## **The AHSN** Network

## Communities of Practice – Cultivating Change Through Collaboration

The South London Patient Safety Collaborative, led by the Health Innovation Network, is at the forefront of leading patient safety across its population of 3 million people, a healthcare workforce of 60,000+ and 12 South London Boroughs.

Following their creation in autumn 2014 the 15 Patient Safety Collaboratives across England, led by the 15 Academic Health Science Networks (AHSNs), are actively building on work following the Francis inquiry, and recommendations



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from the Berwick report on patient safety. Each is setting its own priorities in line with local needs to continually improve care and reduce risk to patients. "The most important single change in the NHS ...would be for it to become, more than ever before, a system devoted to continual learning and improvement of patient care, top to bottom and end to end." - Berwick Report, Aug 2013

In South London, they're successfully developing 'Communities of Practice' to help meet this enormous challenge.

## What Are Communities of Practice?

Communities of Practice (CoPs) are self-organising and self-governing groups of people who share a passion for their field and strive, through collaboration, to become better practitioners.

Communities of Practice are not new in the NHS and have an established place in improvement work. The cross-professional and organisational boundary nature of CoP's give them the potential for reducing fragmentation of practice in service into issues that really matter, such as Patient Safety; and that are typically complex and beyond the scope of any individual, profession or organisation.

In the NHS, "a CoP differs from a delivery network because membership is optional and the ways of working are informal...it's a conversational relationship of peers who want to share and learn from each other. They will also help... develop cross boundary relationships with leaders in other parts of the organisation or community." (From the Improvement Leaders' Guide, by the NHS Institute for Improvement and Innovation)

In South London we've developed seven communities of practice so far, and still growing. They include;

- Medication safetyAcute deterioration
- Maternity
- Sepsis
- Duty of Candour
- Delirium

With wide representation covering the whole health system, each community is organised by its own members. This cuts through hierarchy and bureaucracy and helps people to learn from and with each other about what works, what doesn't and why. Author and Systems Leadership Expert Myron Rogers says: "In a very short space of time, we have seen these communities raise the bar in their domains of practice, increasing a shared sense of rigour about what they're trying to do. They build and deepen trust, making challenging changes possible."

Dr Daghni Rajasingam, Convener of the Maternity Community of Practice and Consultant Obstetrician at Guys and St. Thomas NHS Foundation Trust outlines the aims of her group:

"The Maternity/PPH CoP is considering postpartum haemorrhage below 1.5 L of blood loss, which we recognise is generally less well documented. It is, however, on the increase across the UK and especially so across London. The morbidity associated with this is often unrecognised by maternity teams and primary care due to poor communications between primary and secondary care. Additionally, it can adversely affect bonding, breastfeeding, mental health of the mother and be a traumatic experience for both the woman and her partner.

"The community is hoping to explore some of the causes of non-massive obstetric haemorrhage and to improve the care that women receive before, during and after delivery in the postnatal period. The group is creating a 'back to basics' educational bundle for midwives and obstetricians. It would also like to improve the care that these women receive after the event, across the traditional boundaries of primary and acute care.

"The community is keen to involve interested stakeholders across South London, through the Safety in Maternity Services (SIMS) (multiprofessional) network and the London labour ward leads (medical) networks. The group will also ensure the input of women who can make sure we consider what is important to them in these situations. We are also keen to engage educationalists and improvement methodology experts within the community.

"The main aim of the CoP is to impact on the rates of postpartum haemorrhage. But we hope that the learning and experiences from the community of practice methodology can be documented, disseminated and applied to other areas of women's health."

## What our members and partners say about our Communities of Practice;

- Janet Coninx, Head of Patient Safety and Risk, Croydon Health Services, and a member of the CoP Design Team, says: "There
  has been a lot of energy, sharing of good ideas, successes in team work and what has struck me is the similarity on subjects."
- Nick Sevdalis, Professor of Implementation Science and Patient Safety, at King's College London, says: "People are already asking 'is this the best we can be doing?'... this makes us realise we don't need to reinvent the wheel as there are guys we can learn from it's about the spread of good practice."
- Catherine Ede, Sign up to Safety Campaign says: "For me, meeting up with all the Trusts has been invaluable. It's been good to be able to find out successes as well as some of the problems."



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