



# Rapid Improvement Process

## Process, Principles and Guidance

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DEVON COUNTY COUNCIL

**SOCIAL SERVICES**

# Rapid Improvement Process

## Process, Principles and Guidance

### CONTENTS

	What is the Rapid Improvement Process? . . .	1
Step 1	Define Situation and Improvement Aim . . . . .	3
Step 2	Identify Problem(s) . . . . .	4
Step 3	Temporary 'Quick' Fix . . . . .	5
Step 4	Identify the Root Cause(s) . . . . .	6
Step 5	Identify Solution(s) . . . . .	7
Step 6	Action and Test the Change . . . . .	8
Step 7	Fully Implement . . . . .	9
	Useful Tools . . . . .	10/11

# What is the Rapid Improvement Process?

**Devon Social Services is committed to the continuous improvement of its services and the way they are delivered.**

The Directorate operates a range of regular management, planning, service/practice review and improvement processes that generate change, innovation and improvement and these are supported by Performance Review and information processes that tell the Directorate's managers and staff how well we are doing.

However, there are situations when these processes do not fully enable the degree or speed of improvement that is desirable. In particular where:

- ◆ we continually struggle to improve
- ◆ we have challenging improvement targets to achieve
- ◆ innovation and change is necessary
- ◆ problems repeat themselves
- ◆ staff experience difficulties in delivering what the organisation requires
- ◆ we find difficulty in utilising the full potential of our staff in service and practice improvement
- ◆ our 'normal processes or ways of working' will not deliver the pace of change or improvement that is acceptable for service users.

When this occurs we need to have a way of working that helps us overcome these difficulties. By using this model and involving front line managers and staff in identifying key problems, providing the time and space to find solutions and taking responsibility for making changes the process really works and does make a difference!

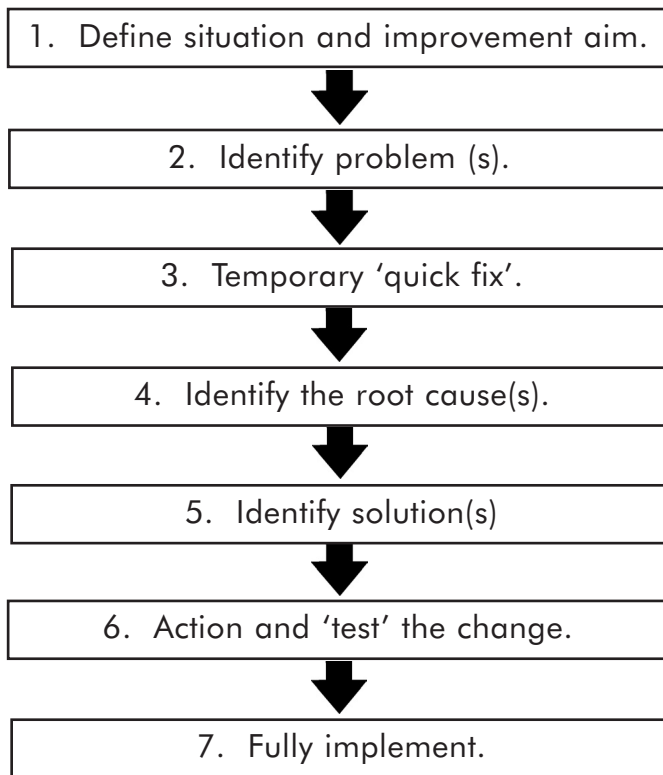
**The Rapid Improvement Process provides a commitment to:**

- ◆ space and time for staff and managers to work on improvement
- ◆ group and team effort
- ◆ a systematic approach.

This booklet provides guidelines on how to use the Rapid Improvement Process to help work on a particular area or difficulty over a specified period of time in a systematic way involving all relevant stakeholders in the process.

