

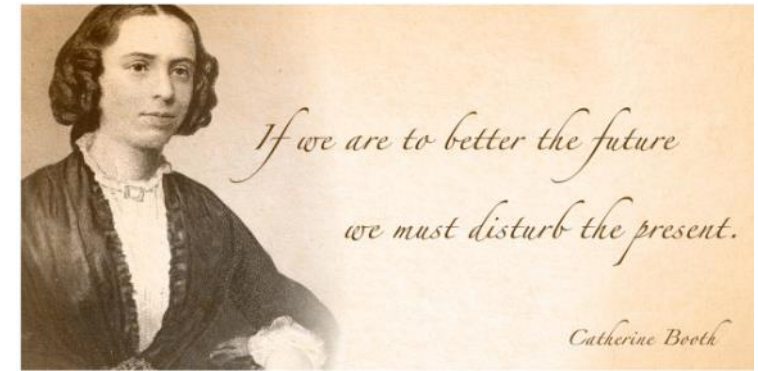
# IMPROVEMENT IS A HABIT

## KEY INGREDIENTS FOR CONTINUOUS IMPROVEMENT

1. Becoming a Systems Thinker
2. Being able to talk about 'what if we'
3. Being prepared to admit it is not good enough yet
4. Never forgetting 'why' what you do matters



# Being positive & disturbing the status quo- as a team and as a professional



"If we are to better the future we must disturb the present." — Catherine Booth

Look at the bigger picture

Talk about ideas and listen to those of others with an open mind

Think about change over time and how one improvement might feed into another

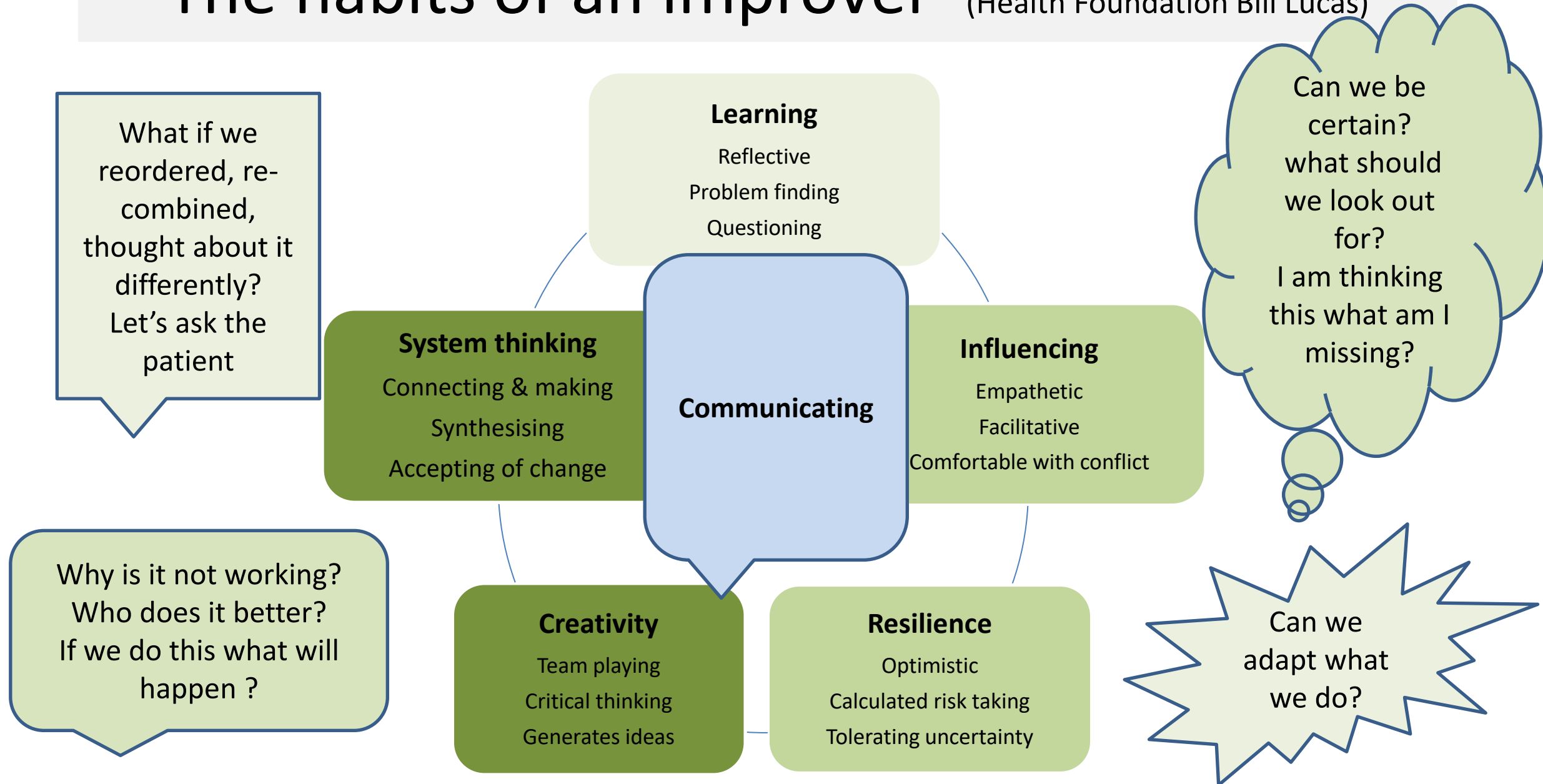
Be patient when things don't go as well as hoped

