QI Project Team:
SCIM Interviewers Police and Social workers

QI Project Aim:
By December 2024 one child /Young person who has undergone a SCIM (Scottish child interview module) interview will have contributed their lived experience to service development and improvement in line with the UNCRC (Article 12,19) The promise and SCIM principles
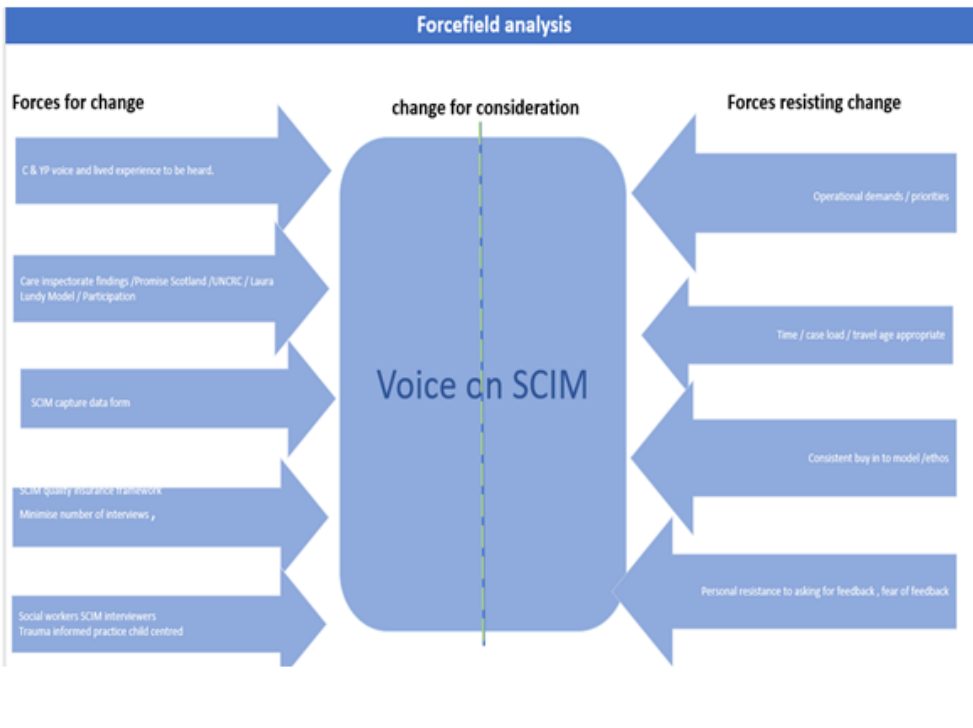
Stage of QI Journey:
Creating conditions met with the team.
Understanding system Discussions with SCIM
Reading of SCIM principles
 Devolving Aims met
Testing changes met

The Quality Improvement journey

Change Idea I am going to test below:
Allocated SCIM Social worker to use the feedback form with a Child or young person that has undergone a SCIM interview.

Area to insert pictures of QI Tools Used:

Forcefield analysis

change for consideration

Forces for change:
- C & YP voice and lived experience to be heard.
- Care inspectorate findings /Promise Scotland /UNCRC / Laura Lundy Model / Participation
- SCIM capture data form
- SCIM quality insurance framework / Minimise number of interviews ,
- Social workers SCIM interviewers Trauma informed practice child centred

Voice on SCIM

Forces resisting change:
- Operational demands / priorities
- Time / case load / travel age appropriate
- Consistent buy in to model /ethos
- Personal resistance to asking for feedback , fear of feedback

ACT
Adapting
Use feedback form with amendments , Amendments will be based on feed back from SCIM team
The guidance document will reflect the changes and feedback.

PLAN
Objective –To use the form with a C/YP and it be effective in capturing their lived experience on the interview.
One trained SCIM Social worker in the SCIM team to use the form to gain lived experience with a C/YP following an SCIM Interview.

Predictions
SCIM S/W will use the form and it be an effective tool in capturing the lived experience
C& YP refuse to give their lived experience to the SCIM S/W

Act | Plan
Study | Do

STUDY
SCIM Interviewer fed back , They don't feel comfortable and wouldn't just hand out the form with no trusted adult to support the C/YP to fill out the form.
The language wasn't appropriate for C/YP
Form didn't allow for organic chat and if practitioner wasn't confident in venturing off the form it wouldn't gain a depth of feedback.
Feedback form not suitable for all ages and learning stages
Feedback was captured but was that because of the established relationship the worker already had with the YP and the worker had the luxury of time as this was a test of change and time isn't always a luxury due to workload.
Not always appropriate for a SCIM interviewer to capture feedback.
Feedback form is good as a guidance /prompt for gathering feedback .
SCIM SW ask another trusted adult to use the form with a C& YP
The form not effective tool / Was too structured.

