



Gloucestershire Safety & Quality Improvement Academy

✓ Learning

✓ Improving

✓ Sharing

#TheGSQIAWay

@gsqia

‘Using & Sharing Knowledge for Improvement’ #QIHour Tweet Chat Report

Report produced by Lou Waters, GSQIA Digital and Networks Advisor & #QIHour host.

Background

The #QIHour tweet chats began in February 2019 and are hosted by Gloucestershire Safety & Quality Improvement Academy (GSQIA) at Gloucestershire Hospitals NHS Foundation Trust. The #QIHour chats are produced in collaboration with a small group of #QITwitter Improvement leaders who make up the #QIHour team: Leeanne Lockley, Steve Daykin, Robbie Ayers, Dr Amar Shah, Lou Waters & Andrew Seaton.

These tweet chats take place bimonthly on a Wednesday at 8pm U.K. time bringing together the improvement community around the globe to connect and discuss key topics, sharing and learning together.

Purpose

The purpose of this report is to share learning & insights gathered through the [#QIHour](#) on ‘Using & Sharing Knowledge for Improvement’, which took place on Wednesday 25th May 2022 at 8pm BST in collaboration with Dr. Andrea Gibbons [@andreadgibbons](#) and [@Evidence4QI](#).



NHS
Gloucestershire Hospitals
NHS Foundation Trust

Tweet chat

Using & sharing knowledge for improvement

Wednesday 25th May 2022
8pm BST (GMT+1)

In collaboration with [@andreadgibbons](#) [@Evidence4QI](#)

#QIHour **#E4QI**

hosted by @GSQIA at @gloshospitals in collaboration with:
[@lockley_leeanne](#), [@steve_daykin](#), [@DrAmarShah](#), [@RobertJMAyers](#), [@LouWaters_QI](#) & [@seaty63](#)

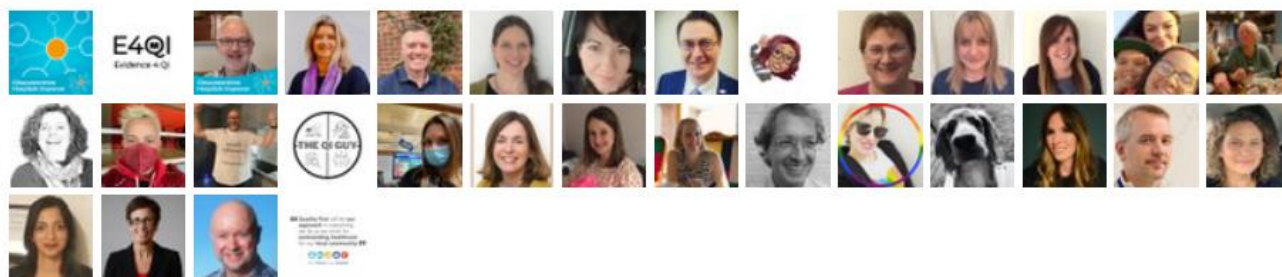
Report contents

- Analytics
- Learning and insights
- Shared resources

Analytics











These analytics are provided by [Symplur – Healthcare Hashtags Project](#) for the [#QIHour](#) hashtag during the period of 8pm-9pm BST on Wednesday 25th May 2022.

Participants













The Influencers











Top 10 Influential

	@gsqia 100
	@andreadgibbons 84
	@Evidence4QI 82
	@steve_daykin 64
	@RobertJMAyers 60
	@PhoenixAutumn 57
	@KaiBoo77 52
	@theQCommunity 51
	@LouWaters_QI 51
	@HayleySGrice 49

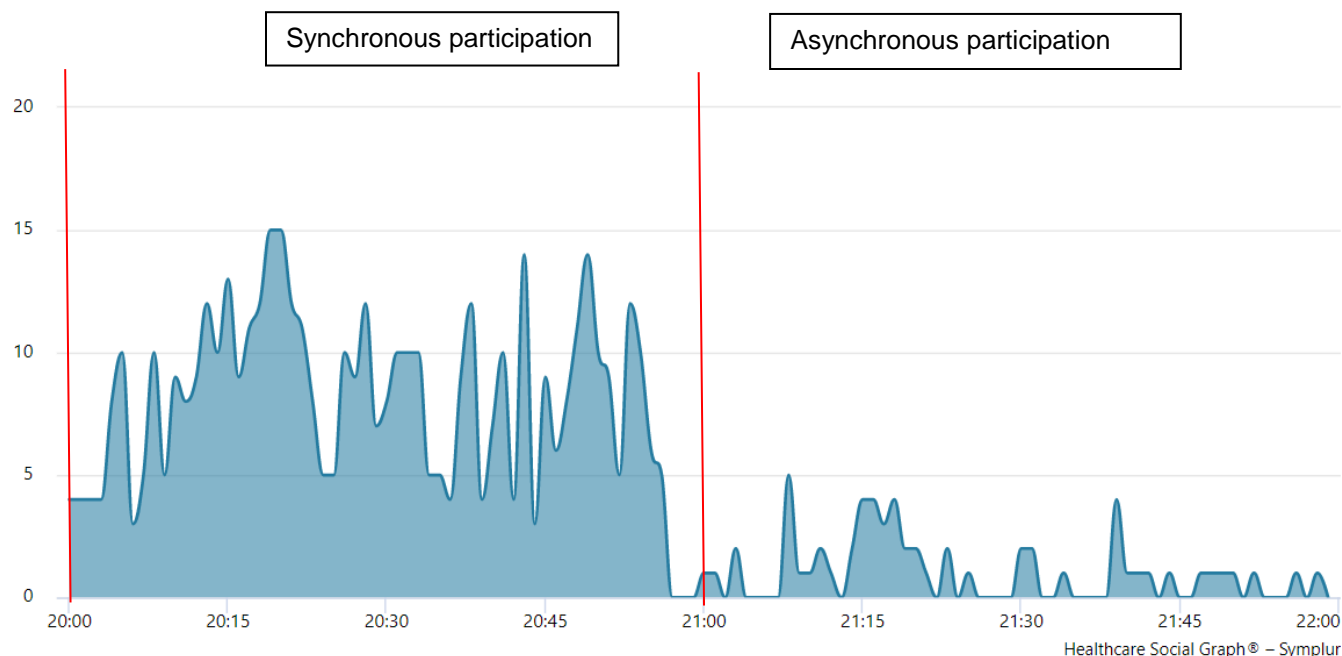
Prolific Tweeters

	@gsqia 121
	@Evidence4QI 45
	@seaty63 42
	@suz_cro 30
	@steve_daykin 29
	@andreadgibbons 25
	@KaiBoo77 25
	@RobertJMAyers 21
	@PhoenixAutumn 14
	@SueLaceybryant 12

