

Agents of change in Ontario healthcare system combine to show their stuff

Highlighting the challenges and opportunities for effectively enhancing the quality of health care delivery and patient safety was the main feature of the inaugural Quality Improvement and Patient Safety Forum held in Toronto on Oct. 18.

Almost 700 delegates attended this first joint meeting of the Centre for Quality Improvement for Patient Safety (C-QulPS) and Improving & Driving Excellence Across Sectors (IDEAS), who have both been holding their own meetings for several years.

The forum proceeded in an almost choreographed fashion.

Delegates were greeted by several posters detailing several innovative pilot projects designed to enhance areas of care in the province.

Opening plenary speaker Dr. Helen Bevan, a leader of disruptive but successful change in the U.K.'s National Health Service (NHS) for many years then detailed the challenges in translating pilot projects into initiatives that have a broader impact on the health system as a whole. Bevan spoke of the importance of rethinking how change can be done effectively in organizations.

Following several parallel breakout sessions dealing with specific quality and patient safety issues, Dr. Trey Coffey, co-lead of the Caring Safely initiative at SickKids closed the meeting with a tangible example of how one of Canada's most important children's hospitals is striving to make major strides to improve patient safety.

While not well-known outside the health care community, the conference was an excellent opportunity for C-QulPS and IDEAS to profile their activities. C-QulPS is a joint partnership between the University of Toronto's faculty of medicine and two of its major teaching hospitals – Sunnybrook Health Sciences Centre and SickKids.

IDEAS is a comprehensive, province-wide initiative aimed at enhancing the province's health care system by building capacity in quality improvement and change management. The initiative is funded by the provincial ministry of health and long-term care and delivered through a partnership of the province's medical schools, Health Quality Ontario (HQP), the Institute for Clinical Evaluative Sciences, and the Institute of Health Policy, Management and Evaluation at the University of Toronto.

In opening the meeting, Lee Fairclough, the vice president of quality improvement at Health Quality Ontario, talked of the spirit of partnership and cooperation shown at the joint meeting as being key to improving the quality of health care.

The posters presented as part of IDEAS reflected the academic and clinical diversity these host organizations bring to health system reform – with topics ranging from chronic disease self-management to health literacy. Bevan then brought insights into why implementing such promising projects are often so unsuccessful in Canada and other countries.

She said the failure to transform pilot projects in health care reform into wider initiatives has occurred with "alarming regularity". Bevan attributed this to a number of factors including the chasm that exists between health care innovators and visionaries and those who work in the rest of the system.

Quoting recent research on the spread and diffusion of ideas, Bevan said one of the most important factors was to take into account the perspectives of those who are expected to implement the changes or who will be impacted by them.

She also talked about the need to stop writing toolkits about best practices and focus instead on “learning by doing.” As an example, Bevan said research has shown social networks and connectivity are 14 times more likely to spread knowledge than written guidance.

Bevan then translated this into a tangible exercise for forum participants by asking them to participate in the “randomized coffee trial” in which attendees were randomly paired with each other to have coffee and discuss issues. She said such trials have been shown to improve connectivity between individuals in groups and enhance the type of social networking she advocates to make true changes.

Much of the rest of the day at the forum was dedicated to breakout workshops on topics ranging from bringing joy to work (the Fourth Pillar of the Triple Aim) to patient engagement in action.

Dr. Trey Coffey presented the closing plenary on the work to date at SickKids to transform it into a High Reliability Organization by dramatically reducing the incidence of medical errors. High Reliability Organizations are defined as those that have “succeeded in avoiding catastrophes in an environment where normal accidents are expected due to risk factors and the complexity of the environment.”

In her candid presentation, Coffey traced the work to date at SickKids which is aiming to achieve a number of goals including reducing the number of serious safety events by two-thirds by the end of 2017-2018.

Coffey said it has been easy for hospitals to hide their lack of progress in improving patient safety adding the “shame and blame” mentality still exists among health care providers.

Coffey’s presentation was a perfect bookend for a day that began with Bevan as it dealt with approaches and experiences to totally change the culture of an organization to make effective changes.

“When it comes to preventable harm ... if there’s something that works we have to do it,” she concluded.