

# Partnering for Quality Improvement

## Why partner for quality improvement?

The Institute for Healthcare Improvement (IHI)'s Model for Improvement is focused on working together with people who use, deliver and are affected by the work being improved.

The Model for Improvement's emphasis on working with others is highlighted by the word 'we' in the model's three key questions:

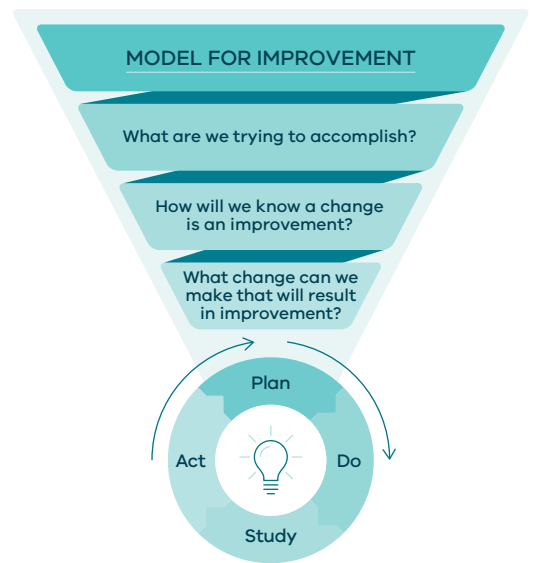
- What are 'we' trying to accomplish?
- How will 'we' know that change is an improvement?
- What changes can 'we' make that will result in improvement?

Working with those who use, deliver and are most affected by the areas of work:

- ensures a diverse range of perspectives, expertise and experiences are considered, which can broaden understanding of the

problem, inspire new ideas and help identify possible changes that might result in improvement.

- builds ownership of the quality improvement work.



## How will you partner?

The IAP2's Spectrum of Public Participation (Figure 1) is the model that the Victorian Department of Health uses as a guide for public participation and engagement. Consider where on the spectrum your current partnering approach sits and where you would

like it to be. Is your partnering practice more similar to the one-directional communication at the 'Inform' level or the multi-directional communication and shared ownership of decisions and outcomes of 'Collaborate' and 'Empower'?

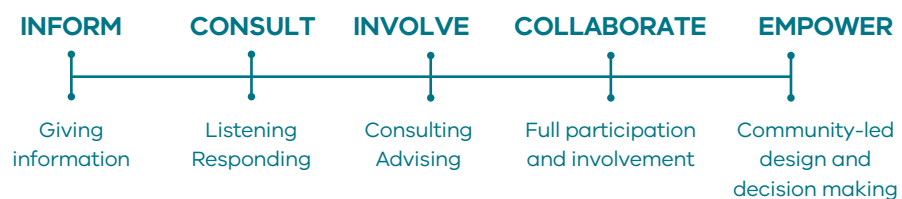


Figure 1. Spectrum of Public Participation, International Association for Public Participation (IAP2)

You should aim for collaborative forms of partnership where possible and be clear about what type of partnering you want use and why. It is important to establish and communicate the type of partnership approach early. This helps manage expectations for how the partnership will work, guides decision-making processes and supports stronger stakeholder relationships. When thinking about the expertise and perspectives that can inform your work, ask ‘who is most affected by and involved in the work we are doing?’ Be creative about how you engage. Is establishing a diverse and representative committee the only way to partner for your work? Perhaps you

have a committee that works with a critical friends group as well? Combine different types of partnering to ensure the project is informed by the right people, experience, and expertise. How will you create a safe space for people to explore new ideas, perspectives and share ownership of the work? Understanding power dynamics within a group, opportunities and barriers for inclusion are important aspects to creating and facilitating a safe and effective working collaborative relationship. Creating a shared agreement to guide your partnership’s ways of working is a great way to start exploring how to create a shared safe space together.

## Partnering in healthcare domains

The Partnering in Healthcare Framework was developed in 2019 as part of a collaborative process. Health professionals and lived experience representatives came together to identify important considerations when partnering with consumers in the health sector. Five domains were identified from those discussions:

- **Working together:** How will you work together with diverse stakeholders? What will you do to help create a psychologically safe space for partnering for all involved?
- **Personalised and holistic:** Understanding individual needs and practicing flexibility to meet these needs is critical to any working relationship. For example, consider how scheduling meetings during traditional work hours can be a barrier to engagement – consumers who work during the day or have family or care commitments may be unlikely to register their interest if meetings are not scheduled at

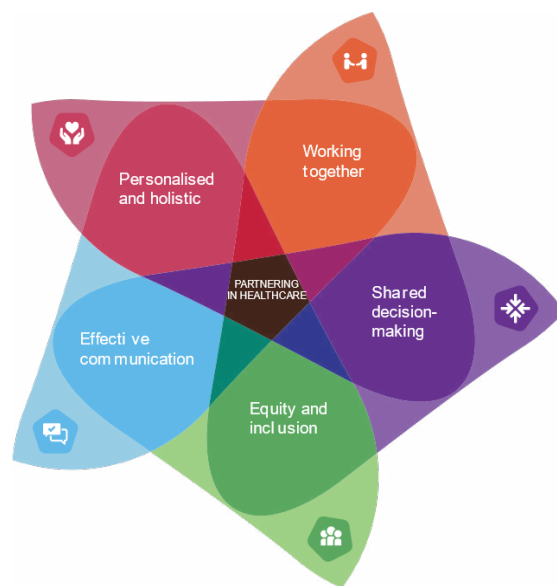


Figure 2: Partnering in Healthcare Framework domains (2019)

times they can participate. Consider adjusting meeting times to reduce this barrier to participation.

- **Equity and inclusion:** What decisions are you making about who is included in your work and who is not? What barriers and opportunities for engagement are you aware of and addressing?

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- **Effective communication:** Are you always clear about who the audience is? How are you adapting your communication to reflect the communication and comprehension needs of your audience?
  - **Shared decision-making:** How are decisions being made in your QI work and how much ownership do your

partners have over the decisions being made? Co-design and co-development work requires shared ownership of the decisions and outcomes. If this is not possible, be clear about where the opportunities for shared decisions are and what decisions might be more limited.

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### Additional resources

This toolkit comes with a Partnering Planning Canvas. SCV adapted this template as part of the Co-design NOW! Partnering in Action learning program and it draws on the work of co-design leaders [KA McKercher](#) and [Co-design.Tools](#). Use the canvas to think through who you need to partner with in your quality improvement work and how you might do this.

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### References

- Horvat, L. 2019. Partnering in Healthcare Framework. Safer Care Victoria. [Safer Care Victoria's Partnering in Healthcare Framework](#)
- Institute for Healthcare Improvement (IHI). How to improve. [How to Improve | IHI - Institute for Healthcare Improvement](#)
- International Association for Public Participation. IAP2 Spectrum of Public Participation
- KA McKercher. 2020. Beyond Sticky Notes.