

YEAR 4 PROSPECTUS



IHI Health Improvement Alliance Europe

September 2019 – August 2020

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Welcome

On behalf of the entire Institute for Healthcare Improvement (IHI) team, we would like to extend an invitation to your organisation to join Year 4 of the Health Improvement Alliance Europe (HIAE). In partnership with IHI's European Strategic Partners, IHI is bringing together some of the most accomplished executive leaders responsible for driving quality and improvement across the complete spectrum of health and health care delivery in Europe.

Across Europe, we have a pressing need to address the growing health care challenges that we face every day. With the pressures of an aging population, an increase in the number of patients with chronic diseases, an escalation in health care costs and simultaneous government and regional spending cuts, it is time to design a new way of providing health care to our citizens — one that is of the highest quality, sustainable, and affordable for the future. And, as we have in the past, we'll work to build a workforce that finds meaning every day in the care they deliver.

Our vision as an Alliance is to co-create systemic improvements in conjunction with the staff and users in our regions to achieve health and well-being better than we've ever seen, care better than we've ever known, at a cost we can all afford for every person, every time.

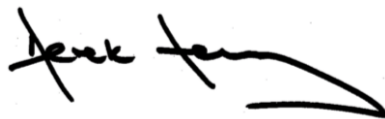
IHI is committed to providing the collaborative infrastructure necessary for HIAE members to connect with like-minded leaders. We will enable leaders to share approaches, innovations, successes, and failures as they strive to secure unprecedented and effective improvement in health and health care. Together, with participating organisations as well as with your local communities and populations, we will identify and spread new effective approaches to these challenging issues.

This prospectus provides information on HIAE's framework and design, as well as outlining our member expectations and Year 4 activities, in-person and virtual. We're also happy to share some success stories of HIAE members, their staffs, and their service users.

At the end of this document, you will find a proposed calendar for the entire year of membership. If you have any additional questions, please email Alliance Director Amelia Brooks at abrooks@ihi.org.

We are excited to launch Year 4 of our Health Improvement Alliance Europe and we hope that you can join us!

Sincerely,



Derek Feeley
President and CEO



Maureen Bisognano
President Emerita and Senior Fellow



Pedro Delgado
Head of Europe and Latin America



Amelia Brooks
Director, Patient Safety and Europe

IHI Health Improvement Alliance Europe

The **IHI Health Improvement Alliance Europe (HIAE)** is a coalition of progressive leaders who are united for change, driven by collaboration, and focused on achieving health and health care results. The group aims to improve work processes, create new delivery models relevant to European health systems, and achieve the best health and best care at affordable cost in the face of changing demographics, increasing chronic illness, escalating costs, and shrinking government and regional budgets.

Our Framework

Through an “all teach, all learn” network design, the HIAE seeks innovative health care designs that can be adapted successfully to European health systems and national contexts, as well as leaders who are focused on improvement, willing to both share and test innovations and improvements in new systems, and eager to spread successful learning at a national scale. The group’s learning opportunities are driven by and for members, with a focus on innovations relevant to system challenges and improvement aims in Europe.

A true learning and innovation community, this coalition provides a wealth of opportunities to learn from others facing similar challenges across the continent and to share ideas and strategies across organisational, regional, and national boundaries. To foster collaboration among members, the HIAE operates under the following principles:

- **Accept and encourage messiness:** The pathway to health care improvement is challenging; in order to progress we must accept that the way forward will be messy and encourage bold new ideas that add to the messiness.
- **Share assets and ideas:** Everyone has something to share, and when we share freely and openly we accelerate the pace of testing, change, and improvement.
- **Be energising and fun:** Raise each other’s joy in work by bringing energy and enthusiasm to the Alliance.
- **Build strong relationships:** We are more generative, impactful, and bold when we work together, across silos, and between regions.
- **All teach, all learn:** We are all willing to teach and be taught, drawing upon the collective knowledge and experience we share as an Alliance.

