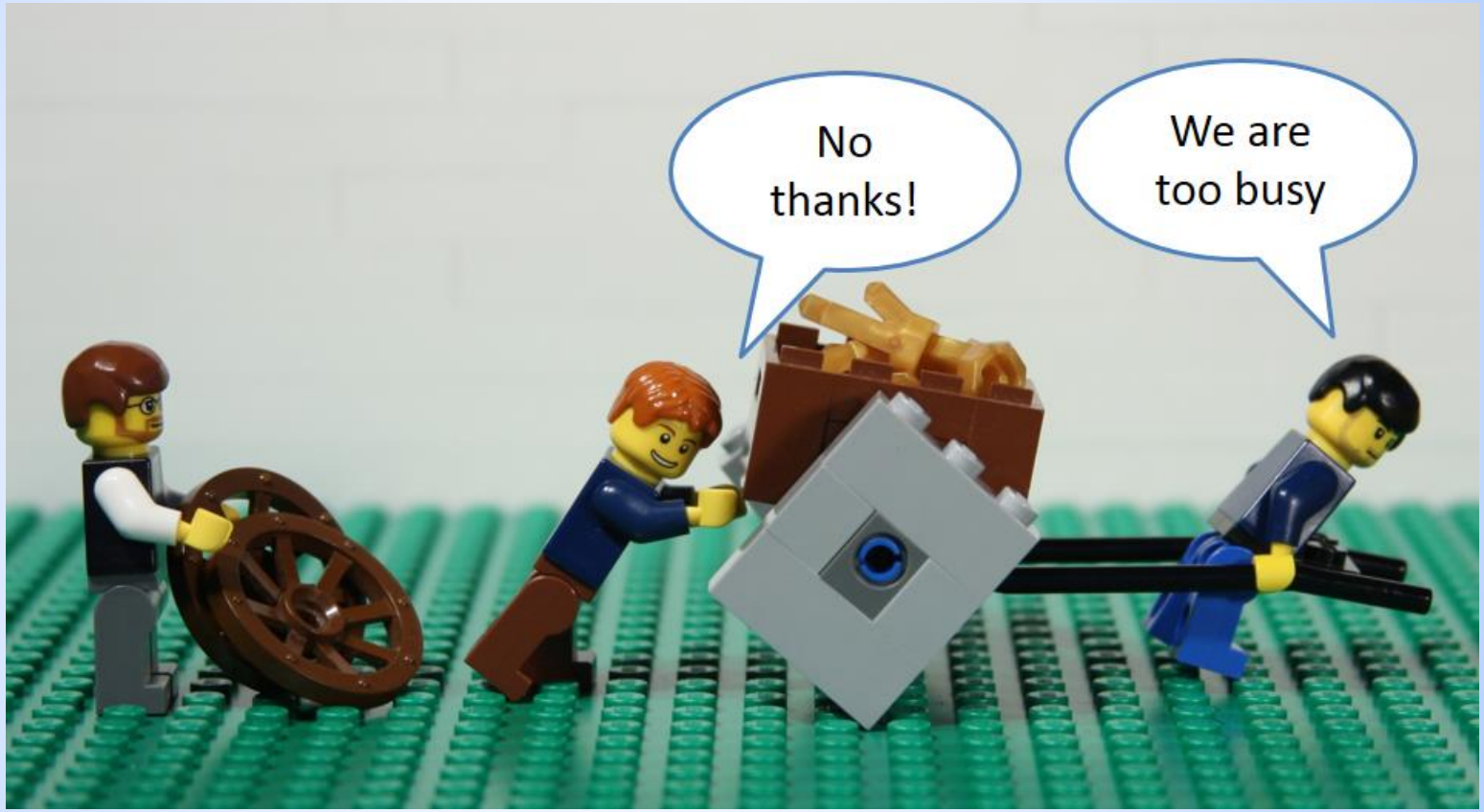
Developing a trauma informed children's services workforce: Supporting practice change in Argyll & Bute