# The Rapid Improvement Process

## The simple seven step framework



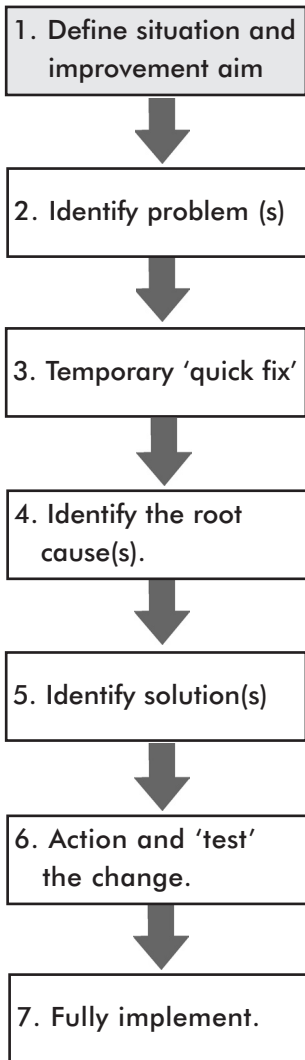
## How does it work?

1. Choose an area or difficulty that needs improving.
2. Identify a mixed group of stakeholders who are involved or have experience of the area of improvement across the whole system - Process Mapping (see diagram on page 10) may be needed to do this.
3. Find a pleasant venue away from work setting, preferably on neutral ground, without distractions.
4. Agree a number of sessions (up to six - may be part residential or full days).
5. Identify a lead manager and an independent facilitator who has previous knowledge of the Rapid Improvement Process).
6. Secure commitment from a senior manager to attend the first and last sessions and enable improvements to be implemented.
7. Agree ground rules within the group.

By using these simple steps a problem area can be systematically worked on over an agreed number of sessions, owned by the people it affects and jointly worked on in a positive way to achieve some results and solutions. The method and way of working can be slightly adjusted according to the area worked on.

# Step 1

## Define Situation and Improvement Aim



A one or two day event may take place at the start of the process to give scope to the area for improvement, identify key issues and challenges and the appropriate people to be part of the more intensive Rapid Improvement Process (RIP). The process may also result in a number of projects to be worked on over a period of time and can be prioritised.

### Describe and clarify

- ◆ **What are we trying to solve/improve?**  
The objective, targets, standards.
- ◆ **Why are we trying to improve?**  
Poor performance, raising expectations, better service for users and ourselves.
- ◆ **What aspirations do we have?**  
Small, medium, large, inspirational change.
- ◆ **How we will do it?**  
Familiarisation with tools and approaches to be used.
- ◆ **Who needs to be involved?**  
Have we got all the people who are involved in the activity or process.
- ◆ **How will we know the change has resulted in improvement?**  
Have we got the measures and information to evidence improvement.
- ◆ **What information do we need before we start?**  
Do we know how well we are doing, do we have the information to help us to identify where potential problems might be?
- ◆ **Do we have a clear understanding of the activity or process we are looking at?**  
Do we need to map the process, define and describe the activity to be able to identify where the problems might be?

(See Useful Tools diagrams on page 11)

## Step 2 Identify Problem(s)

Having agreed the area for improvement and the group of people to work, identify:

What are the problems with the present situation that prevent us from achieving our aim or improvement?

It may be that there is an obvious problem or difficulty that needs to be evaluated and solved or there may be a number of problems. To ensure they are all identified, list what the problems might be.

It is important that everyone within the Rapid Improvement Group has the opportunity to contribute therefore the following rules are recommended.

1. List all ideas for everyone to see.
2. Take turns.
3. One idea per person per turn.
4. Opportunity to pass.
5. No criticism.
6. No censorship.
7. No discussion.

When the group has done this a number of times and there are many more passes than contributions, open it to the group.

