



Leading change: building improvement capability and fostering a culture of continuous improvement

Learning for senior leaders from the Virginia Mason Institute and NHS partnership



Building on our **Trust-Wide Improvement** programme, supported by The Health Foundation, NHS Providers delivered a series of workshops for chairs and chief executives, focusing on learning from the Virginia Mason Institute and NHS partnership evaluation, led by Professor Nicola Burgess, evaluation lead for the NHS-VMI partnership, Warwick Business School, University of Warwick. The image above, and more detailed images below, summarise the six lessons of the evaluation, and below we set out some examples of the actions recommended by attendees, that bring some of these to life.

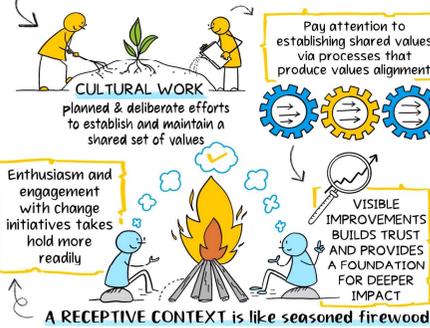
“When you get people from different places together you start to forge relationships that help share practice. Others notice and want to be involved.”

Julian Hartley – Chief executive, NHS Providers

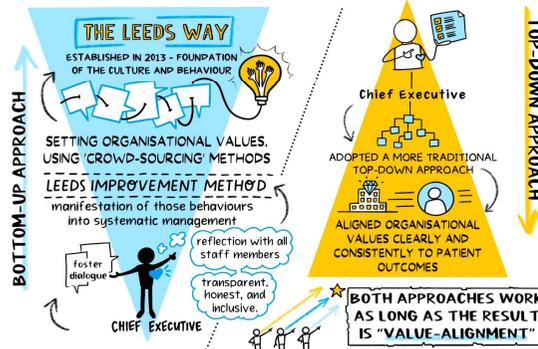
LESSON #1: BUILD CULTURAL READINESS AS FOUNDATION FOR BETTER QI OUTCOMES

Nicola Burgess

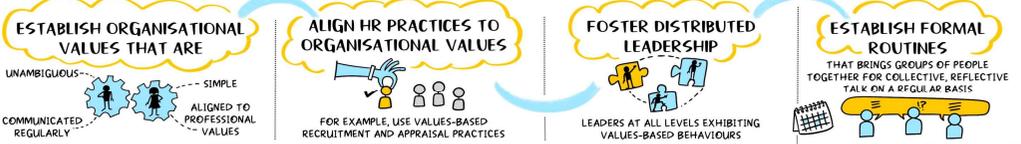
VALUES-BASED "CULTURAL" WORK CREATES A RECEPTIVE CONTEXT FOR CHANGE



PROCESSES OF VALUE SETTING FOR VALUE ALIGNMENT



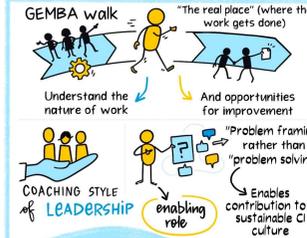
FOUR (INTER-RELATED) FACTORS THAT SHAPE A RECEPTIVE CONTEXT



LEADING CHANGE ACROSS HEALTHCARE SYSTEM: HOW TO BUILD IMPROVEMENT CAPABILITY AND FOSTER A CULTURE OF CONTINUOUS IMPROVEMENT

SKETCHNOTE BY: TANMAY VORA

#LeadingQI



1. LEADERSHIP ROUTINES



2. A DEDICATED IMPROVEMENT TEAM



HOW IMPROVEMENT INFRASTRUCTURE SUPPORTS IMPROVEMENT

EMBED IMPROVEMENT ROUTINES AND PRACTICES INTO EVERYDAY PRACTICE

Nicola Burgess

4. TRAINING

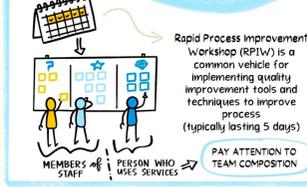


LEADING CHANGE ACROSS HEALTHCARE SYSTEM: HOW TO BUILD IMPROVEMENT CAPABILITY AND FOSTER A CULTURE OF CONTINUOUS IMPROVEMENT

