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Mental Health  
Ontario

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d'Ontario



Canadian Mental  
Health Association  
Ontario



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Quality

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# Quality Improvement Plan (QIP) Journey Web Series: Chapter 5

## Change Ideas—

Change is hard but figuring out  
where to start is harder

January 19<sup>th</sup> 2021

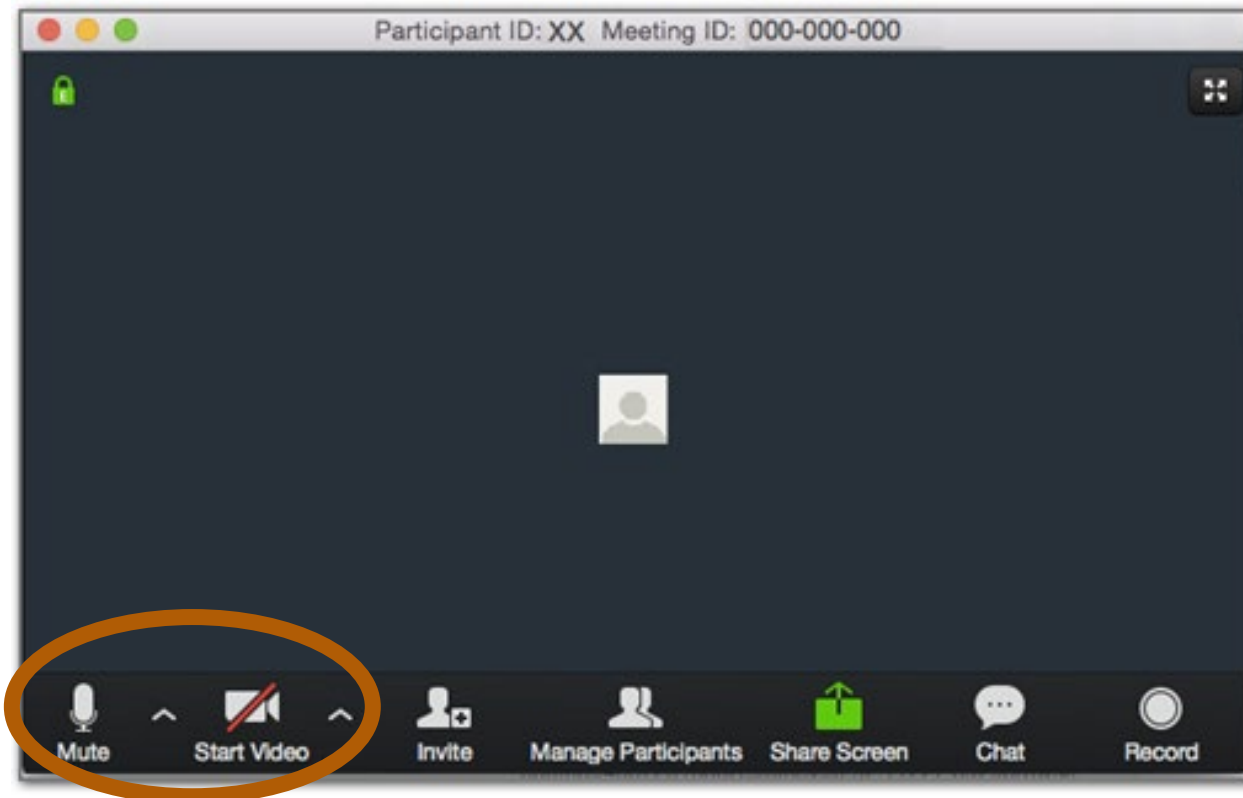


e-QiP

Excellence through Quality  
Improvement Project  
Community-focused. Data-driven.

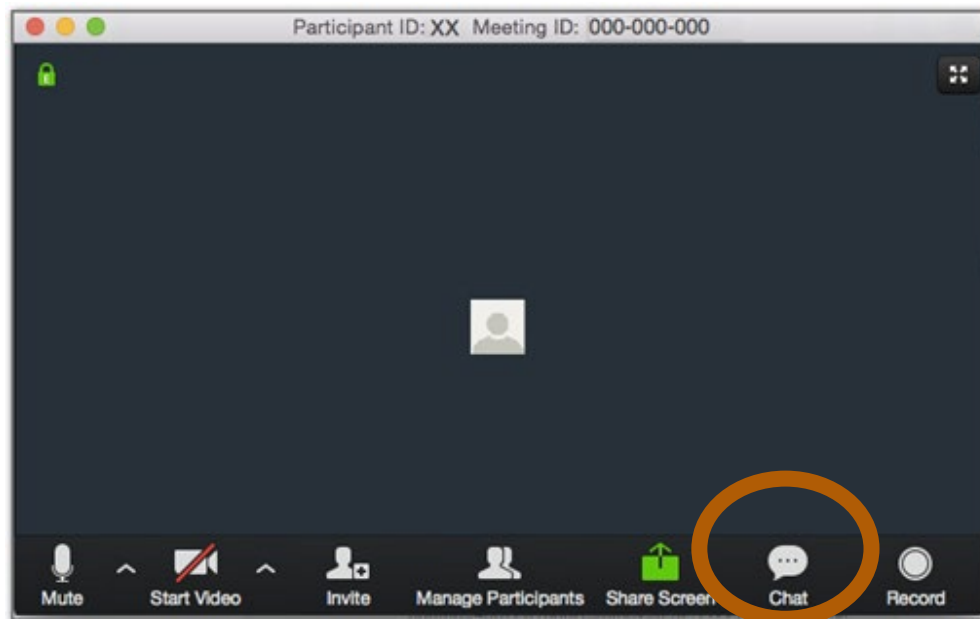
# Using Zoom Together!

## Audio and Visual Controls



# Using Zoom Together!

During the session if you want to contribute but not speak please use the chat function at the right hand of the toolbar



# Learning Objectives

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Through active participation in this webinar, participants will

- Experience how a Driver Diagram can help to illustrate your change ideas
- Know how to generate change ideas
- Understand how to prioritize change ideas to assist with knowing where to start *impact effort grid*
- Be able to name sources of change ideas
- Know how to document change ideas in the QIP
- Discuss keys to success



# Quality Improvement is a priority



## Ministry of Health

- Improving quality
- Implementing innovative solutions

## Centre of Excellence for MH&A

- Performance indicators to establish & monitor performance expectations

## Ontario Health

- Mandate to “bring together a unified “single team” to “execute the government’s strategy, oversee health care delivery, improve clinical guidance, and extend and **strengthen quality and performance improvement capacities** across the continuum of care.”

IDAIM		MEASURE								CHANGE				
QUALITY DIMENSION	MEASURE / INDICATOR	TYPE	UNIT / POPULATION	SOURCE / PERIOD	ORG ID	CURRENT PERFORMANCE	TARGET PERFORMANCE	TARGET JUSTIFICATION	EXTERNAL COLLABORATORS	PLANNED IMPROVEMENT INITIATIVES (CHANGE IDEAS)	METHODS	PROCESS MEASURES	TARGET FOR PROCESS MEASURE	COMMENTS



# Our two roles in health care

**All health care professionals have 2 jobs at work**

**Providing care; and  
Improving care**

Quality by Design – A Clinical Microsystems Approach  
E.C. Nelson, P.B. Batalden, M.M. Godfrey

# Recap.... Chapter One to Chapter Four

- Start with what you know; look for what stands out
- Use the quality domains (safe, effective, person centered, efficient, timely, equitable) and your Strategic Directions and Operational Goals to guide you through the process
- Use others, you are not alone!
- Use data for decision making: look at all the available data – what are your sources? Check out the complaints and compliments
- Remember everything that counts can't be counted – look at qualitative data
- Create a measurement plan and operational definitions – numerator and denominator, targets
- Record measures on the QIP template
- Graphically display and interpret data
- Recognize pitfalls around data collection and analysis
- Understand the difference between activity and change ideas
- Understand the PDSA cycle and how to use it to test change ideas
- Understand the relationship between predications and data collection
- Understand how to scope tests of change for rapid learning
- Discuss keys to success