### Clarify, sort and group

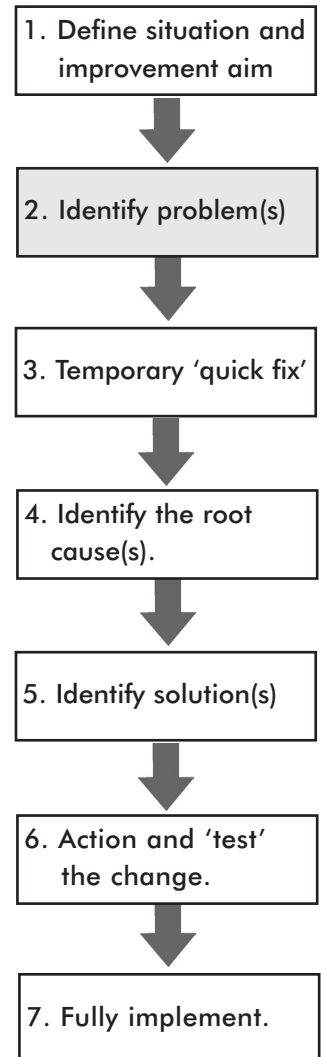
On completion of the list of problems take the opportunity for the group to ask and seek understanding about them if they are not clear. There may be duplication that can be amalgamated or it may be helpful to group the problems into appropriate function categories for ease of evaluation - it may be that the problems relate to different parts of a work process or system and can be grouped against particular parts of a process.

### Problem ownership

It is important that the group works on problems it can resolve, and where problems are outside their control to identify where in the organisation this problem can be resolved most effectively; it may also be that different parts of the same problem rest at different levels in the organisation.

Put a mark (x) against each problem that the group can resolve as a whole or in part.

Where the problem can only be resolved by some other part of the Directorate or partner organisation please identify and mark appropriately. These problems should be recorded as a separate action list and passed to Senior Management for inclusion in the Locality, Divisional, or Directorate improvement process and plan. It will be important that decisions and progress on these actions are fed back to the improvement team.





## Step 4 Identify the Root Cause(s)

In the first instance select the problems that have the highest impact but also have realistic potential for improvement both in terms of effort (cost) and achieve-ability within the immediate future.

These problems can now be evaluated together and solutions pursued as one improvement project or taken as separate improvement projects by the team. (Note: problems that are not selected should not be lost, these can be returned to at a later stage as part of a continuous improvement programme).

Before moving on to look at what the root cause(s) of the problem might be, the improvement process and team should pause to consider any further information that may be needed in relation to the problem(s) identified. Should further analysis or information be required, stop the process and obtain the information.

**Having selected the problem, make sure it and the effect it is having, is clearly defined (with a measure of impact if possible).**

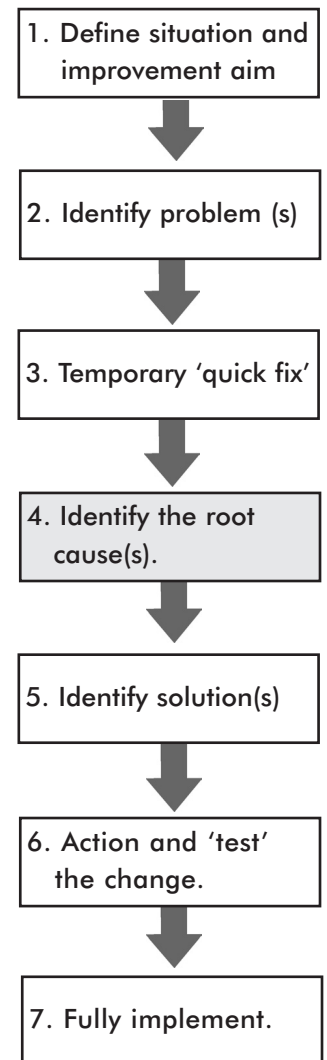
### Cause and effect analysis

A simple way to pinpoint the root of each problem is to take the current understanding of the issue and problem and work backward to identify the cause. The root of a problem is not always obvious, especially where current working practices are based on local custom, tradition or simply habit.