Highest Impressions

	@gsqia 354.6K
	@andreadgibbons 98.1K
	@seaty63 90.3K
	@Evidence4QI 60.7K
	@TheQI_Guy 59.8K
	@suz_cro 58.4K
	@steve_daykin 35.5K
	@KaiBoo77 35.2K
	@acserrao76 33.7K
	@RobertJMAyers 30.4K

Tweet activity



The chat ran from 8.00pm – 9.00pm BST. The 'tweet activity' graph above shows that people continued to contribute to the chat using the #QIHour hashtag after the formal end-point at 9.00pm. Asynchronous contribution to tweet chats is one of the many benefits of using twitter for social learning.

The table below contrasts hashtag analytics for the one hour of synchronous participation in the tweet chat and for a 24-hour period from the chat starting, allowing for asynchronous engagement.

8pm – 9pm GMT (25/05/22)

The Numbers

1.025M

Impressions

479

Tweets

32

Participants

479

Avg Tweets/Hour

15

Avg Tweets/Participant

[Tweet](#)

Twitter data from the [#qihour](#) hashtag from Wed, May 25th 2022, 8:00PM to Wed, May 25th 2022, 9:00PM (Europe/London) – Symplur.

8pm GMT (25/05/22)
- 8pm GMT (26/05/22)

The Numbers

1.257M

Impressions

574

Tweets

51

Participants

24

Avg Tweets/Hour

11

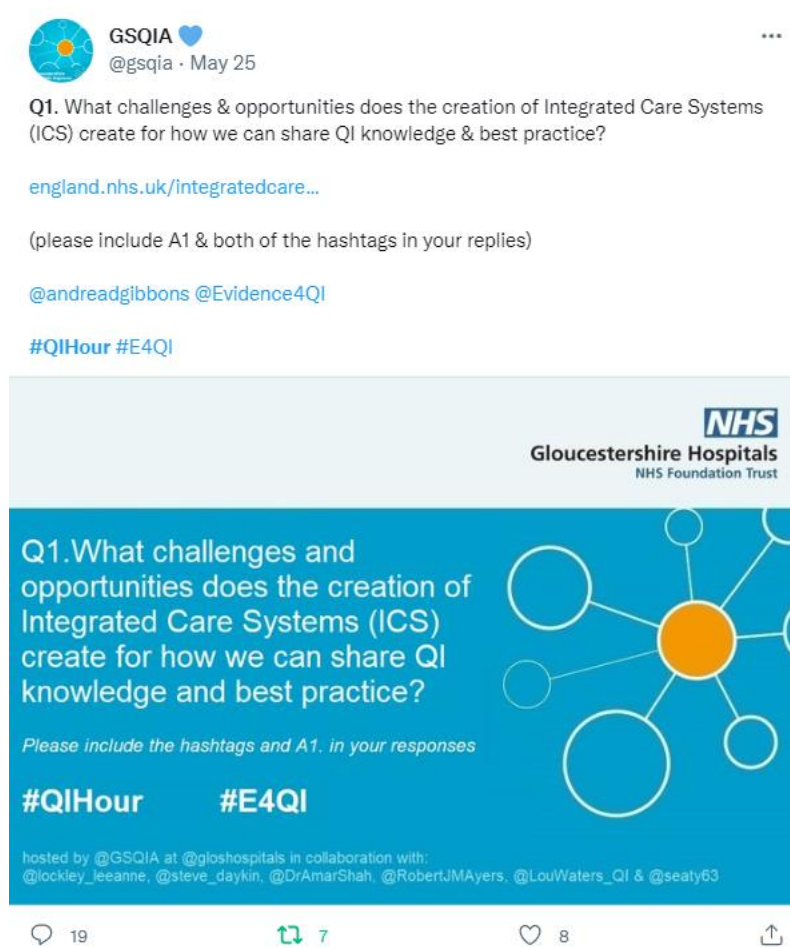
Avg Tweets/Participant

[Tweet](#)

Twitter data from the [#qihour](#) hashtag from Wed, May 25th 2022, 8:00PM to Thu, May 26th 2022, 8:00PM (Europe/London) – Symplur.

Insights and Learning

Question 1. What challenges & opportunities does the creation of Integrated Care Systems (ICS) create for how we can share Quality Improvement (QI) knowledge & best practice?



(The link in the first question is available to access in the resources section at the end of this report, titled “What are Integrated Care Systems?”)

Sue [@DeakinSue1](#) responded that one of the challenges is that “many well-functioning networks do not fit the ICS footprints”.

Another key challenge raised came from [@joyfurnival](#) who shared “that’s an interesting question coming from an ambulance service perspective, as ambulance Trusts are not ‘in’ ICS’s, and footprint covers several”. Joy went on to share that this could “be a barrier to knowledge sharing and too many networks”.

How can we make the new ICS system work well for our ambulance Trusts? Are you having conversations with your ambulance colleagues to work together to make this work?

Andrea [@andreadgibbons](#) commented “we mustn’t fall into the trap of simply lifting and shifting what we are already doing, or just do more of the same”. She continued, “this is an opportunity to reinvent the way that we work together, and make it evidence based.”



Dr Andrea Gibbons
@andreadgibbons

...