# Introducing today's Panelists

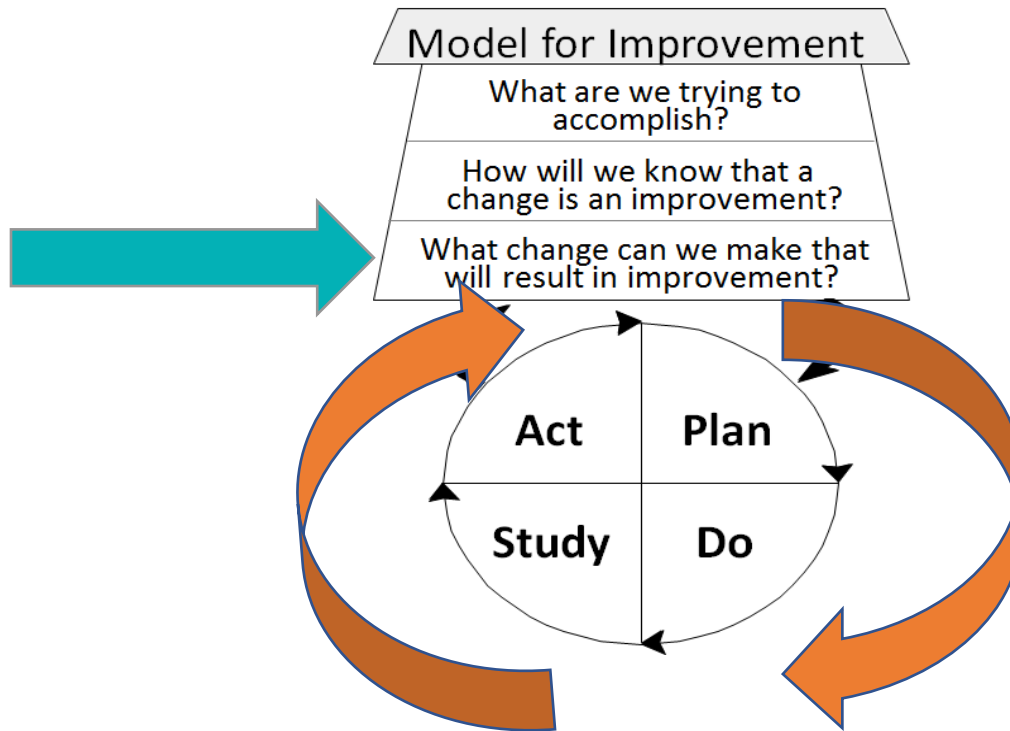


Alice Strachan  
Quality Specialist, Ontario  
Health, Clinical Institutes and  
Quality Programs



Laura Daly-Trottier  
E-QIP QI Coach

# Driver Diagrams: What change(s) can we make that will result in improvement?



January 2021



# Driver Diagrams

*Facilitate the link between root causes and change ideas.*

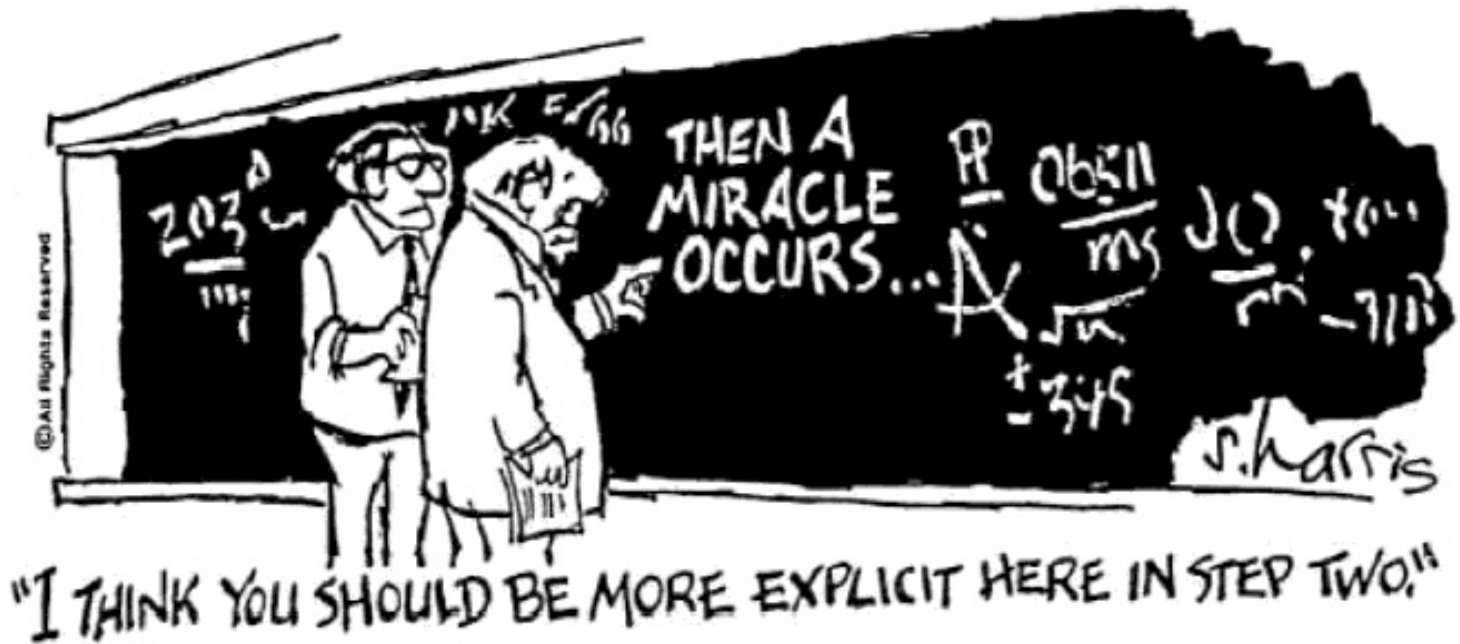
# Driver Diagram

Lays out your improvement project in a simple format

Provides a visual of what must or could be done to achieve the aim

Meant to be updated throughout the project.

# Theory of Change



# Driver Diagram: A Theory of Change

- Creates a logic model to develop and communicate your approach to achieving your aim.
- Facilitates the link between root causes and change ideas.
- Provides a structure for identifying appropriate measures
- Answers the questions “why” and “how”.
- Identifies hypothesized relationships among primary and secondary drivers of change - action/affect validates relationships.

(Reed JE et al. BMJ Qual Saf Oct 16, 2014)

# Theory of Improvement (Change)

An approach to help build and empirically test theories for improvement within a given process or system.

Calls for **experience and knowledge** to justify actions (i.e. “reason-giving”).

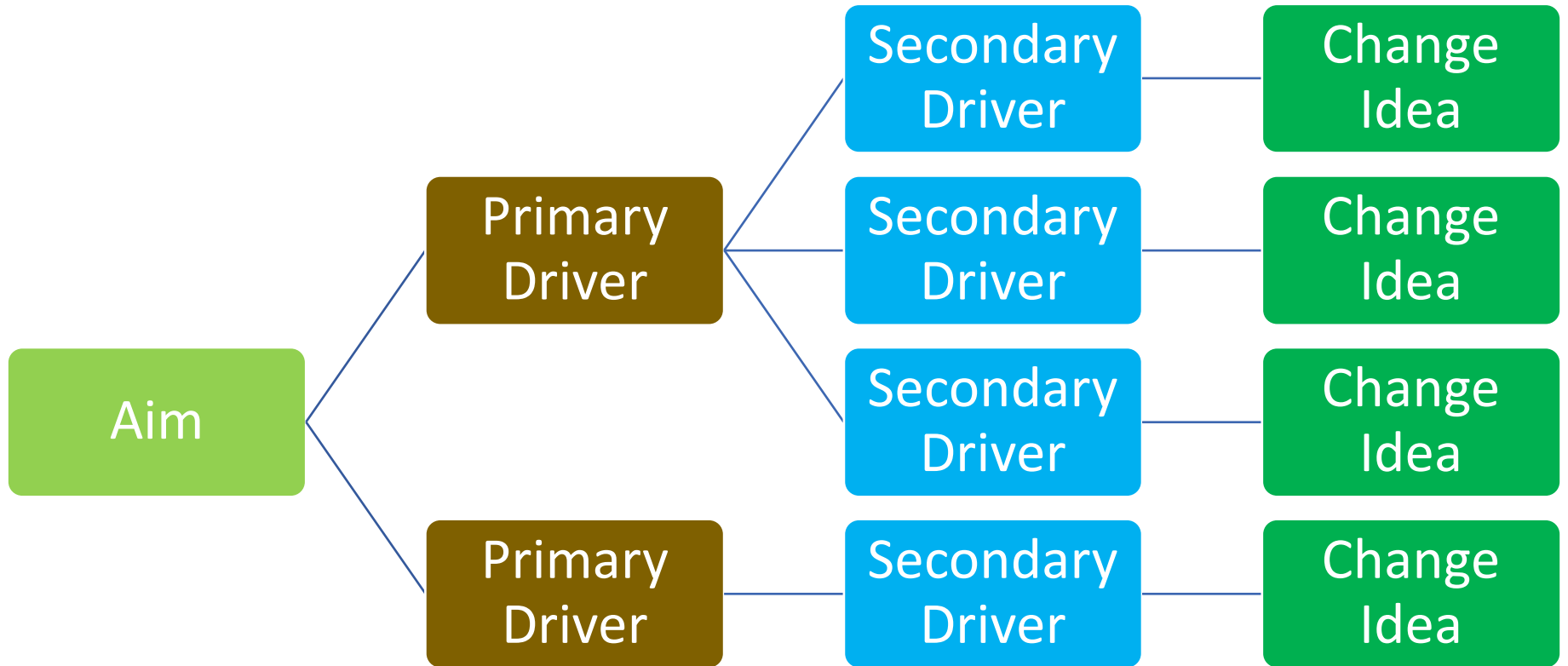
**Facilitates planning and executing change** with the greatest possible impact.

