

Healthcare systems around the world are becoming more concerned with strengthening board level governance of quality. In England, national healthcare regulators are developing approaches, resources and interventions aimed at supporting senior hospital leaders in their role in the governance of quality.

New CLAHRC research investigates the organisational response to an improvement intervention in six hospital boards across England. The research, published in [a new BMJ paper](#) and [BITE-sized summary](#) shows the results a 30-month period of fieldwork, involving interviewing NHS board members, observing board meetings and analysing relevant documentation.

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CLAHRCBITE

Brokering Innovation Through Evidence

What do hospitals need for a board-level quality improvement intervention to work?



Health-care systems world-wide are concerned with strengthening the governance of quality and safety in hospitals. In England, the national regulators are developing approaches and resources to support hospital leaders in their role in the governance of quality.

This study formed part of a mixed-methods evaluation of an initiative designed to help hospital boards develop an organisation-wide quality improvement strategy. The initiative used a research-based guide for senior hospital leaders to develop and implement organisation-wide QI strategies (the QUASER Guide) developed from a study of quality in hospitals in five European countries.

We asked: (1) ***How do public sector hospitals respond to a quality improvement intervention, and what are the effects?*** (2) ***How do features of the social and political context shape the response?*** and (3) ***What are the implications for the future design and implementation of quality improvement initiatives?***

What was the aim of the project?

This study aimed to understand and explain the effects of an initiative to support the senior leadership teams of hospitals improve the quality of care, and to identify lessons for the design of future initiatives.

The intervention

The intervention facilitated the use of a research-based guide for senior hospital leaders to develop and implement organisation-wide QI strategies (***the QUASER guide***). The guide is based on findings from the QUASER study of quality in hospitals, a collaboration between five European countries.

The use of the guide was facilitated in six provider organisations by Foresight Partnership (an organisational development consultancy). The intervention involved a self-assessment questionnaire, which was completed by both executive and non-executive members of the board. Each organisation nominated three board members to attend a series of learning events. In addition to developing an organisation-wide QI strategy, participants were given the task of implementing one organisation-wide QI project.

This research is funded by the National Institute for Health Research (NIHR) Collaboration for Leadership in Applied Health Research and Care North Thames (CLAHRC North Thames).

The findings will be relevant to NHS Boards, the staff and clinicians they lead and all those in the NHS working to improve the quality and safety of care.

As well as researchers, the results will be of interest to policymakers, regulators, knowledge mobilisation organisations and thinkers on boards and leadership across all sectors.

Read the iQUASER paper

[Explaining organisational responses to a board-level quality improvement intervention: findings from an evaluation in six providers in the English National Health Service](#)

Background Healthcare systems worldwide are concerned with strengthening board-level governance of quality. We applied Lozeau, Langley and Denis' typology (transformation, customisation, loose coupling and corruption) to describe and explain the organisational response to an improvement intervention in six hospital boards in England.

Read a BMJ editorial highlighting the paper as *"an example of an empirical study that successfully enters into dialogue with management theory"*

[Engaging with theory: from theoretically informed to theoretically informative improvement research](#)

Repeated calls have been made for the increased use of theory in designing and evaluating improvement and implementation interventions.¹⁻⁴ The benefits are argued to include identifying contextual influences on quality improvement (QI), supporting the generalisability of findings and anticipating how future phenomena might unfold.^{2 5} Most importantly, the ability of

Read our "need to know" summary

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