

Improvement Science Program 2019

A joint initiative of the Clinical Excellence Commission and the Royal Australasian College of Physicians for RACP Advanced Trainees in New South Wales.

Information package and application form.

This is a unique program which will help Advanced Trainees to recognise areas where improvement in the health system are needed and will equip them with new skills to improve the system and enhance their leadership skills.



Past participants have published / presented their Clinical Practice Improvement projects at national and international conferences over the past six years.

The Clinical Excellence Commission

The Clinical Excellence Commission (CEC) was established in 2004 as one of the five key structural reforms outlined in the NSW Health Patient Safety and Clinical Quality Program (PSCQP) and as an evolution of the Institute for Clinical Excellence.

Since its development, the CEC has gained local, national and international recognition by developing and driving programs and initiatives in collaboration with clinicians, managers, consumers and health service partners.

The range of areas addressed includes clinical incident review, deteriorating patients, end of life care, falls prevention, human factors, infection control, leadership, medication safety, mortality review, open disclosure, adult & paediatric quality and safety, partnering with patients, pressure injury prevention, safety and quality education, sepsis, teamwork, transfusion medicine and venous thromboembolism prevention.

The Royal Australasian College of Physicians

The Royal Australasian College of Physicians (RACP) is responsible for the training and assessment of doctors who have completed their medical degree and an internship at a hospital and wish to practise as physicians or paediatricians by undergoing further training through the RACP to specialise in a certain area of medicine. The RACP oversees their training, including positions in hospitals, written and clinical examinations as well as providing a program of continuing professional development for Fellows of the RACP. The Royal Australasian College of Physicians (RACP) is the professional medical College of over 17,000 physicians and 8,000 trainee physicians, often referred to as specialists, in Australia and New Zealand.

Improvement Science Program Objectives

Using the Model for Improvement, the Improvement Science (IS) Program will provide an opportunity for RACP Advanced Trainees and recent FRACP graduates to focus on developing their non-technical skills as well as their medical expertise. Quality and safety is central to all aspects of patient care. This program will provide participants with the skills required to recognise and respond to improvement opportunities. The program aligns with several domains of the RACP Professional Qualities Curriculum including communication, quality and safety, teaching and learning, leadership and management, health advocacy and the broader context of health.

This program will enable participants to improve the safety and quality of care to patients through:

- Enhancing the knowledge of clinicians about quality improvement theory
- Improving the ability of clinicians to identify causes of process failures within their clinical teams
- Enhancing clinicians' personal and professional leadership skills
- Developing interdisciplinary teamwork
- Equipping healthcare facilities with personnel who can apply improvement methodology to effect change, implement evidence-based practice and address problems identified during root cause analyses
- Designing effective solutions using plan, do, study, act (PDSA) tests of change
- Awareness of micro-system re-engineering, human factors and reliable design principles
- Foundation in measuring for quality using statistical process control charts
- Spreading and sustaining change and improvement
- Developing Healthcare Leaders

The Improvement Science (IS) methodology provides a framework so that participants can undertake a comprehensive diagnostic of the causes of process failures, which lead to inefficiencies and/or patient harm, and design solutions to improve patient care.

Key Principles of Clinical Practice Improvement methodology

The basic principles of Improvement Science include these concepts:

- Health care is a process which can be analysed
- Both the process and the outcomes of clinical work can be measured
- Profound knowledge of the processes of care exist within individuals who work in the system, in particular 'micro-systems'
- Interdisciplinary teamwork and the design of novel solutions are essential in effecting improvements in health process
- Using small tests of change in the form of Plan, Do, Study, Act (PDSA) cycles to test theories
- There is the will and leadership to implement change.

Improvement Science Program Structure

The CEC/RACP IS training program runs over one year and is supported by an initial 2-day face to face IS training workshop as well as online modules.

Participants are required to undertake a local improvement project which is related to a clinical service where challenges have been identified. It is the intent of the CEC and the RACP that the outcome and documentation of these projects should be of a publishable standard. It will be the responsibility of the Trainee to ensure that their project meets any and all ethical review requirements.

Each participant will have a supervisor, as for all RACP projects, and will also have a co-supervisor with expertise in IS.

Recommendations for an IS Project

It is recommended that participants choose a project related to a rotation they will be on shortly after the IS workshop. To manage the project, within your current workload it is recommended that participants are in the same team at the beginning and the end of the project. It is a requirement that the project team is interdisciplinary. Our experience has shown that involving other professional disciplines and a patient or family member in the project team has been most effective for project outcomes and participant satisfaction.

Interested Trainees should submit applications using the form below prior to Friday 22 March 2019. By this time each Trainee will need to have chosen a project idea and discussed it with their intended RACP supervisor. Further project discussion will occur at the face to face workshop to be held on the 16th & 17th of April 2019. Following this workshop, supervisors will be put in contact with co-supervisors / senior clinicians familiar with IS methodology, who will be willing to provide advice during the project's duration.

Support materials will be provided to each participant electronically via e-mail as well as online, to be accessed alongside several training modules. All participants will be expected to complete the available modules.

Two reviews of the projects progress with CEC and RACP representatives will take place. The first review will be held on Wednesday 9th October 2019, known as a mid-point review, followed by a final presentation in March 2020. Participants will be required to complete and submit their projects prior to 11 March 2020.

Intake for this program is limited. If applications exceed the maximum number of positions within the program, each application will be reviewed, and Trainees informed of their acceptance prior to Friday 29 March 2019.

It is recognised that Trainees are likely to have many competing priorities and are extremely busy. For this reason, the program delivery will be as flexible as possible. There will be minimal pre-workshop reading to undertake and the clinical improvement project can be tailored to fit within the participant's work schedule.

