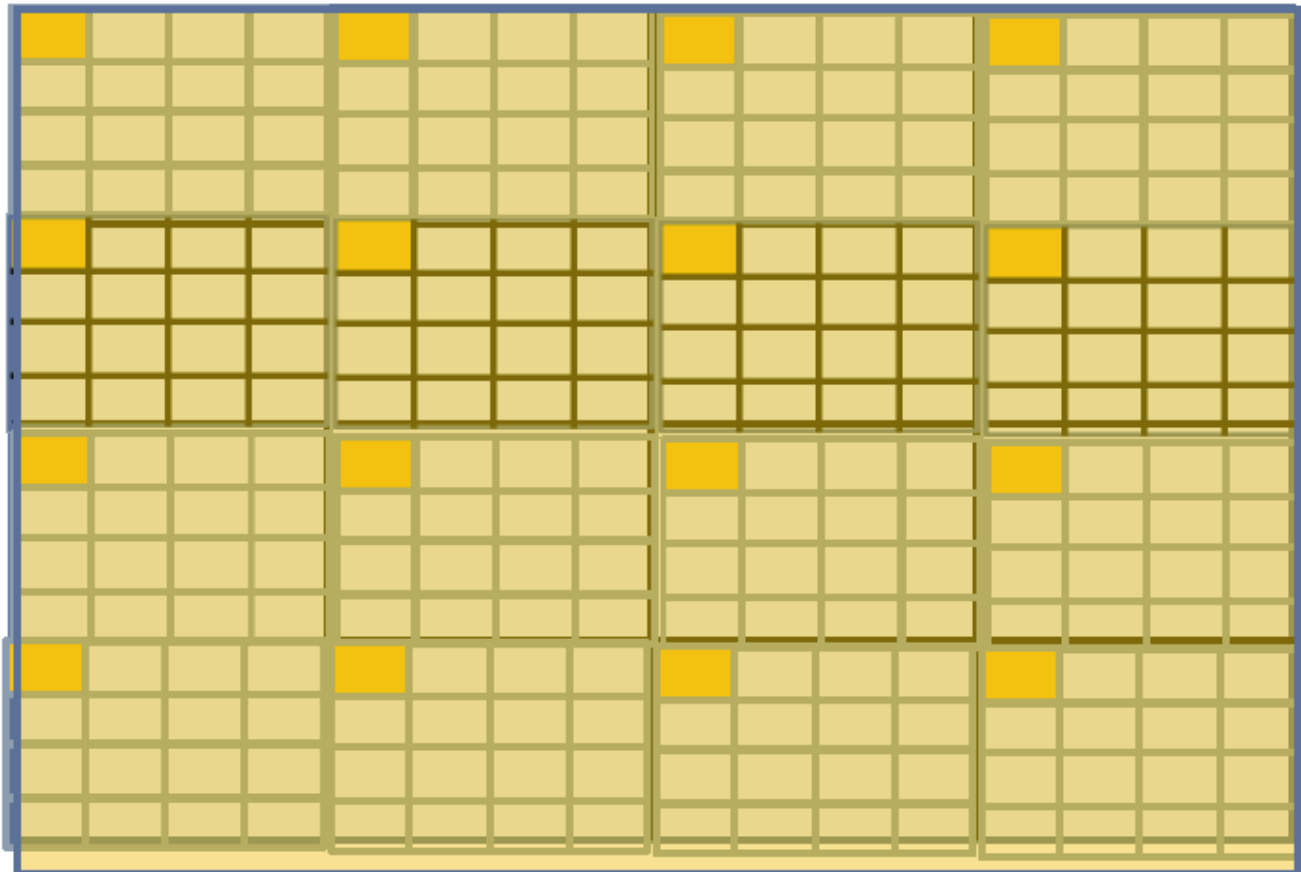




# System View: Population + Administrative Unit

e.g. 2 million people: 16 hospitals

Scale up  
task 3:  
Going to  
full scale





**“As the bits of the cube start moving, keep communicating and coordinating”**

*Rosabeth Moss Kanter, Harvard Business School*

**Time for a story...**

Stat. Soc. 42.  
An<sup>o</sup> Dñi 1596  
Obijt Juno. 1618



**Intervention ship** – 3 tsp lemon  
juice per sailor per day  
No fatalities from scurvy

**Control ships** – no intervention  
110/278 sailors dead from scurvy





How long do you think it was until provision of citrus fruits became standard practice in the British Navy?



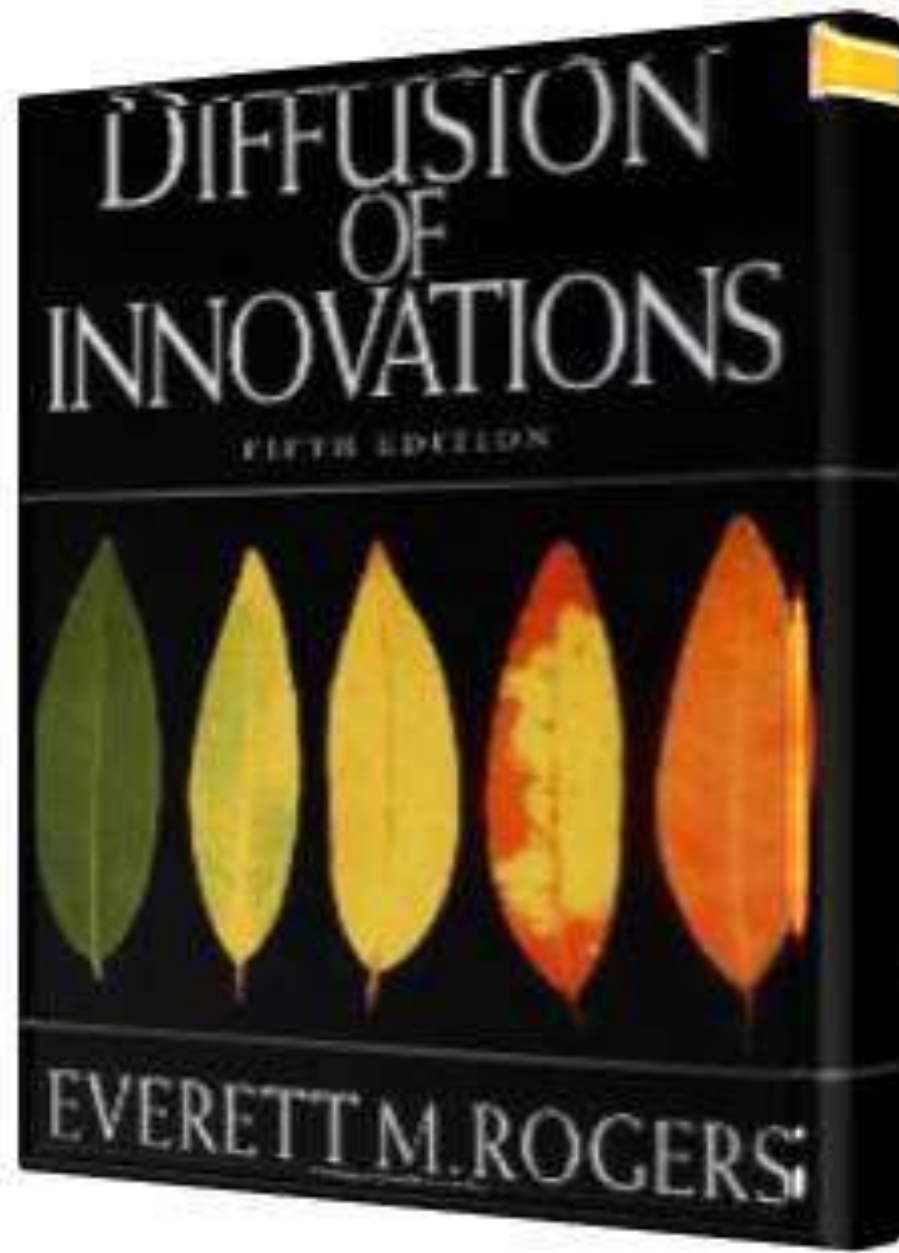
Why?



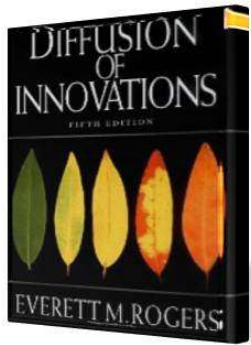
**“Strong evidence for an innovation is necessary, but not sufficient, to result in its adoption”**