SKETCHNOTE BY: TANMAY VORA

#LeadingQI

5. RAPID PROCESS IMPROVEMENT WORKSHOPS



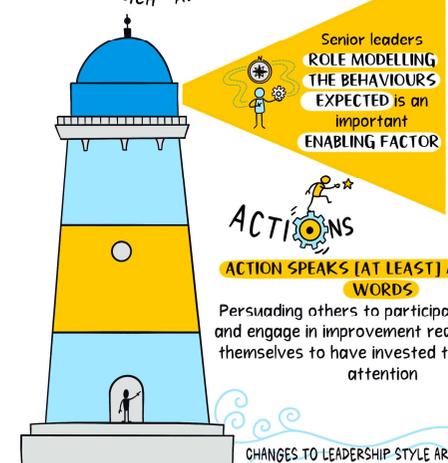
6. ROUTINES FOR STRATEGIC ALIGNMENT



HOW LEADERS LIGHT THE WAY and show the path for others to improve

Nicola Burgess

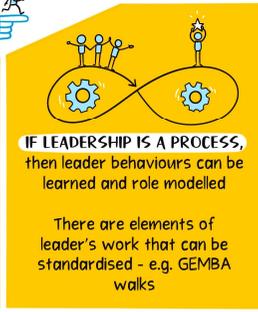
LEADERSHIP IS A PROCESS...
... AS MUCH AS A PERSON



LEADING FOR IMPROVEMENT REQUIRES A COACHING STYLE OF LEADERSHIP
"Leaders should be problem framers not problem solvers"

LEADERS SET ATTENTION - getting organisational participants to focus attention on significant priorities

LEADERS PROMOTE IMPROVEMENT CULTURE through improvement in capability of people

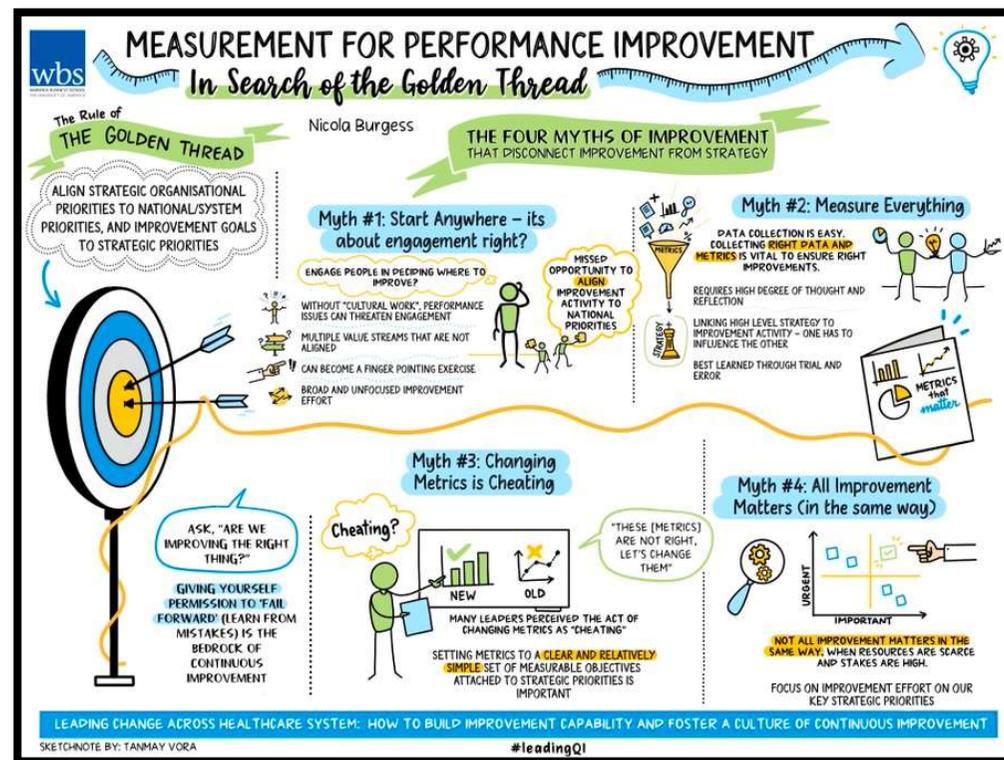
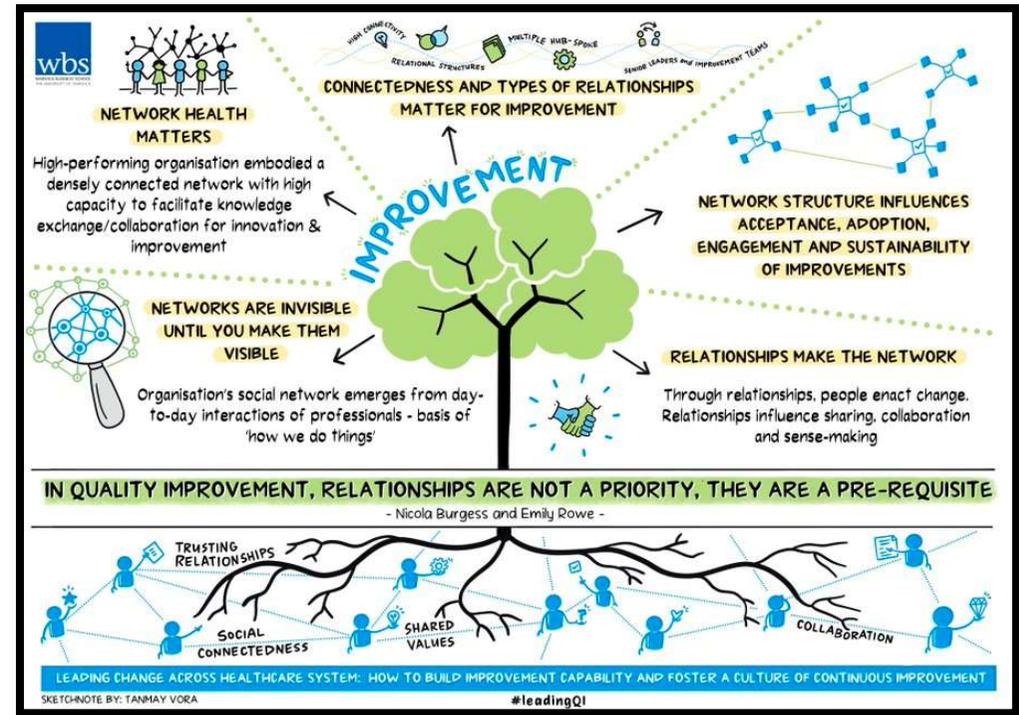


