



THE WORLD ACADEMY OF MEDICAL LEADERSHIP

FELLOWSHIP IN QUALITY
IMPROVEMENT (F.Qim)
PROSPECTUS

www.waml.uk

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The World Academy of Medical Leadership (WAML)

The World Academy of Medical Leadership supports the globalization, development and standardisation of medical leadership and quality improvement skills with doctors, across the UK and overseas.

Our organisation is based on the skill, expertise and leadership of a Faculty of qualified MBA and MSc Medical Leadership NHS Consultants supported by Improvement Academics.

The Fellowship in Quality Improvement

The **Fellowship in Quality Improvement** is a one year programme based on 600 hours of study covering all knowledge and tools to support the completion of a Quality Improvement project, that complies with the BMJ SQUIRE Guidelines for publication. The programme is designed for busy senior doctors and consultants who are seeking to develop new knowledge and skills in quality improvement and medical leadership.

The Fellowship is a work based programme designed to support you to undertake a 'real time' improvement project in your place of work. We will support you from the start to finish, from writing your aims, objectives and conceptualizing your problem statement, to producing a report / paper for publication.

Our view is that learning about quality improvement and successfully applying new knowledge is best done while in practice.

By the end of the Fellowship Programme in Quality Improvement Fellowship you will be able to:

- ✓ Apply the knowledge and skills required of the Academy of Medical Royal Colleges 'Quality Improvement - training for better outcomes' (2016) and GMC to a 'real time' Quality Improvement project
- ✓ Produce a report on the application of quality improvement knowledge and skills for dissemination in the workplace
- ✓ Use the framework of the SQUIRE guidelines to prepare an article for publication to disseminate learning from the Quality Improvement project

On completion of the Fellowship in Quality Improvement and after a publication of your work, you will become a Fellow of the World Academy of Medical Leadership and be eligible to join the teaching Faculty.

Objectives

1. To design a Quality Improvement project and register this project in the workplace
2. To identify the baseline of the problem using a range of different metrics
3. Use a range of Quality Improvement science tools and techniques to progress the QI project
4. To become a critical thinker in the development of skills in leadership, team work and change management and to reflect upon one's own contribution to the collaborative nature of quality improvement
5. To develop a collaborative strategy with knowledge of multiple methods, to engage patients and families in the quality improvement project
6. To produce a final evaluation report using SQUIRE guidelines for publishing the Quality Improvement report in BMJ Quality and Safety or presenting an oral or poster presentation at a national or international conference

The Fellowship in Quality Improvement (continued)

Modules

There are four Modules of learning for the FQim which include:

Quality Improvement	Teams and Team Working	Medical Leadership	Change and Transformation
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Each module has been designed to map against the

- General Medical Council's requirements for Leadership and Management
<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/leadership-and-management-for-all-doctors>
- General Medical Council Generic Professional capability framework
<https://www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/generic-professional-capabilities-framework>
- The Academy of Medical Royal Colleges standards for Quality Improvement
<https://www.aomrc.org.uk/reports-guidance/quality-improvement-training-better-outcomes>
- MBA benchmarks equivalent to the first-year study for an MBA Medical Leadership
 - Markets
 - Customers/Stakeholders
 - Finance
 - People
 - Operations Management
 - Information Systems

Module Assessment

Each module has its own assessment strategy with a separate learning activity, which collectively supports the final report / publication.

Programme Assessment

The Fellowship is awarded once a paper has been accepted for publication

Reflective Learning Activities

Reflective Learning (1 hour a week)

You will be encouraged to reflect on your weekly online learning to show the development of your learning throughout the Quality Improvement Fellowship year. These reflections on learning can be used to upload to your Continuing Professional Development e-portfolio to demonstrate continuous learning in practice. We will guide you to use your reflections in your final report to your organisation and or paper for conference presentation.

Core Features of the Fellowship in Quality Improvement (#FQim)

1. Coproduction with patients

The most successful healthcare systems in the world work with patients in co-production and service re-design. It has long been recognised that the involvement of patients and carers will result in a more effective, safer and quality service re-design.



Our leadership development programmes are delivered in association with patient and carer partnership organisations and we support you to engage patients in your work.