Mark Freeman, 2012, The International Journal of Management Education

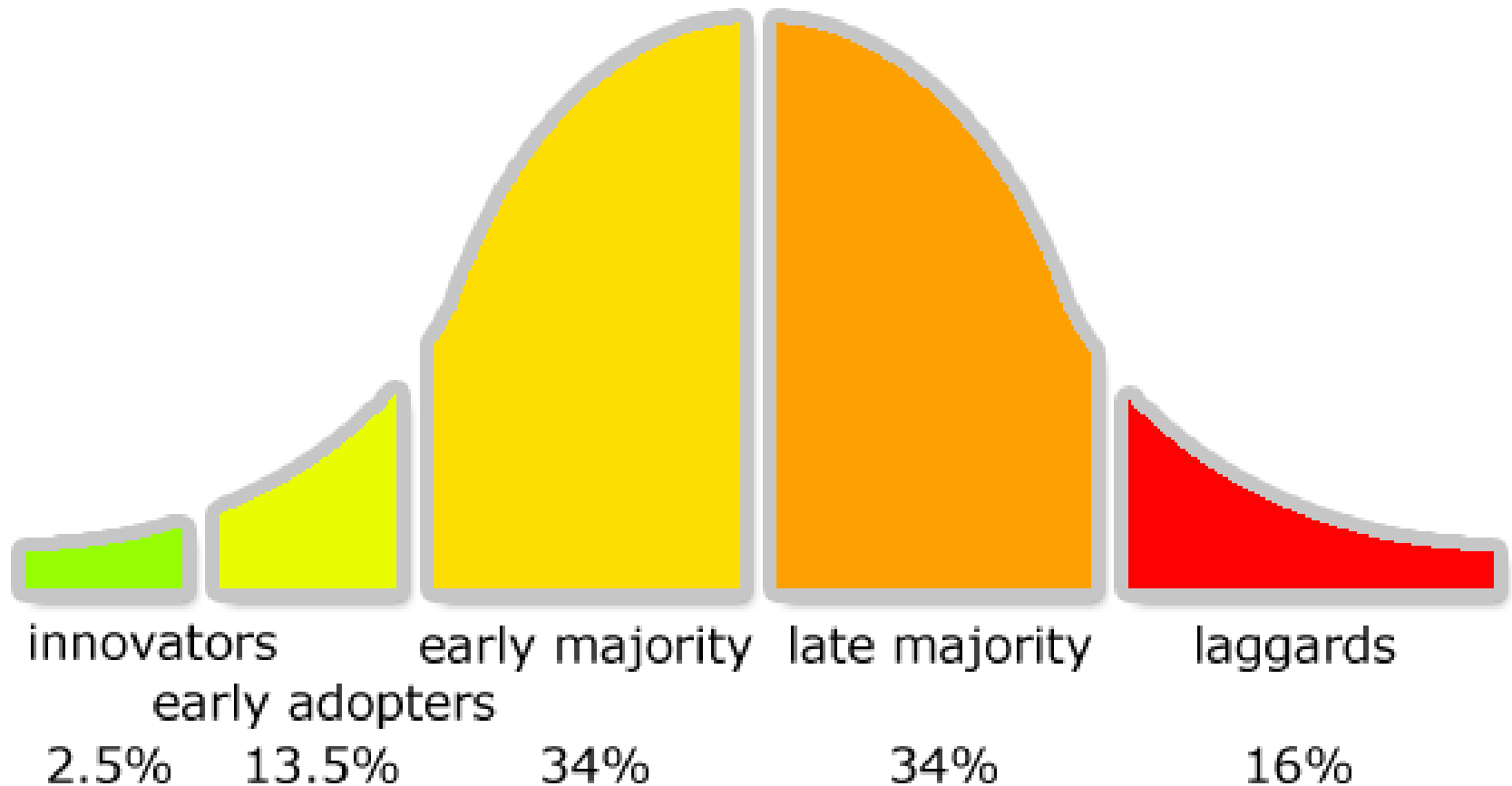




**Everett Rogers (1962)**

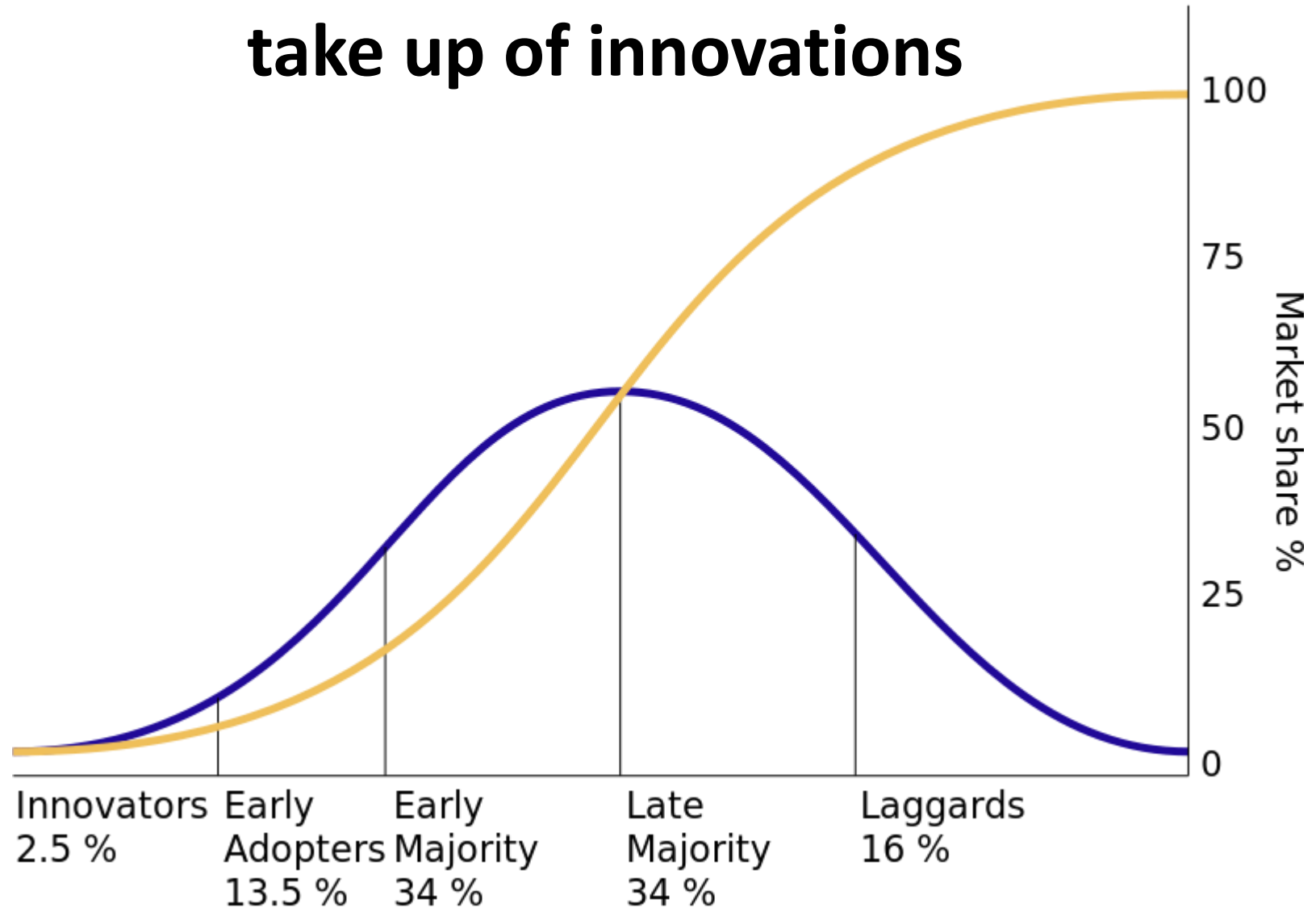


# Readiness to take on new ideas



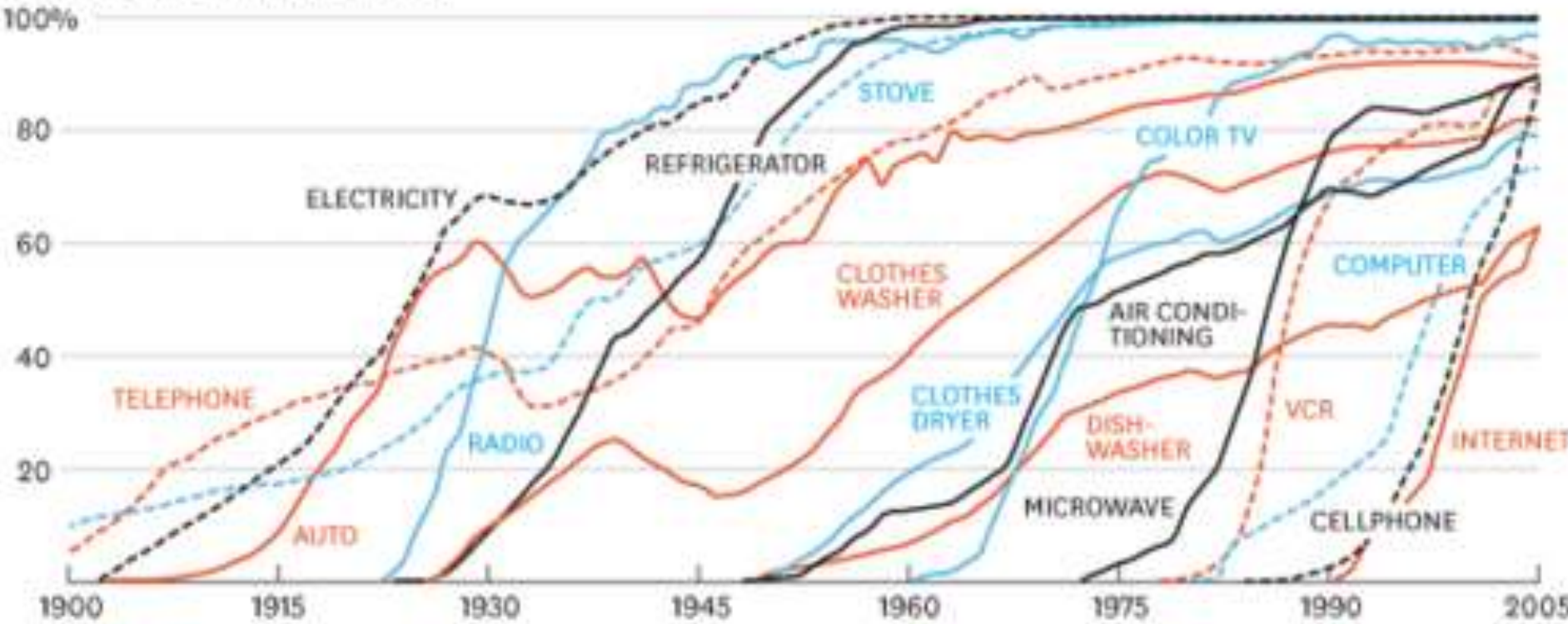
# The "S" curve...