DO
SCIM SW used the feedback form on a young person who had been a witness and feedback was gained ,
Observations
The SCIM interviewer stated that the form wouldn't be appropriate for all C&YP that had undergone a SCIM interview because of the nature of what they were being interviewed for.
Was too structured.
How did the SCIM interviewer feel using the form
Was the form successful because of an already established relationship
Time isn't always a luxury

Area of Learning:

Successes: .After having discussion with SCIM Interviewers lots of sensitive feedback came out that helped me gain a better understanding of the challenges around the interview process and barriers collecting feedback. One success is that we did achieve the lived experience of a C/YP. Using the QI tool was really helpful in me understanding what the forces were around the feedback form . Learnt lots about different teams and different journeys . Light bulb moment, Having a chat with Jade about the QI journey and helping me to simplify my aim.

Challenges: SCIM interviewers resisting any feedback / communication or engagement . Very ambitious with my first Aim statement and having to rethink . QI journey has tested me !! Frustration that gaining the lived experience isn't always top of everyone's to do list !

FLASH REPORT Jill Gudelis & Elisabeth Cairney

QI Project Team:

Jill Gudelis
Elizabeth Cairney

QI Project Aim:
By February 2025, 50% of the Dingwall Social Work family team will be using the Better Meetings Guide to uphold voice, choice and participation of children and young people in line with The Promise, UNCRC, and the Highland Inspection report.
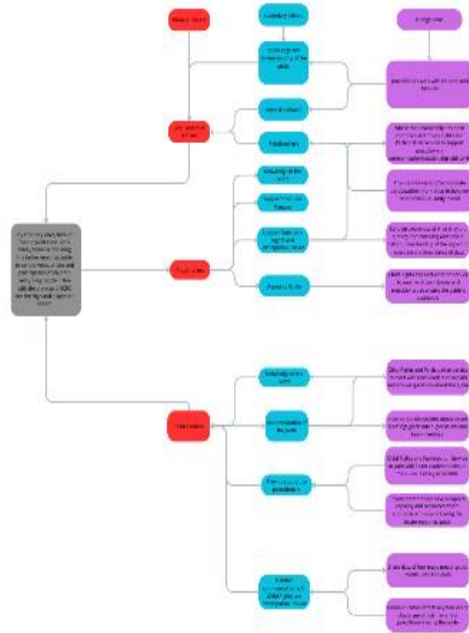
Stage of QI Journey:
Testing changes

Change Idea I am going to test below:
Dingwall social work team to have the Better Meeting Guide (BMG) factored into their supervisions by practice lead each month to enhance the use of the guide

QI tools used: MS Form &Driver Diagram:

ACT

- The Dingwall Family Social work team to continue their meetings to discuss and develop ideas using the BMG.
- For Jill and Elizabeth to meet in person with the team regularly instead of sending MS forms, this will keep up momentum and promote sustainable improvement.

PLAN

To use the MS form to get data and trends about the use of BMG with the Dingwall Social work team.
-The response from the MS will show who is using and who is not .
Provide the team with the guide and talk them through its importance.

STUDY

-MS Forms were not capturing true reflection of the team's experiences and visiting the team was better way of engaging with the team around feedback.
-100% of Dingwall SW Team are now using the BMG in practice with positive feedback.

DO

The Dingwall social team will test the Better meeting Guide during their encounters with those in which they support.

Area of Learning: Successes: *Social Worker – after meeting with Jill & Elizabeth thought long and hard about his use of the BMG and decided to embed it more into his practise so asked young person where he would like to meet for his next meeting, young person said "In my Den playing minecraft" he met the young person in that place and it totally broke down all challenges with the family and now the family and the social worker have a better relationship.*
Challenges: *Trainee Social worker found it difficult to understand the reasoning for using the form and asked when "she could stop using it"- This was an initial challenge, but she now organises all team meetings and chairs them. Some frustration about other services who are not aware of the guide.*

QI Project Team:
Maggie Hume
Charlene MacLeod (Mgr)