2. Clinician led

As Faculty of WAML, we hold highly accomplished Curriculum Vitae and have publication profiles with a track record of presenting our work at UK and International Conferences on Quality Improvement and Medical Leadership. We are clinicians first and foremost who have successfully mastered skills in quality improvement, medical and clinical leadership practice, teaching and research and who want to support you to also develop and apply these skills in your practice.

3. An ethos of 'learning' as well as 'teaching'

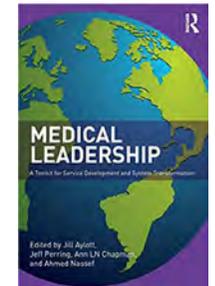
We facilitate you to develop skills in learning rather than simply to focus on 'teaching'. We will signpost you to the resources we have created that you may find useful to develop your learning in Quality Improvement in medical leadership.

4. Evidence Based Measurement for Improvement

We will support you to learn how to use 'time series' measurement in your quality improvement work and to apply a more systematic way to determine if a change is an improvement.

5. Guided Learning in Quality Improvement & MBA subject benchmarks

We have produced a series of online resources and have also published case studies to support the Fellowship Programme. The Case Studies are found in the book that supports the Fellowship in Quality Improvement which is : [Medical Leadership a toolkit for service development and system transformation.](#)



6. SQUIRE as standard

We will support you to learn about Quality Improvement that enables you to meet the requirements of the SQUIRE guidelines for publication. We will encourage you to publish and disseminate your work.

7. Return on Investment

We will support you to identify the initial cost of the problem that requires improvement. We will then support you to evaluate the impact of your work to provide a return on investment.

8. Competency Based

We will support you to develop a set of competencies to demonstrate competency in quality improvement and medical leadership.

Module – Medical Leadership

The aim of this module is to facilitate access to a range of medical leadership tools and to reflect upon the learning of these tools when applied to oneself. This module will facilitate learners to understand the theory that underpins the most effective design of medical leadership programmes. Leadership will be examined as a global concept and you will be supported to critically examine the application of leadership models and their relevance across the globe. We will support your development of new leadership models and approaches including collaborative leadership as a mechanism for medical engagement and to achieve co-production with patients and the wider multi-disciplinary team.

Learning Outcomes

By the end of this module learners will be able to:

1. Utilise a range of leadership diagnostic tools, reflect on their utility and the theory underpinning them and also consider how the results can inform one's own leadership development
2. Critically explore the submission of reliable and valid data for a 360 degree feedback process to inform the reflection on development for professional revalidation
3. Explore efficacy of leadership models to produce 'train the trainer' and 'democratisation of knowledge', demonstrating impact and outcome for the health population
4. Critically examine the globalisation of medical leadership and the application of medical leadership models and approaches across different cultures and health populations.

Indicative Content

What is leadership and the values of a patient centred leader? What is leadership as clinical practice and how best to apply it to achieve Patient safety and Quality Improvement (including situational awareness, problem solving and decision making); Finding out what sort of leader I am - Leadership Diagnostics (how this informs the way I relate/communicate with patients/ service users); Effective Leaders embrace 'out group' members to secure effective team working; Learning Styles and different personalities - how best to engage individuals different types of learning styles; Leadership Behaviours and competency frameworks; Reflection 'in' and 'on' practice and effective leadership strategies; Collaborative and collective Leadership and the democratisation of knowledge; Leadership as co-production and team working for effective mental health; The results and outcomes of effective leadership; Fostering leadership with trainees to implement quality improvement; Evaluating Leadership programmes with Kirkpatrick and a review of the evidence; Return on Investment of leadership development; Sustaining the core values of Leadership and embedding a culture of collective leadership; Communities of practice and communities at work to create a sense of belonging and value.

Assessment Task Information

Undertake self diagnostic questionnaires to identify strengths and areas for development in leadership skills. Reflect on the learning and create an action plan for personal leadership development. (Reflective report 2000 – 3000 words)

Module – Quality Improvement and Operations

The aim of this module is to teach the core tools and methods of Quality Improvement and to support the application of these tools to a specific Quality Improvement project. The module will give an introduction to Quality Assurance and Improvement as a core function of Operations Management. This module will work within the SQUIRE guidelines to support the construction of a Quality Improvement report produced at a standard for publication.