## What readiness for change means for take up of innovations



# CONSUMPTION SPREADS FASTER TODAY

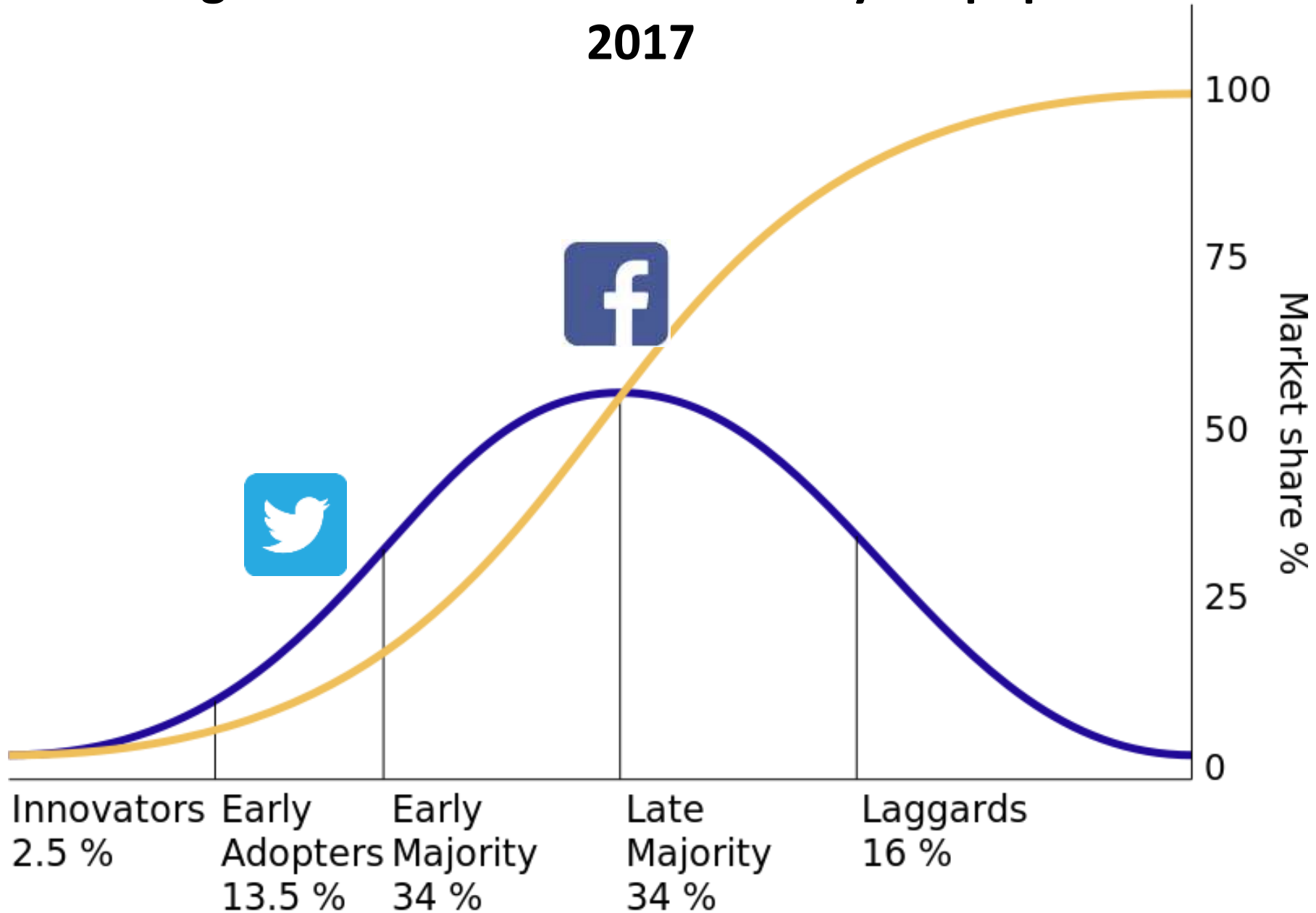
PERCENT OF U.S. HOUSEHOLDS



SOURCE MICHAEL FELTON, THE NEW YORK TIMES

HBR.ORG

# % usage of Twitter and Facebook by UK population 2017



**How much diffusion of these innovations has there been amongst the people in this room?**



# Experiment: How to diffuse ideas further?

## Instructions

- In a moment we are going to ask you to have conversations with each other about these 3 areas of innovation (either using Twitter, using Facebook or being active in a QI project)
- You need to be in small groups of 2-4 with at least one person who is a user of one of the innovations and others who are not
- Decide on one innovation to talk about at a time
- Existing users, you are trying to convince others to try changing their behaviour to use the innovation.
- You will have 10 minutes for this exercise. Try to have at least 2 conversations with different people...
- And finally... 1 more move...



# Discussion: the benefits of using this innovation

## Experiment: How to diffuse ideas further?

### Instructions

- In a moment we are going to ask you to have conversations with each other about these 3 areas of innovation (either using Twitter, using Facebook or being active in a QI project)
- You need to be in small groups of 2-4 with at least one person who is a user of one of the innovations and others who are not
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- Existing users, you are trying to convince others to try changing their behaviour to use the innovation.
- You will have 10 minutes for this exercise. Try to have at least 2 conversations with different people...
- And finally... 1 more move...

Facebook

Twitter

QI

**So what affects the  
rate of adoption of a  
new idea?**

## MiniDisc, the forgotten format

Twenty years ago, Sony launched a format that promised CD clarity and cassette convenience - but the world just wasn't interested. Why not?



“It took a decade to make any impression on the mainstream –

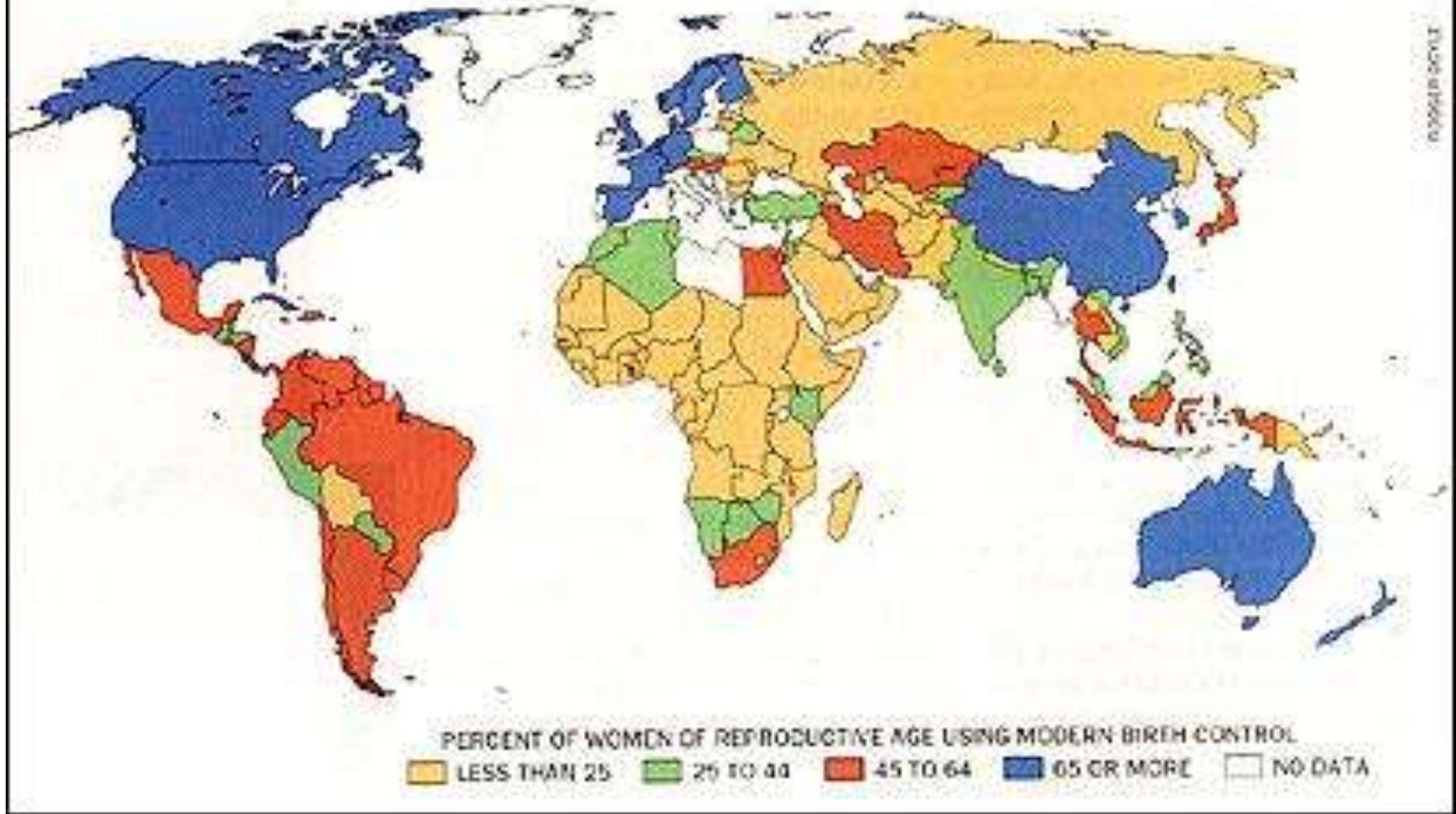
people stuck with cassettes for recording, and Walkmen and Discmen for portability –

and almost as soon as it did, it was killed by the MP3 player”

# Relative advantage

A

# World Birth-Control Use



# Compatibility

A

# Dvorak keyboard™

A faster, more comfortable  
typing experience.