QI Project Aim:
100% of KC staff develop and access a training plan to address baseline needs 'not started'*as identified in the Kyleakin Connections Self-Assessment Toolkit in line with the Scottish Government Routemap's Pillars and Principles of Holistic Whole Family Support, by January 2025
*100% of quality indicators in relation to L+D were self-assessed as 'not started'.
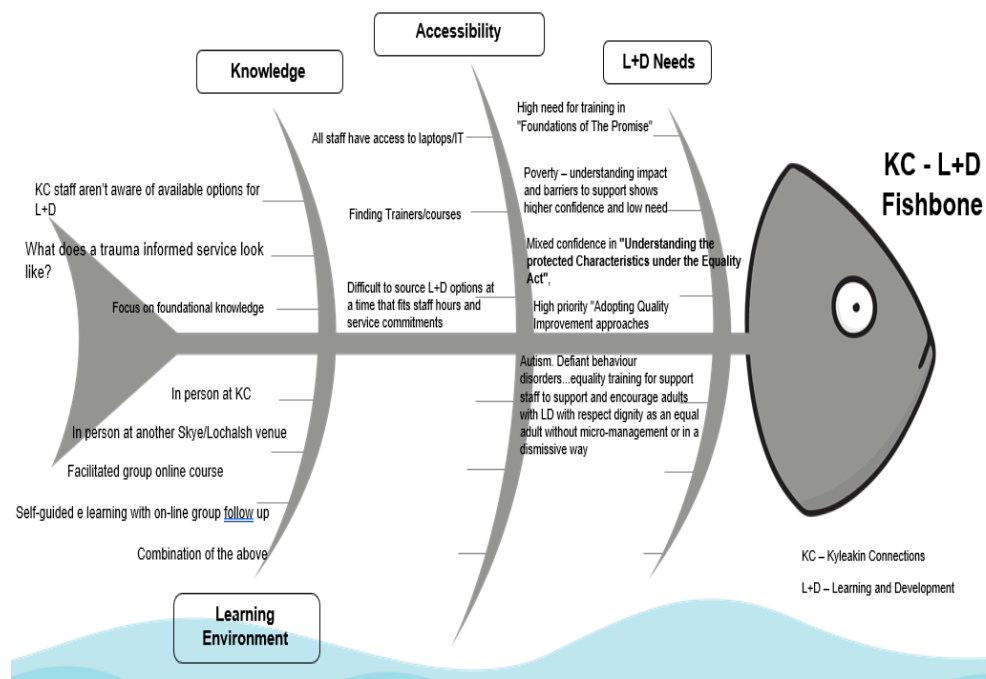
Stage of QI Journey:

Understanding the System

The Quality Improvement journey:

Change Idea I am going to test below:
KC staff have already completed their self assessment toolkit and have noted their status around elements of Pillar 4, none of which are self assessed as 'ready'. This PDSA cycle will test where staff L+D priorities needs align with knowledge and confidence. This information will support improvement planning in relation to Pillar 4.

QI TOOL used – Fishbone

KC - L+D Fishbone

Knowledge
- KC staff aren't aware of available options for L+D
- What does a trauma informed service look like?
- Focus on foundational knowledge

Accessibility
- All staff have access to laptops/IT
- Finding Trainers/courses
- Difficult to source L+D options at a time that fits staff hours and service commitments

L+D Needs
- High need for training in "Foundations of The Promise"
- Poverty – understanding impact and barriers to support shows higher confidence and low need
- Mixed confidence in "Understanding the protected Characteristics under the Equality Act",
- High priority "Adopting Quality Improvement approaches"
- Autism. Defiant behaviour disorders...equality training for support staff to support and encourage adults with LD with respect dignity as an equal adult without micro-management or in a dismissive way

Learning Environment
- In person at KC
- In person at another Skye/Lochalsh venue
- Facilitated group online course
- Self-guided e learning with on-line group follow up
- Combination of the above

KC – Kyleakin Connections
L+D – Learning and Development

ACT
- Present matrix for review
- Liaise with team to determine best mode of communication to drill into priorities further
- Establish 2 short term and 2 medium term priorities
- Agree action plan
- Support access to relevant L+D opportunities
- In 6 months, review self-assessment toolkit in light of L+D evaluations
- Adopt this change idea
- Seek feedback on this process and if useful adopt and roll out to more partner services.

PLAN
All KC staff will complete a survey of 10 questions by 16th December to identify barriers, challenges and opportunities for L+D
- Distribute MS survey to all staff using key indicators and responses within the WFWP SA Toolkit
- Consideration given to privacy and consent
Predict
- Time and accessibility are going to be the biggest barriers.
- 50% of staff will complete survey
- Poverty, problematic substance use, and Equality will be of greatest priority to the team.

STUDY
- High priority for action included areas where staff had high and lower confidence and knowledge (green and red)
- Further understanding required of the areas where knowledge and confidence was low yet so was priority status low
- 43% of team responded. Christmas timing might have affected this.

DO
- Email sent to team via service manager to ensure every team member received it. Email sought participation outlining timeline and process of this PDSA
- Attached copies of Quick Guide to FREE Training and their latest version of SA Toolkit

Area of Learning: QI tools available. Your aim can change over time. Go small and then smaller again!

Successes: Responses from KC staff and willingness to meaningfully develop holistic WFW approaches. Brought QI Tools to life and I can see their value ongoing. Process highlighted the unexpected feedback, particularly in terms of priority and confidence responses. Staff views and needs have been represented and have influenced action

Challenges: Pinning down my aim in a way that meaningfully built on KC self-assessment producing added value to our relationship. Would have found benefit in us taking a team approach to this QI task for the benefit of the programme as a whole?

FLASH REPORT Cohort 9 Ann Gillies

QI Project Team:
Ann Gillies, WFWP Team, Sample of 3 Providers

QI Project Aim:
By March 2025, 50% of the team will be using the e-form to collate a provider overview to populate the Area Service Mapping Database, aligned with Pillar 3 Whole System Joined-up approach

Stage of QI Journey:
Creating conditions
Understanding systems
Developing Aims
Testing changes

Change Idea I am going to test below:
Based on the results from the user feedback survey I'm going to create an e-form to collate consistent provider information to populate the Area Service Mapping Database.

