



SGLS Pilot – Draft Charter

We work together to develop and test out a virtual small group learning approach to collaborative QI using HDC measures

Our Goals

- Demonstrated sustained improvement in a clinical outcome with small scale projects for a group of practices
- Enhanced collaboration across practices
- Increased understanding and practice of QI process with PDSA (Plan-Do-Study-Act) cycles
- Enhanced joy in work
- Enhanced sense of community with other care providers
- Spreadable approach that other groups can replicate
- Demonstrate virtual small group learning
- Develop materials for future SGLS offerings
- Collect ideas for HDC Discover app improvements
- Assess the value and do a cost-benefit analysis of this approach

Principles

- **Trust** - we recognize that improvement work requires vulnerability, and trust is needed as a bedrock for successful collaborative QI
- **Confidentiality** - we will not spread detailed information about individual practices or clinics outside of this group unless there is consent, and we will hide identifying labels for others' data if presenting to any external audiences
- **Context dependence** - we do not use the measures for judgment or performance assessment, and instead recognize that they are dependent on local contextual factors
- **Diversity of opinion** - we invite and value divergent views, and take a learning approach with curiosity
- **Spread successes** - we find out what works and then share this with hopes of increasing impact
- **Data-informed** - where possible, we use data to guide our decisions
- **Highly adoptable QI** - we use quality improvement methodology in our efforts, with a focus on change ideas that will not lead to excessive workload for frontline teams
- **Rational topic selection** - we consider the following when deciding on our collective improvement topic
 - Good evidence to support the efforts to improve, within our realm of control and influence
 - Easy way for data capture, ideally with HDC measures

- High relevance to our practices
- High potential for positive impact on patient outcomes
- Easily defined and scoped
- Involvement of clinical team members
- Excitement or timeliness around topic
- **Human connection** - we value the social element of this group, and are fully present with cameras on whenever possible
- **Creativity** - we see this group as a chance for members to be creative and propose new innovative ideas
- **Fun** - we don't take ourselves too seriously, and recognize that sustained joy in our work means we need it to be fun!

Members

- **Lead Facilitator**
- **PSP support**
- **HDC support**
- **Participants**

Responsibilities

- **Session 1** - come together to orient to purpose, agree how to work together, share data, create a custom group, and brainstorm possible topics
- **Session 2** - review in detail and develop a list of possible clinical topics, and *following the end of the session*, select a topic to work on together, deciding on shared outcomes measures
- **Session 3** - review updated outcome data after new data load on HDC Discover, share progress on testing changes (what worked, what didn't), learn from others to inform next change ideas to test
- **Session 4** - again review updated outcome data after new data load, share progress, and start to think about making changes sustainable
- **Session 5** - again review updated outcome data after new data load, share progress, discuss impact on patients, consider spread or transition to new topic

Decision-making

- Decisions are made by consensus.
- We will use voting to select a clinical topic.
- When there is disagreement, we will try to find a workable way forward that everyone agrees is "safe to try", even though it may not be everyone's preferred approach.
- Where possible, we will use data to inform our decisions.

Measures

- **Clinical topic measures**
 - *Outcome*
 - *Process*
 - *Balancing*
- **SGLS measures**
 - Number of physician-hours spent in virtual meetings
 - Number of PDSA cycles completed
 - Number of changes implemented
 - Number of change ideas tested
 - Proportion of participants who have involved client voice
 - Number of coaching hours

When to disband this team or renew this charter?

- The first round of this SGLS is expected to be around 9 months in length.
- At the end of this, the group may decide to continue working on the same topic, switch to a new topic, or disband.