Aims and Objectives

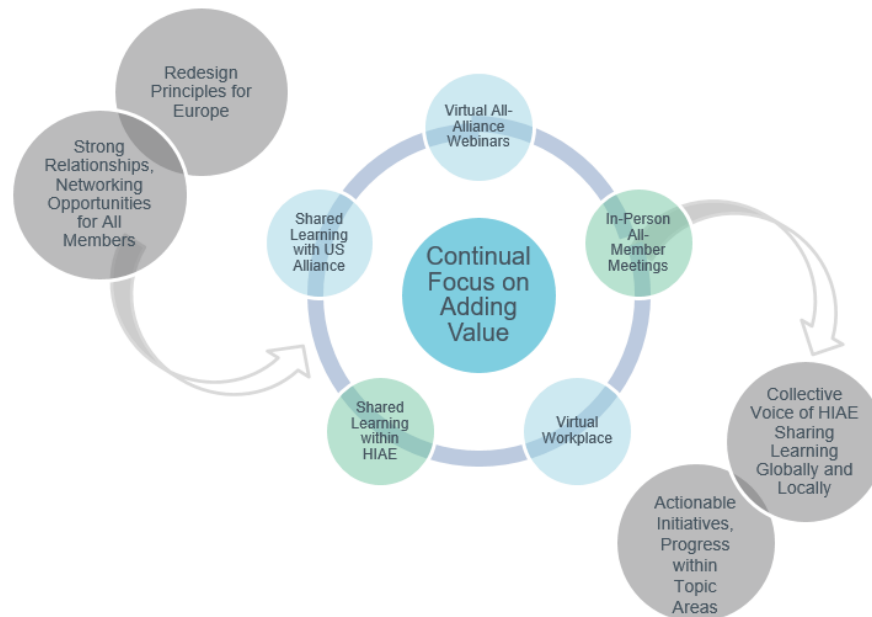
The HIAE engages bold and visionary health care leaders — leaders who believe that now, perhaps more than ever before, we must change the dialogue about health care. Across Europe, we have a pressing need to address growing challenges. How will our health and care systems cope with the demands if we do not choose to continually innovate our work processes to generate models of delivery that will improve the health and health care for all citizens?

To achieve our aim to improve work processes, create new delivery models, and achieve the best health and best care at affordable cost, we must work together to:

- Surface common challenges across and within regions

- Develop innovators in many places
- Leverage each other's ideas and share internationally
- Develop a collective voice
- Learn from past and present networks
- Address the challenges of:
 - An aging population
 - An increase in the number of service users with chronic diseases
 - An escalation in health care costs and simultaneous government and regional spending cuts

Alliance Design



In-Person Meetings

Three in-person meetings provide space and time for members to interact with each other, strengthen connections, and maintain the momentum of the Alliance. The agendas for in-person meetings are crafted to allow members time to learn from each other, using interactive activities and styles of presentation. Meetings often take place at member sites and these will include a portion of the day dedicated to reviewing local solutions that tie back to HIAE work. A sample of previous agendas from Year 3 can be found in [Appendix C](#).

Dates and Locations

Ease of transportation and member sites are considered when choosing locations for in-person meetings, all of which will take place in Europe. Meetings are 1.5 days in length, starting on the

first day at 10:30 AM and ending on the second day at 2:00 PM to allow members to minimise time away from their home organisations. The approximate meeting dates are as follows with locations forthcoming:

- TBD September 2019
- TBD February 2019
- TBD June 2019



All-Alliance Webinars

During the months between in-person meetings, the HIAE will convene virtually on 90-minute All-Alliance webinars. Members have the opportunity to share their work and learn from experts in the field. Webinars also provide an opportunity to contribute to workgroup breakout sessions. Alliance members can invite an unlimited number of staff from their organisations to participate in these virtual sessions. Webinars occur every second Tuesday of the month from 1:00-2:30 PM British Time. A sample of All-Alliance webinar topics can be found in [Appendix D](#).

Virtual Platform

While in-person networking time is extremely valuable for the HIAE, it is also important to maintain momentum between the three face-to-face meetings. The IHI team is committed to supporting the HIAE by providing virtual spaces where members can interact and share materials outside of our monthly webinars. Members are able to:

- Access shared files from the IHI team and other HIAE members
- View upcoming events on the HIAE calendar
- Interact with other members via listserv function

IHI Forum Receptions

At the IHI National Forum in December (US) and the IHI/BMJ International Forum in April (Europe), IHI hosts joint networking receptions for members of the HIAE and the IHI Leadership Alliance. The IHI Leadership Alliance is a North America-based collaboration of health care executives who share a goal to work with one another as well as in partnership with patients, workforces, and communities to deliver on the full promise of the IHI Triple Aim.