QI Tools Used:
User Feedback Survey with team to find out where improvements could be made with the Area Service Mapping Database. Link to survey - WFWP Area Service Mapping 2024 Survey
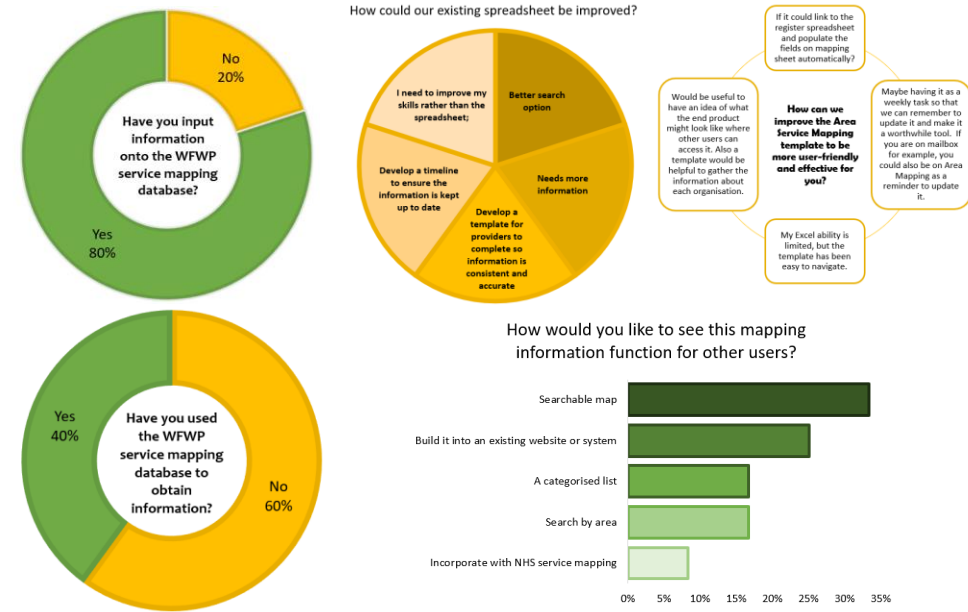

ACT

Based on feedback and data analysis to date:
- Feedback has mostly been positive, so scale up the use of the current e-form with 7 more providers to ensure consistency in results.(Total 10)
- This will inform if current e-form needs adopting or adapting.
- Follow-up on feedback to organise discussion with one of the initial test providers to obtain more detailed evidence of existing provider information requests.
- Arrange to contact other organisations highlighted after this conversation that are collating similar information and explore if beneficial to consider setting up short life working group to enhance collaboration and consideration of adopting, adapting or abandoning current form if the information is already being gathered.. [Next PDSA cycle]

PLAN

Objective: Using insights from the user feedback survey, develop & pilot an e-form designed to collect service information from providers. The goal is to streamline data collection for the Area Service mapping database, enhancing the efficiency and accuracy of service information gathering.
- Develop a draft e-form: Create a prototype e-form using MS Forms to capture essential details about services for C,YP & F
- Implement the draft e-form with 3 selected service providers to gather initial feedback.
- Collect and analyse feedback from providers focusing on the form's usability, relevance and any potential issues of duplication.
Prediction: It is anticipated that providers will find the e-form intuitive and user-friendly. The shared information is expected to facilitate referrals and enhance the potential for effective sign-posting to appropriate services.
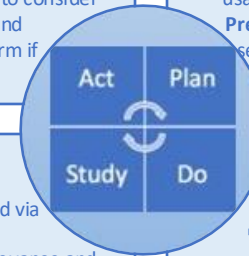
STUDY

- Analyse the completeness and relevance of the data submitted via the e-form
- Review feedback from participants on the form's usability, relevance and time required to complete it
- Determine if the e-form meets the defined criteria and integrates seamlessly with the existing Area Mapping spreadsheet including ease of populating the spreadsheet directly using the collated information.
- Identify areas where the form may need improvement, such as unclear questions, missing information or technical difficulties based on responses to the post-completion questions
- Identify instances of data duplication and explore collaborative strategies to streamline the data collection process.

DO

- Launch the e-form with a selected group of 3 service providers
- Offer clear, detailed instructions & on-going support to participants, including a set of guidance questions to address after form completion.
- Collect feedback from participants on the form's usability and relevance of information collected
- Ensure the process accounts for existing directories and guides where providers are already submitting service information. This approach allows for collaborative efforts to maximise sustainability and avoid creating additional work if the information is already being captured elsewhere.

Area of Learning: Applying learning to real-life QI project; making the quality improvement project small enough to complete for this module and sorting through too many 'big' ideas; learning from other Cohort 9 participants. Helped me to consider where we could have best impact.

Successes: Data from the survey provided several improvement ideas. The team overall had a positive view of the Area Service mapping information spreadsheet, even though it wasn't being used effectively, so the project was worthwhile to develop. Helped me to take a step back to understand the system better.