Replying to @gsqia and @Evidence4QI

A1: 2/2 This means creating & seizing opportunities to learn from each other & share best practice. And underpinning strategic decisions with robust evidence, right from the start.

#QIHour #E4QI

8:10 pm · 25 May 2022 · Twitter Web App

Jonathan [@TheQI_Guy](#) commented “this is just a management construct and the same barriers that prevented joined up care will still exist” and Kevin [@kevinj86](#) queried “has this made things easier or just added another line of bureaucracy that we need to get through?”

One thing seems certain from some of the comments, we need to use this opportunity and not lose it. This is an opportunity to really do things differently.

Sally [@SallyTom48](#) shared “challenges....old systems still make sharing ‘clunky’ e.g. IT, certain resource sets”.

Matthew [@MatthewMezey](#) commented...



Matthew Kalman Mezey
@MatthewMezey

...

A1. I suspect that things like Systems Convening, network mapping of improvers (eg with Kumu), Working Out Loud etc become even more vital for learning/sharing across an ICS. #QIHour #E4QI

8:13 PM · May 25, 2022 · Twitter for Android

If you haven't yet come across systems convening, there is a fantastic book you can download for free which is included in the resources section at the end of this report.

Steve [@steve_daykin](#) shared his thoughts...



Steve Daykin (RMN) Senior Improvement Lead 🌟
@steve_daykin

...

Replying to @gsqia, @andreadgibbons and @Evidence4QI

A1. Challenges wise it can bring an increased amount of different organisations which may not have common priorities and can make decisions and where to focus on. Also can add an extra layer of bureaucracy to cut through #QIHour #E4QI

8:11 pm · 25 May 2022 · Twitter for iPhone

[Steve](#) has been working in an ICS way and the opportunities he described include encouraging “the use of common tools & techniques across a system working approach”. He described “working closer with colleagues crossing boundaries”. He expanded on this with an example; “In Nottinghamshire we work in an ICS way and deliver our #QSIR training together encouraging peer learning and discussions increasing joint working. Also staff moving around the system don’t have to learn a new #QI way”.

Hayley [@HayleySGrice](#) also shared an example of how they are working in [Derbyshire Community Health Service NHS Foundation Trust](#).



Hayley Grice
[@HayleySGrice](#)

...

Replying to [@gsqia](#), [@andreadgibbons](#) and [@Evidence4QI](#)

[#QIHour](#) increased regional & ICS improvement forum;
[#QI @DCHSCET](#) training opportunities such as
[@ACT2improve](#) mixed cohort; recruitment
[@DCHStrust](#) looking @ creative opportunities. ICS
hoping it will reduce silos and expand whole pathway
working together [#E4QI](#) [#QITwitter](#)

8:13 pm · 25 May 2022 · Twitter for iPhone

Ali [@wheelyal](#) also shared her experience of working in the [@CheshireWestICP](#).



Ali Wheeler [@wheelyal](#) · 25 May

⋮

A1. We have a local [#improvers](#) network
[@CheshireWestICP](#) just a small but
brilliant group of peer support, battery
recharge, ideas hub. could see it growing
on an ICS footprint [#improvement](#)
knowledge has no boundaries or
geography [#QIHour](#)
[#QITwitter](#) [#E4QI](#)

Lived Experience Ambassador [Cristina](#) shared:



Cristina Serrão she... · 25 May

⋮

A1. [#QIHour](#) [#E4QI](#) people don’t like
change it’s human nature. As someone
with multiple conditions that I self
manage I hope Integrated Care Systems
leads to me having more choice and
control of my health and how I can
improve experience for others best
practice [#ImprovingTogether](#)

Key themes coming from the responses around the opportunities ICS working presents include:

- Sharing & Learning
- Networking
- Knocking down silos
- Collaboration
- Standardisation
- Patient-centred care

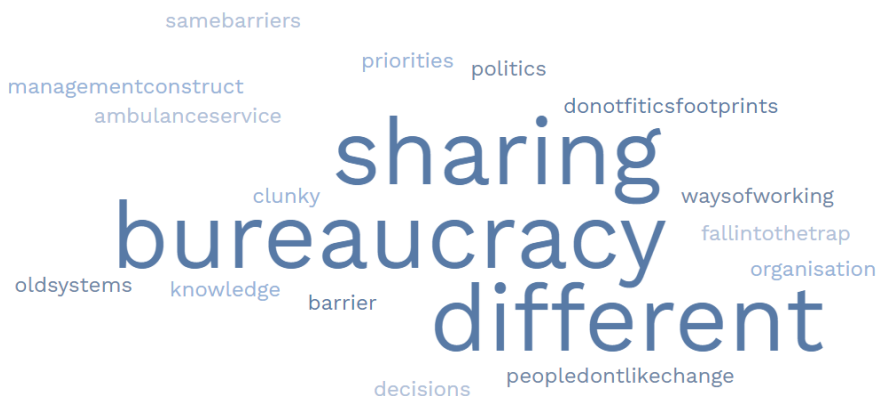
With participants using language such as “nurture”, “shared goal” and “building”.

Key words and themes that appeared included in response to Question 1: “What challenges & opportunities does the creation of Integrated Care Systems (ICS) create for how we can share Quality Improvement (QI) knowledge & best practice”