11 December 2019

Making the change

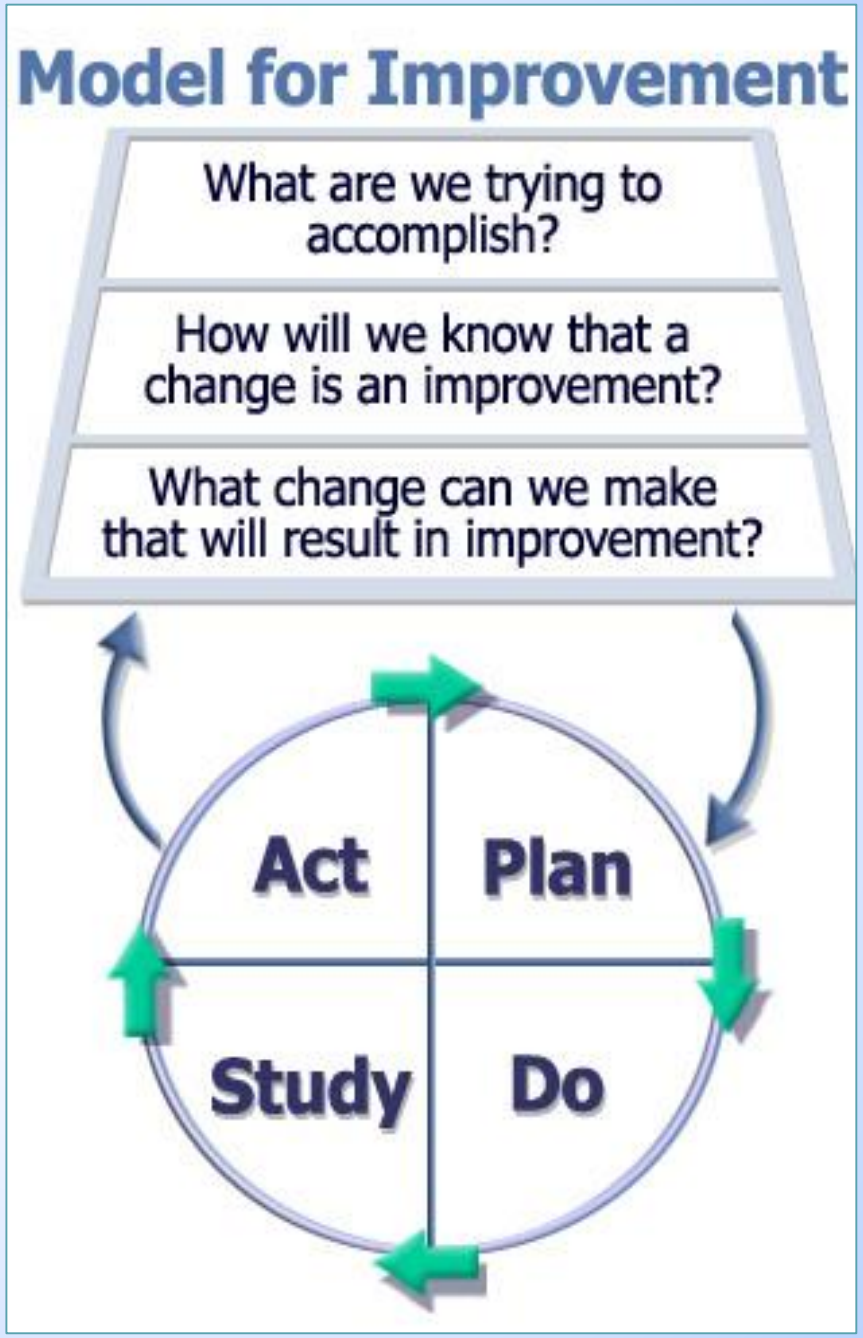
- What have I learned that will impact on what I do, in my role / within my organisation, on a day to day basis?
- What can I do differently as a result of what I have learned?
- What will this look like? How will I, my colleagues, clients know that something different is happening?

- "The **definition of insanity is doing the same thing over and over** again, but **expecting different results**."


No thanks!
We are too busy

The Thinking Part

The Doing Part



Change ideas - what changes can I make that will result in improvement?

- **Continuity of relationship** between professionals and families over time?
- **Personally greeting every child** coming in to the class at the start of each day?
- Our organisation supporting a **learning culture** in relation to trauma?

Refining an aim statement

- What are we trying to accomplish (aims)?
- Measurable (by how much?)
- Time specific (by when?)
- Define target group (for whom?)