Challenges: Time commitment of providers to complete the information and how we can collaborate with others collating similar information so that we do not duplicate but enhance existing work. Sustainability.

FLASH REPORT Cohort 9 Hayley Graham

QI Project Team:
Whole Family Wellbeing Programme

QI Project Aim:
To ensure that by August 2025, 90% of early learning & childcare centres in the Dingwall ASG receive information regarding ASL prior to a child starting nursery – inline with the Quality Framework for ELC. Services.
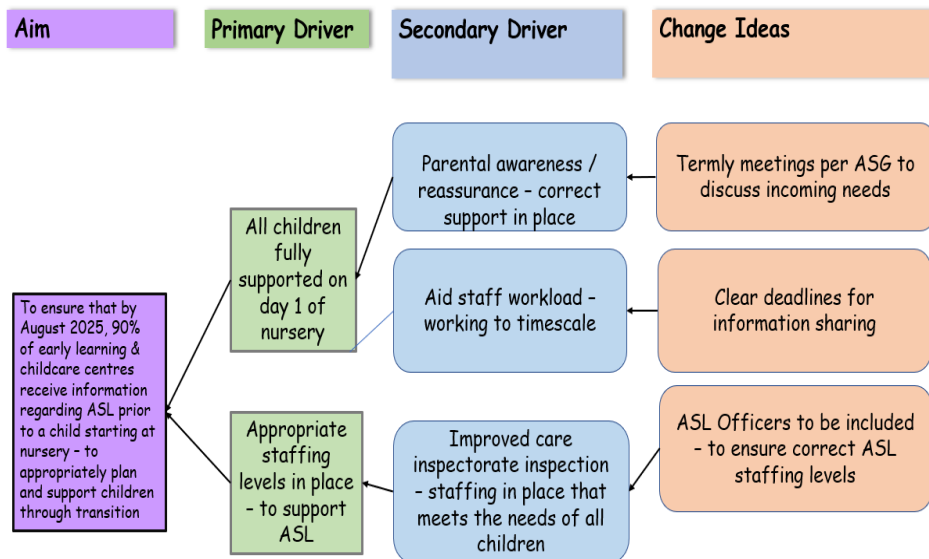
Stage of QI Journey:

Testing changes

The Quality Improvement journey:

Change Idea I am going to test below:

PDSA 1 – Change Idea 3
Bringing together key stakeholders

QI Tools Used:

Driver diagram

Aim

Primary Driver

Secondary Driver

Change Ideas

To ensure that by August 2025, 90% of early learning & childcare centres receive information regarding ASL prior to a child starting at nursery – to appropriately plan and support children through transition

All children fully supported on day 1 of nursery

Parental awareness / reassurance - correct support in place

Termly meetings per ASG to discuss incoming needs

Aid staff workload - working to timescale

Clear deadlines for information sharing

Appropriate staffing levels in place - to support ASL

Improved care inspectorate inspection - staffing in place that meets the needs of all children

ASL Officers to be included – to ensure correct ASL staffing levels

ACT

- Team decided to adopt the change and organise regular meetings
- In order to manage time effectively it was felt that a whole ASG discussion would be required per meet

STUDY

- Team reflect and listed the positives from meeting
- Agreed that staffing to support children before they start nursery could be put in place – necessary paperwork progressed
- ASN Officer to look at deployment of existing staff

PLAN

- Ascertain the best date for key professionals to come together
- Informal chats with all key stakeholders – ASN Officer, Childcare Manager & Health Visitor – so they understand the purpose of the proposed meeting – to increase the effectiveness of data sharing to support children starting nursery

Act | Plan
Study | Do

DO

- The team met and talked through the needs identified by Health staff and the support children moving into ELC will have.
- Only Dingwall Primary ELC was included in the discussion – to start small and keep discussion focused
- Child's Plans shared prior to the meeting, where appropriate
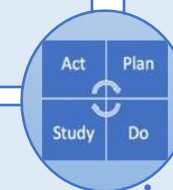
Area of Learning: From the chart, it is interesting to note that

Successes: Stakeholders have been fully onboard and are excited to develop timeframes and "cut offs" to ensure children are appropriately supported prior to starting nursery – this is just the start, I plan to continue with testing before implementing meaningful changes. Collaborative group meetings.

Challenges: Different data collections I found it difficult initially to speak with the correct people, in Education there are many staffing layers as to who holds ELC data, I have been advised that SEEMiS (the educational data system) is currently being expanded to include early years data across statutory and private settings which improve accessing the correct info at the right time.

