

## Demand, Capacity & Flow QI Collaborative

Learning Set 3 Monday 9 October 2023





### Housekeeping

- No fire alarm tests are planned for today.
- Toilets are located to the right of the lifts on level 1 and the ground floor.
- Lunch will be from 12:30-13:15 and will be served in Room 1.6.
- **Room 1.1** is also available if anyone needs to take a break at any point or needs some space on their own (apart from between 10.45am-12.10pm you can use 1.6 at this time).
- If you need to take a phone call or attend to an email during a presentation, please kindly leave the room.





### X/Twitter

- We will be live tweeting this event so you may see the QI coaches on their phones during some sessions. Please also find and follow us
   @NCCMentalHealth or search for #DCFQI.
- We encourage use of X/Twitter and social media to share the work that you are doing throughout the collaborative.
- However, we kindly ask you not to tweet people's names, photographs of people's faces or their talks without their permission.

### Thank you!!



### Today's agenda

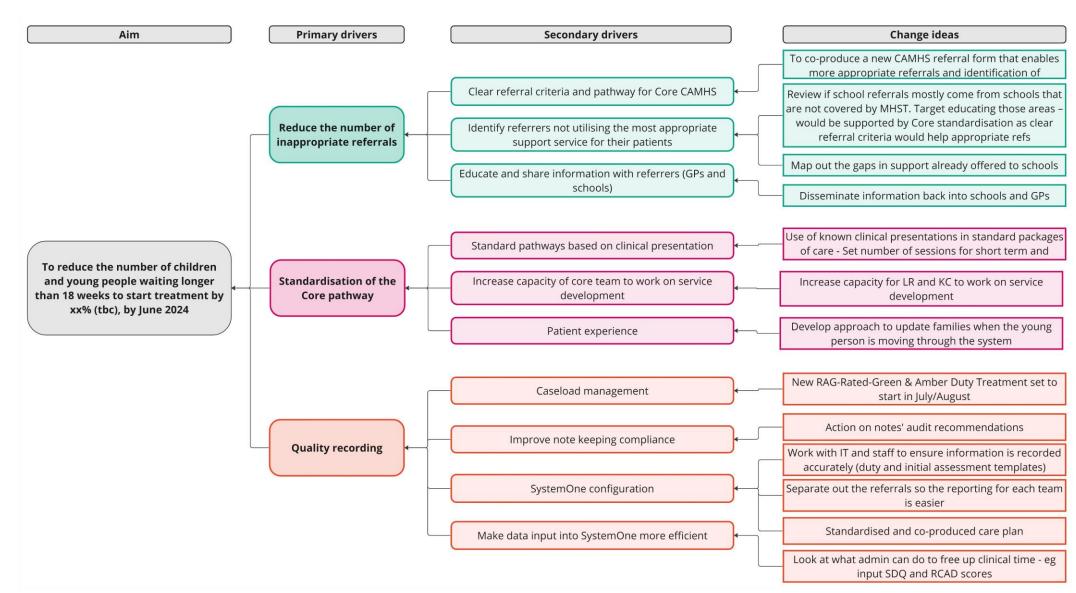
Time	Item	Speaker
10:30-10:45	Welcome, housekeeping and recap	Emily Cannon, Head of Quality Improvement, NCCMH
10:45-12:10	Change ideas: What has been planned and tested?	All
12:10-12:30	Sharing learning from the change ideas session	Amar Shah, National Improvement Lead
12:30-13:15	LUNCH	
13:15-14:15	Working with people with lived experience in your DC&F QI Project	Sarah Markham, DC&F Patient and Carer Representative, NCCMH
14:15-14:50	Equity lens on demand, capacity and flow	Tom Ayers, Director of NCCMH and Satwinder Kaur, Patient and Carer Representative, NCCMH
14:50-15:00	Feedback and close	Saiqa Akhtar, Senior Quality Improvement Advisor, NCCMH