- Guides the **continuous process** of prediction, testing, learning and revision towards a given aim.

# Driver versus Tree



# Four Main Components:



Aim

S.M.A.R.T. Goal

Specific

Measurable

Achievable

Realistic

Time Bound

\*should be meaningful to your clients/tenants

A well-written **Aim** helps you identify your **Outcome Measure**

## Primary Driver

Key areas you will need to influence; big topics or areas you will need to work on in order to achieve your aim.

All key areas of your system that you will need to influence within your project, should be captured within your drivers.

A well-written **Primary Driver** helps you identify your **Process Measures**

## Secondary Drivers

These will influence **Primary Drivers**; these are seen as having less importance than **Primary Drivers**.

These are what would need to be in place to positively influence the **Primary Driver**.

The difference between **Primary** and **Secondary Drivers** is important. If the driver is big and critical, you should consider it as a possible **Primary Driver**

A well-written **Secondary Driver** helps you identify relevant **Change Ideas**

## Change Ideas

Things you would like to test in order to achieve the **Aim**; each change idea should have an effect on at least one **Secondary Driver** (all Change Ideas are expected to help achieve the **Aim**)

May be more than one change idea for each **Secondary Driver**

Change Ideas are based on the Root Causes identified by team (positively framing the Root Causes identified on your Pareto Chart may be a great place to start!)

# Reminder: Family of Measures

## Outcomes Measures

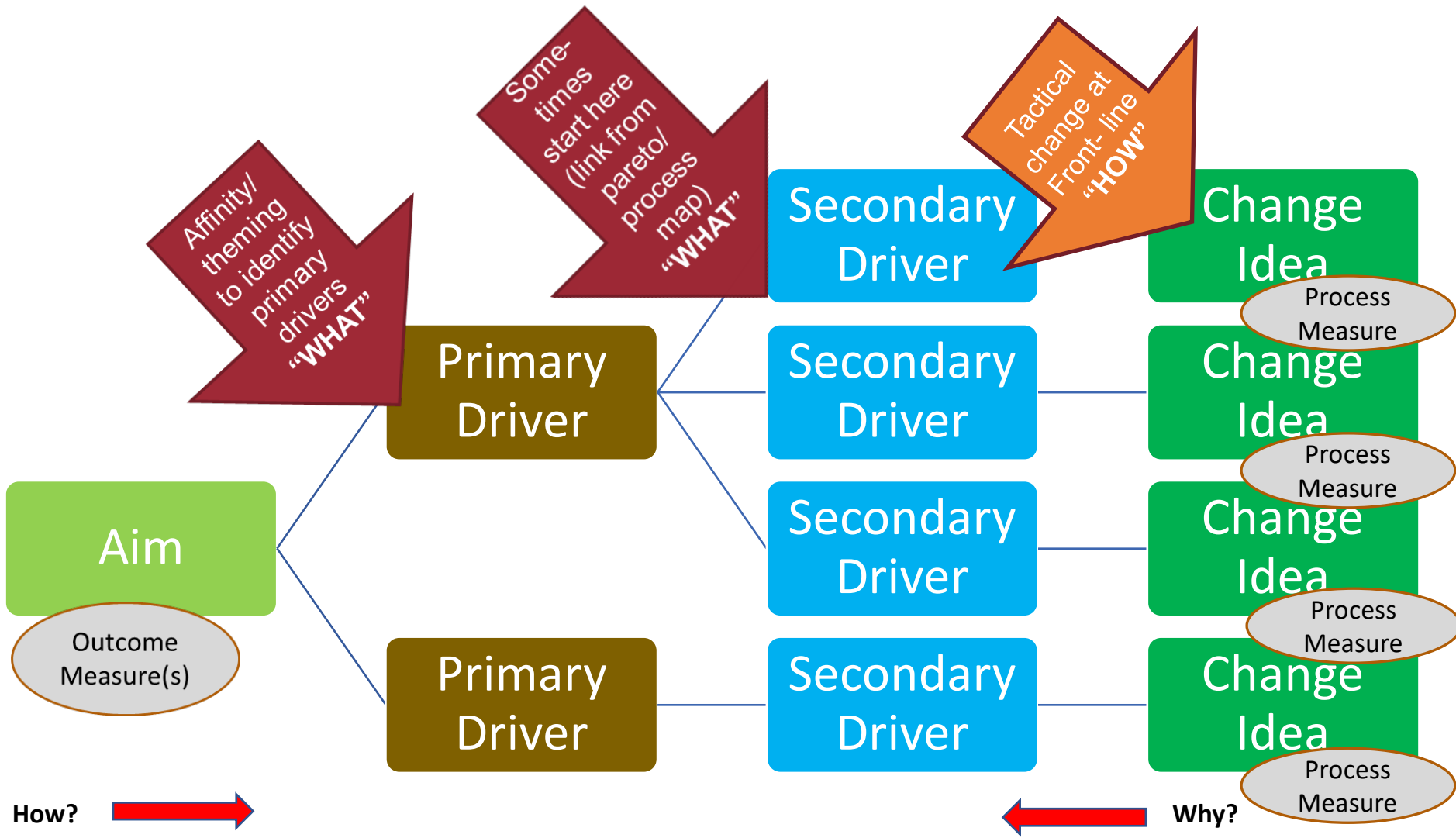
- ✓ Where are we ultimately trying to go?
- ✓ Are your changes leading to improvement
- ✓ Measures of the customer or client
- ✓ Typically represents “the client voice”

## Process Measures

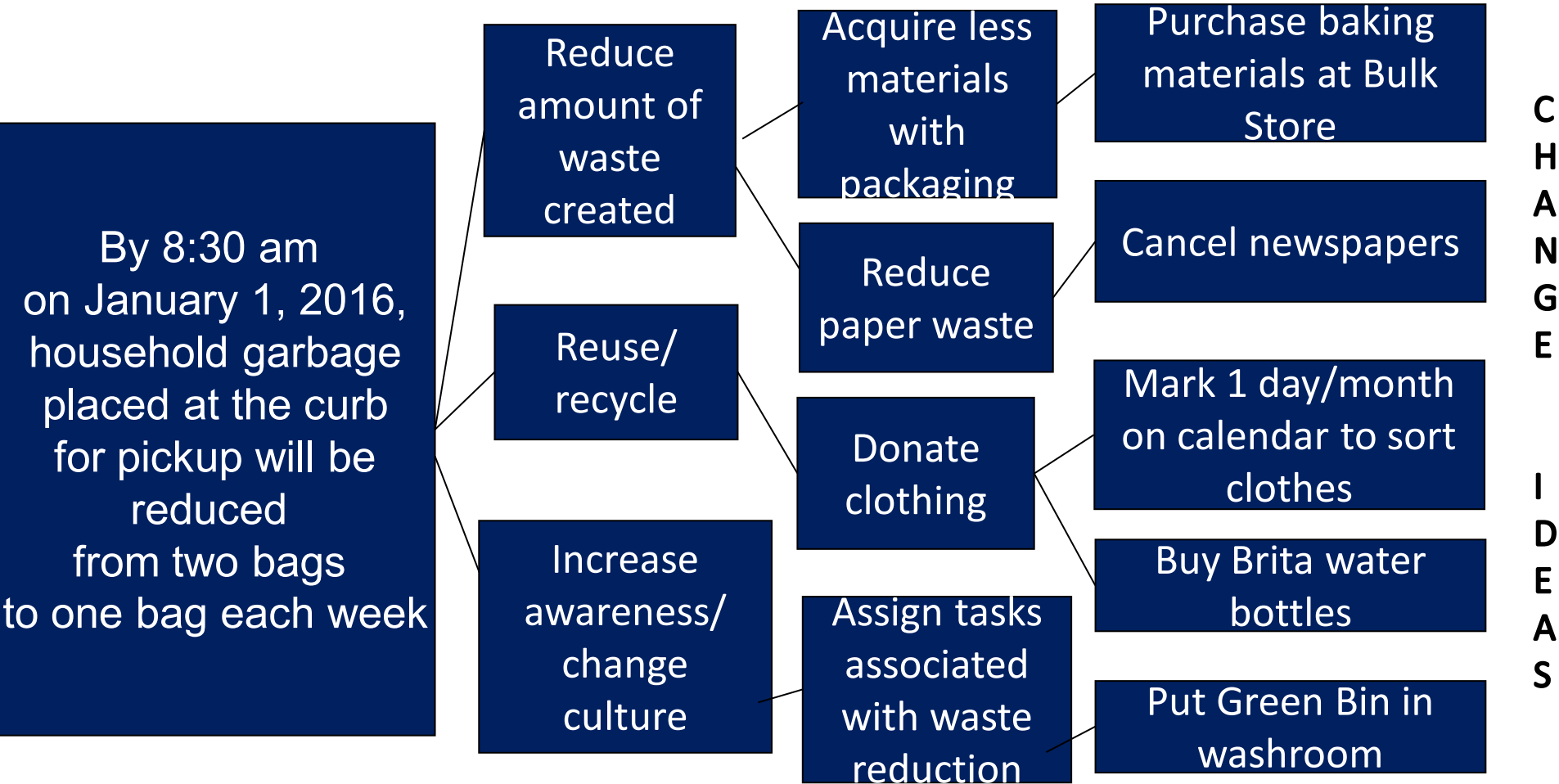
- ✓ Are we doing the right things to get to the outcome?
- ✓ Measures of the workings of the system
- ✓ Are we doing the right steps – are our changes working?