QI Project Team:
Sandra Brown, Inverness High School ASG attendance group, Family Links delivery partners, four parents

To increase the number of parents involved in the work of the Inverness High School ASG Family Links project steering group from a baseline of 0 to 3 to enhance the direct voice of families in the design of the service, in line with Pillar 1 of the Scottish Government Routemap's Pillars and Principles of Holistic Whole Family Support, by January 2025

Stage of QI Journey:
Creating conditions
Understanding systems
Developing aims
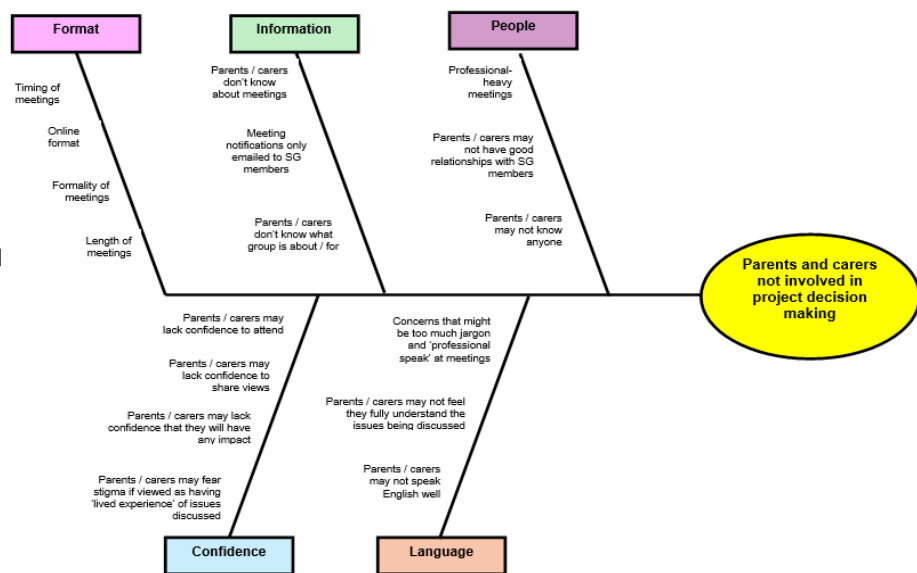Testing changes

The Quality Improvement journey:

Change Idea I am going to test below:
Seek views / involvement of parents and carers outside of meetings by attending an existing parent / carer group.

Area to insert pictures of QI Tools Used:

Title: Inverness High School ASG Family Links Project – Parent / carer involvement in project steering group

Format
- Timing of meetings
- Online format
- Formality of meetings
- Length of meetings

Information
- Parents / carers don't know about meetings
- Meeting notifications only emailed to SG members
- Parents / carers don't know what group is about / for

People
- Professional-heavy meetings
- Parents / carers may not have good relationships with SG members
- Parents / carers may not know anyone

Confidence
- Parents / carers may lack confidence to attend
- Parents / carers may lack confidence to share views
- Parents / carers may lack confidence that they will have any impact
- Parents / carers may fear stigma if viewed as having 'lived experience' of issues discussed

Language
- Concerns that might be too much jargon and 'professional speak' at meetings
- Parents / carers may not feel they fully understand the issues being discussed
- Parents / carers may not speak English well

Parents and carers not involved in project decision making

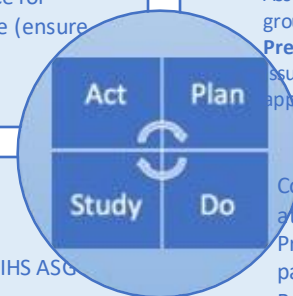**Link to possible change ideas arising from fishbone diagram**

ACT
Adapt. Conduct another PDSA with the following changes:
- Choose a different group which can be contacted by email prior to attending – to seek consent of members and send briefing in advance.
- Choose a date when group is not busy with other preparations.
- Keep printed briefing, biscuits, warm, friendly facilitation style
- Take parents who wish to engage into a separate space for discussion to respect those who do not wish to engage (ensure during preparations, that second space is available

STUDY
- Outcome not achieved.
- Learning from attending parent group discussed with IHS ASG Family Links groups
- Agreement that not being able to ask / brief parents beforehand was problematic . More may have engaged if they had felt prepared / been consulted before the meeting.
- Time of year likely a factor in low number of parents in attendance.
- 50% of parents interested in taking part – is this a typical average? Unrealistic to think that all parents in group will engage.
- All parents in group were happy with our presence – just not the topics. Friendly, warm facilitation approach was effective.

Act | Plan
Study | Do

PLAN
Objective: To gather the views of three parents (from the ASG) on issues pertinent to Family Links project steering group by dropping into an informal meeting of parents in one of the schools.
Planning: Consult ASG head teachers about suitable groups and seek recommendation about best one to attend – date, time and venue known / Who will attend the meeting to speak to the parents and agree on an approach? / Find out if we can contact group members in advance to provide information and ask for their agreement about us attending / Assemble clear and concise information about project and steering group to give to parents at the meeting
Prediction: Parents will welcome the opportunity to share views on key issues in an informal and familiar environment and with warm, friendly approach. We will achieve target of 3 parents involved.

DO
Consulted head teachers and selected a parent coffee group at Dalneigh – Tues 3rd December.
Prepared and printed clear and accessible handout for parents on key steering group questions
- Bought biscuits – including gluten free
- Sandra and one of Family Links workers met to prepare, attended – no way of letting parents know beforehand. 4 parents in attendance that day – fewer than usual – close to Xmas given as reason.
- Two parents engaged and two did not, citing lack of forewarning, other things to talk to one another about (Christmas preparations), not wanting formal conversation in this informal peer space.