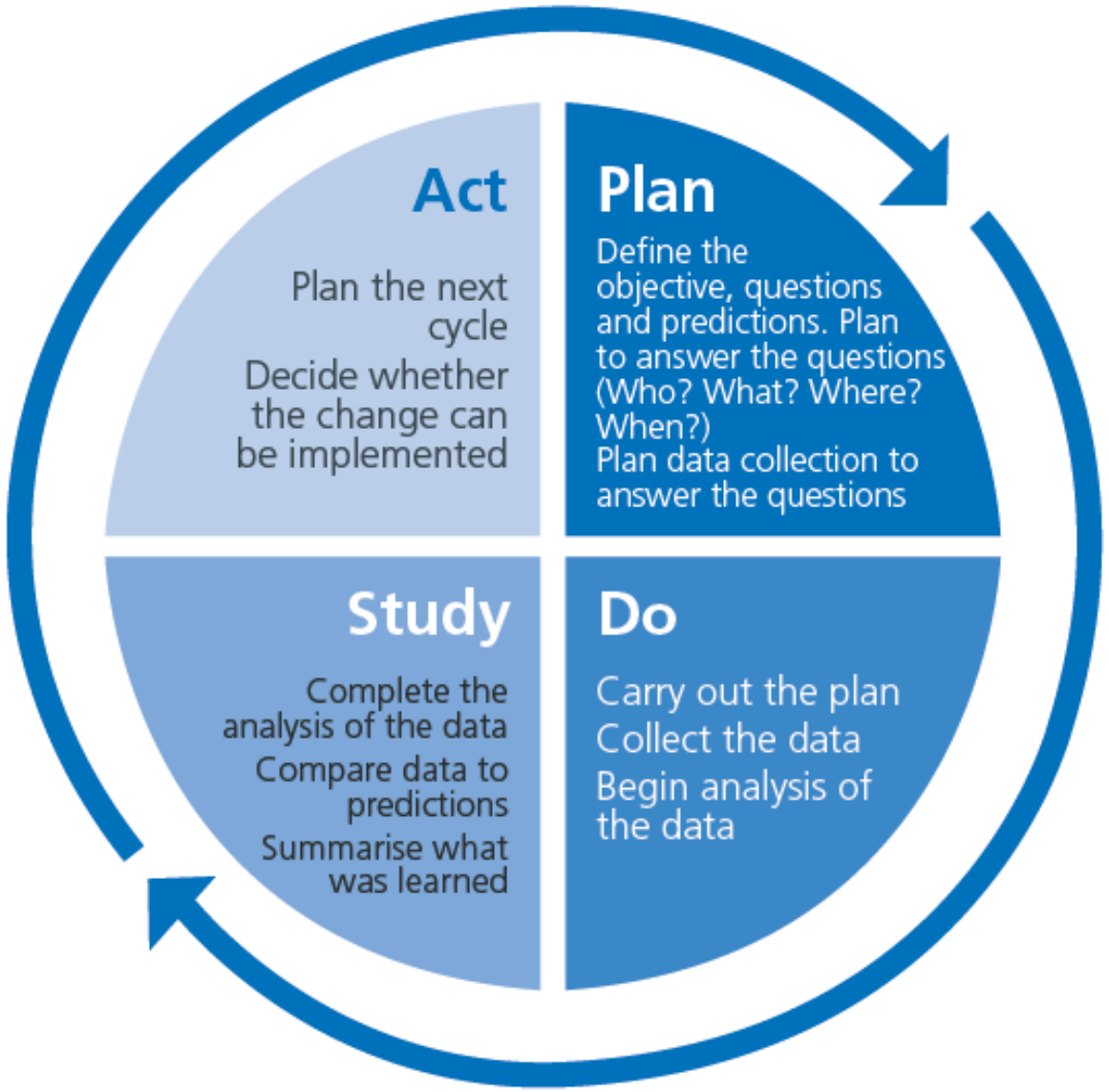
Considering measures

Don't ask, 'What will we measure?'