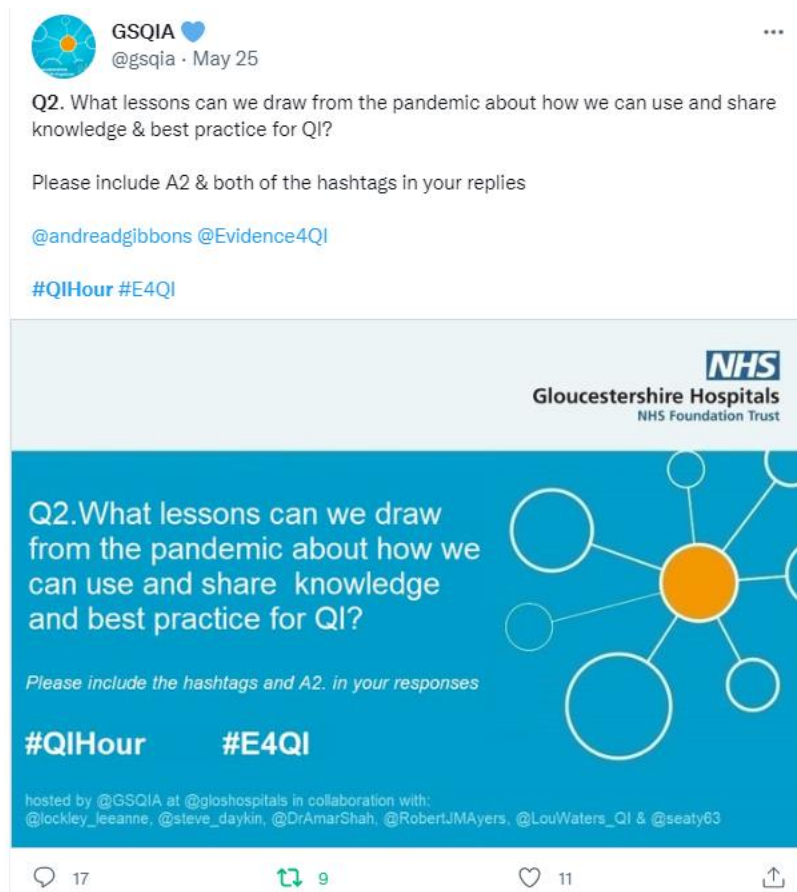
The opportunities



The challenges



Question 2: What lessons can we draw from the pandemic about how we can use and share knowledge and best practice for QI?



Cristina [@acserrao76](#) responded:



 **Cristina Serrão she...** · 25 May

A3. We should share the good the bad and the ugly. Be open and honest and transparent. It's ok if people got it wrong if they look to others for ideas to change. That includes the people who use services. Lots to talk about [#coproduction](#) but do all [#QIHour](#) people know how? [#E4QI](#)

Andrea [@andreadgibbons](#) agreed, commenting that “it's shown the importance of being honest about what we don't know and being generous with what we do know.”

[Ali](#) shared that....



Ali Wheeler @wheelyal · 25 May

A2. Pilot projects were tried, tested and improved at speed, we did daily (sometimes x2) #pdsa called #sitreps, people didn't know we were using that methodology, We need to keep working where appropriate at that pace, Be overt about using #improvement tools
#QIHour
#QITwitter #E4QI

[@GSQIA](#) asked Ali, “do you think you had more success because people didn't realise they were using a methodology? Do you think the ‘technical’ language of improvement helps or hinders in the real world”.

Ali responded “that's a debate I have with myself/my team. We started the meetings with shared #CommonPurpose #CallToAction ‘we are here to...’ ‘we will meet again in 3 hours to...’. I often said we were using #improvement live, not sure it was heard, made me proud, it works”.

Hayley [@hayleypicklesRN](#) shared this wonderful response:



Hayley Pickles
@hayleypicklesRN

Replying to [@gsqia](#) [@andreadgibbons](#) and [@Evidence4QI](#)

Q2. To make connections outside of your area of work. Working with other people gives you an insight in what works for them and their organisation and if it can work for yours.

Also no matter what job role or title you have- if you want to make a change you can! 😊 #QIhour #E4QI

8:19 PM · May 25, 2022 · Twitter for Android

Teresa [@KaiBoo77](#) replied “This 100% #MoreThanMyBand #QIHour #E4QI”.

[Teresa](#) said that we need to “simply keep talking and networking. Ask the questions on places like [#QITwitter](#) They keep the conversations flowing. What we do need is an easy access place to share on but that will come”.

[Andrea](#) responded “I am sure [@PhoenixAutumn](#)'s ears are burning. She is a determined lady on a mission to make that easy access place a reality!”

Emma [@emmaadamsGenQ](#) reflected...



Emma Adams
@emmaadamsGenQ

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

A2 [#QIHour](#) [#E4QI](#) Some of the best sharing I saw was through informal, personal spaces - such as those held by the [@theQCommunity](#) but also through digital informal spaces such as WhatsApp- social networking as important as more formal forums

8:18 PM · May 25, 2022 · Twitter for iPhone

[Kevin](#) commented “the pandemic in a number of cases has had a positive effect. If you look at virtual outpatients, we would have still been agreeing a pilot. Where this had to be introduced in double quick time”.

Paula [@Paularyeland](#) also commented on the pace of change, saying “during covid, everything was changing at pace and so more people felt empowered to lead change. We all saw different people stepping up and leading and testing huge changes. Instead of change being seen as being for “those trained”, it became something for everyone. The expectation of change was empowering and enabling. The removal of so much red tape meant that it was easier, less frustrating and well received. It also shed the light on the importance of communication.”

[Robbie](#) commented:



Robbie Ayers
@RobertJMAyers

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

A2. A personal lesson learnt... we [#NHS](#) achieved significant transformational change in very focused areas to support our response to Covid19; however focused less on cultivating [#QI](#) for the masses. We lost the capacity to ensure a 1000 flowers 🌺 were blooming [#QIHour](#) [#E4QI](#)

[Joy](#) reflected that she noticed “the team knowledge in the moment/lived experience of staff during covid. This is an issue/risk. What can we do/try? Many solutions were not tested so little evidence. This opened up ‘safe’ experimentation to >staff with new QI routines, creating new evidence”. [Sue Deakin](#) commented “in hospitals we became more clinically led and operationally supported with less focus on targets, more on optimizing quality and safety”.

Andrew [@seaty63](#) reminded us to be cautious of “reactive thinking”.



...