## Complexity/Simplicity



Actively encourage an experimentation culture



**Trialability**

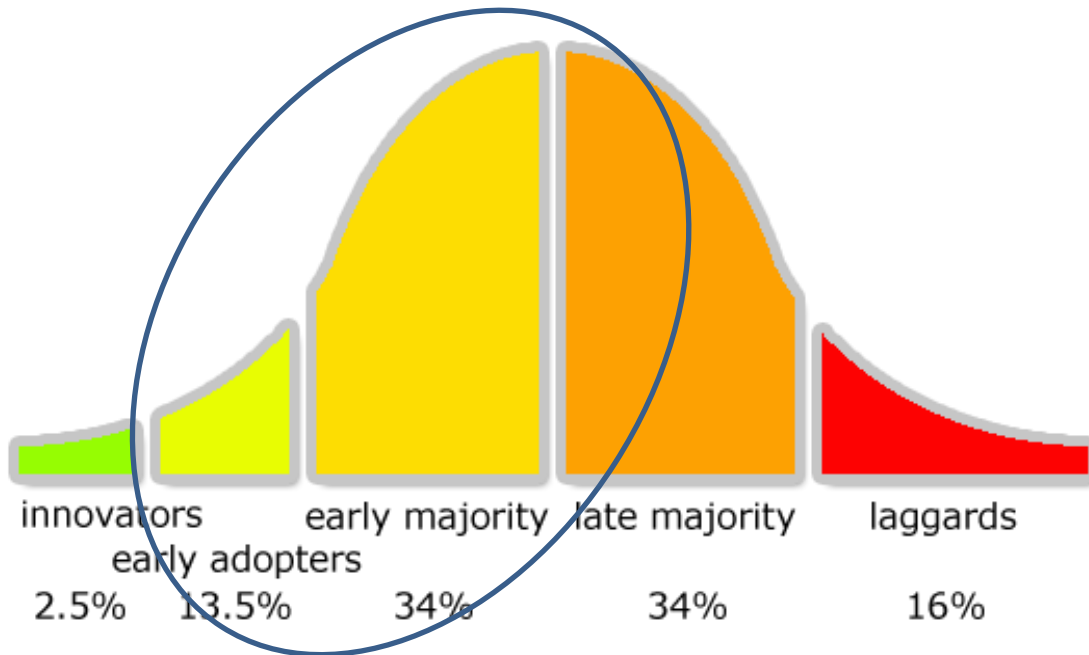


# Observability

A



# Rodgers' guidance on how people experience change

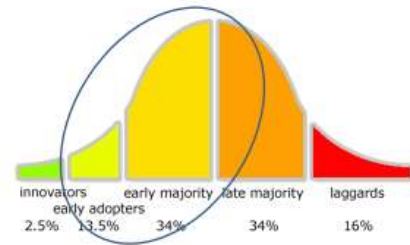


Concerns about  
risk and  
uncertainty



The need for  
reassurance and  
trust

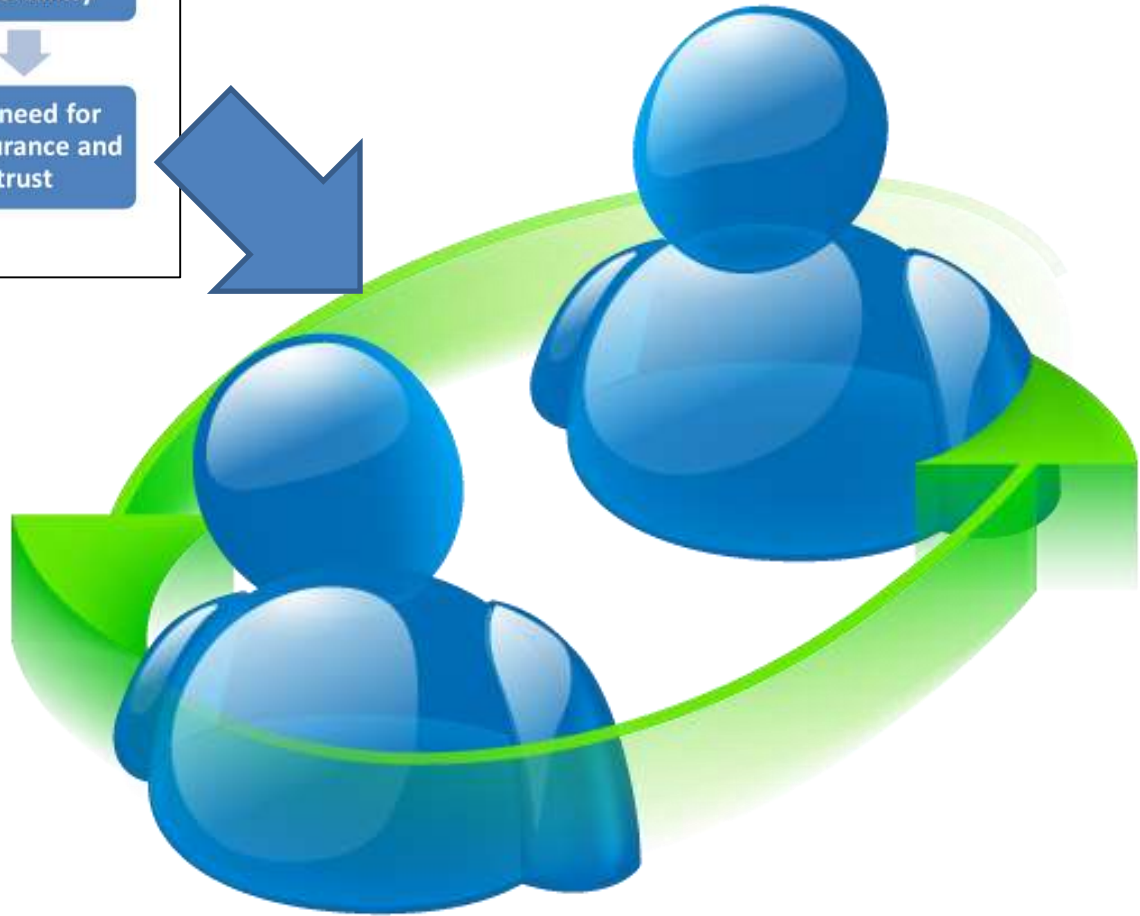
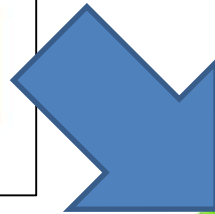
## Rodgers' guidance on how many people experience change



Concerns about  
risk and  
uncertainty



The need for  
reassurance and  
trust



# 1. The power of peer to peer

## Rodgers' guidance on how people experience change



## 2. Reinvention by adopters

# **Attributes of Innovations that successfully spread**

- 1. Relative Advantage**
- 2. Compatibility**
- 3. Complexity/Simplicity**
- 4. Trialability**
- 5. Observability**

## **How people experience change: Key drivers**

- 1. Peer to peer**
- 2. Reinvention by adopters**

# What kind of methods tend to be used for adoption?

Optional

Collective

Authority

# What kind of methods tend to be used for adoption?

**Optional**

**Collective**

**Authority**

Collaborative

Executive mandates

Wave sequence

Natural diffusion

Campaigns

Extension agents  
(training & mentoring)

Affinity group  
(disseminate superior  
model to other sites)

Emergency mobilization

Hybrid approaches

A

# 9 Methods for spread and scale up:

Massoud, Donohue, McCannon 2010

1. **Natural diffusion** - spread ideas without intentionality
2. **Campaigns** - shared, quantitative aim connected to a targeted social system (evidence-based intervention, measurement, communications, and distributed field operations)
3. **Collaborative** (physical or virtual) – networked structured learning and exchange around shared aims, measures, and goals
4. **Extension agents** - spread through training and mentoring.
5. **Emergency mobilization** – rapid efficient assembly of plans, materials, supplies.
6. **Affinity group** - develop superior model, then dissemination to other sites in the system.
7. **Executive mandates** – policy, guidelines, protocols
8. **Wave sequence** - systematic spread within integrated multi-level systems
9. **Hybrid approaches** - where combined elements from different approaches form a new approach.