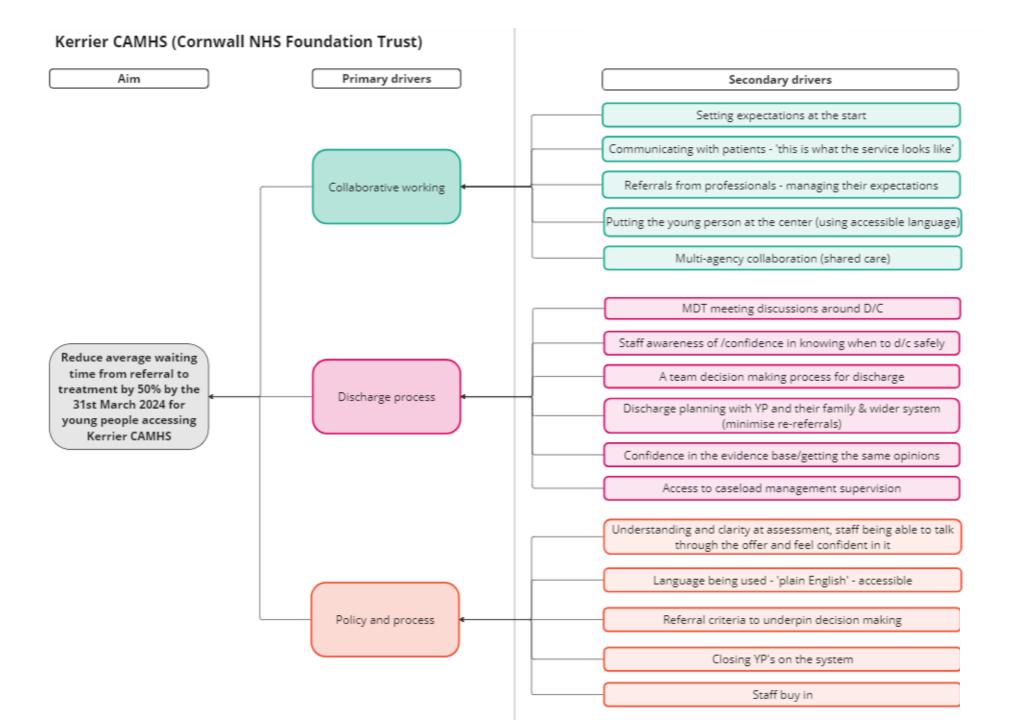
### Since the last learning set (July)...

Teams have been finalising their driver diagrams and generating change ideas...

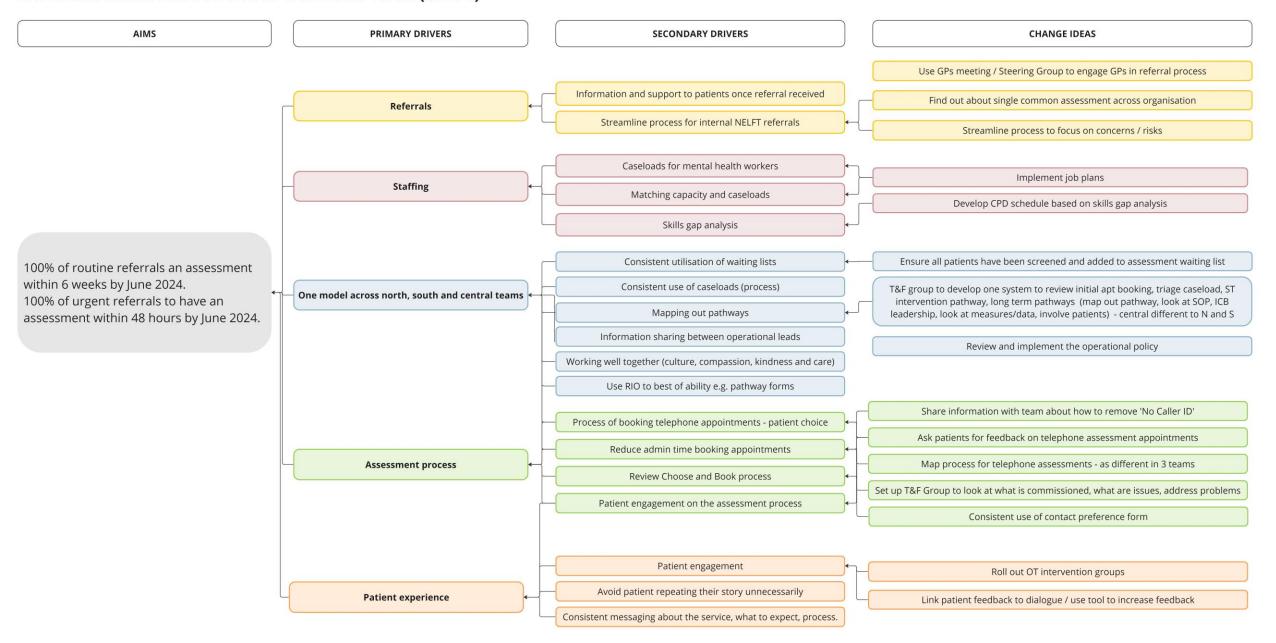
### **Core CAMHS**

(Bradford District Care NHS Foundation Trust)