Timeline

The table below provides a high-level overview of the HIAE activities planned between **September 2019** and **August 2020**. We encourage you to meet with your team prior to the first in-person meeting to review the activities described below and determine how your organisation can best contribute to and take advantage of the HIAE.

| HIAE Year 4 September 2019 – August 2020 | Location | August | September | October | November | December | January | February | March | April | May | June | July | August |
|--|-----------|--------|-----------|---------|----------|----------|---------|----------|-------|-------|-----|------|------|--------|
| Launch Call | Virtual | • | | | | | | | | | | | | |
| In-Person Meeting 1 | TBD | | • | | | | | | | | | | | |
| In-Person Meeting 2 | TBD | | | | | | | • | | | | | | |
| In-Person Meeting 3 | TBD | | | | | | | | | | | • | | |
| All-Alliance Calls | Virtual | | | • | • | | • | | • | | • | | • | • |
| IHI Forum Receptions | In Person | | | | | • | | | | • | | | | |
| Workgroups | Virtual | | • | • | • | • | • | • | • | • | • | • | • | • |

Member Experiences in HIAE



The Platform for Continuous Improvement of Quality of Care and Patient Safety (PAQS) aims to consolidate relationships between the many stakeholders in health care in order to work together, in a consistent and cohesive approach. Our progress is more centered around networking and learning about how to achieve improvement in quality and safety, as we are not a health care institution directly involved with patient care. The IHI Health Improvement Alliance Europe (HIAE) has been very important in this regard. The HIAE has allowed us to make connections with members such as NHS Scotland and Danish Society for Patient Safety, and those contacts directly inspired us on our projects back in Belgium. The Alliance has shown us new projects and ways of working during sites visits and has given us opportunities to think together about health care challenges such as connecting finance and quality improvement and increasing joy in work.

- Mathieu Louiset, Innovation and Improvement Officer, PAQS (Belgium)



East London NHS Foundation Trust (ELFT) is a provider of mental health, community health, specialist services and some primary care, for a population of 1.5 million people in East London, Bedfordshire, and Luton. Our mission is to improve quality of life for all we serve. We are now four years into our improvement journey, and still learning and adapting at pace. Over the last year we have been continuing to build and replenish our infrastructure to support continuous improvement within every team in the organisation. We're also designing and supporting large-scale improvement work on topics that include enjoying work, reducing physical violence, and improving access and flow in community teams. We have learned so much from the experience and wisdom of others in the HIAE. It's important in continuous improvement to reflect regularly, take time to source learning, and to replenish one's energy. The HIAE serves all these functions for us, and it's a real privilege to be part of the community.

- Amar Shah, Consultant Forensic Psychiatrist and Chief Quality Officer, ELFT (England)



The HQCA is a provincial agency that pursues opportunities to improve patient safety and health service quality for Albertans. Our improvement journey covers many aspects. Most notable is our measuring, monitoring, and survey work. We provide reports to family physicians that describe how their patients use health services. We monitor several sectors of the health system through our FOCUS website to show how the sectors perform, and we regularly survey Albertans on their experience with the health system. Our experience in HIAE has been excellent. It is great to hear and see the many ways members are using innovative approaches to improve quality. I appreciate the opportunity to learn from others and appreciate that the agenda is designed to meet the needs of the members. I particularly enjoy the site visits which have been incredible.

- Andrew Neuner, CEO, HQCA (Canada)



Belfast Health and Social Care Trust *Belfast Trust is a large complex integrated system in Northern Ireland, which provides health and social care across 7 hospital sites and more than 100 primary care and community sites. We serve approximately 500,000 service users in Belfast and provide secondary and tertiary care services to Northern Ireland at large (approximately 1.8 million users). Over the past year, the Trust has developed a Quality Improvement Strategy and Plan that builds on the enthusiasm and expertise of a number of key individuals trained through the IHI, Health Improvement Scotland, and site visits to centres of QI excellence locally and internationally. March to Safety, Safetember, and What Matter to You events are just a few of the many successes of our central QI faculty who keep the Trust in line with the regional QI 2020 strategy. Several senior staff attended excellent HIAE conferences from 2016 to 2018. The shared learning from these has centred on population health across complex health and social care systems, with the repeated messages focusing on: what matters through co-design and co-production; meaningful data collection; and recognizing, sustaining, and spreading improvement, even in the most deprived of environments – for example, Caesarian section rates in Latin America and user involvement in ELFT.*