Think of what would help get over a hurdle don't blame someone/ something

Check how things are going- better to know a tweak is needed now than later  
Don't be afraid to ask- 'so if we do this what should go right & what might go wrong'

# The habits of an improver

(Health Foundation Bill Lucas)



Describe how your team developed their improvements in 2025 so you can be sure to improve on them further in 2026

Did we reorder, re-  
combine, think  
about it differently?  
Did we ask the  
patient

Why was it not working?  
What idea did we have ?  
Did we experiment/test?

What will we  
look out for to  
tell us it's not  
as good as it  
needs to be ?  
Is something  
missing?

Did we adapt  
what we did  
or have a  
complete  
change ?

# Continuous Improvement in the delivery of best science and patient experience requires more than education and intermittent training

## What **enables** continuous improvement?

- **KNOWLEDGE** of the system and its current performance
- **CONFIDENCE AND CAPABILITY** to make change when it's needed/ before an accident
- **TEAM ALERTNESS** and team performance of the highest level
- **PATIENT AND PERSON INVOLVEMENT**

## What are **barriers** to team improvement?

**TIME** ( we don't prioritise getting better )

**RESOURCES** (we can't see how to use what we have better than we do)

**UNDERSTANDING** ( we worry about completely re designing what happens now)

**CONFIDENCE** ( we have forgotten that it is the front line where real quality is designed- we know what works and when it doesn't )

How might you have more enablers and reduce any barriers in 2026

Think how you might ensure in 2026 there is time,  
that you know what the priorities are  
that the team is well connected and patients and families are involved

### Enablers

- Knowledge
- Confidence
- Team alert to everything
- Patient & person involvement

### 2026 plans

### Barriers

- Time
- Resources
- Knowledge
- Confidence

# Where are our strengths and our weaknesses

- Learning
- Influencing
- Resilience
- Creativity
- System thinking

Can we Re engineer our talents

Figure 1 – The habits of improvers





# Engineering & Nurturing the Right Habits

## Leading and being positive with change

1. **Show up** – if you don't show up, nothing happens. Be there. Trust that your presence matters and can make a difference.
2. **Speak up** – Use your voice. Say what needs to be said. Ask the questions that need to be asked. Shape the agenda. Re-frame issues and give new perspectives.
3. **Look up** – Have a higher vision, bring values to the team. Know what you stand for. Elevate people out of the weeds and to a bigger picture of why our work is important.
4. **Team up** – Everything goes better with partners. Don't try to do it alone. Build a sense of partnership.
5. **Never give up** – Persist until done. Everything looks like a failure in the middle. It will take longer than you imagine, keep going anyway. Be flexible in your approach, but inflexible in your persistence.
6. **Lift others up** – Share success, share credit and give back once you have a success.

Rosabeth Kantor Harvard Business School – listen to her describe this, yes she gives US examples and it is from 2016 but 17 minutes will explain these universal components of leading change

<https://conorneill.com/2016/07/06/6-keys-to-leading-positive-change-rosabeth-moss-kanter/>