Now begin to identify what is causing the problem(s). There are number of approaches that can be adopted to this. 'Word-Storming' provides easy entry into the process ensuring every one is involved by using everyone's knowledge and experience. Using this process a number of tools can be applied, for example: Fish-bone diagram and process chart (see Useful Tools - page 11).

### Key Cause Identification

Having established the key causes the group can rank and select the most likely causes. A simple way of prioritising is to list the possible causes and then using coloured felt pens each person in the group each rate its priority in red, green or yellow (red being the highest priority). The causes with the highest number of red dots by the side of it are the highest priority etc.



## Step 5 Identify solution(s)

1. Define situation and improvement aim



2. Identify problem (s)



3. Temporary 'quick fix'



4. Identify the root cause(s).



5. Identify solution(s)



6. Action and 'test' the change.



7. Fully implement.

Having identified the key causes the group can now find the solutions. Again a simple route into this is by the team suggesting ideas for potential solutions.

In finding and evaluating the solutions the team may want to consider:

- ◆ Has any one else solved this before?
- ◆ Is there good practice and evidence we can draw from?
- ◆ Do we wish to consult with anyone else? (service users can have excellent solutions)
- ◆ Is this an opportunity to challenge our traditional way of thinking?
- ◆ Are there options that can be tried and tested?
- ◆ Are there some obvious actions that everyone agrees with and improvements could be made straight away?
- ◆ Small test of change - using a Plan, Do, Study, Act (PDSA) cycle- why not try out some ideas in a small way first and see what happens - learn from this and then fully implement.

# Step 6

## Action and test the change

### Action planning

After the problems have been identified, ideas for possible solutions generated and potential solutions evaluated, the group need to plan for testing and implementing the new ideas.

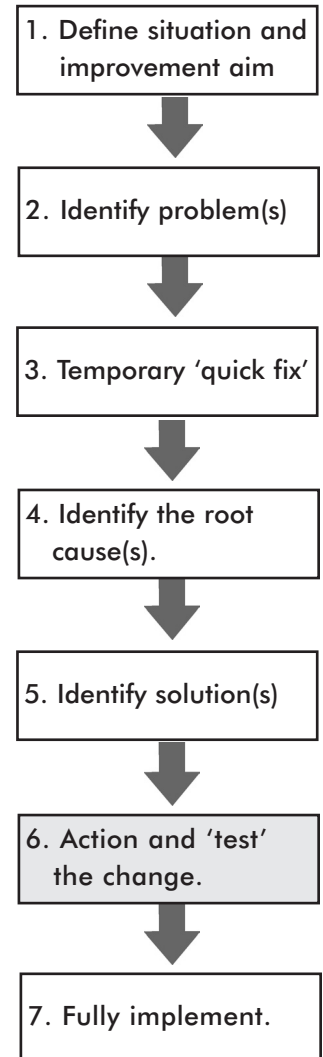
It is important to have a clear plan of action that is easy to understand and where no one is left in any doubt about what is happening next.

From the selected solution (s) create an action plan as outlined here being clear about what action need to be taken, who will do it and when, how will the action be taken and how can success be measured.

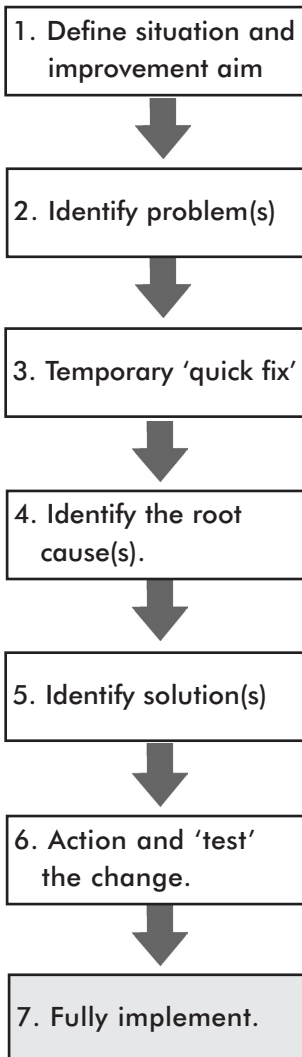
Small tests of change can be tried with one or two service users, teams or groups of staff.

