

## Overcoming Barriers to Improvement

Duncan Wagstaff
Anaesthesia SpR
PQIP Fellow











# Effectiveness of a national quality improvement programme to improve survival after emergency abdominal surgery (EPOCH): a stepped-wedge cluster-randomised trial

Carol J Peden, Tim Stephens, Graham Martin, Brennan C Kahan, Ann Thomson, Kate Rivett, Duncan Wells, Gerry Richardson, Sally Kerry, Julian Bion, Rupert M Pearse, on behalf of the Enhanced Peri-Operative Care for High-risk patients (EPOCH) trial group\*

Improving care at scale: process evaluation of a multi-component quality improvement intervention to reduce mortality after emergency abdominal surgery (EPOCH trial)

T. J. Stephens<sup>1,7\*</sup>, C. J. Peden<sup>2</sup>, R. M. Pearse<sup>1</sup>, S. E. Shaw<sup>3</sup>, T. E. F. Abbott<sup>1</sup>, E. Jones<sup>4</sup>, D. Kocman<sup>5</sup>, G. Martin<sup>6</sup> and on behalf of the EPOCH trial group

Hospital-level evaluation of the effect of a national quality improvement programme: timeseries analysis of registry data

Timothy J Stephens, <sup>1</sup> Carol J Peden, <sup>2</sup> Ryan Haines, <sup>1</sup> Mike P W Grocott, <sup>3</sup> Dave Murray, <sup>4</sup> David Cromwell, <sup>5</sup> Carolyn Johnston, <sup>6</sup> Sarah Hare, <sup>7</sup> Jose Lourtie, <sup>8</sup> Sharon Drake, <sup>8</sup> Graham P Martin, <sup>9</sup> Rupert M Pearse, <sup>9</sup> <sup>1</sup> On behalf of Enhanced Perioperative Care for High-risk patients (EPOCH) trial group











## Challenges

- 1. Data collection & feedback
- 2. Time / resources / support
- 3. Engaging colleagues











### Three Suggestions

- 1. Adopt a multi-faceted approach
- 2. Collaborate
- 3. Attend to local context











## 1. Multi-faceted approach

Technical

Technical

Technical

Technical

Social

Data analysis
Run charts
PDSA methods
Pathway segmentation
Stakeholder engagement
QI team

Using more strategies -> increased success (probably)











#### 2. Collaboration



Share: data / skills / ideas



'Internal'- the whole MDT and patients



'External'- utilise networks such as: Trainee networks / AHSNs / CPOC





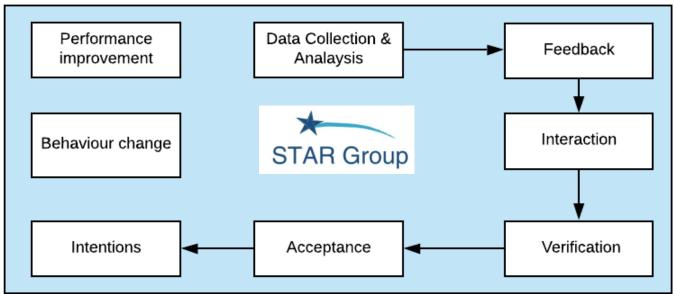






## A Successful Collaboration using PQIP data





















#### Other Successful Collaborations

JAMA Surgery | Original Investigation

## Evaluation of the Collaborative Use of an Evidence-Based Care Bundle in Emergency Laparotomy

Geeta Aggarwal, MBBS; Carol J. Peden, MD; Mohammed A. Mohammed, PhD; Anne Pullyblank, MD; Ben Williams; Timothy Stephens, MSc; Suzanne Kellett, MBBS; James Kirkby-Bott, MBBS; Nial Quiney, MBBS; for the Emergency Laparotomy Collaborative

# Accelerating the Pace of Surgical Quality Improvement

The Power of Hospital Collaboration

Darrell A. Campbell Jr, MD; Michael J. Englesbe, MD; James J. Kubus, MS; Laurel R. S. Phillips, RN, MSN; Charles J. Shanley, MD; Vic Velanovich, MD; Larry R. Lloyd, MD; Max C. Hutton, MD; Wallace A. Arneson. MD: David A. Share. MD. MPH

# Are quality improvement collaboratives effective? A systematic review

Susan Wells,<sup>1</sup> Orly Tamir,<sup>2</sup> Jonathon Gray,<sup>3,4</sup> Dhevaksha Naidoo,<sup>5</sup> Mark Bekhit,<sup>6</sup> Don Goldmann<sup>7</sup>











#### 3. Context

Understanding Context = 'Situational Awareness'

MUSIQ v2.0 (Reed et al, 2018)

Choose improvement targets to suit the context

Consider the *social* aspects of change?

- Leadership
- Morale
- Ownership











## **PQIP** Ownership

Board / Executive GOVERNANCE Clincal Director Quality / Audit R&D QΙ Surgery Anaesthesia Management Improvement **LEADERSHIP** Consultants Trainees Research Nurses Nurses / AHPs Audit



**PQIP** 

**PQIP TEAM** 









#### Thank You

d.wagstaff@ucl.ac.uk