[@HayleySGrice](#) shared “Never have we needed to #MakeEveryContactCount more; the NHS can innovate quickly when we need to; Virtual working for clinical and non-clinical tasks (is) definitely a positive for large community trusts to expand colleague connections & #QITwitter networks.” Hayley shared some of the benefits she saw “1) expanded community rehab service offer to meet patient needs & choice – some like virtual phone/video. 2) Reduced mileage. 3) Virtual team meetings (are a) game changer for diary management. 4) Greater triage of patient needs. 5) QI & creativity opportunity.

Sue [@SueLaceybryant](#) commented “It’s about pooling all the expertise and skills and local knowledge. And creativity of one and all.”

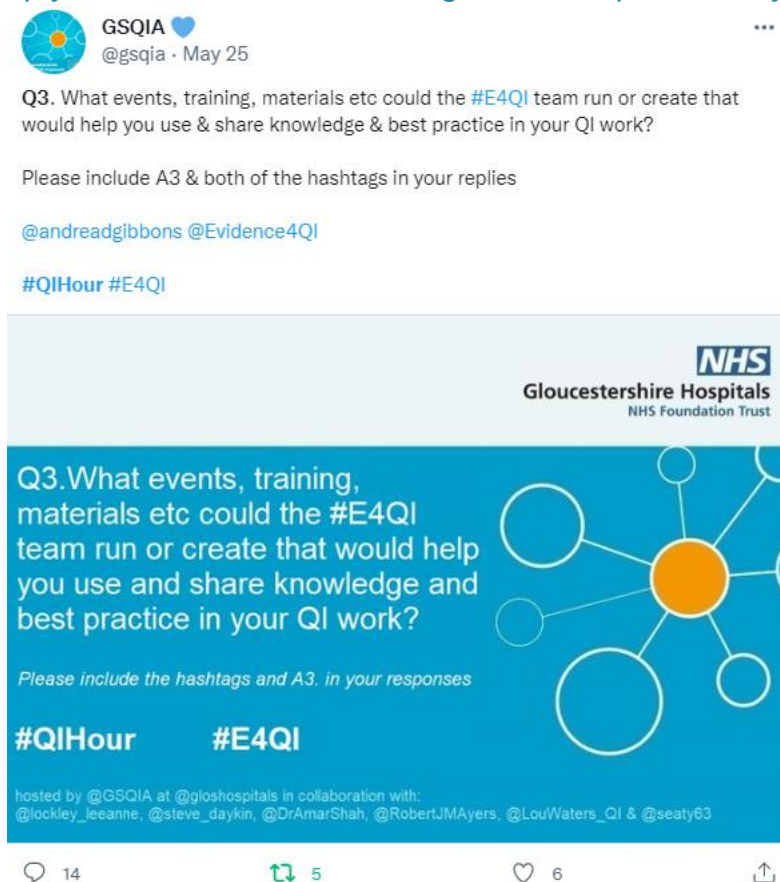
Themes that presented themselves in response to this question include:

- Change happened faster due to removal of red tape and was empowering & enabling
- Use of improvement methods
- Communication and virtual working
- Cross team/organizational learning and sharing
- Being honest, open and transparent.
- Evidence and knowledge sharing.

Key words that appeared included in response to Question 2: “What lessons can we draw from the pandemic about how we can use and share knowledge and best practice for QI?”



Question 3: What events, training, materials etc could the #E4QI (@Evidence4QI) team run or create that would help you use and share knowledge and best practice in your QI work?



[Andrea](#) shared that ideas they've been thinking about include "monthly lunch and learn" online sessions; whole community virtual meetings" and asked "how frequently and what topics?" She continued with "website with free to access resources, guest speakers (see Q4. we would love to invite your role models)."

[Steve](#) responded that "being able to share ideas on a handheld device" was important for him – "a QI app". [Teresa](#) commented "that would be amazing, especially for our frontline staff who can't get on a PC".

[@hayleypicklesRN](#) stated "I'm new to this therefore I personally would benefit from how to communicate your ideas in a professional context". Hayley also added she would like more information on "how to overcome barriers such as people who do not adhere to change".

A very important point that we make sure any resources we produce meet the need of people at a variety of different points in their improvement journey – matching the knowledge and skills to the people's needs every step of the way.

Affra [@PhoenixAutumn](#) shared....



Dr. Ffion Autumn (She/Her)
[@PhoenixAutumn](#)

...

Replying to [@gsqia](#) [@andreadgibbons](#) and [@Evidence4QI](#)

A3. [@Evidence4QI](#) bridge the gap & connect [#QI](#) to [#KnowledgeMobilisation](#), [#HorizonScan](#) and [#Evidence](#) experts, tools, & training. Offering ways of integrating these tools to accelerate [#QI](#), [#innovation](#) & [#improvement](#). [#QIHour](#) [#E4QI](#) [@FabNHSStuff](#) [@theQCommunity](#) [@Evidence4QI](#) [@GSQIA](#)



[@PhoenixAutumn](#)

8:29 PM · May 25, 2022 · Twitter Web App

[Robbie](#) shared:



Robbie Ayers
@RobertJMayers

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

A3. I think virtual QI action learning sets to bring us together and support each other in overcoming the barriers we all face. As @fayjojo says “what gets in the way”, such a simple and useful question #QIHour #E4QI



What's getting in the way? Barriers to improvement in the NHS

8:30 PM · May 25, 2022 · Twitter for iPhone

[Affra](#) responded “Great idea! Action sets create a supporting group and a space to think, reflect, discuss and process.”

[Joy](#) shared her interest in knowledge into practice with [Emma](#) agreeing that we “need stronger links from research into QI practice”.



Dr Joy Furnival CEng
@joyfurnival

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

#A4 I'm wondering abt adapting knowledge into practice in real world context & learning frm the implementation science/experimentation lit eg today's #QcomQMS session How might research on visual management be applied in orgs w/ different context? #QIhour #QItwitter #E4QI

8:39 PM · May 25, 2022 · Twitter for iPad

Emma also shared that she is interested in “what is ‘good enough’ data”.