## Balancing Measures

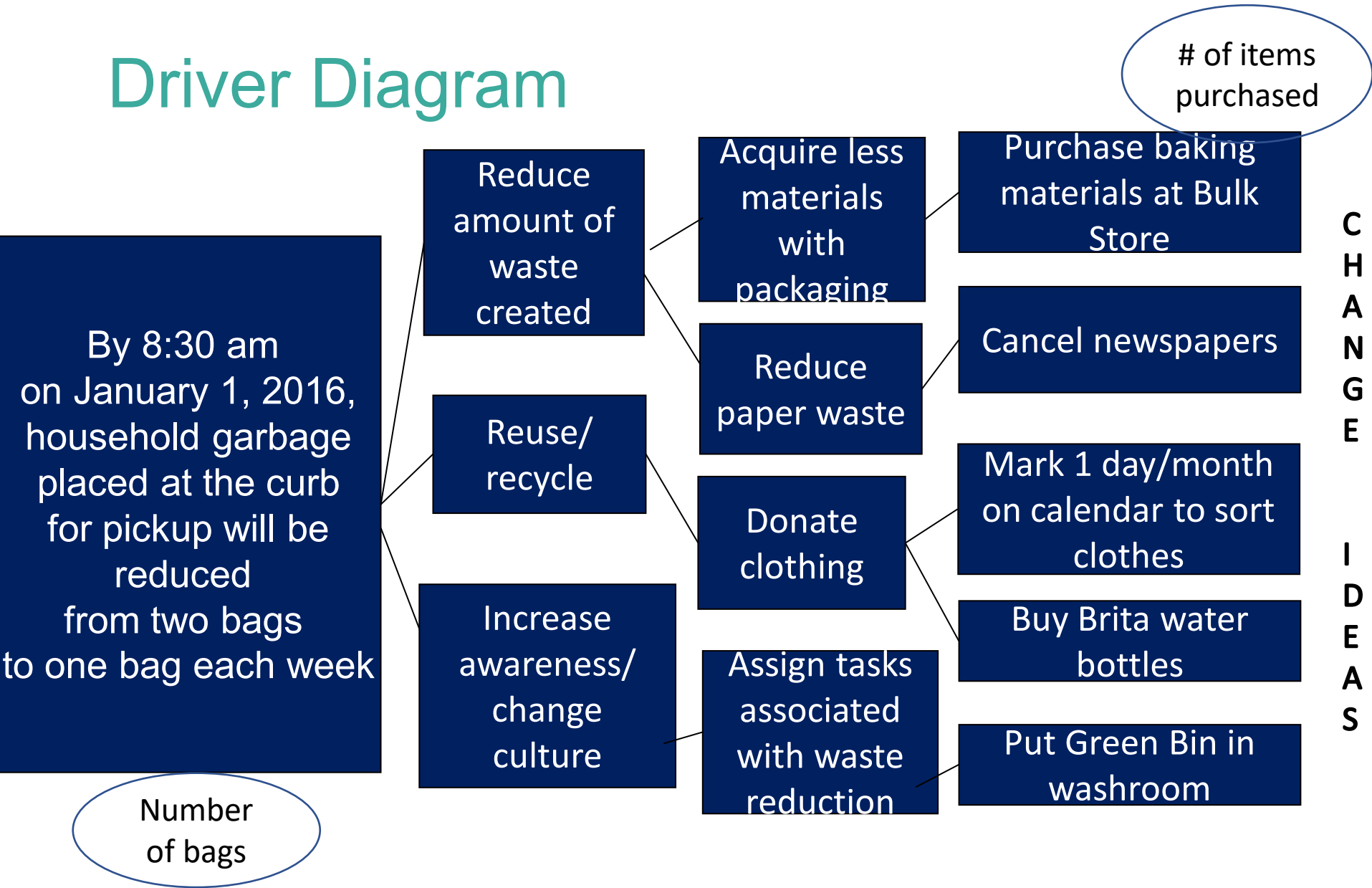
- ✓ Are the changes we are making to one part of the system causing unexpected changes in other parts of the system? (ie/increased workload for staff?)
- ✓ Measures of other parts of the system