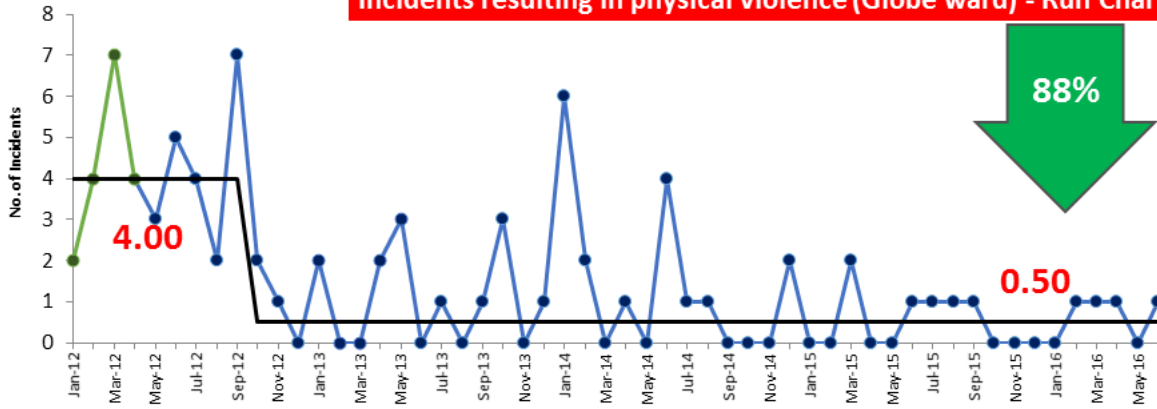


**Make connections!**

# Violence reduction at ELFT

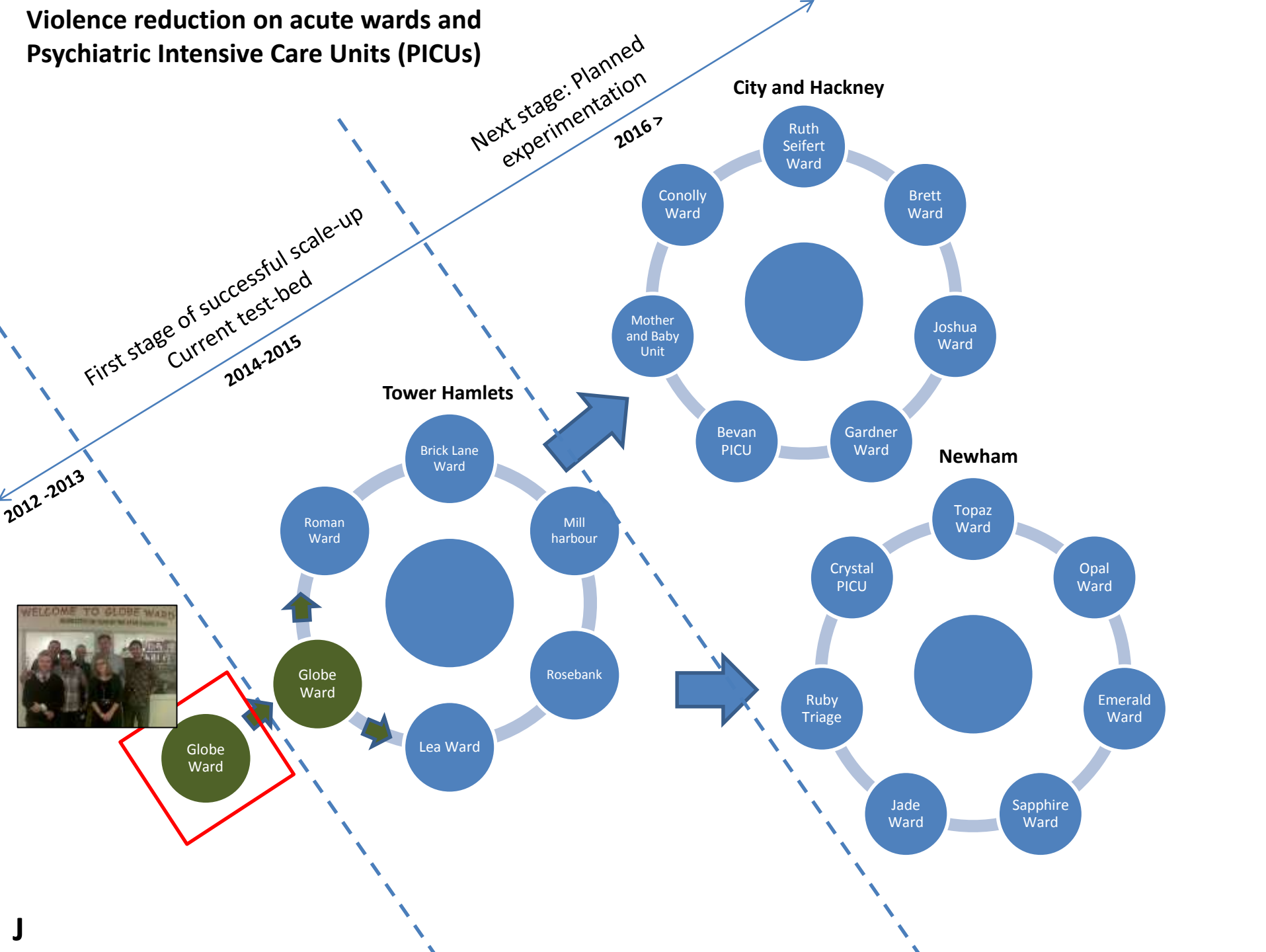
Our (current) journey of scale-up and  
diffusion...

