Using QUBE to drive innovation and change; an NHS case study for the Scottish UTI network

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December 2015

A new way of working
Our interest started when a colleague told us she’d found a new way of working - on a 3D fully immersive platform, called QUBE. QUBE enabled her to work with a geographically dispersed team of people who had never met in person. She said that within 15 mins, the team were working effectively and the project was being developed at real speed. The organisation (NSS) had approved wider testing of QUBE to help drive innovation and apply new ways of working. She suggested we attend the ‘Accelerating Change’ programme on QUBE with other NHS colleagues, to learn how to work differently, based on ‘new world principles’: (www.worldaftermidnight.com)

Accelerating change
The accelerating change programme started with a “gathering” which allowed us to familiarise ourselves with working on QUBE, ensuring we could all navigate around the Qubicle and find out who was there and what they were working on. The programme required us to bring along a project, to apply our learning directly to our work, and to then share that learning with our teams. This meant that we remembered what we’d learnt and our teams benefited immediately from new knowledge, learning how to do things differently too.

By meeting on QUBE, we learned that if our project is stuck in the fog, there is a way out of it!

Sharing our experiences
Over the course of 4 workshops and group tutorials, we discovered new ways of working to ensure we had engaged our stakeholders, aligned our teams on the deliverables and understand new ways to develop communications, business cases and project plans quickly. We also learned how to deal with different types of project and that we can manage risk more effectively if we remember the plot of alien sci fi movies!

We formed a network of QUBE champions, and finished off with a QUBE show and tell of what we’d done in such a short time to our Directors. We found we loved working on QUBE, it was fun, effective, saved time and most importantly made us behave in a more collaborative way. It helped us really ask ourselves questions around our assumptions and proposals and develop new ideas and creative solutions to meet the needs of our customers and stakeholders. We could immediately apply all of our learning to our work and engage our teams in new ways of working.

QUBE tutorial

Personal Stories Told by participants
https://www.youtube.com/watch?v=SCUy_WcDI2s
Delivering change @ speed

Once the initial course was over, we wanted to run our own project on QUBE. This was the Scottish National Urinary Tract Infection (UTI) project which Health Protection Scotland had been asked to lead. A project Qubicle was set up for our team and one of our super-user colleagues facilitated us through the work. Regular weekly “drumbeats”, were set up to drive the project forward. These were at the same time and day each week (no more trying to find suitable times for everyone to meet) and we never cancelled or rearranged them. Amazingly we had nearly 100% team turn out every week. We started each drumbeat with our “Hopes and Fears” to clarify what we wanted to do in the session (no more agendas) and always finished with a “Sticky steps scheduling” (actions for the team based on the work we had agreed) so no more writing up minutes. Even more impressive is that everyone did their actions before the next drumbeat.

Developing our project using Performance Enhancement Tools (PETs) embedded in QUBE

We came to QUBE with a project plan spanning 18 months. First, we intended to invite all our stakeholders to an event to tell them about the network and bring them on board. But was this the right thing to do? Would it be effective and deliver what we needed? How much would it cost? Our facilitator suggested a 4D event hosted and facilitated on QUBE - a workshop for around 15 key stakeholders. We challenged our thinking with different PETs (performance enhancement tools) that examined who our stakeholders are and their levels of engagement and support for the project. Just 20 minutes in, we realised that a national event may have the opposite effect of what we were trying to do, quickly making us consider alternatives, with full support from the steering group.

Just 4 weeks later, through our weekly drumbeat, we had come up with new ideas, researched options, developed a solution and started to test this solution with the steering group. Not only was the solution a novel way to create a network and best practice for Scotland in UTI infections, but it also delivered a mechanism where users monitored best practice within their own peer groups. HPS co-ordinated but did not dictate best practice, ensuring effective uptake to improve health outcomes. We continued hosting QUBE workshops with stakeholder groups to help them meet the needs of their peer groups in delivering best practice health care. Just 6 months later, we realised we had planned drumbeats we didn’t need - the project had effectively been delivered over a year early. We had spent less time on it – estimating that the work we did in our drumbeats meant that we achieved things 50% more quickly. No-one travelled for meetings or workshops - saving even more time and we’d come up with a solution through which the community could own, promote and self manage their own best practice, effectively embedding this practice across all stakeholder groups, so that maximum improvements to health can be achieved.

Conference poster describing the UTI network approach

Overall outcome
An innovative solution delivered:
- In half the time, at
- Reduced costs, with
- Less resource effort, but with
- Collaboration and engagement from over 50 stakeholder groups in a novel way, to
- Ensure success, and
- Improve the health outcomes of patients

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