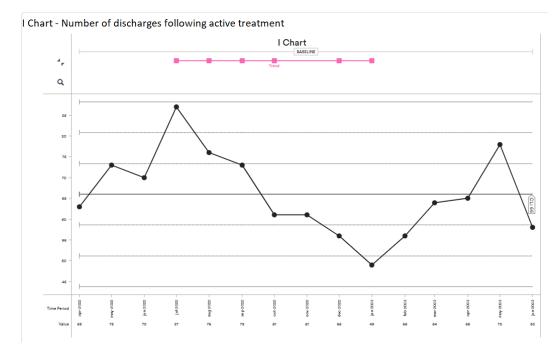
### HAVERING MENTAL HEALTH AND WELLNESS TEAM (NELFT)



### Have started to collect data...

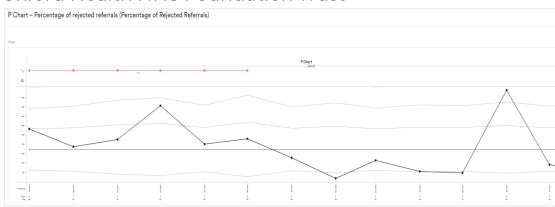
### **Havering CAMHS**

North-East London NHS Foundation Trust



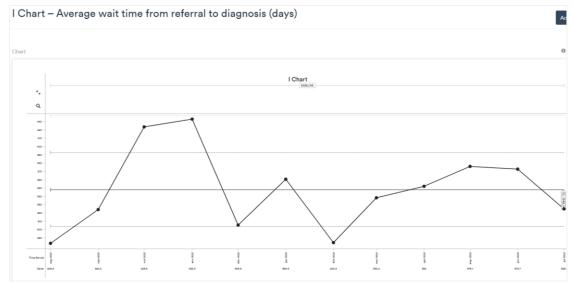
### **CMHT for Older Adults North & West Oxfordshire**

Oxford Health NHS Foundation Trust



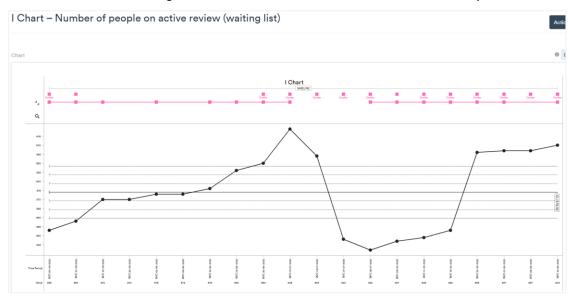
### **Memory Assessment and Treatment Service**

Bradford District Care NHS Foundation Trust)



### **DGS Community Mental Health Team**

Kent and Medway NHS and Social Care Partnership Trust



### And test change ideas...

Meet with GP with most inappropriate referrals to discuss referral criteria

Triage process with built in checklist and automated tasking/follow up

Set number of sessions for a shortterm and longer-term pathways

Improve the quality of initial assessments by supporting staff to capture the information needed to make decisions

Simplify the two-stage screening process by removing the first stage, so that clinicians only screen once

Removal of the Awaiting Missing Referral Information (AMRI) stage during screening new referrals

Develop a clear discharge process for Havering CAMHS that can be communicated to staff, young people and their families

Create a usable flow chart for referring GP's to understand the service









Introduce regular caseload reviews (discussing D/C and intervention)

Remove first stage of screening to streamline the screening process

Act Plan
Study Do

Update appointment letter to provide meaningful, useful information

Create discharge process map

Act Plan
Study Do

Call patient to offer appointment times and book over the phone

Develop and test consultation feedback form

Act Plan
Study Do

Introduce A 'CAMHS agreement' at first appt

Introduce clinic model for completing assessments



#### NELFT Quality Improvement Services @nelftqis · Aug 4

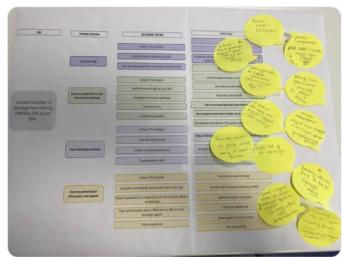
This week, QI supported the Redbridge #CAMHS service with a process mapping session to get a better understanding of the processes from referral to discharge. The team was engaged with a keen interest on patient safety and delivering an efficient service. #QualityImprovement



ta NEI

#### Saiqa @saiqanccmh · Jul 28

This week our @NCCMentalHealth QI Coach Aarti Gandesha met with wonderful Havering #CAMHS team @nelftqis, as part of the #DFCQI Collaborative @rcpsych. This was the 3rd engagement session with young people, who discussed their project driver diagram and generated change ideas.