# Driver Diagram

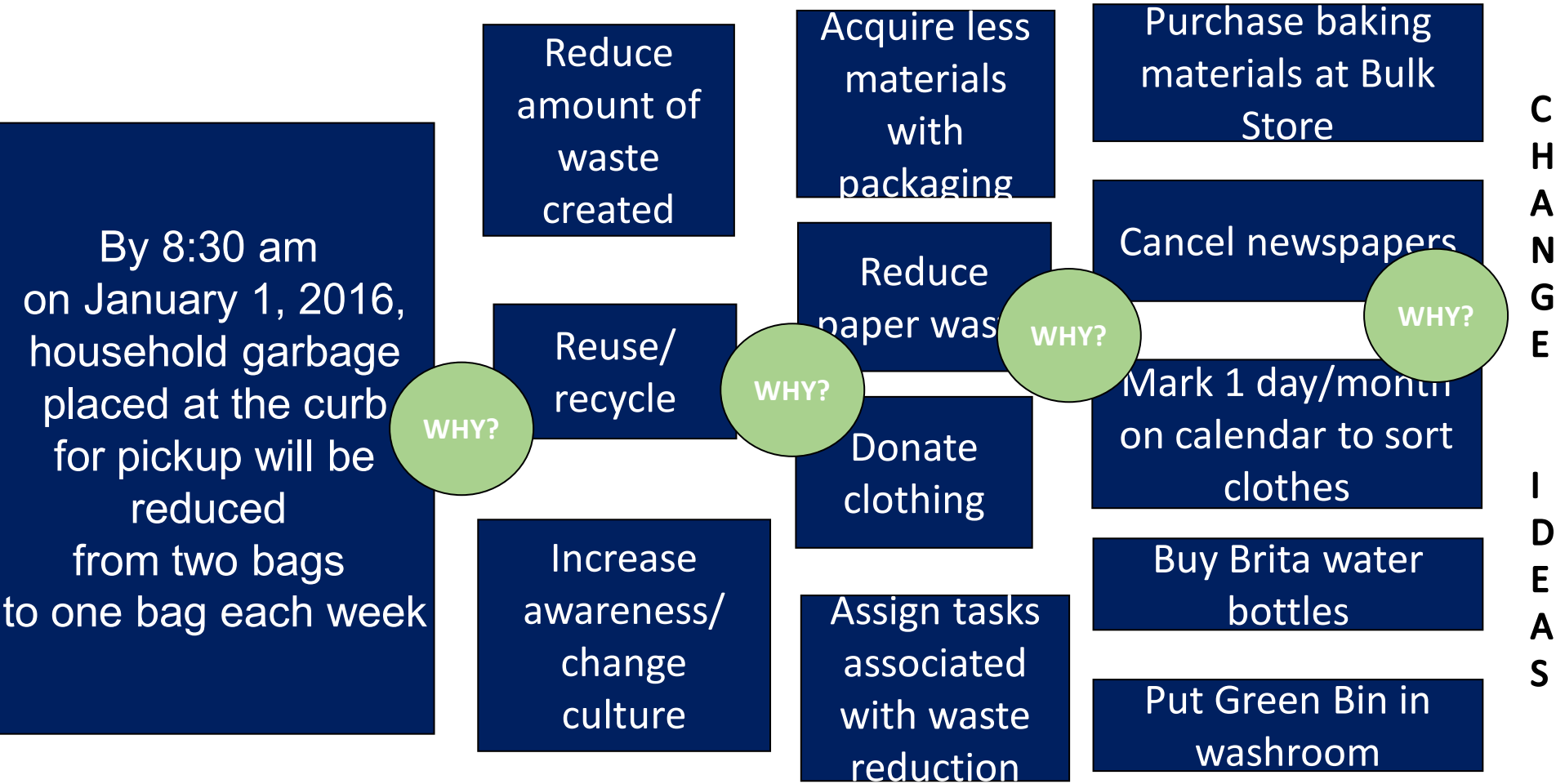


# Driver Diagram





# Reading Right to Left Answers Why?





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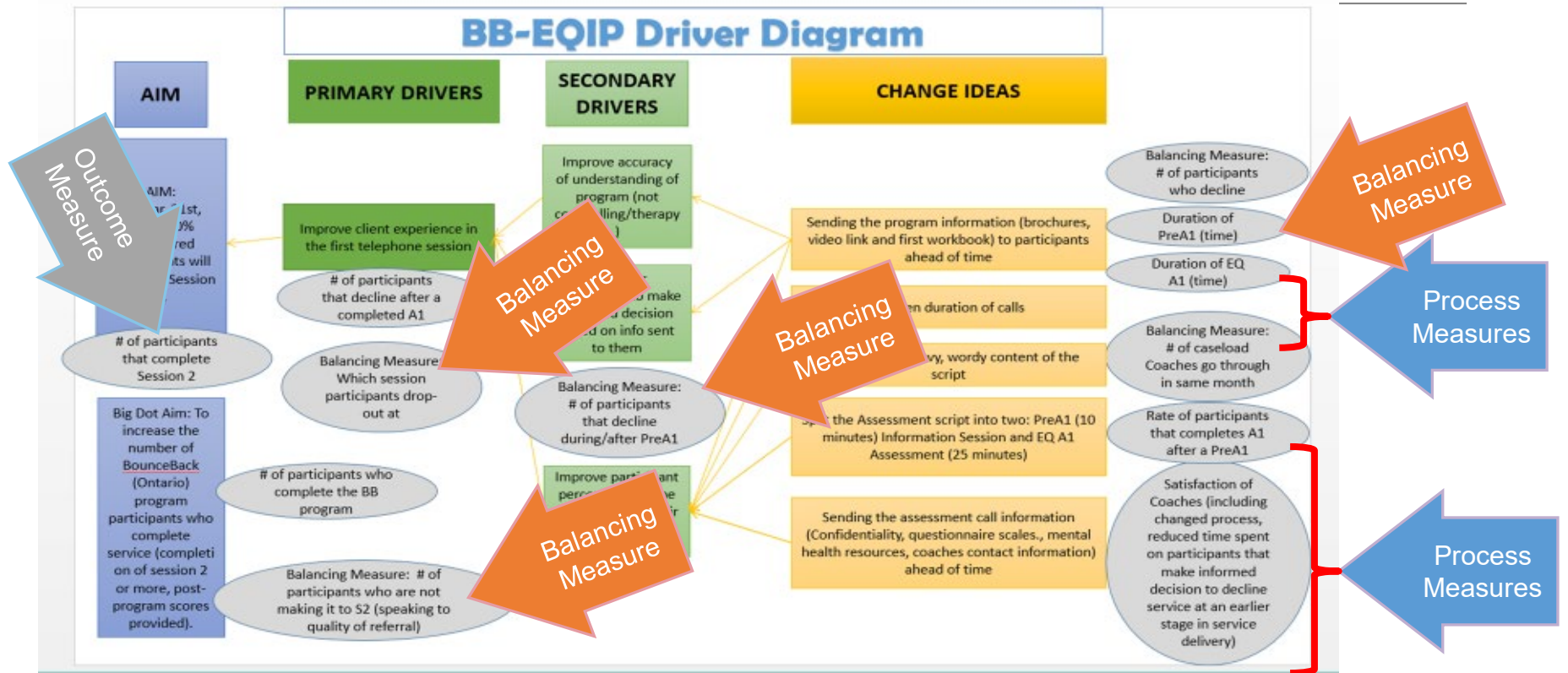


Ontario Health Quality



Improving & Driving Excellence Across Sectors

# CMHA York and South Simcoe BounceBack: Driver Diagram

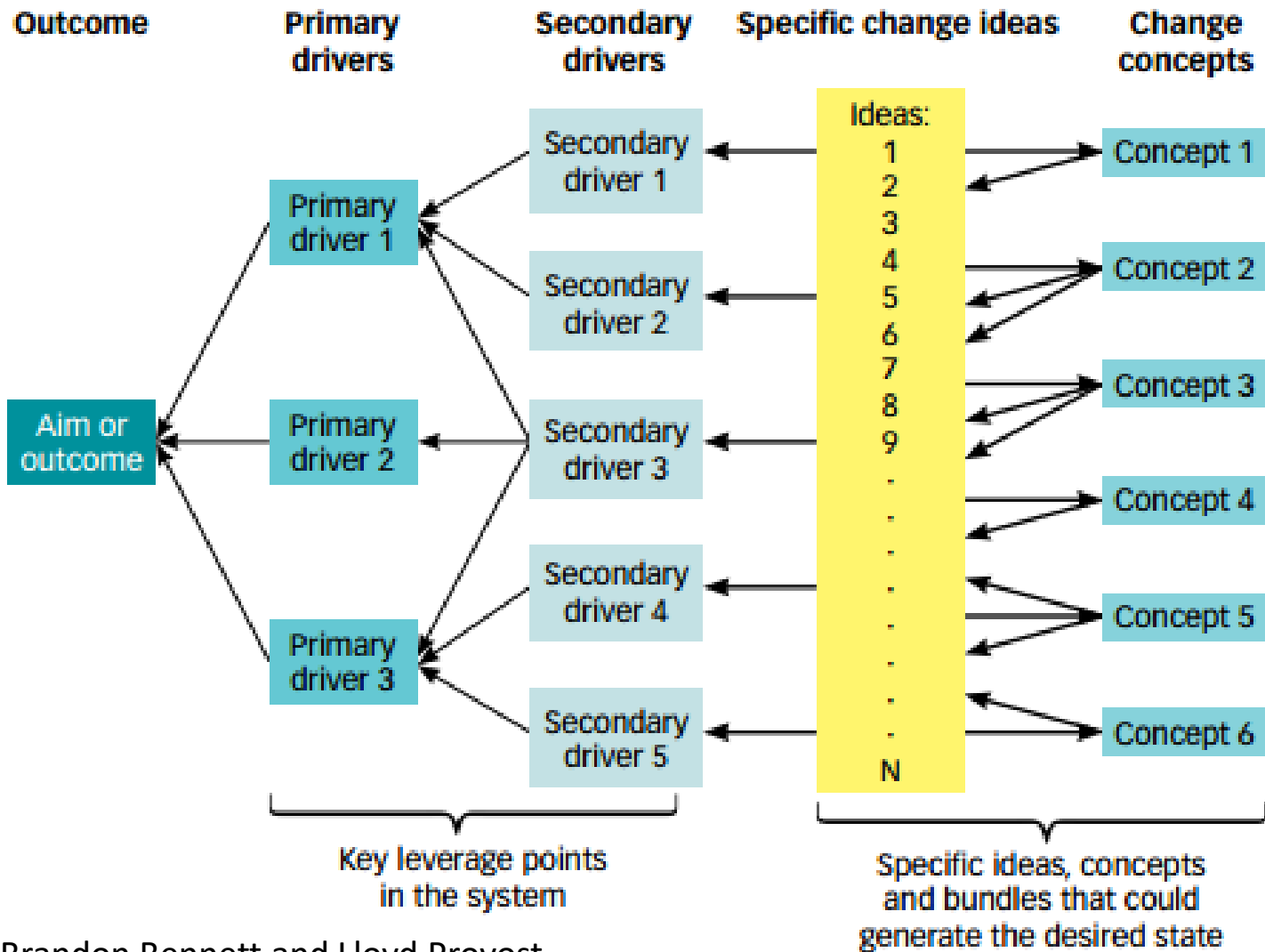


# What's **YOUR** Theory?

Driver diagram serves as tool for **building and testing** theories for improvement

by Brandon Bennett and Lloyd Provost

# Driver diagram as your theory of change



From Brandon Bennett and Lloyd Provost

What's Your Theory? In *Quality Progress*

# Questions to extract concepts

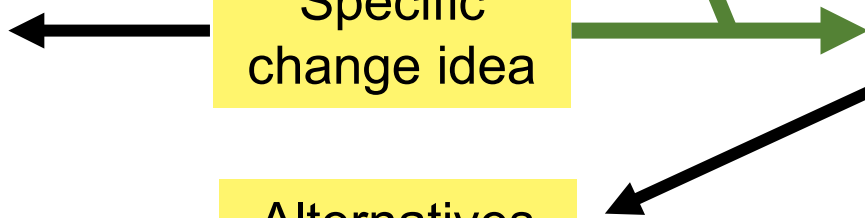
How does it work?  
What is happening?  
Why is it useful?  
What does it provide?  
Where is its value?  
Why is it worthwhile?