- Cathy Jack, Medical Director and Maria O’Kane Associate Medical Director, Belfast HSC Trust (Northern Ireland)



Royal Free London NHS Foundation Trust *The Royal Free London NHS Foundation Trust is a large, multi-site academic and general hospital serving as the main hospital for a population of around 1.5 million people in North London. Royal Free Group has made a commitment to putting continuous quality improvement and reducing unwarranted variation in care delivery at the heart of how we approach usual work. We have established Clinical Practice Groups (CPGs), teams closely linked to the operational line with central support focusing on reducing unwarranted variation and driving quality improvement across our most important clinical pathways. The Alliance has given us the opportunity to share with and learn from like-minded leaders across a diverse set of organisations, yet facing common challenges – for example, joy in work and population health. Through the Alliance, the Royal Free has formed a three-way partnership with improvement leads in Imperial NHS Trust and NHS Improvement, focusing on a range of topics such as reducing unwarranted variation and creating a culture of learning and psychological safety.*

- James Mountford, Director of Quality, Royal Free London NHS Foundation Trust (England)



Landspítali *Landspítali is the only tertiary care hospital in Iceland, taking care of 350,000 inhabitants, and more specifically all hospital care for 220,000 inhabitants as well as 2,000,000 tourists. We aim for all of our improvement work to focus on the patient and their needs. We are now six years into our Lean and quality improvement journey and are still struggling. Emphasis over the last year has been on care pathways, improvement boards, and standard work for leaders to support our continuous improvements. We are also preparing for new buildings at our site. We have learned from HIAE meetings that many others are tackling the same or similar problems. Hearing the experiences of others gives us ideas and enthusiasm to go further in our improvement journey.*

- Guðrún Björg Sigurbjörnsdóttir, KPO Manager, Landspítali – National University Hospital of Iceland



Northern Health and Social Care Trust (NHSC) is a provider of integrated health and social care services with an annual budget of circa £620 million, covering a rural and urban population of 470,000 people and employing 12,000 staff. Our improvement journey over the past year has been exciting, energising, and empowering. Our experience in Year 2 of HIAE has been more productive and fruitful than Year 1, as we have made some good connections for collaborative work. The meeting site visits have sparked really interesting ideas, which I have brought back to NHSC. A key learning for me is that you need a consistency in attendance (at least one person from the Trust attending all the face-to-face meetings), otherwise network development is more difficult.

- Gill Smith, Innovation and Quality Improvement Lead, NHSC (Northern Ireland)



Imperial College Healthcare is an NHS Trust of 10,000 people, providing care for around 1 million people every year in our 5 hospitals and a growing number of community services in North West London. We continue to embed consistent and rigorous improvement methodology in the design, implementation, and evaluation of strategic Trust-wide improvement and transformation programmes and seek opportunities to share and spread learning through nurturing collaborations with external networks. Key learnings we have taken back to our organisation from the HIAE meetings include content on: distributed power, organisational culture, co-production, and improvement methods beyond traditional health care boundaries linking to population health. The lectures, site visits, webinars, formal and informal networking activities have proved a highlight and make this unique to the Alliance. Through the HIAE we have also developed a local collaboration in which we facilitate safe collaborative spaces to learn from each other about approaches to reduce unwarranted variation, culture, and measurement for improvement.

- Bob Klaber, Consultant Paediatrician and Associate Medical Director, QI (England)

Participation

We will partner and align to address the most pressing challenges facing health care organisations in Europe and use our collective intellect to innovate new models to achieve the Triple Aim. Ultimately, our goal is to effect positive, enduring change — and we are committed to providing the support leaders and their organisations need to achieve demonstrable and unprecedented results.

HIAE members commit to:

- Send representatives to three in-person meetings throughout the year
- Invite staff from their organisations to contribute to All-Alliance webinars
- Be courageous and bold toward our aspirations to improve

Member Benefits

The opportunity to connect with like-minded colleagues under a philosophy of “all teach, all learn” can significantly accelerate the knowledge, skills, and experience needed to strive for best health and best care, at affordable costs... for everyone. The HIAE’s learning opportunities are driven by and for members, with a focus on innovations relevant to system challenges in Europe.