CHANGES TO LEADERSHIP STYLE ARE ESSENTIAL FOR DEVELOPING IMPROVEMENT CULTURE WITHIN AND ACROSS AN ORGANISATION

LEADING CHANGE ACROSS HEALTHCARE SYSTEM: HOW TO BUILD IMPROVEMENT CAPABILITY AND FOSTER A CULTURE OF CONTINUOUS IMPROVEMENT

SKETCHNOTE BY: TANMAY VORA

#LeadingQI



Insights in action at board level

The chairs and chief executives attending the workshops shared numerous personal actions that support these lessons to come to life at board level locally and in their wider organisations:

- Showing a visible lead from board by including improvement in board papers.
- Having dispersed QI leaderships roles across the board to help encourage ownership outside of the traditional portfolio 'owners'.
- Making leadership engagement simple, routine and systematic by:
 - Focusing on problem-framing rather than problem-solving to give staff the opportunity to explore the problem and voice their own thoughts and solutions.
 - Making a personal commitment to speak less, and instead listen and watch more, holding back verbally when engaging with staff, and so giving teams the space to express their opinions.
 - Developing their own guiding trigger questions and prompts to use with teams, to encourage discussion and creative problem solving.
 - Creating frequent opportunities via informal spaces for staff to meet with leaders to encourage trusting, open relationships.
 - Fostering clinical leadership and engagement by bringing multi-disciplinary clinical teams together from across the organisation to build relationships.
 - Ensuring that clinical teams have a shared responsibility in developing values.
- Ensuring the whole board take part in leadership walkarounds in a predictable, known pattern - examples sighted of how this is achieved included:
 - Through personal encouragement from the chair
 - Creating a systemised approach with an organised 'grid' delegating who goes where.
 - Maximising the potential of board development days to make it routine for the whole board to get out and about.
- Initiating visits to trusts or external organisations experienced in building strong improvement cultures, to allow leaders to see firsthand practices in place and to visualise how this could be replicated in their own organisations.
- Including in-person improvement training in organisational induction processes and viewing this as both knowledge sharing and network building, to develop accountability.
- Ensuring that values are clearly communicated, recognisable and in aligned at all levels of the organisation on a day-to-day basis.
 - Making sure that the language used mirrors organisational intentions and shared principles including reframing cost efficiencies as waste reduction and focusing on patient experience, quality, and safety to engage clinical teams and cultivate a shift in cultural mindset.

- Being consistent with any interventions you make or practices you embed as part of your improvement journey, to demonstrate a commitment to the process and to foster trust within your team.
- Celebrating progress by communicating successes across the organisation. For example, spotlighting improvement areas at committee level and bringing those teams to the meetings to share their successes and incentivise staff to contribute ideas.
- Signalling patient involvement as a priority as well as staff involvement, as an important part of values alignment

Further reading

- [Six key lessons from the NHS and Virginia Mason Institute partnership](#)
- [Full report on the findings of the national evaluation of the NHS-VMI partnership](#)
- [Resources and practices that make up CI infrastructure](#)
- *Humble Inquiry: The Gentle Art of Asking Instead of Telling* (Edgar H. Schein, 2013)
- *Becoming the Change: Leadership Behaviour Strategies for Continuous Improvement in Healthcare* (John Toussaint & Kim Barnas, 2020)
- *If Disney Ran Your Hospital* (Fred Lee, 2004)