Secondary Driver

Specific change idea

Alternatives

Concept

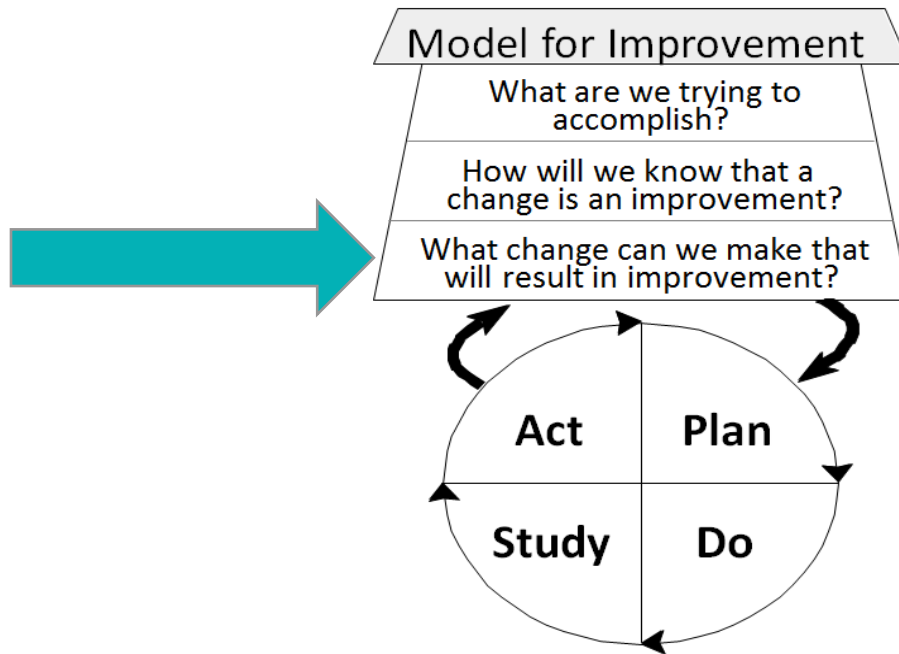




# Generating Change Ideas

*We understand the root causes of our problem, now we need to come up with some ideas on how to change them!*

# Change Ideas: What change(s) can we make that will result in improvement?





"For crying out loud, Douglas, try and think outside the box."

# Change Concepts

Use concepts to strengthen driver  
diagram (thinking)

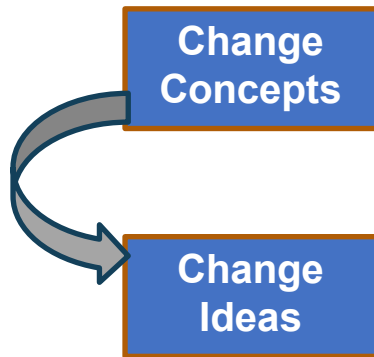
Design change ideas to achieve  
improvement



# Use Change Concepts as a Starting Point to Generate Change Ideas

**Change Concept:** A general notion or approach found useful in developing specific ideas for change that result in improvement.

**Aim:** To decrease wait time for initiation of service delivery.



**Example – Centralized Intake:**

- Minimize number of steps
  - Adjust resource supply to match demand
  - Eliminate rework
- 
- Decrease the number of programs involved
  - Modify MH counsellors to match predictable times of week/month when number of referrals is higher
  - Design a computer-based form that doesn't allow submission until all the required fields are completed. (OCAN?)

- IHI Improvement Guide
- Eg. Eliminate Waste

- Process and System
- Value Stream
- Problem Solving
- Data and Variation

Change Concepts

Current State

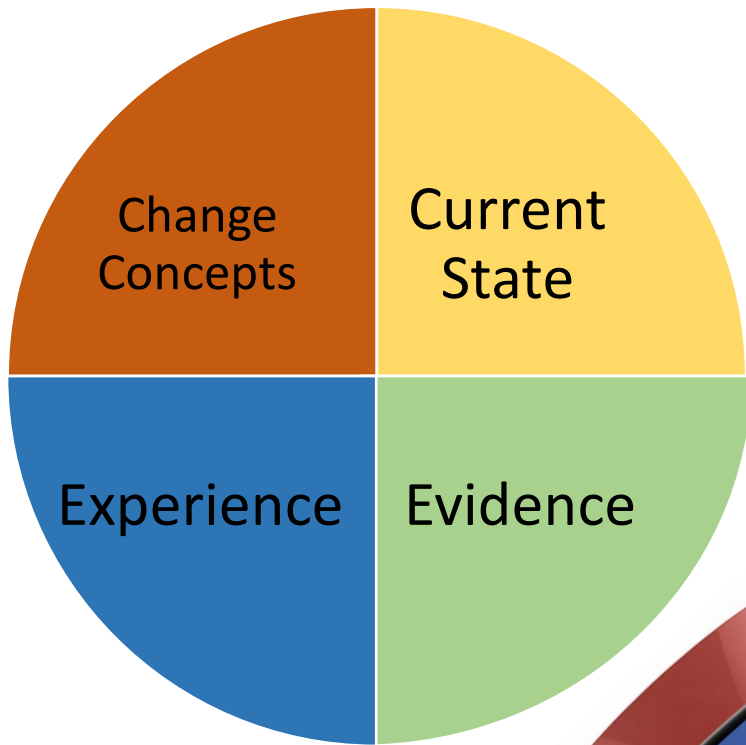


- Clients, Tenants, Caregivers and Families
- Your own
- Colleagues
- Communities of Practice

Experience

Evidence

- Human Factors
- QI Literature
- Clinical Literature
- Guidelines/Best Practices



# Types of Changes

## Reactive changes

- About keeping the system running
- Solve problems/symptoms or react
- Short term impact
- Band-Aids



## Fundamental Changes

- Fundamentally alter how work or activity is done
- More likely to be sustained
- Lasting impact





How many different ways could you empty a glass of water?

**Rule:**

The glass and/or table may not be moved.

“Start where you are.  
Use what you have.  
Do what you can.”

“Steal Shamelessly!!!”