North East London NHS Foundation Trust (NELFT) and NCCMH





NELFT Quality Improvement Services @nelftqis · Mar 6

Day 2 of #ProcessMapping for @rcpsych #DFCQI Collaborative. This time with @NELFT Adult Autism Services. This helped the team identify an area to focus their project on where they will have the greatest impact on their waiting list.

@NCCMentalHealth #QITiwtter @NELFTLetsEngage

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athway from referral to discharge DFCQI Collaborative with

Great to see all the discussions and planning for our first PDSA cycles at the @NCCMentalHealth collaborative from our 4 @NELFT teams (WF SPA, HAV CAMHS, HAV MHWT, B&D Adult Autism team) #rspsych #DCFQI #QITwitter



Follow the #DemandCapacityFlow Collab here nelft.nhs.uk/demandcapacit...

#### @NELFT @NELFTLetsEngage #QITwitter



& Katie Lidington

12:31 PM · Mar 2, 2023 · 466 Views



Demand, Capacity & Flow

Quality Improvement Collaborative













## Process of creating a flow chart...

"Really good as this was missing in our service - it was challenging as there is so much to capture . it is not until you put pen to paper that one realises how much work goes into it."

"It seemed daunting at first because of the scale and the complexity but it was so well supported that it felt achievable."

"Challenging, all of us trying to agree."

## Process of collecting and discussing data...

"It motivates us in doing better and see the positives of what we are doing, the challenge is to get accurate data from the system (spot gap in the system) so that we have the tools to gather qualitative data."

"It has been challenging because we don't currently collect the data that we need."

"It has been good to clarify perceptions with facts and get a true understanding."





### Process of developing aim, driver diagram and change ideas...

"The driver diagram gives a deep insight that links the different process and parts of the system. This helps to organise information to link the aim of the project to potential change ideas."

"It's been good to prioritise and also discuss what is achievable, and better understand the barriers."

"Positive experience to really clamp down on what needs to change. Tying into SMART goals helpful."

"It is hard as we are also going through transformation."

"Challenging deciding on the aim."





## What you have enjoyed most...

"Getting to meet with others are hearing what they are doing, this helps form ideas." "Meeting other trusts and sharing and learning on the collaborative learning days."

"Protected space for team to come together to discuss ideas and implement change."

## Some of the challenges faced so far...

"The time in the workplace to be able to really get changes embedded. We have struggled with our seniors not understanding the need to tackle patient flow differently and their influence has been tricky."

"We have struggled to get service user involvement in the project."

"Data gathering from the system we use."







## Change ideas: What is being planned and tested?

DC&F teams share their progress, successes, and challenges so far.





- In your tables of 2-3 teams, each team have approx. 10-15 mins to share the idea you have been planning/testing and discuss with colleagues from other teams.
- Is there key learning you can take back to your projects? Use the worksheets on your tables.



### Seating plan for change ideas session

### Table 1

- Cheshire & Wirral Complex Needs Service
- West London Ealing Acton MINT

### Table 2

- NELFT Havering MH & WT
- NELFT SPA

### Table 3

- Cambridge & Peterborough CLASS
- NELFT ASD

### Table 4

- Coventry MH & Wellbeing Team
- Kent & Medway DGS CMHT
- Avon & Wiltshire Psychological Therapies

### Table 5

- West London Ealing North MINT
- West London Hounslow IAPT
- RCPsych HR Recruitment Team

### Table 6

- Bradford Memory Service
- Oxford Health OA CMHT
- West London Ealing Southall MINT

### **Room 1.1**

- Bradford CAMHS
- NELFT Havering CAMHS
- Cornwall Kerrier CAMHS

Teams
highlighted in
bold do not
have to move
tables



- Add your change idea posters to the boards around the room, so your ideas can be shared with everyone.
- Add a ping pong ball to



- container 1: for each idea your team is <u>already</u> testing or planning to test
- container 2: for each <u>new ideas</u> you will take back to your team





With your team, spend 10 mins consolidating all your learning and conversations:

- Any new change ideas?
- Learning and suggestions from other teams
- Actions to take forward





### Feedback

Teams to share learning with all.





# Working with people with lived experience in your DC&F QI Project

### Sarah Markham

Patient and Carer Representatives, NCCMH

## Recap: working with people with lived experience





## Checking in on progress





- India Blakemore (Cheshire and Wirral Partnership NHS Foundation Trust)
- Kenzie (Bradford District Care NHS Foundation Trust)



### Final reflections and next steps





## Close

### Saiqa Akhtar

Senior Quality Improvement Advisor, NCCMH





### Feedback and close

 We value your feedback as this helps us to continue to improve these events.

 Please use the QR displayed here, or the paper copies on your tables.