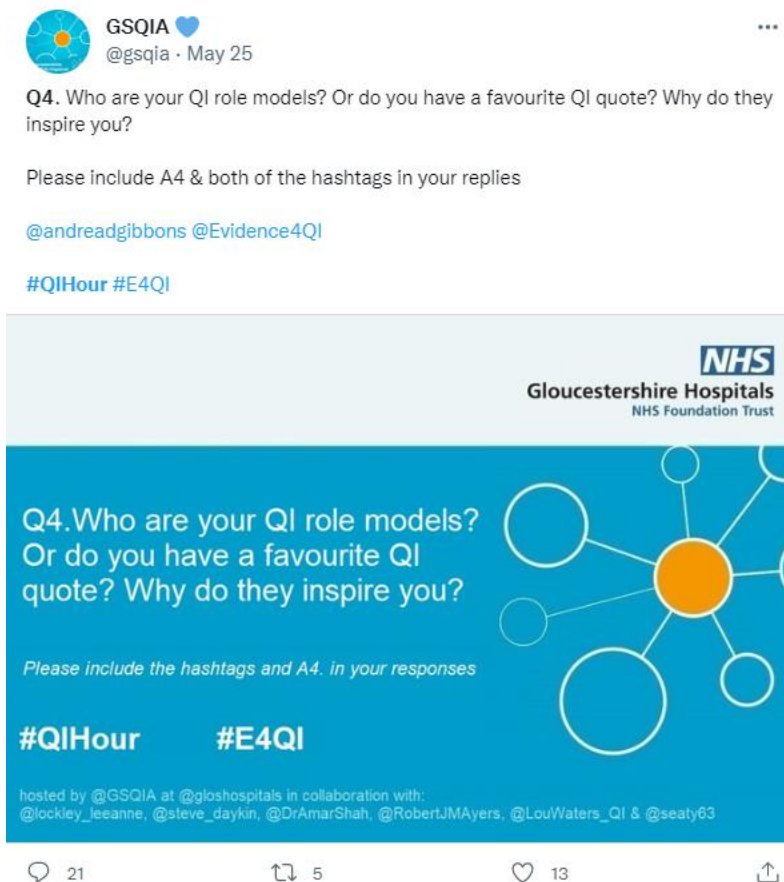
8:28 PM · May 25, 2022 · Twitter for iPhone

- Networking events (virtual or in person)
- Action learning sets
- Infographics – more visuals
- Sharing resources (& standardizing?)
- A free QI app (with tools, space to share & add favourite tools etc)
- An easy access place where you can search by 'keywords'
- Adapting knowledge into practice / research into practice
- Utilising the Academy of Fab NHS Stuff
- Sharing podcasts
- How to create effective case studies

(scroll down to next page)



Question 4: Who are your QI role models? Or do you have a favourite QI quote? Why do they inspire you?



There was a lot of love in the responses to this question with many participants being role models to others in the conversation. The beauty and joy of twitter for building relationships and sharing in an equitable and non-hierarchical way, bringing us all together.

[Cristina](#) responded with her role models and commented "SO MUCH respect for #LivedExperience partners in this space".

[Emma](#) said "That's a hard question! Role models are everywhere (& where you least expect them!). Some of the best are those that lead with humble inquiry & inspirational resilience".

[Teresa](#) responded:



Teresa
@KaiBoo77

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

A4

My #QITwitter family who have lit a fire & helped me grow.... #QIHour #E4QI



8:40 PM · May 25, 2022 · Twitter for Android

..and [Hayley](#) commented:



Hayley Pickles
@hayleypicklesRN

...

Replying to @gsqia @andreadgibbons and @Evidence4QI

A4. I'd say my biggest QI role models are the people I work with and look after on the front line. It's extremely challenging and this inspires me to try to make things better for both healthcare workers and the patients.
#Qihour #E4QI

8:42 PM · May 25, 2022 · Twitter for Android

Here is a list of role models that participants shared if you would like to follow them on twitter.

@HelenBevan	@DrNancyFontaine	@andyheeps
@donberwick	@fayjojo	@joyfurnival
@maureenbis	@lolleycal	@emmaadamsGenQ
@LouWaters_QI	@LindsayHanmore	@Earth_Kate
@SueLaceybryant	@MissHelenPardoe	@nickchamberson
@lockley_leeanne	@FabNHSSstuff	@Kaizen_Anil_MBB
@andreadgibbons	@HorizonsNHS	@ShirleyNorth10
@RobertJMAyers	@Sch4Change	@tamedprince
@AdamSewellJones	@emmachallans	@jane3545
@RealMikeRother	@katebhilton	@LynneWinstanley
@paulplsek	@Evidence4QI	#QITwitter

Shared quotes included:

"Sometimes you win & sometimes you learn". – John Maxwell.

"Fall in love with the problem you're trying to solve not the first solution that comes to mind". - unknown

“Reasonable people adapt themselves to the world. Unreasonable people attempt to adapt the world to themselves. All progress therefore depends on unreasonable people” – George Bernard Shaw

“How wonderful it is that nobody need wait a single moment before starting to improve the world” – Anne Frank

“A shared purpose that connect with emotions and values that moves people to action”. – NHS Horizons

“Data, data, data. I cannot make bricks without clay”. – Don Berwick

“Without data you’re just another person with an opinion”. – W. Edwards Deming

“Be the change you want to see in the world”. – often attributed to Mahatma Gandhi

“Quality is everyone’s responsibility”. - W. Edwards Deming

“People are entitled to joy in work”. - W. Edwards Deming

“Every system is designed to get the results that it is getting”. – often attributed to W. Edwards Deming

“Without change there can be no improvement”. - unknown

“Without knowledge, action is useless and knowledge without action is futile”. – Abu Bakr

The following word cloud is made up of words people used when describing their role models and also unnamed individuals/groups of role models shared.)



Question 5: What are your top tips for anyone that wants to make their QI projects more evidence based?



GSQIA ❤️
@gsqia · May 25

...

Q5. What are your top tips for anyone who wants to make their QI projects more evidence based?