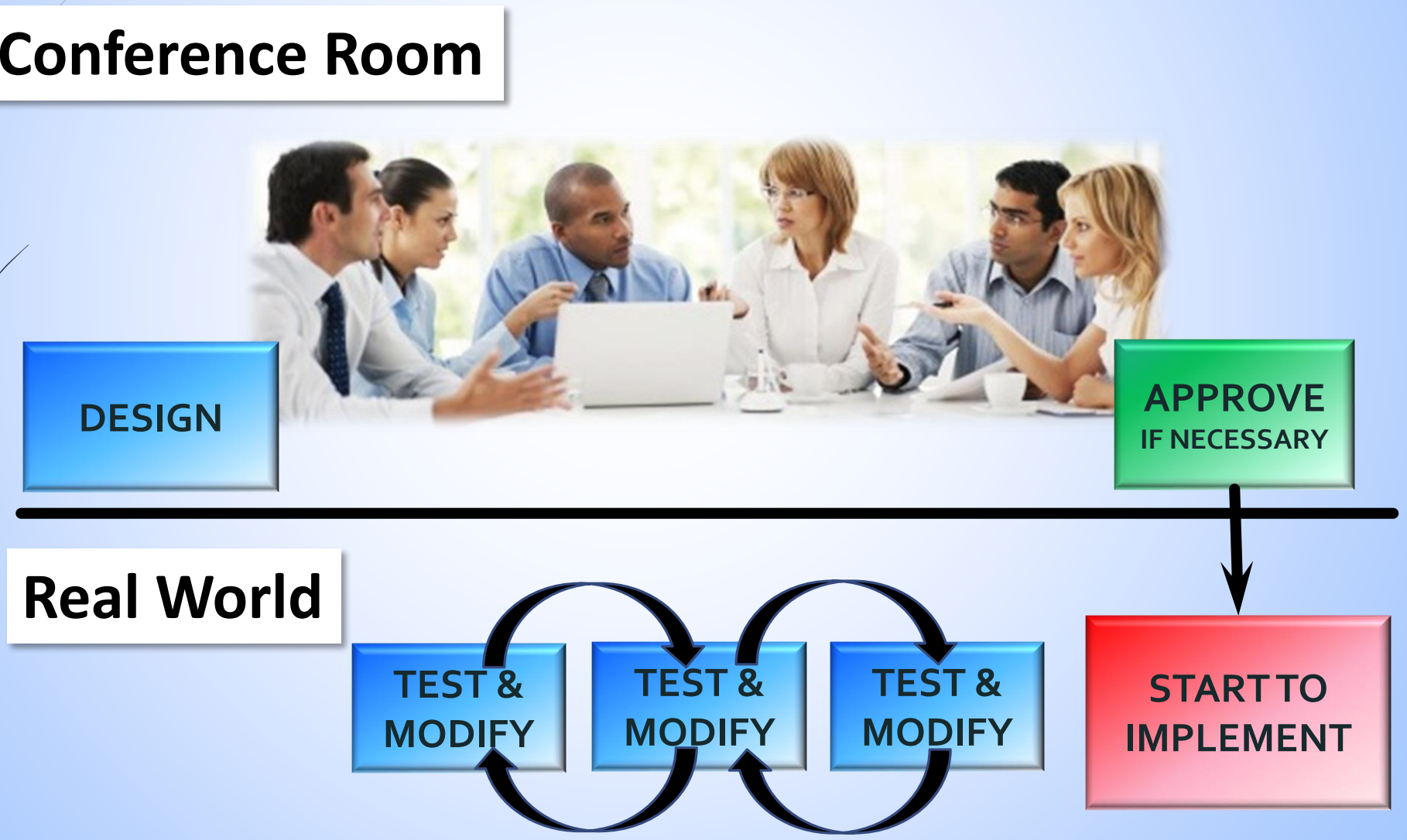
Ask, 'What do we need to know?'

Then figure out if you can measure it.

PDSA cycle – the doing bit



The Quality Improvement approach



Tips for success

- Plan **multiple cycles** to test ideas
- Test on a **really small scale**, for example, test on one family, or with one practitioner, at one meeting and increase the numbers as you refine the ideas
- Test the proposed change with **people who believe in the improvement**. Don't try to convert people in to accepting the change at this stage
- Only implement the idea when you are confident that you considered and tested **all the possible ways of achieving the change**

Keep measuring

https://improvement.nhs.uk/documents/2142/plan-do-study-act.pdf