### Suggested template for an action plan:

What needs to be done?	Who is responsible?	How will the action be taken?	By when?	How will we measure its success?



## Step 7 Fully implement

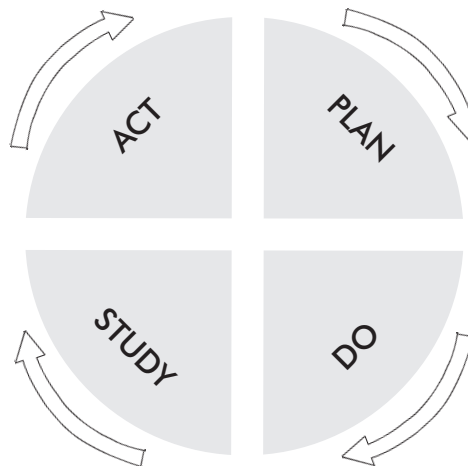


In implementing the solutions a way of monitoring should be created to see what effect it is having, leading to review of its success and identifying any further changes that may be necessary. If it has been successful share it with others as they may have been looking at the same problem.

The group should also review their individual learning from the project and share this with their peers and manager, and use in contribution to their own personal development.

### Model for improvement PDSA cycle (Plan, Do, Study, Act)

- ◆ What are we trying to accomplish?
- ◆ How will we know that a change is an improvement?
- ◆ What changes can we make that result in improvement?



(Source: NHS Modernisation Agency Improvement Leaders Guide 2002)

# Useful tools

## Process Mapping

Mapping the process at a high level to identify problem causes at key stages can provide more detailed analysis.

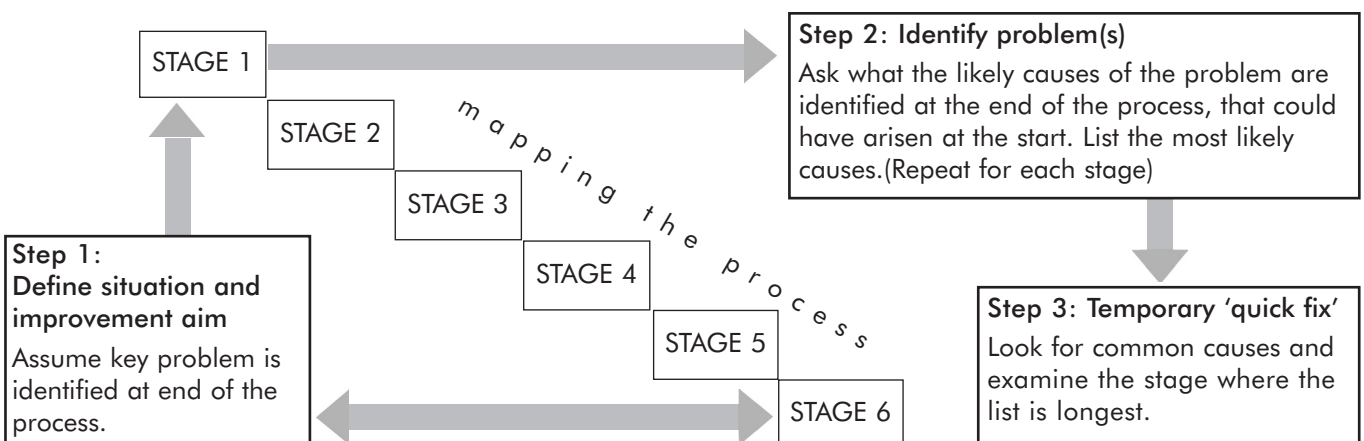
### Process Mapping to identify causes

Process mapping is a simple exercise and one of the most powerful ways to understand the real problems from the service user's perspective and to identify opportunities for improvement. An easy way to do it is to use post-it notes and have a start and end point breaking down each step in the process. Once the process is mapped, questions can be asked about the causes.