Content

Operations Management, Quality Assurance, Audit and the difference between QI, PDSA; Defining Quality and Quality Assurance; Quality Improvement, Building a QI Team and developing a Terms of Reference, PDSA, TQM and a culture of Quality Improvement, building Continuous Quality Improvement, Ishikawa Fish bone Analysis; Pareto principle, analysis, the 80/20 rule, process mapping, Jonkoping, Literature review; Return on Investment; generating metrics for a baseline, Project Management, benchmarking; Developing your own metrics to calculate your ROI in your QI project; Measurement for Improvement: distinction between data and information; Lean methodology and the elimination of waste; Patient Satisfaction Questionnaires; Service redesign and patient centred Experience Based design; Value chain analysis; Negotiating and managing conflict; Control charts, run charts and scatter diagrams; Statistical Process control; Preparing a business case; Creating a quality organisation

Learning Outcomes

By the end of this module learners will be able to:

1. Critically explore the core functions of operations management identifying the role of quality assurance and quality improvement as a core operations function
2. Critically explore the differences between quality assurance and quality improvement and the different tools required for each
3. Apply the tools for quality assurance and quality improvement to a specific project and explain your rationale for project focus and selection
4. Differentiate and apply the methods for measurement for improvement and reflect upon the leadership skills required to achieve best impact.

Assessment

Collection of baseline data, benchmark data against national data sets, undertake a scoping literature review of the specific clinical / systems issue. Demonstrate core competencies in Quality Improvement and Quality Assurance by applying quality improvement methods in the workplace. (2000-3000 words).

Module – Teams and Team Working

The aim of this module is to teach evidence-based research underpinning the creation of an effective and high functioning team that excels in patient safety and clinical excellence. This module supports leaders to develop strategies for 'High Performing teams' in the organisation and will draw upon case studies and team assessment exercises to support your learning in this area.

Learning Outcomes

By the end of this module learners will be able to:

1. Critically explore and define the difference between a group, a team, an effective team and a "high performing team"
2. Critically explore the research evidence for team working to develop a culture of continuous quality improvement
3. Apply the tools to facilitate a high performing team and relate this approach to your specific project, explaining the impact of team dynamics on the implementation of the quality improvement project
4. Critically examine the relationship between patient safety, quality improvement and team working
5. Differentiate and apply the methods for measurement for improvement with teams and reflect upon their usefulness to demonstrate impact

Content

Critically explore and reflect upon what is a group, a team and a High Performing team to achieve patient safety; Values for diverse teams; Appreciative Inquiry; Patient safety and team work; Equality and Diversity in teams to deliver quality patient care; Engaging the healthcare team; Communities of Practice and Medical Engagement; Effective team working in hospital; Team Training; How to examine team roles and team strengths : Belbin's team roles; Personality types and preferences; Participatory inquiry with patients - story telling and coproduction; Team Huddles - the evidence and how it works; Coaching and Team work; Team work & digital technology and change management, the evidence

Assessment Task Information

The assessment for this module will be to undertake self diagnostic exercises in personality types to identify preferred team roles; undertake team role diagnostics and analyse the fit between patient safety, strategic roles and workforce development. Reflect on Teams and team working from an international perspective. (Reflective report 2000 – 3000 words).

Module – Changes and Transformation

The aim of this module is to explore change from both a personal and organisational perspective. From a personal perspective by exploring psychological theories that help us understand what motivates people to transform and change their behaviour as well as from an organisational perspective by understanding change theory and large-scale health system transformation. We explore wider systems theory to understand what works when scaling up quality improvement projects and the critical factors required to be in place to enable success in larger organisation transformation. We look at globalisation and international programmes of health care to identify how the World Health Organisation, Universal Health Care objectives can be achieved.

Learning Outcomes

By the end of this module learners will be able to:

1. Critically reflect upon personal approaches to change to identify strategies for transformation and improvement.
2. Reflect upon different strategies for organisations to develop as a learning organisation.
3. Critically review the theories on system transformation and the evidence for success of large-scale healthcare transformation.
4. Critically review the evidence for organisational success and sustainability.
5. Critically explore the relationship between clinical leadership, co-production with patients and the wider multi-disciplinary team as mechanisms to support sustainability in healthcare organisations
6. Research and review the role of technology to disrupt healthcare.