**Incidents resulting in physical violence (Globe ward) - Run Chart**

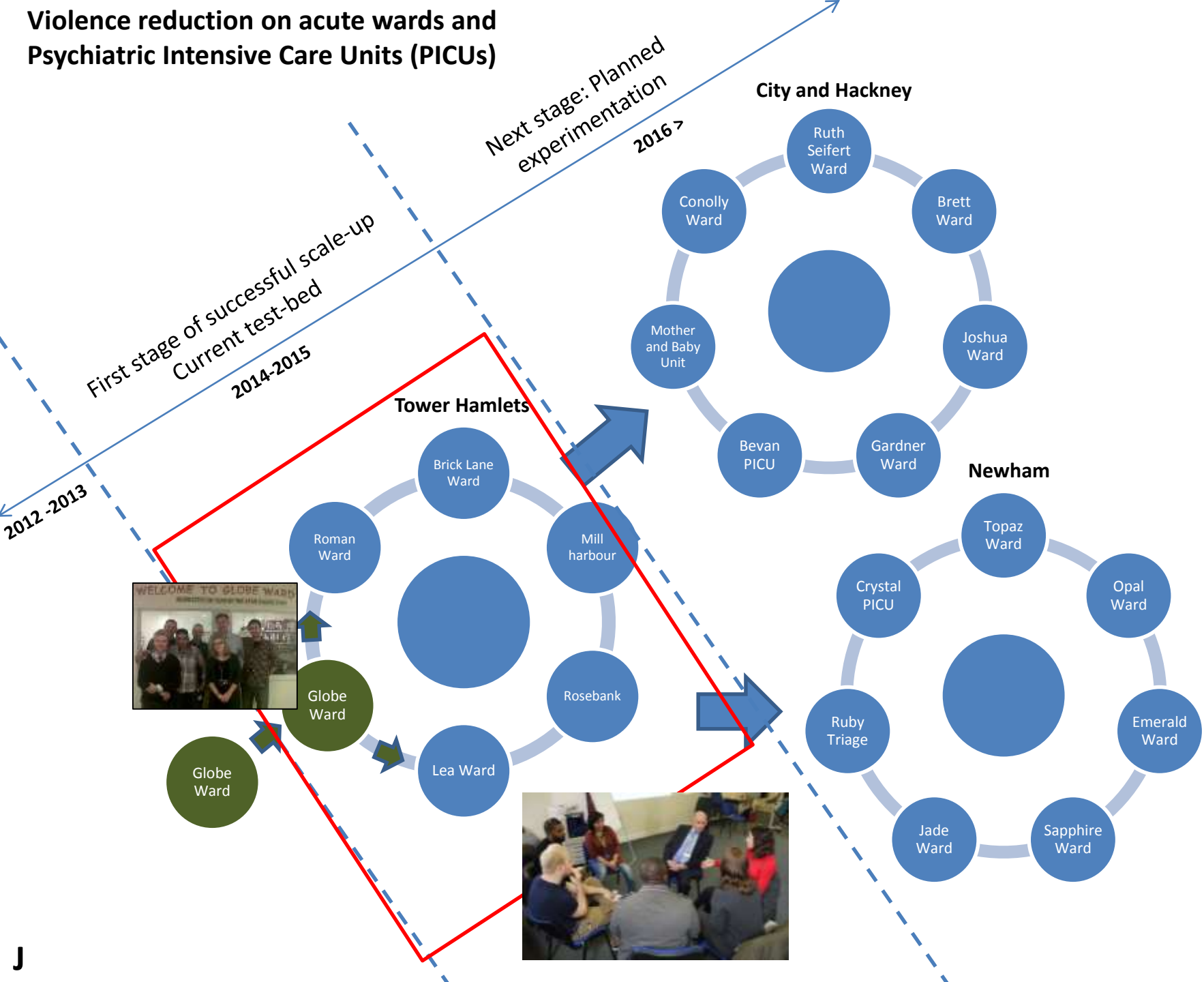


2012

# Violence reduction on acute wards and Psychiatric Intensive Care Units (PICUs)

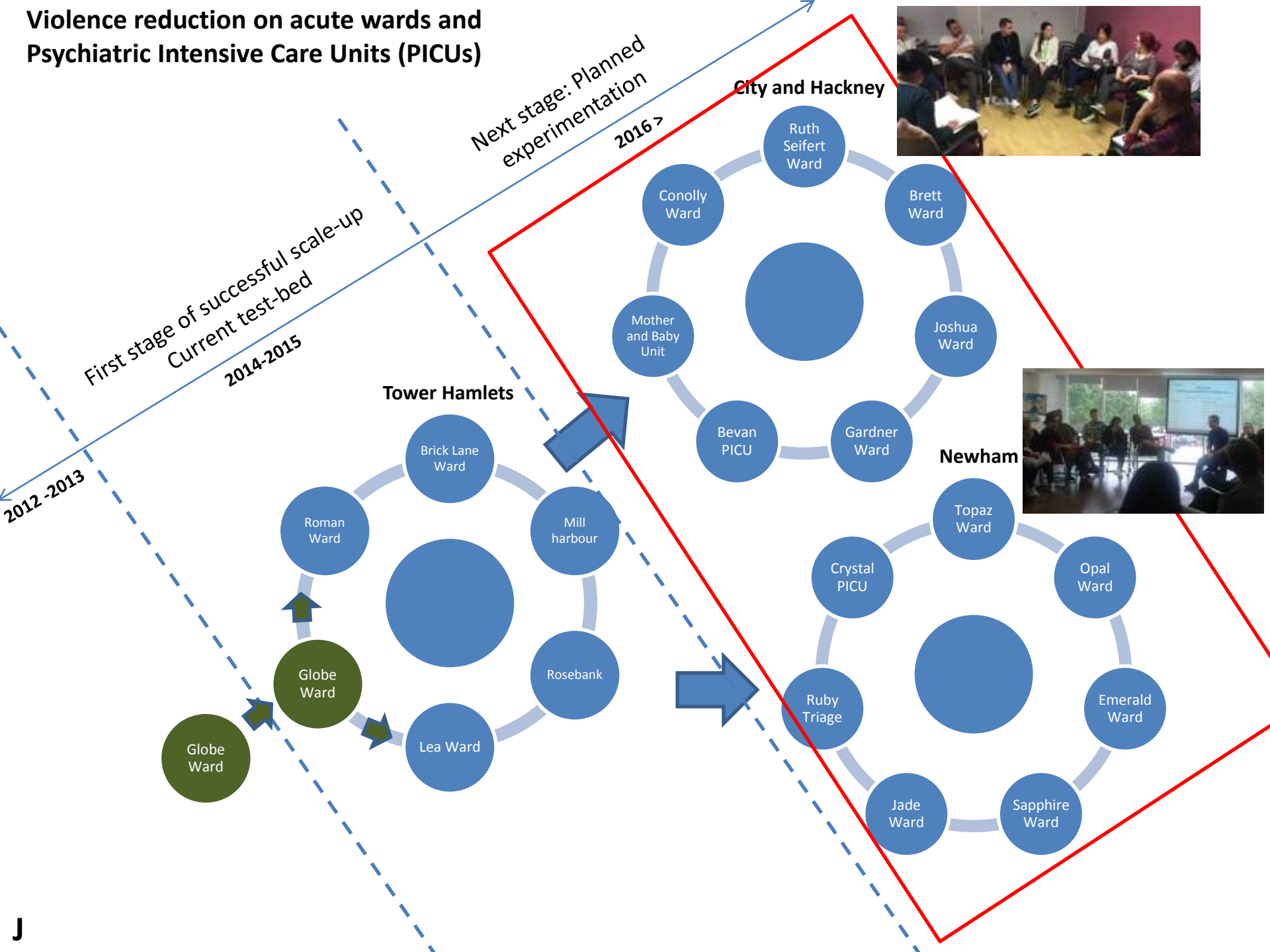


# Violence reduction on acute wards and Psychiatric Intensive Care Units (PICUs)





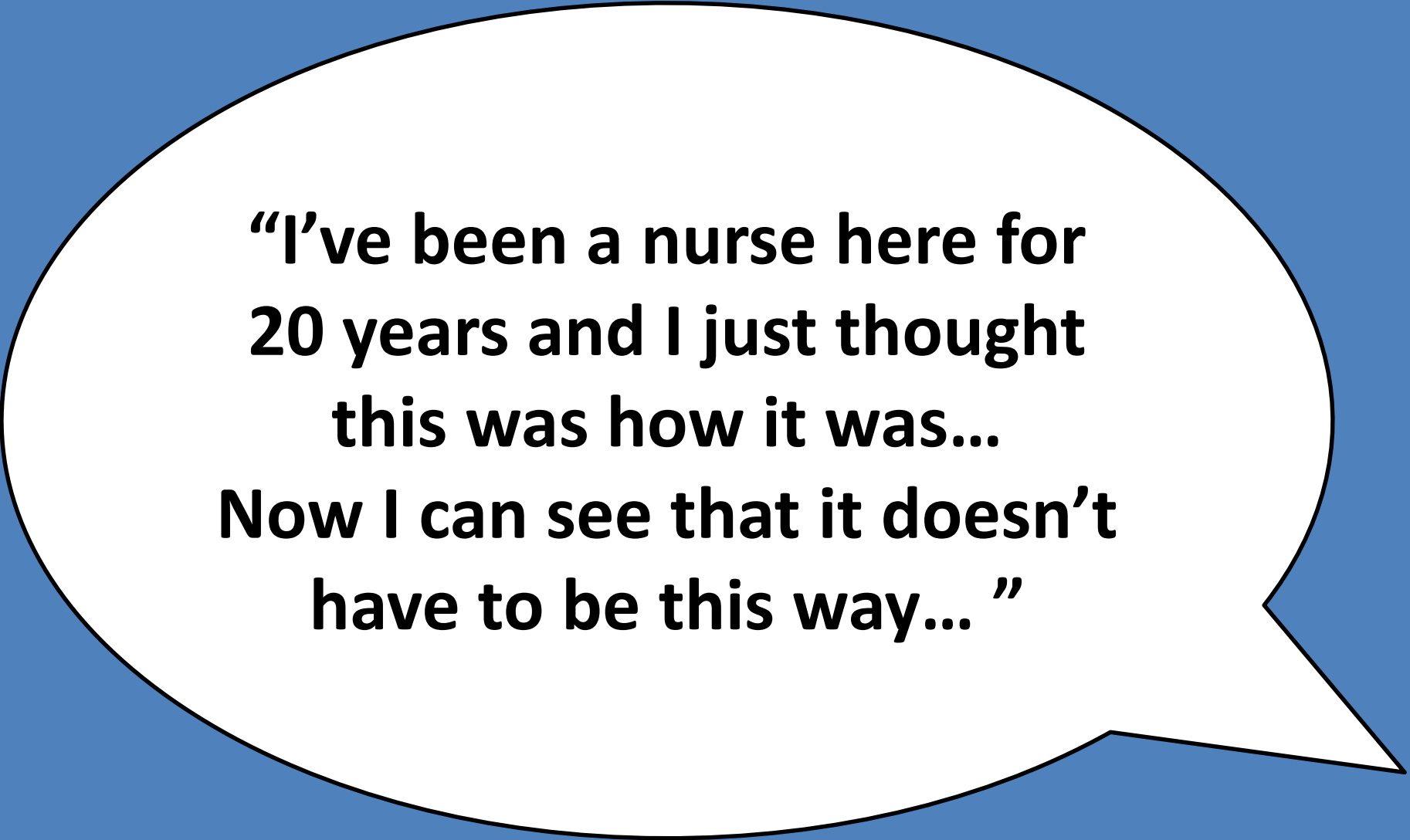
# Violence reduction on acute wards and Psychiatric Intensive Care Units (PICUs)





*“Whenever I have the opportunity to hear more about this work, I’m reminded of the time Andy Cruickshank came to see me to say that he wanted to work on violence reduction...*

*I will be very honest with you now and say that I was rather sceptical of whether he would be able to work on this and whether change was truly possible in this area...”*



**“I’ve been a nurse here for  
20 years and I just thought  
this was how it was...  
Now I can see that it doesn’t  
have to be this way...”**



# WAYS OF SEEING

JOHN BERGER

Seeing comes before words. The child looks and recognizes before it can speak.

But there is also another sense in which seeing comes before words. It is seeing which establishes our place in the surrounding world; we explain that world with words, but words can never undo the fact that we are surrounded by it. The relation between what we see and what we know is never settled.



The Surrealist painter Magritte commented on this always-present gap between words and seeing in a painting called *The Key of Dreams*.

The way we see things is affected by what we

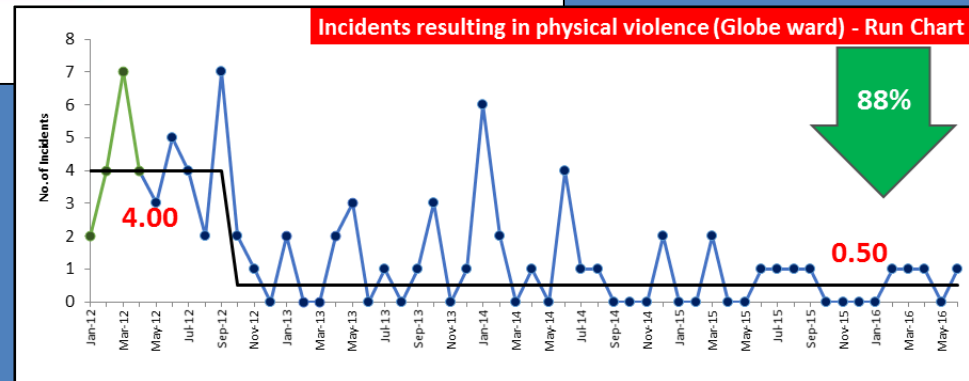


*“Whenever I have the opportunity to hear more about this work, I’m reminded of the time Andy Cruickshank came to see me to say that he wanted to work on violence reduction... I will be very honest with you now and say that I was rather sceptical of whether he would be able to work on this and whether change was truly possible in this area...”*

“I’ve been a nurse here for 20 years and I just thought this was how it was... now I can see that it doesn’t have to be this way”

## The Attributes of Innovations

1. Relative Advantage
2. Compatibility
3. Complexity/Simplicity
4. Trialability
5. Observability



## XXXXX Ward: Feelings / Experiences / Impact

- Scared
- Rejected
- Am I in the right job?
- Anger
- Let down
- Inadequate
- Anxious
- Divided
- Feeling am I the only one feeling this way?
- Feeling alone
- Why me?
- Not feeling supported
- Disappointed
- Gets to a point and you can't be bothered
- Low self-esteem
- Start questioning yourself >> what have a I done wrong?
- Feeling like I don't want to come to work
- Feeling low
- Feeling let down
- Sometimes encourages people to kick-off >> normal culture
- Affects staffing levels >> injury, sickness
- Reduced resources (property damage)
- Reduced patient interaction time
- Service users feeling scared
- Wouldn't have faith in the service if I was a service user
- Would add to service users wanting to leave, but they can't
- Not therapeutic... aggravates things further
- Families feeling let down