Selection Criteria

Trainees wishing to apply are required to meet the following criteria

- Registered as an Advanced Trainee with the Royal Australasian College of Physicians or have become a Fellow of the RACP within the past two years
- Undertaking a RACP accredited clinical rotation in NSW between April 2019 and March 2020
- Demonstrated commitment to self-directed learning
- Skilled in verbal and written communication to enable implementation of clinical practice improvement
- Willingness to lead and influence others
- Ability to work effectively with a broad range of clinicians and managers
- Interest in creating a work environment that supports a learning culture and building the capability and potential of the clinical team
- Desire to use routinely collected data more effectively to improve clinical practice

Second team member

Participants are invited to bring along another member of the broader clinical team (e.g. Nurse. Physio etc) for the CPI workshop. This enables the participant to gain a more rounded view of the methodology from a different perspective from one of the larger team.

Expectations

What participants can expect from the RACP

- Contact from the RACP State manager every two months in order to provide support to participants
- Advice from the RACP in relation to college project requirements

What participants can expect from the CEC

- A two monthly telephone call to support participants and offer advice regarding CPI project team and issues related to the CPI project
- Materials to support them in the form of electronic resources, online modules and templates
- An experienced faculty to guide participants in CPI methodology

What supervisors of participants can expect from the CEC

- Supervisors can expect support in the principles of Clinical Practice Improvement methodology as outlined below
- An introductory WebEx to outline program requirements within the first month
- Mentoring as required from senior CEC staff

What is expected from participants?

It is expected that participants will:

- Initiate and maintain contact with their RACP supervisor for the duration of the Program
- Initiate and maintain contact with their quality manager in the LHD and their Director of Clinical Governance
- Have a central leadership role in driving their local CPI project
- Actively participate in the program activities and use opportunities to learn from daily challenges to maximise “patient centred” outcomes
- Complete mandatory components of the course:
 - Have an idea for a project prior to March 2019
 - Attend a two-day CPI face to face training course on the 16th & 17th of April 2019
 - Complete all available online modules
 - Submit final project presentation and abstract by March 2020
 - Completion of a short de-identified patient safety questionnaire before and after the course

What are the benefits to participants?

- You will develop a broad understanding of Quality and Safety, areas which are becoming increasingly important in clinical care, clinical relationships and medical management
- You will learn a contemporary approach to improvement using driver diagrams
- You will develop skills which will be of value for future clinical leaders
- The opportunity to publish projects or present your project at national and international conferences (as done by a number of past participants)

Whilst many CPI projects meet RACP project requirements for an Advanced Training project, this is examined on a case by case basis and any Trainee who would like this project to serve a dual purpose should contact their RACP Education Officer directly for advice.

Workshop Content

The workshop will be delivered by a range of experts who have worked extensively in the areas of clinical practice improvement in a clinical context.

	Day 1		Day 2
09.00am START	Registration from 8.30am Acknowledgement of country (local staff) Group introductions	09.00 am START	Recap day one Measuring for Improvement
09.15	The business case for Quality Improvement Ms Jane Murkin		
10.15 – 10.30	<i>Morning Tea</i>	10.30 – 10.45	<i>Morning Tea</i>
10.30 – 11.15	IS methodology using Driver Diagrams as a tool Cathy Vinters	10.45 – 11.15	Past participant project
11.15 – 12.30	Group work QI Tools and techniques to approach your clinical challenge <i>Teams, Aim statements, Flowchart, Brainstorming</i>	11.15 – 11.45	International QI
		11.45 – 12.30	Spreading and sustaining improvement
12.30 – 13.00	<i>Lunch</i>	12.30 – 13.00	<i>Lunch</i>
13.00 – 14.30	QI tools continued <i>Affinity diagram, Primary Drivers, Secondary Drivers Process measures Outcome measures Balance measure, Creativity and Innovation</i>	13.00 – 14.40	Scoping projects with participants (20 minutes each)
14.30 – 15.15	Medical Leadership Professor Kim Oates	14.40 – 15.40	Next project
15.15 – 15.30	<i>Afternoon Tea</i>		<i>Working afternoon tea</i>
15.30 – 17.00	<i>Change ideas, prioritising solutions, Impact matrix, PDSA cycles</i> Small group project presentation	15.40 – 16.40	Tables to run through another project
		16.40	Evaluation, next steps and close

Key Dates – RACP CPI 2019 cohort 8

Deadline for Applications	22 March 2019
Participants notified	25 March 2019
Mandatory Two-Day Clinical Practice Improvement Workshop	16 & 17 April 2019
'Aim' statement submitted to CEC	22 May 2019
WebEx for RACP supervisors of participants	May 2019 (TBA)
Projects Begin & First interdisciplinary CPI team meeting	Before 20 May 2019
Mid-point review is held some months following workshop (participants must attend to present their project to date)	9 October 2019
Presentation and abstract submission	11 March 2020
Final submission of presentation, poster and abstract	18 March 2020

Please note: This information is correct at the time of printing. Content and timetable may be subject to change.

Location

The CPI workshop will be held in Sydney's CBD at the office of the Royal Australasian College of Physicians 1 Farrer Place, Governor Macquarie Tower, Level 19, GMT 2, Sydney NSW.

The mid-point review will be held at the offices of the Clinical Excellence Commission, Meeting Rooms 1 & 2, Level 17, McKell building, Rawson Place, Sydney.

Program Fees

The Clinical Excellence Commission will cover the cost of the program. The RACP will cover the cost of venue and material handouts. The clinician/LHD will need to cover costs associated with time release (including backfill), travel and accommodation if required.

For further information regarding the IS project contact the CEC:

Cathy Vinters

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