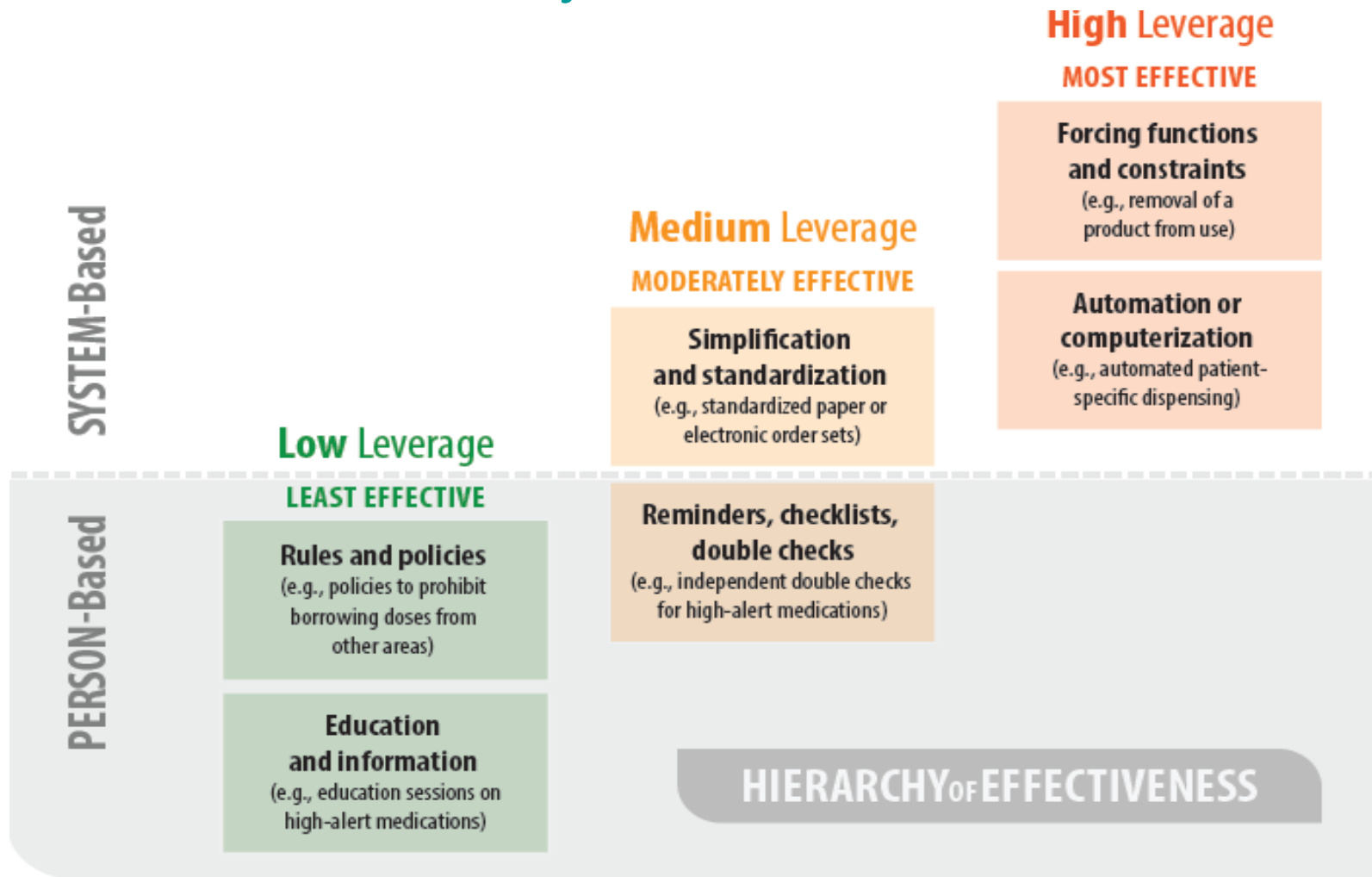
BUT be careful to understand root cause first...

AND remember that Plug & Play rarely works...

# A variety of techniques for generating creative change ideas

1. Change Concepts
2. Random Words
3. Mental Benchmarking
4. TRIZ/Reversals

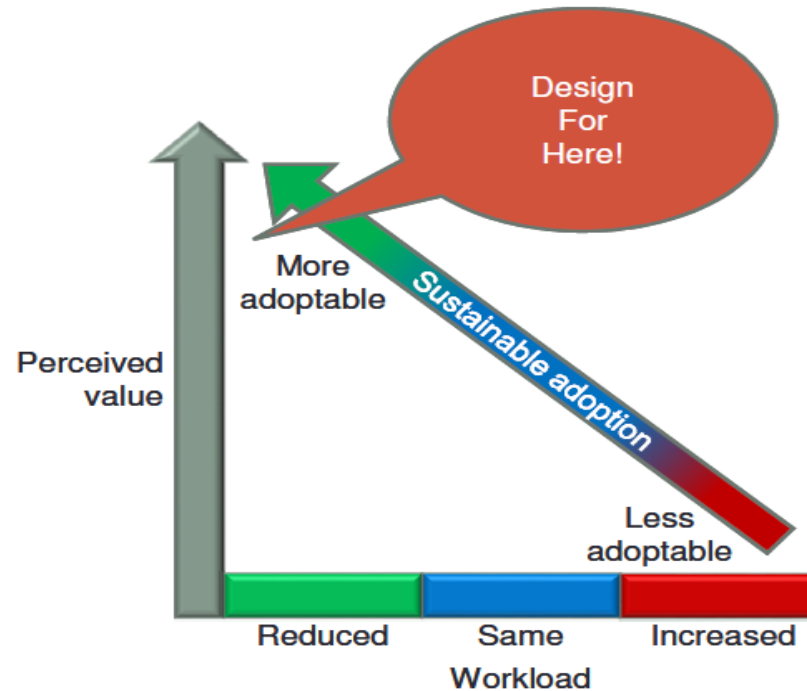
# Select high leverage change ideas early on to facilitate sustainability



# Try to ensure that change ideas don't keep adding to staff workload!

## Hypothesis

- Change initiatives that do not add additional workload and have high perceived value are more likely to be adopted, cause less workplace burden and, achieve the intended outcomes



# Impact Effort Grid

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“Where do I start?”

# What is it?

The impact effort matrix was designed specifically for the purpose of deciding which of many suggested change ideas to test first. It provides answers to the question of which solutions seem easiest to try (low effort) with the most effects (high impact).

It does not mean you always start with the easiest or ignore the high effort ideas but it does give you the platform to have the discussion around where to begin

# Steps

Retrieve suggested change ideas from previous discussions.

Construct an empty diagram with effort required to test the change on the horizontal axis and impact of the change on the vertical axis, and divide it into four quadrants.

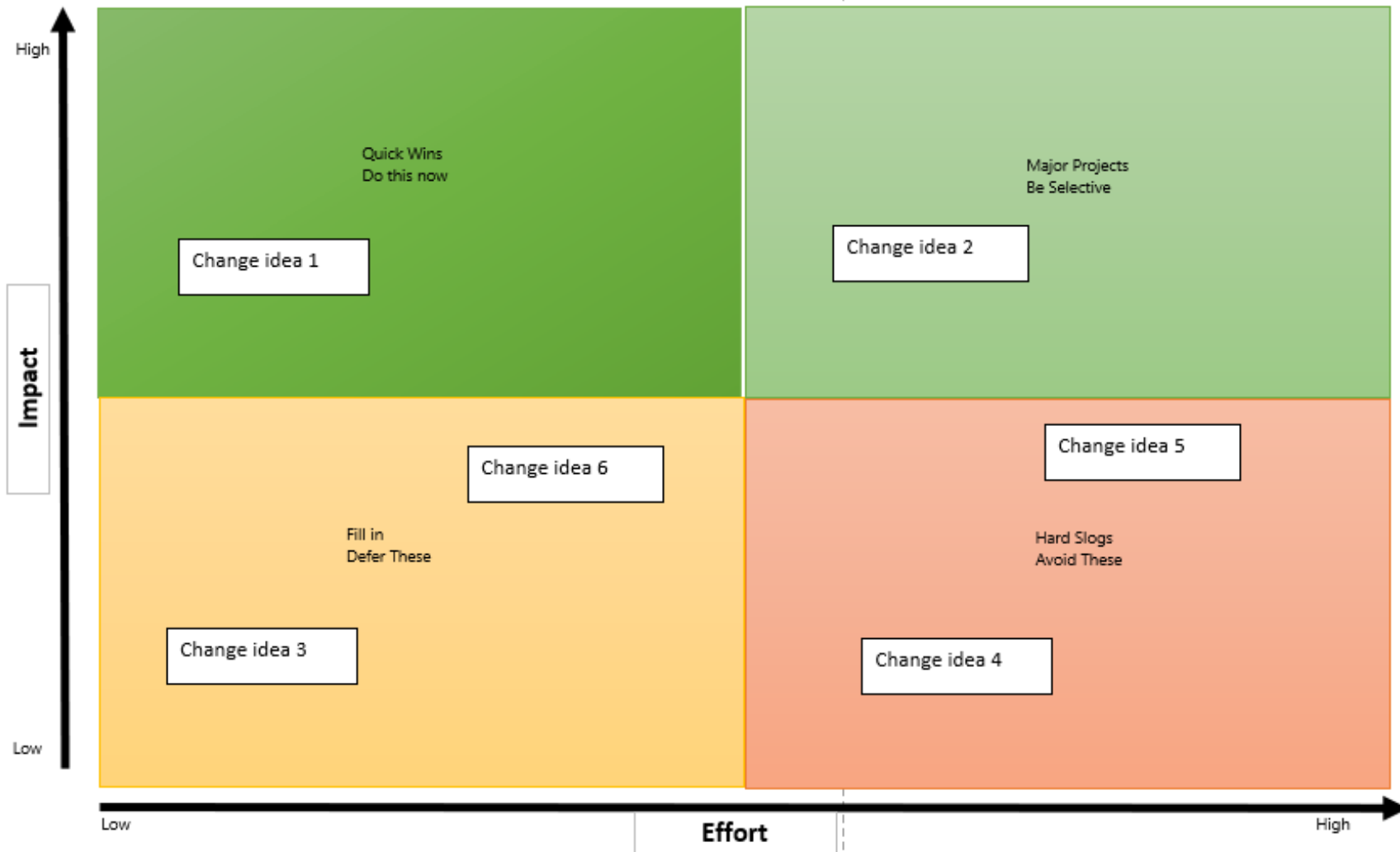
Assess effort and impact for each solution. Place the solutions in the diagram according to these assessments.