Please include A5 & both of the hashtags in your replies

@andreadgibbons @Evidence4QI

#QIHour #E4QI



17

5

8



This tweet from [@SueLaceybryant](#) was in response to an earlier question but fit really nicely in to the report here:



Sue Lacey Bryant
@SueLaceybryant

...

A3 [#E4QI](#) [#QIHour](#) Top Tips include 1)reach out to your NHS library team & make them virtual members of your [#QI](#) project. [library.nhs.uk/nhs-staff-and-...](#) 2) Know you're not the 1st to tackle your [#QI](#) challenge. Work your networks And 3)please check current evidence [library.nhs.uk/knowledgehub/](#)



GSQIA ❤️ @gsqia · May 25

Replying to @SueLaceybryant @TheQI_Guy and 2 others

Any top tips you can share Sue?

#QIHour #E4QI

8:43 PM · May 25, 2022 · Twitter for Android

Sue also added “make your projects more [#E4QI](#) Find the evidence, se the evidence. Make evidence specialists part of your team. Ask them to find the evidence for you. Alert you to new evidence. There’s a theme here. Find your [#NHSLibrarian](#). Make change happen”.

[Teresa](#) commented “I’d say libraries or if you’re like us with none, (on) [#QITwitter](#) there’s always someone to point you in the right direction. Also learning how and where to research it opens things up so much”.

Early planning was a theme, with [Paula](#) writing “I would spend a bit more time planning and looking at what you want the end point to look like. It could be there is a specific thing you need to change or implement”.

Hayley [@HayleySGrice](#) had similar thoughts:



Hayley Grice
[@HayleySGrice](#)

...

Replying to [@gsqia](#) [@andreadgibbons](#) and [@Evidence4QI](#)

A5 spend more time in the planning phase, pause & involve stakeholders to ensure you’re seeking to answer the right question; establish measures from the outset; follow a [#QI](#) methodology; connect with research; link to audit or EBP standards-see audit as a QI tool [#QIHour](#) [#E4QI](#)

8:53 PM · May 25, 2022 · Twitter for iPhone

[Joy](#) suggested looking into “business/management literature on performance improvement, method/culture/systems/leadership evidence – can be ignored as *not* healthcare (and jargon different). Critical thinking (is) important here though re: quality of evidence & skills to adapt/adopt”.

[Jonathan](#) also suggested looking outside of health and care, commenting “evidence doesn’t need to come from healthcare. What can we learn and adapt from other industries? Some of (the) best ideas are based on experiences from elsewhere Netflix, Amazon, B.A etc”.

[Jonathan](#) said that “we need endless curiosity about why things work and what makes them work” and suggests reading – a lot.

[Cristina](#) responded “build your networks and share, and ask people to share too”.

Hayley [@hayleypicklesRN](#) commented “if you are unsure of how to make things evidence based (as I am) do not let this stop your ideas. It might still be a little gem so speak to people and get your idea out there”.

Sam [@samanthaclare](#) replied...



Sam
[@samanthaclare](#)

...

A5 - I’d also say not to be afraid to challenge views - whether that’s your own or your colleagues. If something makes you feel defensive - ask yourself why. Deep learning emerges that way. [#QIhour](#) [#E4QI](#)

8:53 PM · May 25, 2022 · Twitter for iPhone

Measurement also came up a in a number of responses as a mechanism for ensuring our improvement work is evidence based. [Emma](#) also raise the topic of evaluation: “also give some serious thought to evaluation as you go along – build your evidence and link to other evidence elsewhere”.

There was also a bit of discussion around “what do you mean by evidence?” – It’s a great question and this is how Andrea responded to it: “In the [@Evidence4QI](#) project we tend to take the widest possible definition and be as inclusive as possible; to mean every type of knowledge – from tacit knowledge gained by experience right through to robust academic research”.

[Jonathan](#) also commented about this stating “evidence is much more than what gets published. There will (be) so much ‘evidence’ of improvement, ideas and work that is making a difference close to home. Talk to your colleagues”.

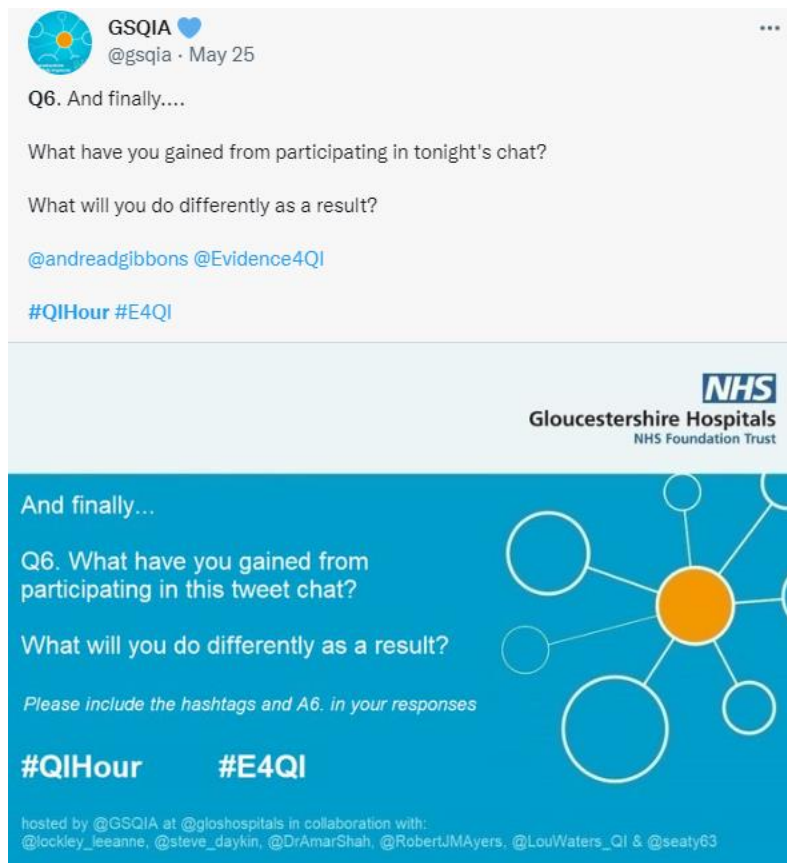
[Affra](#) reminded us how using evidence can help us to “stop duplication and reinventing the wheel and increase chances of success”.