Content

Facing personal fears and reaching high, personal transformation and vision - so what do successful people have in common? Scientific Management and Taylorism and healthcare; Entrepreneurism, innovation and creativity - disruptive models; Theories of transformation and change and the evidence applied to healthcare; Systems theory and generating a continuous learning culture moving away from blaming individuals; Healthy working environments and multi-disciplinary working - creating a culture of trust, partnership, feedback and motivation; Quality Improvement for system transformation; Providing value to the customer : The evidence for systems change in the private sector, Philips, Toyota ; Digital technologies for system transformation; Business case for global systems change; World Health Organisation : Sustainable Development Goals - keeping our ethical and moral compass in systems transformation; Self managed teams and devolved decision making - the case for autonomy; Disseminating results and writing for publication ; When things go wrong - more critical reflections; Continuing Personal Development

Assessment Task Information

Reflect on personal and professional learning from the change theories proposed in this module and reflect on how retrospectively these change theories and models could have impacted on a recent change project you have been involved with. (Report 2000 – 3000 words).

Our Teaching Faculty

We are a group of medical and academic doctors, with an MBA Medical Leadership, MSc Leadership, or PG Cert Medical Leadership who have core competencies in Quality Improvement to teach and guide other doctors. We believe that leadership development and quality improvement should be delivered by clinicians for clinicians in co-production with patients and service users and with support from managers.

Our Teaching Faculty are skilled mentors and Action Learning Set Facilitators competent in the following areas:

- ✓ Measurement for Improvement (Descriptive statistics, Run charts, control charts, statistical process control)
- ✓ Leading and coaching Team members
- ✓ Patient engagement, process mapping and patient personas
- ✓ Quality Improvement for Operational Management
- ✓ Quality Improvement for System Transformation
- ✓ Quality Improvement for overseas programme development
- ✓ Leading Effective Teams
- ✓ Coaching for success
- ✓ Managing and Sustaining Change
- ✓ Leadership Diagnostics for Continuous Professional Development and Revalidation
- ✓ Strategy and finance



Dr Remig Wrazen

Medical Director, WAML & Consultant Anesthetist at Sheffield Teaching Hospitals NHS Trust.



Dr Jill Aylott, PhD, MBA

CEO/ Head of Programmes, WAML & Academic Director, QIMET International, UK



Mr Simon Boyes

Clinical Director for General Surgery for Sheffield Teaching Hospitals NHS Trust and is a published author



Dr Alix Fonfe MBBS, MRCPCH, PGD

Paediatric trainee, specialising in neonatology & in 2018 Alix was the paediatric Chief Registrar at Leeds Children's Hospital



Dr Rowena Catipay-Buyan

Oncologist at Doncaster and Bassetlaw NHS Hospital Foundation Trust & has a senior leadership role in the Acute Oncology Service



Mrs Lisa Fox MSc Health and Social Care Leadership

Advisor for Data Analysis and Informatics Support for WAML & Assistant Director of Information Services, UK NHS



Mr Silas Gimba

Director of Strategic Change and Transformation for WAML & Consultant Gynaecologist and Obstetrician



Mr Bolorinde Ola

Research Director for WAML & Consultant Gynaecologist & Subspecialist in Reproductive Medicine and Surgery



Miss Rachael Baines

Director for Clinical Microsystems & Consultant in Plastic Surgery and Medical Leadership

Guest Speakers



Dr Jeff Perring

Medical Director, Sheffield Childrens Hospital NHS Foundation Trust



Mr Kirtik Patel

Consultant Upper GI and Bariatric Surgeon at the Northern General Hospital, Sheffield Teaching Hospitals NHS Foundation Trust



Dr Aishin Lok

ST8 Neonatal Grid Registrar, Evelina London Neonatal Unit, St Thomas' Hospital

Signing up!

If you would like to register for the FQIM Programme, please send your application form to Justine.Watson@waml.co

Steps to get started on the Programme

- ✓ Registration
- ✓ Course Fees and Enrolment
- ✓ Book Module teaching dates in your diary
- ✓ Arrange a pre-course meeting with the Programme Director to refine your personal objectives
- ✓ Schedule 4 coaching sessions throughout the year
- ✓ Plan to study for approximately 5 hours a week (some of this time will be spent working with stakeholders in the workplace, you may also probably spend up to another 5 hours in project related meetings in the workplace. In addition we recommend you watch the FQim learning videos and undertake the reflective learning activities)



For more information please contact



Justine Watson on
Justine.Watson@waml.co



Dr Jill Aylott on
jill.aylott@waml.uk or 078014 30840

www.waml.uk