Area of Learning:
Understanding how to really focus on ONE PDSA cycle arising from ONE change idea. I had actually carried out TWO PDSA cycles (I attended a second parents' meeting in January), thinking this was all part of the first test of change – failing to recognise that I had actually adapted my approach with the second meeting. Our change idea should have said "Seek the views of parents/ carers outside of steering group meetings by attending **an existing parent / group**" NOT "**existing parent / carer groups**"

Successes:
This approach does work (50% of parents engaged) and can be further adapted to be more effective. Being prepared, kind and lovely is extremely important when seeking to engage with new people, as is ensuring that they also get a chance to feel prepared.

Challenges:
Assuming everyone would welcome the chance to have a 'voice' in decision making processes if given the opportunity. Learning to be precise about framing and carrying out a test of change.

FLASH REPORT Cohort 9 Cai MacIver

QI Project Team:
Cai MacIver & The Mamma Tribe

QI Project Aim:
By March 2025, 100% of Mamma Tribe members will have access to TURAS Learn which aligns to Pillar 4 of the WFWP and the Scottish Government Routemap for Holistic Whole Family Support
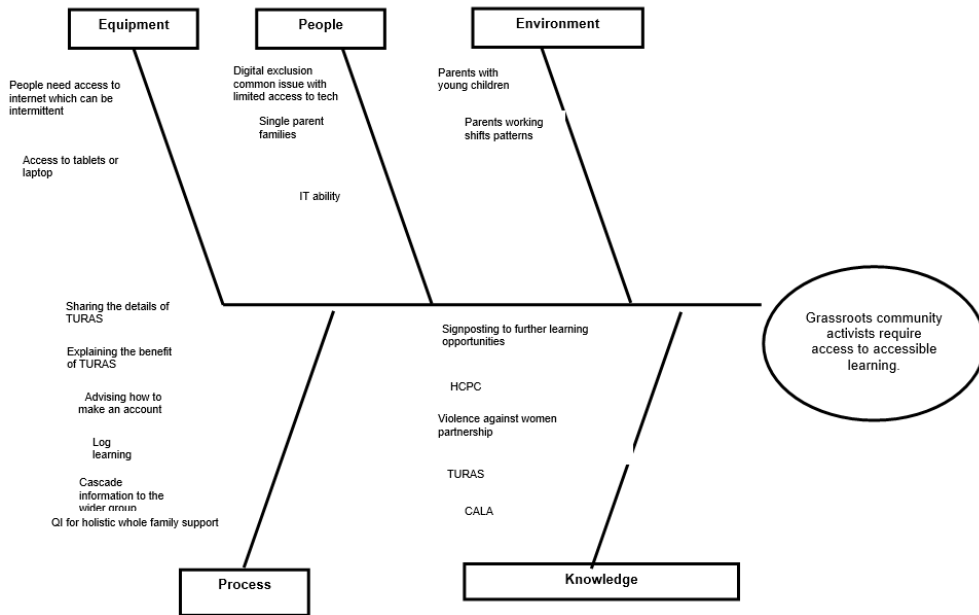
Stage of QI Journey:
Testing changes

The Quality Improvement journey:

Change Idea:
Test using Turas as an online educational resource for training needs expressed by the Mamma Tribe

QI TOOL used – Fishbone

Equipment
- People need access to internet which can be intermittent
- Access to tablets or laptop

People
- Digital exclusion common issue with limited access to tech
- Single parent families
- IT ability

Environment
- Parents with young children
- Parents working shifts patterns

Process
- Sharing the details of TURAS
- Explaining the benefit of TURAS
- Advising how to make an account
- Log learning
- Cascade information to the wider group
- QI for holistic whole family support

Knowledge
- Signposting to further learning opportunities
- HCPC
- Violence against women partnership
- TURAS
- CALA

Grassroots community activists require access to accessible learning.

ACT
- From the feedback received, this is a useful portal, easy to access. The information will be adopted and disseminated across Mamma Tribe membership

PLAN
- Share link to TURAS and the 'joining info' video with 1 representative of the group
- Identify the most accessible time of day
- Identify the most useful portal for accessing TURAS Learn
- Identify any barriers or challenges that transpired.

PREDICT
- They'll feel more confident to share this training resource among membership
- Some difficulty registering /logging in.
- Poor internet connection hampering progress.
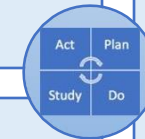
STUDY
- Whilst phone was a good search option, accessing the courses on laptop was easier.
- Whilst not a bad thing, they acknowledged there was too much choice and identifying where to start was challenging.
- Navigating the site was easier than they thought.
- They liked that they could access training at a convenient time to them, PLUS being able to start a session, save it and return provided the flexibility they needed. This aspect also helped those living with intermittent internet access.