Benefits for members include:

- Direct access to health care organisations that are leading in improvement
- Unlimited organisational participation in collaborative harvesting, designing, and testing
- Unlimited organisational participation in virtual meetings, email listserv, and virtual platform
- Permission to use HIAE Member badge (pictured right) on social media, email signatures, and other relevant resources
- Organisational representation at three in-person meetings during the year
- Access to IHI experts and resources during in-person meetings, virtual All-Alliance webinars, and at IHI Forums
- 15% discounts for IHI National Forum (US) and IHI/BMJ International Forum (Europe)

Cost of Membership

In conjunction with the desire to be small, agile, and collaborative, members are asked to contribute a programme fee to cover the annual membership dues. The enrolment fee is US\$12,000 per organisation.

Due to capacity restrictions, each member organisation is asked to bring no more than two attendees to each in-person meeting (a total of three per meeting). If an organisation wishes to send more than two individuals, IHI will keep a waitlist and determine availability on a first come, first served basis after registration has closed. Members are responsible for covering their own travel and accommodation expenses for all in-person meetings. Breakfast and lunch will be provided at the three in-person meetings.

How to Apply

To apply for enrolment in the IHI Health Improvement Alliance Europe, email a completed application form ([Appendix E](#)) to IHI Project Manager Amber Watson at awatson@ihi.org.

Contact Information

For more information, or to join the Alliance, please visit ihi.org/HIAE or email IHI Project Manager Amber Watson at awatson@ihi.org.

Appendix A: Meet the IHI Team



Derek Feeley, DBA, President and CEO, Institute for Healthcare Improvement (IHI), previously served as IHI's Executive Vice President from 2013 to 2015, during which time he had executive-level responsibility for driving IHI's strategy in five focus areas: Improvement Capability; Person- and Family-Centred Care; Patient Safety; Quality, Cost, and Value; and the Triple Aim. Prior to joining IHI in 2013, Mr. Feeley served as Director General for Health and Social Care in the Scottish Government and Chief Executive of the National Health Service (NHS) in Scotland. In that role he was the principal advisor to the Scottish Government on health and health care policy and on public service improvement. He also provided leadership to NHS Scotland's 140,000 staff in their delivery of high-quality health and health care. In 2013, Mr. Feeley was made a Companion of the Order of the Bath by Her Majesty, Queen Elizabeth II, in recognition of his services to health and health care.



Maureen Bisognano, President Emerita and Senior Fellow, Institute for Healthcare Improvement (IHI), previously served as IHI's President and Chief Executive Officer for five years, after serving as Executive Vice President and Chief Operating Officer for 15 years. She is a prominent authority on improving health care systems whose expertise has been recognised by her election to membership in the National Academy of Medicine, among other distinctions. Ms. Bisognano advises health care leaders around the world, is a frequent speaker on quality improvement at major health care conferences and is a tireless advocate for change. She is also an instructor of medicine at the Harvard Medical School and a research associate in the Brigham and Women's Hospital Division of Social Medicine and Health Inequalities. She serves on the boards of the Commonwealth Fund, Cincinnati Children's Hospital Medical Center, and ThedaCare Center for Healthcare Value. Prior to joining IHI, Ms. Bisognano served as CEO of the Massachusetts Respiratory Hospital and Senior Vice President of the Juran Institute.



Pedro Delgado, MSc, Head of Europe and Latin America Regions, Institute for Healthcare Improvement (IHI), has a unique ability to work across cultures, languages, and systems. Based in the United Kingdom, he has been a driving force in IHI's global strategy. From work on reducing C-sections in Brazil, to improving early years education in Chile, to improving patient safety in Portugal and mental health in London, Mr. Delgado has led the key senior relationships and design and implementation of large-scale health system improvement efforts and networks globally. He coaches senior leaders and teams, and lectures extensively worldwide on large-scale change, patient safety, and quality improvement. During his time at IHI, he also facilitated the Quality and Innovation Centers network, which included Kaiser Permanente's Performance Improvement Institute, Qulturum in Jönköping County (Sweden), and the James Anderson Center for Clinical Excellence at Cincinnati Children's Hospital. His background is rich in diversity, including a brief period as a professional football (soccer) player, roles in hospital management and large-scale improvement leadership in the UK, and experience working in mental health in Venezuela and the UK. He holds summa cum laude degrees in Psychology and in Global Business, and an MSc in Healthcare Management and Leadership.