## The Attributes of Innovations

1. Relative Advantage

2. Compatibility

3. Complexity/Simplicity

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### XXXXX Ward: Feelings / Experiences

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- Se
- W
- in
- a service user
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- Not therapeutic... aggravates things further
- Families feeling let down

# Safety Discussion in Community Meetings



Broset Violence Checklist

## The Attributes of Innovations

- 1. Relative Advantage
- 2. Compatibility
- 3. Complexity/Simplicity
- 4. Trialability
- 5. Observability

WARD: ROSEBANK Safety Cross

DATE: 14/07/16

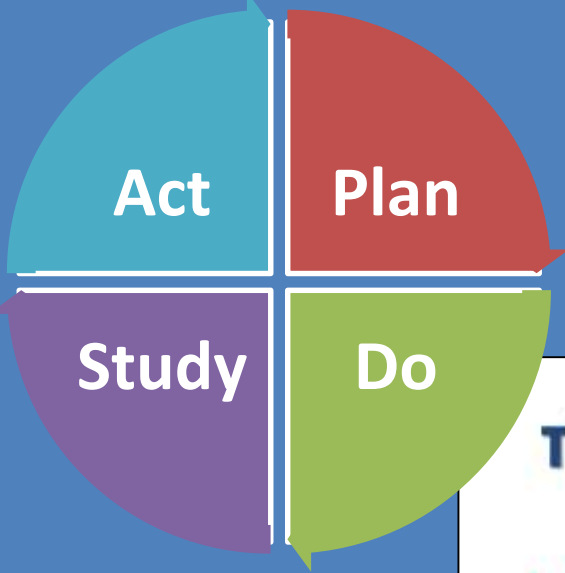
|       |       |
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| 3:00  | 4:00  |
| 5:00  | 6:00  |
| 7:00  | 8:00  |
| 9:00  | 10:00 |
| 11:00 | 12:00 |
| 13:00 | 14:00 |
| 15:00 | 16:00 |
| 17:00 | 18:00 |
| 19:00 | 20:00 |
| 21:00 | 22:00 |
| 23:00 | 24:00 |

100% Physio

A



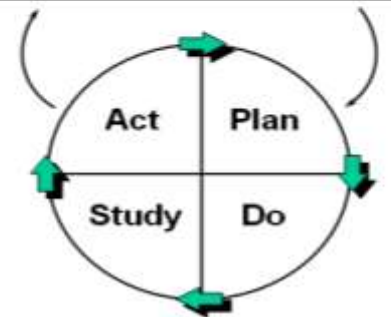
Safety Huddles



## The Attributes of Innovations

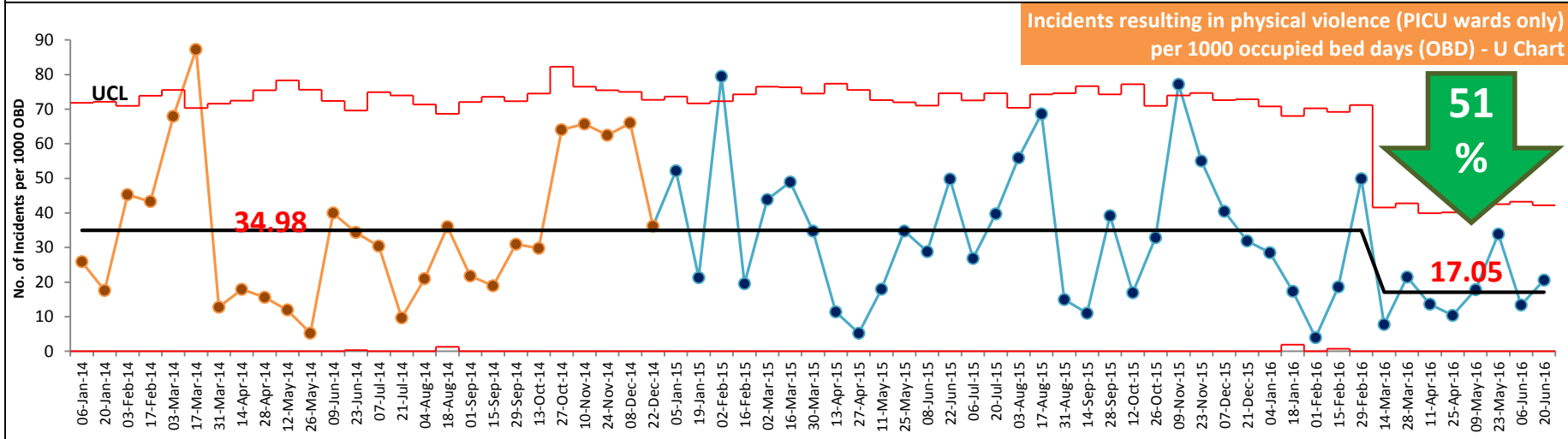
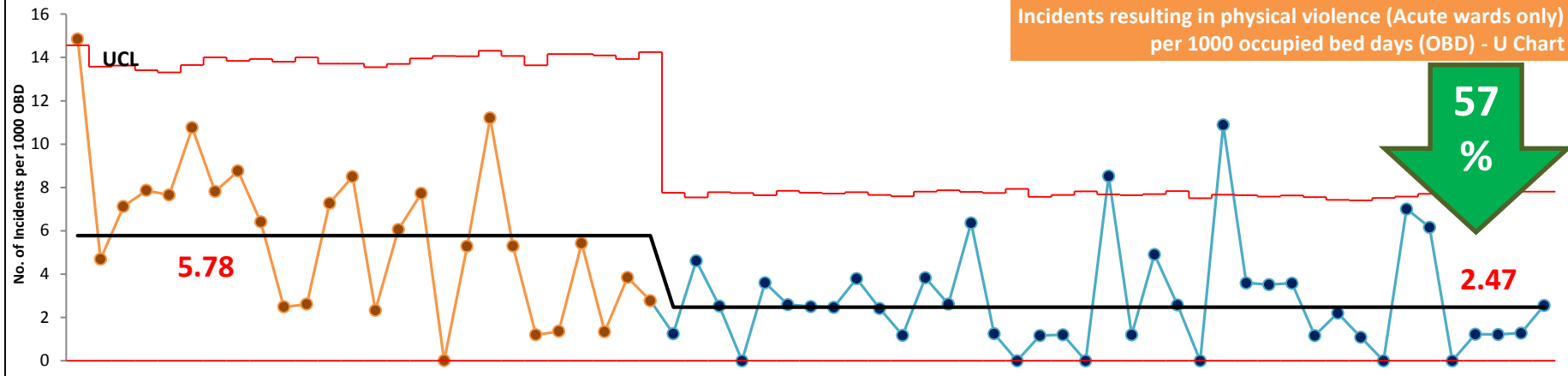
1. Relative Advantage
2. Compatibility
3. Complexity/Simplicity
4. Trialability
5. Observability

| 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 Attributes of Innovations**

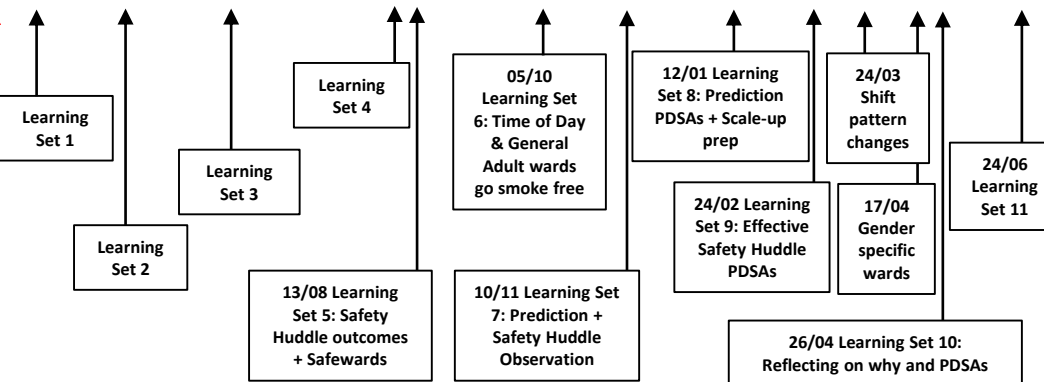
- 1. Relative Advantage**
- 2. Compatibility**
- 3. Complexity/Simplicity**
- 4. Trialability**
- 5. Observability**



← **BASELINE DATA (BEFORE)** | **PDSA DATA (AFTER)** →

↑ Pre-work / engagement

↑ Testing begins



Hackney

84%

Acute  
Wards  
including  
Brett

66%

Gardner  
Ward

42%

Acute  
Wards  
excluding  
Brett

67%

Joshua  
Ward

67%

Bevan  
Ward

64%

Topaz  
Ward

90%

Brett  
Ward

86%

Emerald  
Ward

Reductions we are seeing in data over time

Newham



*“We’re no longer fire-fighting all the time... ”*

*“I think there is a shift. Before we started this, no one talked about it. Now we are bringing it up, which says 'it is not ok' ”*

*“It is more calm and relaxed”*

*“I'm just really pleased that it's permeating out and patients are feeling able to broach the subject”*

*“It’s been a good few months... we are moving fast now”*

*“The team feels more confident and are having better discussions around issues that may arise”*

