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Affinity diagram

NHS England and NHS Improvement
Affinity diagram

What is it?
An affinity diagram can help you review and analyse ideas generated during brainstorming sessions.

Affinity diagrams involve grouping and analysing ideas based on similarity or theme and their use encourages people to think inventively and make non-traditional connections of ideas. The process promotes greater ownership of results, allowing breakthroughs to emerge naturally.

Techniques like affinity diagrams and brainstorming can help you to clarify an issue and think up new ideas so you can move onto the next steps.

Participants may be surprised that the sorting is done without speaking – this is done to prevent anyone dominating and allows creative thinking to flourish.

When to use it
You can use affinity diagrams at any stage of an improvement project, particularly if you anticipate a large volume of ideas.

How to use it
1. Express the issue under discussion clearly in one sentence (top level theme), framed as a question, for example, ‘Why are patients waiting so long for test results?’

2. People silently record their views on sticky notes and randomly stick these onto a flipchart or wall. As a minimum, use a noun and a verb, preferably in a four to seven word statement.

3. Without discussion, the group sorts the sticky notes (single items) into 5–10 groupings (second and third level themes). If someone disagrees with a grouping, the note can be moved, but without discussion.

4. Create a summary or header card for each grouping to encapsulate the main theme through a rapid team consensus. Avoid one word headers.

5. Draw and record the finished diagram by connecting all the heading cards with their groupings.

6. Review the result with the team and other key people (stakeholders).
What next?

This will depend on why you are using an affinity diagram, what you want to get out of it and how it went. Ensure that either you or members of your group follow up the ideas and communicate any results to the rest of the team. If you are trying out a new idea, small tests of change (e.g. plan, do, study, act (PDSA) cycles) are a useful way of initiating action quickly.

If you are using the tool to identify the cause of delay in a patient journey or a safety issue, you may find it useful to capture the output in the form of a cause and effect (fishbone) diagram.

Background

The affinity diagram is also known as the KJ method after Kawakita Jiro, who devised it in the 1960s.
Examples of why people DNA (did not attend):

**Top level theme:**
- Example: why do people DNA (did not attend)?

**Second level theme:**
- Patient factors
  - Appointment not needed
  - Too unwell
  - Unable to get time off work
  - Negative previous experience
  - Patient anxiety – nature of illness
  - Unable to arrange childcare
  - Public transport difficult to access
  - Patient forgot about appointment
- Socio/demographic factors
  - Distance from hospital
- Hospital factors
  - Incorrect record
  - Appointment letter unclear
  - Notification of appointment – too short notice
  - Inconvenient time or day of appointment
  - Urgency of appointment
- Other
  - GP/patient communication unclear
  - Appointment not needed
  - Too unwell
  - Unable to get time off work
  - Negative previous experience
  - Patient anxiety – nature of illness
  - Unable to arrange childcare
  - Public transport difficult to access
  - Patient forgot about appointment

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