Amelia Brooks, Senior Director, Patient Safety and Europe Region, Institute for Healthcare Improvement (IHI), has expertise in quality improvement, patient safety, human factors, analytics for improvement, and safety culture. She joined IHI in January 2016 as a Director in the Patient Safety team, where her role includes teaching, diagnostics, and onsite coaching for organisations. She is also now IHI's Regional Director for the Europe Region and lives in the UK. Ms. Brooks leads a number of IHI's European programmes and oversees all regional activity. Prior to joining IHI, she worked in strategic and operational roles in the patient safety and improvement fields, including frontline roles as a quality improvement specialist. Prior to joining IHI, she led the design, development, and implementation of a regional Patient Safety Collaborative in England and also led the design and development of the Life Improvement Software System.



Amber Watson, Project Manager, Institute for Healthcare Improvement (IHI), supports a range of content areas, including the Triple Aim, health equity, health systems redesign, and health care leadership in North America and Europe. In addition, Ms. Watson has supported virtual programming, strategic partnerships, and patient safety. Her professional interests include health disparities and global health, with a focus on programme implementation and design. Before joining IHI in January 2016, Ms. Watson worked in international development business strategy and community support services. She holds a bachelor's degree in International Comparative Studies and Arabic, and a minor in French.

Appendix B: Year 3 HIAE Membership List



Alberta College of Pharmacy, *Canada*
 Barts Health NHS Trust, *England, UK*
 Belfast Health and Social Care Trust, *Northern Ireland, UK*
 Central and North West London NHS Foundation Trust, *England, UK*
 College of Physicians and Surgeons of Alberta, *Canada*
 Danish Society for Patient Safety, *Denmark*
 East London NHS Foundation Trust (ELFT), *England, UK*
 Health Quality Council of Alberta (HQCA), *Canada*
 Healthcare Improvement Scotland, *Scotland, UK*
 Imperial College Healthcare NHS Trust, *England, UK*
 Landspítali National University Hospital, *Iceland*
 Lillebaelt Hospital, *Denmark*
 Local Government Frederiksberg Health & Care Department, *Sweden*
 NHS Fife Health and Social Care Partnership, *Scotland, UK*
 NHS Grampian, *Scotland, UK*

NHS Highland, *Scotland, UK*
 NHS Improvement, *England, UK*
 NHS Lothian, *Scotland, UK*
 NHS Scotland and Scottish Government, *Scotland, UK*
 North East London NHS Foundation Trust, *England, UK*
 Northern Health and Social Care Trust, *Northern Ireland, UK*
 Northern Ireland Ambulance Services, *Northern Ireland, UK*
 Northern Ireland Regional Network: RQIA, HSCI, HSC Leadership Centre, *Northern Ireland, UK*
 Plateforme pour l'Amélioration continue de la Qualité des soins et de la Sécurité des patients (PAQS), *Belgium*
 Public Health Wales, *Wales, UK*
 Regional Sjælland, Bridge for Better Health, *Denmark*
 Royal Free London NHS Foundation Trust, *England, UK*
 Scottish Ambulance Services, *Scotland, UK*
 South Eastern Health and Social Care Trust, *Northern Ireland, UK*
 South London and Maudsley NHS Foundation Trust, *England, UK*
 Southern Health and Social Care Trust, *Northern Ireland, UK*
 St. George's University Hospitals NHS Foundation Trust, *England, UK*
 STZ Hospitals, *The Netherlands*
 Surrey and Borders Partnership Trust
 The County Council of Region Jönköping, *Sweden*
 The Health Foundation, *England, UK*
 The King's Foundation, *England, UK*
 Western Health and Social Care Trust, *England, UK*

Appendix C: Year 3 Meeting Agenda Sample

Day One

| Time | Topic |
|-------------|--|
| 10:00-10:15 | Welcome & Introductions |
| 10:15-12:00 | HIAE Exchange: Introductions, Networking, Huddles A series of networking activities based around organisational asks and offers designed to help build stronger connections between partners and develop your organisational networks. |
| 12:00-13:00 | Lunch |
| 13:00-14:00 | Person-Centred Care: A Daily Practice A joint session on joy featuring lessons from the What Matters to You campaign. |
| 14:00-15:00 | Refreshment Break and Travel to Site Visits |

| | |
|---------------------|---|
| 115:00-17:30 | <p>Site Visits</p> <p>Sign up for site visits to occur virtually prior to meeting start.</p> <ul style="list-style-type: none"> - Emergencies Head Quarter 112 in Brussels - ED at Cliniques Universitaires Saint Luc - Crew Resource Management from Pilots to Doctors at Brussels Airport - Hand Hygiene Improvement in a Geriatric Ward - Brussels Health Plan Development by Regional Health Minister - SAMUSOCIAL - Doctors of the World - Welcome, Care and Orientation Centre. |
| 19:00 | Optional Evening Reception |