Gemma [@gvhawtin](#) said “give it a try and make sure you get your colleagues to help you. Use what is already out there.”

Key words and themes that appeared included in response to Question 5: “What are your top tips for anyone that wants to make their QI projects more evidence based?”



Question 6: What have you gained from participating in tonight's chat? What will you do differently as a result?



[Ali](#) forgot how much she loves tweet chats and gained “meeting new people and colleagues, and gained new ideas”.

For [Robbie](#) “reading and participating has turned a frown upside down”.

[Gemma](#) responded...



Replying to @gsqia @andreadgibbons and @Evidence4QI

A6 [#QIhour](#) [#E4QI](#) always inspired and chance to read through the comments. We have a great community to share and always inspired by you all. Can only help in any improvement work. [#AHPSupportWorkers](#)

8:57 PM · May 25, 2022 · Twitter for iPhone

[@hayleypicklesRN](#) commented that she was “surrounded by like-minded inspiring people! And also feeling very welcome” which is great to hear! We like to host a welcoming space for our [#QIHour](#) chats so that is wonderful feedback for us.

[Andrea](#) shared the following:



Dr Andrea Gibbons
@andreadgibbons

...

Replying to @gsqia and @Evidence4QI

A6. I'm inspired & energised by you all & your passion for sharing, connecting, breaking down barriers. Thank you. We will work through your answers & use them to drive the #E4QI plan for the next 12 months. 🙏🙏🙏

#E4QI #QIhour

8:53 PM · May 25, 2022 · Twitter Web App

Key words and themes that appeared included in response to Question 6: “What have you gained from participating in tonight’s chat? What will you do differently as a result?”



Shared resources

[@Evidence4QI](#): ‘What are Integrated Care Systems?’

<https://www.england.nhs.uk/integratedcare/what-is-integrated-care>

[@andreadgibbons](#): Librarians are your very best friend

<https://www.youtube.com/watch?v=vCXnTqGFG18>

[@LouWaters_QI](#) (shared as an addition based on the chat): ‘Systems Convening: A Crucial Form of Leadership for the 21st Century’ by Etienne & Beverly Wenger-Trayner (free download): <https://wenger-trayner.com/systems-convening>

[@acserrao76](#): <https://future.nhs.uk/AlwaysEvents>

[@PhoenixAutumn](#) (*scroll down for image*)



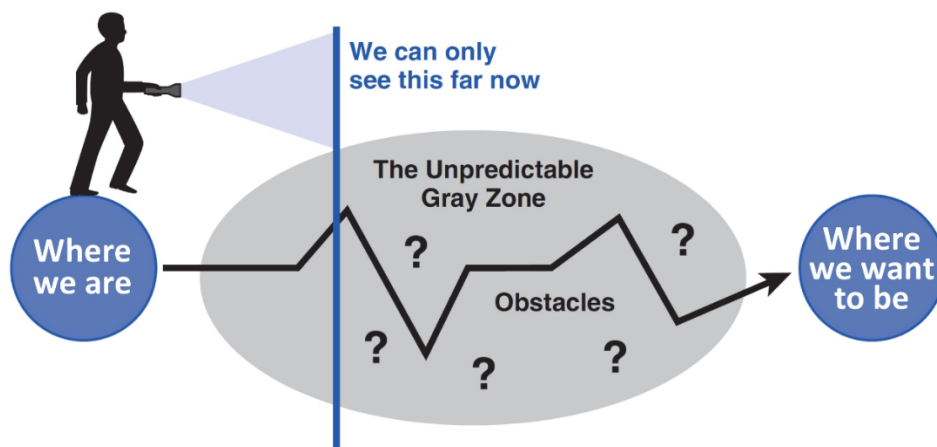
[@SueLaceyBryant:](#)

- Health Education England Library & Knowledge Services <https://library.nhs.uk/nhs-staff-and-learners>
- Health Education England Knowledge Hub <https://library.nhs.uk/knowledgehub>
- NHS Knowledge Mobilisation Framework <https://library.hee.nhs.uk/knowledge-mobilisation/nhs-knowledge-mobilisation-framework-postcards>
- Learning Health Systems Framework <https://learninghealthcareproject.org/background/learning-healthcare-system>

[@pjokkis:](#) Love the problem, not your solution [BLOG by [@ashmaurya](#)]

<https://blog.leanstack.com/love-the-problem-not-your-solution>

[@pjokkis:](#) [graphic from [@RealMikeRother](#)]



[@joyfurnival](#) & [@emmaadamsGenQ](#): Quality Management System resources, webinar recordings are available in the 'past events' on the Q Community website <https://q.health.org.uk/get-involved/past-events> Also search and explore the #QcomQMS hashtag.

[@RobertJMAyers](#): [Health Foundation] What is getting in the way? Barriers to Improvement in the NHS <https://www.health.org.uk/publications/what%E2%80%99s-getting-in-the-way-barriers-to-improvement-in-the-nhs>

[@MatthewMezey](#): Digital Special Interest Group <https://q.health.org.uk/community/groups/big-data>

The next #QIHour chat is on 'Culture for Improvement' joined by [Emma Challans-Rasool](#), Executive Director of Culture & Improvement at Sherwood Forest Hospitals NHS Foundation Trust. This chat will take place on 20th July 2022 at 8pm BST (GMT+1).

Follow [#QITwitter](#) for more from the improvement community.

We also encourage you to check out [The Academy of Fabulous NHS Stuff](#)

And register for the [School for Change Agents](#), a free online course starting in November.

If you are in the UK and ROI we also encourage you to apply for membership of the [Q Improvement Community](#).

Report produced by Lou Waters, GSQIA Digital and Networks Advisor & #QIHour host.