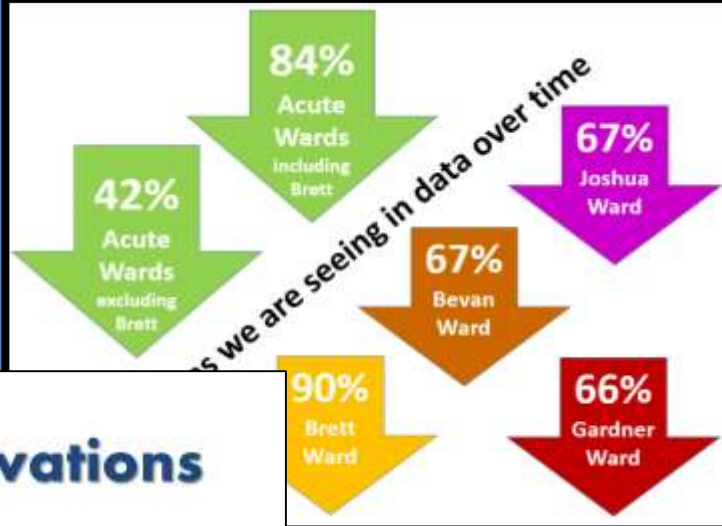
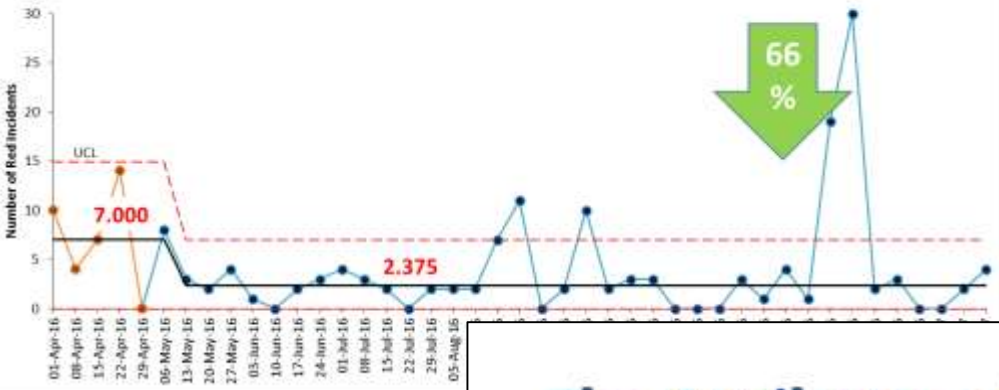
*“A service user has said she is impressed by the atmosphere... “*

*“4 months ago I was really scared to come to work, but it’s getting better”*

*“There’s a better therapeutic environment and patient satisfaction. You can feel the lowered levels of stress for staff and patients”*

*“Well, what can I say, the team are fantastic! Thank you for helping all the patients here. You save lives and give us a second and third chance”*

Red Incidents recorded by week on the Safety Cross, (Gardner) - C Chart



## The Attributes of Innovations

1. Relative Advantage
2. Compatibility
3. Complexity/Simplicity
4. Trialability
5. Observability

"I think there is a shift. Before we started this, no one talked about bringing it up, which says 'it is not ok'"

"We're no longer fire-fighting all the time..."

"I'm just really pleased that it's permeating out and patient care is broaching the subject"

"The team feels more confident and are having better discussions around issues that may arise"

"The team are talking about risk and making decisions - something that would never have happened 18 months ago"

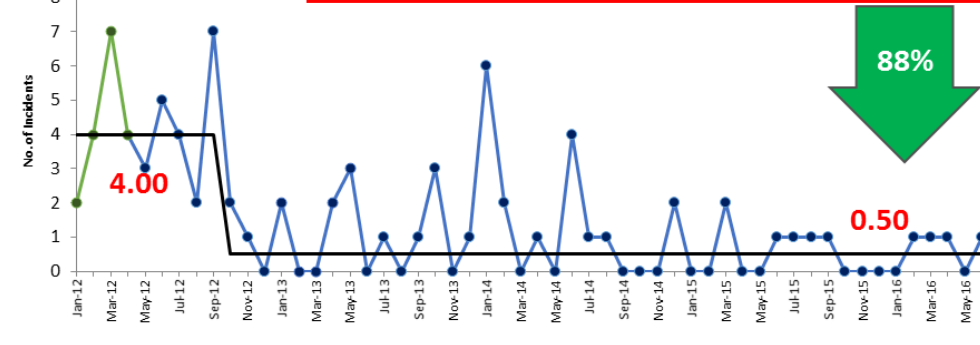
"4 months ago I was really scared to come to work, but it's getting better"

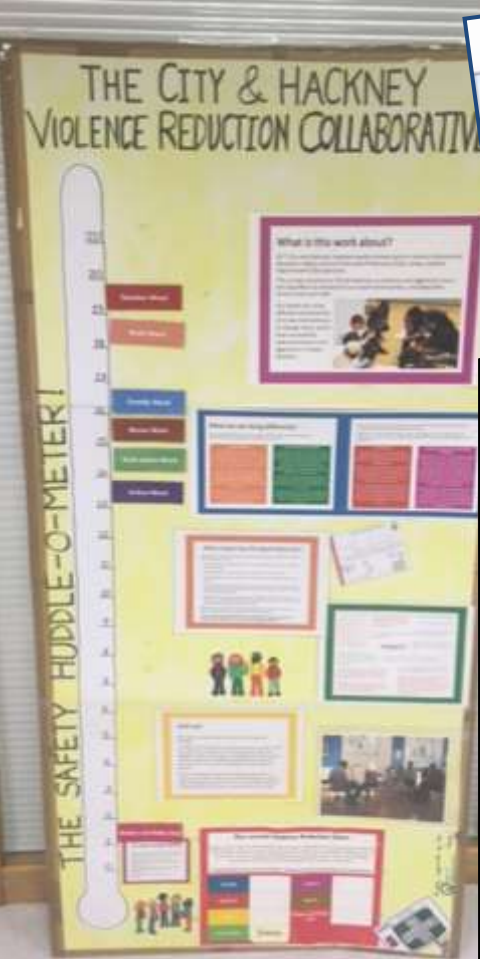
"I find them (huddles) an essential part of the shift; a space for us all to communicate and highlight risks to keep us safe"

"There's a better therapeutic environment and patient satisfaction. You can feel the lowered levels of stress for staff and patients"

"Well, what can I say, the team are fantastic! Thank you for helping all the patients here. You save lives and give us a second and third chance"

Incidents resulting in physical violence (Globe ward) - Run Chart

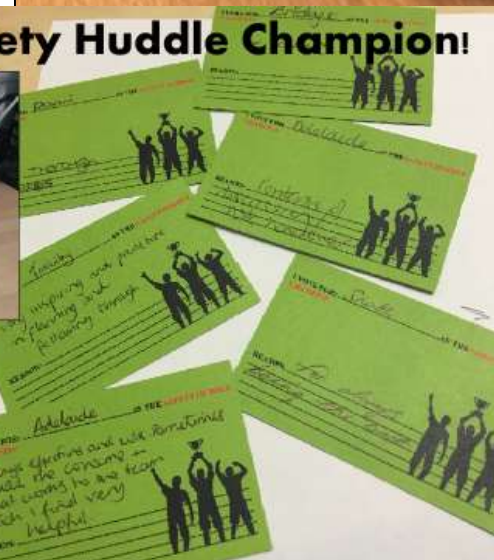




The power of peer to peer



Lea's Safety Huddle Champion!



Lea Ward

Lea Ward have done a lot to engage the team in the change ideas, including awarding safety huddle champions every month, based on nominations from staff (shown on the green cards)







BEVAN WARD SAFETY HUDDLE LEAGUE TABLE  
27 September 2016

| League           | Player                                | Points |
|------------------|---------------------------------------|--------|
| Champions League | <b>MARTIN</b>                         | 8      |
| Champions League | Patricia<br>Claire<br>Steve<br>Carmen | 6-7    |
| CHAMPIONSHIP     | Sean                                  | 5      |
| LEAGUE 1         | Mark<br>Monica<br>Lynn                | 4      |
| LEAGUE 2         | Julian<br>Sally<br>Angie              | 2      |

Making it your own!

*control*

Reinvention by adopters

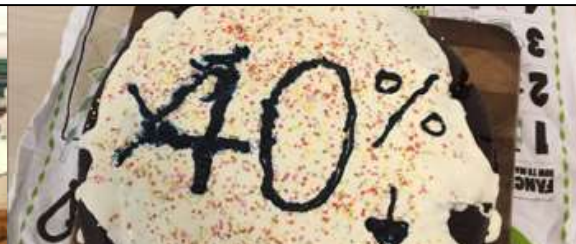


8:30am? 3:30pm?  
11:30pm?



The Bevan Ward team is aiming to do Safety Huddles 3 times a day to help us identify safety risks on the ward. These are quick stand-up meetings of the team.

Doing Safety Huddles is new for us, so sometimes it's hard to remember to do them. We hope this poster will help remind us... but if we've forgotten, please remind us too!



Lea Ward September Safety Huddle Champion  
George enjoying his prize



A man in a green tank top and dark shorts is sitting on the ground, looking exhausted and holding a medal. He has a race bib on his chest with the number 50677. A water bottle is visible to his left. The background is a blurred outdoor setting.

**RUN A MARATHON,  
THEY SAID**

**IT'LL BE FUN, THEY SAID**



IF TRUMP  
CAN RUN  
SO CAN YOU





A

# Key considerations

Leadership role

Context and  
readiness

Energy and  
Engagement

Phased  
approach

Design of  
support and  
learning systems