DO
- Link sent to representative with guidance video via email
- Follow-up teams call to ensure understanding of access options
- Representative accessed TURAS in the evenings
- Follow up call to explain and build confidence in TURAS as a valid, certified route to free training

Area of Learning: Mamma Tribe members are a brand-new grass roots organisation. The SA Toolkit and locality coordinator support raised their awareness of learning needs but also where opportunities existed for training opportunities. It was agreed that they would access TURAS in the first instance.

Successes: The Process worked, evidence of strengthening Pillar 4

Challenges: Defining the project aim and making micro enough to be of use to the group. I would have found this task more beneficial if we had doubled up or collaborated as a team

FLASH REPORT Cohort 9 Sadie Kevill

QI Project Team:
Sadie Kevill

QI Project Aim: By January 2025, the Poverty and Health groups will be collaborating to improve outcomes of the Financial Inclusion Pathway by developing two shared actions. Building overtime to develop 12 shared actions by December 2025.

Stage of QI Journey:
Creating Conditions – Met with Toni Barker / Jennifer Baughan
Understanding system – Met with Toni Barker
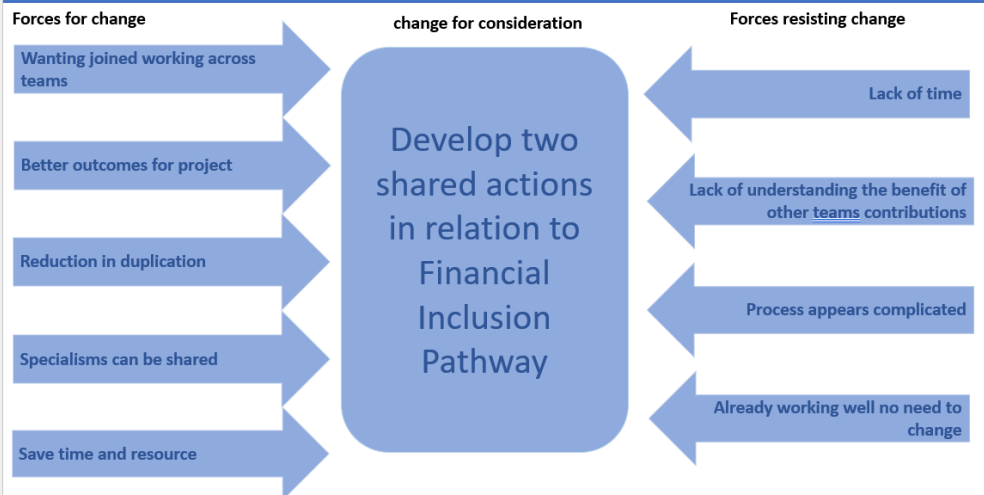Developing Aims – Met with Mentor

The Quality improvement journey:

Change Idea I am going to test below:
Facilitate the development of two shared actions in relation to the Financial Inclusion Pathway.

Area to insert pictures of QI Tools Used:

Forcefield analysis

Forces for change	change for consideration	Forces resisting change
Wanting joined working across teams		Lack of time
Better outcomes for project	Develop two shared actions in relation to Financial Inclusion Pathway	Lack of understanding the benefit of other teams contributions
Reduction in duplication		Process appears complicated
Specialisms can be shared		Already working well no need to change
Save time and resource		

ACT- Adapt
The Poverty and Health Representatives can take the agreed actions forward and continue to meet to develop and refresh the financial inclusion pathway work. They will continue to meet and take back actions to wider group to make this work move forward with opportunity to scale work out across teams. Adaption - would request updates of progress prior to meeting to assist discussions.

STUDY
Both the Poverty and health group were keen move forward collaboratively with identifying shared actions. I hadn't predicted one group had completed a lot of work already so, we needed more information. This work did require a refresh which enabled both groups to plan together how this was to be achieved. 2 shared actions identified additional training to be provided, and resources updated

PLAN
Identify key stakeholders by looking at individuals representing groups that can affect change. Small representation at first, make take time to establish discussions, I predict stakeholders to be engaged in the aim and want to develop collaborative working on project.
Arranged two short teams' meetings
Will take notes at meeting to record progress.

DO
Had initial informal discussions with key stakeholders, this was so everyone was aware of the purpose and highlight shared workstream.
Planned 2 team meetings.
Initial difficulty getting time in the diary within time frame.

It was identified at the first meeting both were at different stages and work had already started.
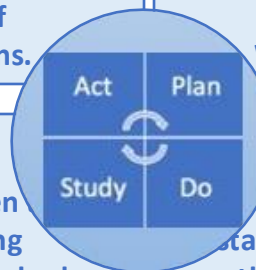
Area of Learning: Successes: 3 successful meetings to discuss agreed priorities, both group have a better understanding of where the work has progressed and have identified actions to take forward collaboratively to refresh and strengthen the Financial Inclusion Pathway work. A lot more understanding an opportunities has been presented, access multiple data sources how many referrals and wider spread across teams.
Challenges: Co-ordinating people's diaries to meet during timescale, Initial meeting wasn't as expected as we didn't have a full picture of progress already made