Discuss where to begin

# Impact /Effort Grid

		Effort	
		Difficult to Do	Easy to Do
Impact	Major Improvement / Benefit	3.	1.
	Minor Improvement / Benefit	4.	2.

## Impact - Effort Grid Decision Making Matrix





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We sometimes  
underestimate  
the influence of  
*little things.*

*Charles W. Chestnutt*

# The Provincial QIP has 3 Main Components

## Narrative

Sets context for improvement

A brief summary of the plan

Includes patient engagement efforts

## Workplan

Aligns with Model for Improvement

Themes the organization will be working on

Ideas on how the organization will improve

When does this get added?

## Progress

What was achieved?

Describes progress from previous year's plan

Leverage learnings from implementing QIP and testing change ideas

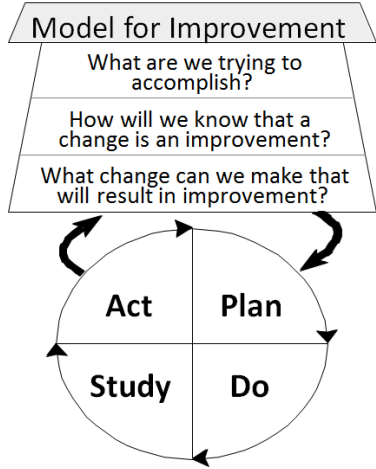
# QIP and the Model for Improvement

ID/AIM		MEASURE								CHANGE				
QUALITY DIMENSION	MEASURE / INDICATOR	TYPE	UNIT / POPULATION	SOURCE / PERIOD	ORG ID	CURRENT PERFORM MANCE	TARGET PERFORM MANCE	TARGET JUSTIFICATION	EXTERNAL COLLABORATORS	PLANNED IMPROVEMENT INITIATIVES (CHANGE IDEAS)	METHODS	PROCESS MEASURES	TARGET FOR PROCESS MEASURE	COMMENTS

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?





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Change				
Planned improvement initiatives (What are your change ideas)?	Methods (What will you do to make your planned changes happen?)	Process measures (what would tell you the changes are in progress?)	Target for process measures (what numbers will you monitor to show your changes are in progress?)	Comments (is there anything you think might be a barrier or enabler that leadership needs to know?)
1				
2				
1				
2				
1				
2				



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Change Idea #1	Enough detail so that someone else can understand what it is you are going to be doing	what data will you collect that will tell you whether or not this change idea is doing what you had hoped it would do	what is your goal with respect to what this change idea will do	what else does the reader need to know to understand what you are intending
Change idea #2				
1				



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	Step 2			
	Step 3			
	Step 4			
Change idea #2				



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**I Wish I Was A Mind  
Reader, But I'm Not!  
So Talk!**



# Keys to Success When Getting Started

- Be curious
- Ask questions: to the board, senior leaders, manager, service delivery team, clients/tenants and stakeholders - about the strengths and area for improvement for the agency
- Use data for decision making: look at all your data sources, check out the complaints and compliments – **think of your data overtime vs a point in time**
- Remember everything that counts can't be counted – look at qualitative data
- Be sure everyone defines the data being collected in the same way
- Consider stubby pencil data collection
- In QI we are interested in good enough data
- Use data for light not heat – it is about learning
- Don't let perfection be the enemy of improvement
- Involve clients/tenants – what improvement is important to them



# Keys to Success continued

- Targets for improvement should be both aspirational and achievable
- Use data you already have or can easily collect that reflects what you are trying to measure
- Think about your audience when presenting data
- Think “oneness”. Don’t boil the ocean.
- Make sure you have revealed the root cause
- Process Measures drive Outcome Measures and can only be defined once change ideas are generated
- Ask “why” and “how” when building out your Driver Diagram
- You may not always have secondary drivers and you may have the added layer of tertiary drivers.
- Resist the temptation to jump to change ideas too soon. Understand root cause first.
- Think small – scale down your ideas by at least one
- Consider impact and effort but don’t discard ideas based on that alone
- The workplan should tell someone else what you are trying to achieve and how you will do it.
- You will have less time than you think you have and your change ideas will be more complex than you think they are

Questions or Curiosities?

What can we clarify?

What else do you want to know?



# Resources



## E-QIP QI Tools and Resources - Change Concepts, Change Ideas and Activity Templates

### QIP Template



## What's Your Theory?

# COMING UP NEXT!

## Chapter 6: Read me a QIP Story

### Objectives:

- Understand the purpose of the QIP Narrative
- Understand the pieces of the QIP Narrative
- Understand how to engage clients/tenants in the QIP journey
- Understand the important of **partners and stakeholder engagement** in the QIP journey
- Discuss keys to success

[Register Here](#)



# **\*\*NEW\*\*COMING SOON!**

New Chapter: Measurement Session Three – As we continue our story –the dish ran away with the run chart (Run Charts)

## **Objectives:**

- Understand the different types of variation and their relationship to improvement
- Understand why run charts are useful in quality improvement
- Learn how to create and interpret run charts using the run chart rules
- Understand how to tell the story of a run chart (annotation, terminology, etc.)
- Discuss keys to success

Feb 2, 2021 12:00-1:00 PM in Eastern Time (US and Canada)

[Register Here](#)



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**UNDERSTAND**  
**PIVOT**  
**CHANGE**  
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## Register today: Education series for health care providers

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### **Measurement-Based Care in mental health and addictions service delivery**

The COVID-19 pandemic highlighted a number of strengths and weaknesses of our health system and has left many asking how we can improve the quality of care in service delivery. This three-part education series will look at how measurement-based care can drive improved patient outcomes and more efficient service delivery.

[Learn more here](#)

# Help us Evaluate our Event!

Please take a few minutes to help us evaluate today's event and let us know what future topics you would be interested in!

[Link to Survey](#)



# Foundations to QI (IDEAS) e-Learning Course!



[CLICK HERE TO REGISTER!](#)

# Visit E-QIP's Website!



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Stay connected to the  
**E-QIP Community of Practice** on

The Quorum logo consists of a stylized '@' symbol followed by the word 'Quorum' in a blue, sans-serif font.



**JOIN TODAY!**



- 1) Create and account on [Quorum](#)
- 2) Click on the "Join Group" button on the [E-QIP CoP](#)

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Don't forget to click the **SUBSCRIBE TO UPDATES** button in the group to get notified when there's new activity!

# Quick QI Webinars & Newsletter



## E-QIP NEWS

Excellence through Quality Improvement Project

### Message from Debbie and Naushaba

We are amidst unprecedented times with competing priorities which may seem in opposition. On one hand, keeping clients/tenants, team members, and your families' safe, balanced against providing the services that your clients/tenants need during the pandemic. The problem solving and ultimately cycles of plan, do, study, act (PDSA) are happening over minutes versus the usual slower, contemplative speed. Creative approaches (change ideas) are being implemented rapidly and altered as you gather data and input from team members and clients/tenants about what is working and as new information is shared by health authorities. Many of you are finding a balance between keeping your clients/tenants, team, and own families safe while providing services in new and modified ways. At E-QIP, we have started a hashtag [#QIOnTheFly](#), to capture the ways in which you are modifying your service delivery during COVID-19. Please share with us stories about adjustments you are making and what you are learning; E-QIP remains available to you as a conduit to share your great ideas through twitter -using our hashtag [#QIOnTheFly](#), or through an email or telephone call. We are beginning to share your innovations on our new website [www.e-qip.ca](http://www.e-qip.ca) and as well as future communiques and webinars.

## E-QIP's Quick QI webinar series now available online!

- For refreshing knowledge on the *Model for Improvement*
- A series of 9 webinars which are 20-30 minutes each
- Based on our coach's first-hand experiences and case studies

## Join our mailing list to stay informed of future webinars and training events:

<http://eepurl.com/b1A5EX>