- ◆ How many steps are there in the process?
- ◆ How many times is there a hand over between one person to another?
- ◆ What is the approximate time taken for each step?
- ◆ If there is a delay at any stage keep asking why.
- ◆ What are the causes?

(Source: NHS Modernisation Agency Improvement leaders guide 2002)

## Process Mapping Diagram



## TPN analysis

A TPN analysis is useful at some stage to determine what the group can do themselves and whether the causes are within control of the group. For each cause/idea the group decides if it is:

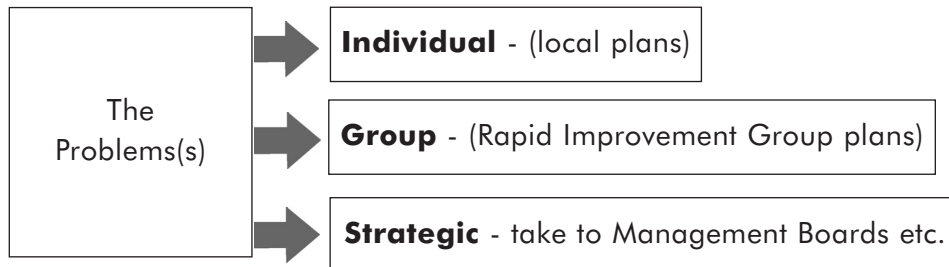
- T - **totally** within the control of the group
- P - **partially** within the control of the group
- N - **not** within the control of the group

Decide how the 'T's can be taken forward, identify who else needs to be involved to move the 'P's forward and decide where the 'N's need to be referred.

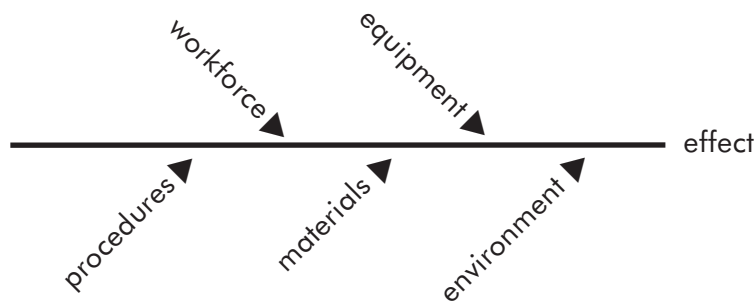
(Source: NHS Modernisation Agency Improvement leaders guide 2002)

# Useful tools (continued)

## Step 1: Defining the Situation and Improvement Aim



## Step 4: Identify the Root Cause(s) Ishikawa (Fishbone) Diagram



*(Source: Japanese Quality professional widely known for the Ishikawa diagram also known as the fishbone or cause and effect diagram. He is also known as Ishikawa Kaoru)*

Construct a 'fish bone' diagram as above and list the probable causes - the group can decide the headings/classifications, for example:

- ◆ ensure all participants are clear about the 'effect'
- ◆ draw a broad arrow from left to right towards the effect box
- ◆ decide on the headings for the branch arrows
- ◆ work with each arrow in turn and get the group to list all possible causes or factors on post-it notes. Ask each participant to place them on the arrows
- ◆ work with each of the branch in turn and group related thoughts
- ◆ look for gaps and readdress if necessary.

Possible headings could be about:

1. Workforce the people doing the work
2. Equipment and machinery used to do the work
3. Policies and procedures how the work is done
4. Materials required to do the work
5. Work environment and facilities where the work is done.

# Information from Devon County Council **SOCIAL SERVICES**



## **Rapid Improvement Process**

### **Process, Principles and Guidance**

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