Day Two

| Time | Topic |
|--------------------|--|
| 8:30-8:40 | Welcome Back & Day 2 Overview |
| 8:40-9:00 | <p>Site Visit Report Outs</p> <p>What lessons learned can you take back for next Tuesday?</p> |
| 9:00-10:30 | Belgium Hospital Waste Workshop |
| 10:30-10:45 | Refreshment Break |
| 10:45-12:15 | <p>HIAE Breakouts</p> <ul style="list-style-type: none"> - Improving Value, Reducing Waste - Leading through Relationships - Improving Population Health |
| 12:15-13:00 | Lunch |
| 13:00-14:15 | <p>Leadership Surgery</p> <p>During this session, we will work together to tackle specific leadership challenges across the Alliance.</p> |
| 14:15-14:30 | Wrap Up & Close |

Appendix D: HIAE Webinar Samples

| Topic | Presenter(s) | Key Learnings |
|---|--|---|
| <p>Leading a Culture of Safety</p> | <p>Allan S. Frankel, MD, Principal at Safe & Reliable Healthcare and IHI Faculty</p> | <ul style="list-style-type: none"> • The role of leaders to leverage the components of IHI's Framework for Safe, Reliable, and Effective Care as “organs” of the work setting • Building improvement readiness in the organisation through focusing on learning and local leadership, teamwork, safety, burnout, and work/life balance • Utilise analog or digital dashboards to display and track cultural measures which will: give a voice to staff, connect teams and leaders, and make management of improvement easier • Categorising data to inform what robust work settings do culturally to improve |
| <p>Building a Culture of Quality Improvement in Clinical Practices</p> | <p>NHS Tower Hamlets Clinical Commissioning Group: Virginia Patania, Governing Board Member Tom Margham, General Practitioner and Clinical Lead of Tower Hamlets EQUIP Programme</p> | <ul style="list-style-type: none"> • Change happens at the speed of trust — building trust is essential • Change must be meaningful — if it does not matter to you, it does not matter to us • Data sharing has enabled high-level data analysis; good data is key to understanding variation in primary care • Building improvement capability: Retaining existing talent, recognising and nurturing new talent, all voices are equal |
| <p>Sticky Messages and Storytelling</p> | <p>Mike Briddon, Director of Editorial and Multimedia, IHI</p> | <ul style="list-style-type: none"> • Capturing people's attention by creating a gap of curiosity • The use of simple/plain language is more effective • Use emotion as it inspires and moves people to act • Consider the vehicle to use for your storytelling • Keep your messaging short and concise |

Appendix E: Application Form

IHI Health Improvement Alliance Europe Application

The Institute for Healthcare Improvement (IHI) is pleased to convene Year 4 of the Health Improvement Alliance Europe (HIAE), a community of progressive leaders working to co-create systematic improvements in conjunction with the staff and users in the region to achieve health and well-being results.

Prospective members apply to HIAE as an organisation to connect with other forward-thinking organisations across the region, both virtually and in person.

In order to stay small, agile, and collaborative, enrolment in the Alliance is capped. Submissions will be accepted on a rolling basis and applicants will receive a response within two weeks. Please email your completed application to IHI Project Manager Amber Watson at awatson@ihi.org.

Membership Fee and Application Deadlines

I agree to the Fee of US\$12,000 per organization (applications received by August 1, 2019)

Applicant Information

| | |
|---|--|
| First name: | |
| Surname: | |
| Email address: | |
| Phone number: | |
| Brief description of why you are interested in participating: | |

Organisation Information

| | |
|------------------------|--|
| Organisation name: | |
| Billing Contact Name: | |
| Billing Contact Email: | |
| Billing Address: | |
| Country: | |

Please email your completed application to IHI Project Manager Amber Watson at awatson@ihi.org.