



# **A governance model for Q**

## **Summary Paper**

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## Summary

This paper describes a governance and regional organising model for Q, drawing on literature, interviews with external stakeholders and discussions with the Q team. A detailed report on the options considered is available upon request.<sup>1</sup>

The Q Initiative emerged as a bold response to the Berwick Report<sup>2</sup>, itself a compelling exhortation to embed learning into the health system.

Through Q, the Health Foundation and NHS Improvement are building capacity and capability for improvement in ways that have not been tested before in any system in any part of the world.

The RAND evaluation that has run alongside Q has made some clear recommendations for Q going forward, praising Q and the culture and characteristics it has nurtured from the start<sup>3</sup>. These include; the importance of harnessing diversity through 'a shared core of values supporting a wide variety of activities', maintaining inclusivity, lack of hierarchies, creative ways of working, a commitment to the inclusion of under represented groups, self awareness, and the desire to listen and respond to all views however challenging or contradictory. (p62).

All of these characteristics and ambitions require a governance and organising model that is visionary, values based and inclusive, as well as robust and accountable. This paper therefore proposes the concept of a 'Q Commons', in which stewardship, shared decision making and a desire for the common good become encrypted in the structures and create a platform that allows Q to continue to flourish.

## 1. Introduction

- 1.1. Q is a growing community of people skilled in improvement, working cross the UK. Q is also resources, activities and fledgling infrastructure, connecting, supporting, mobilising and developing people and improvement projects. Its long-term aim is to create, at national scale, capacities for improvement,<sup>4</sup> to increase the dosage and use of quality improvement expertise in the health and care sector,<sup>5</sup> and foster a learning environment to improve health and care.<sup>6</sup>
- 1.2 Q is committed to co-design, innovation, agility and a predominantly non-hierarchical approach to all its endeavors.<sup>3</sup> It shares many of its values with quality improvement initiatives and social movements around the globe, but is unique in design and composition. Q's design statement outlines a theory of change that is inclusive, ambitious and recognises the broader context and organizational structures in which Q activities sit.<sup>7</sup>
- 1.3 Literature on the components of 'good' governance suggests that accountability, transparency, inclusivity, and effectiveness are key.<sup>8</sup> 'Good' governance for Q must involve establishing structures and processes that are capable of overseeing a high quality multi-provider programme of activities in a way that furthers its long-term aims and underpinning values.

## 2. What does a Q governance model need to take account of?

- 2.1 One of the distinctive features of the Q community is its approach to new ways of working across traditional boundaries.<sup>3</sup> Q has the potential to offer something qualitatively different through its activities, building cross-boundary capacity and capability within the system, creating opportunities to test and develop new ideas for improving health and care.
- 2.2 One of the other important features of the Q initiative has been its lack of hierarchy and its commitment to involving patients, carers and diverse professions from within and beyond the health and care sector in design processes.<sup>3</sup>
- 2.3 Q has a strong commitment to flexible, iterative learning, minimising bureaucratic processes, maximizing learning between members and promoting a sense of shared ownership across the community.

- 2.4 Any governance model will need to facilitate two-way relationships between national and regional activities, as well as strong relationships with other improvement organisations and ensure these are well managed as the Q community grows in size and complexity.
- 2.5 In summary, the new governance model will need to nurture these cross-boundary, non-heirarchical, creative relationships which allow Q to contribute to improvement at all levels of the health and care economy. Investing in cultivating effective structures and patterns of behavior for the stewardship of Q-specific resources and activities has the potential to create connections and ways of working that help the Q community contribute to its aspirations. The 'governance' structures are not just a technical enabler for delivery, but will be a significant backdrop to the member experience and reputation of Q. What we put in place should bring wider benefits in terms of establishing a platform for collaboration between different parts of the mainstream health and care system, creating a strong interface with existing organisations and groups that play a significant role in the delivery of QI across the UK.

### **3. A new model of governance for Q**

- 3.1 This specific project has identified a wide variety of governance models used across health and care, education, voluntary sector organisations and private enterprise, drawing on examples from around the world<sup>1</sup>. These range from formal bureaucracies, to informal collectives defined by lack of formal structures, sometimes known as adhocracies (see Appendix 1 for a summary). The model proposed for Q draws on different elements of these.

#### **The 'Commons' model**

- 3.2 The governance model proposed for Q is one that is values based and inclusive, as well as robust and accountable. It is based on the notion of stewardship of services or assets, offered for 'the common good'. This model was referred to by Berwick in 2009<sup>9</sup> and more recently by Ham and Alderwick<sup>10</sup> as having the potential to envision a different and more dynamic way of working in healthcare. It also has strong links to Donabedian's assertion that the ethical dimension of quality improvement work is essential to its success<sup>11</sup>.

- 3.3 Communities in many parts of the world have traditionally had communal land, described as ‘the commons,’ where people graze their livestock. In 1968, Garrett Hardin wrote a paper using the grazing commons as a metaphor for the problem of over-population arguing that many of the world’s resources – food, water, energy, were being squandered because human beings were unable to self-organise in the interests of the collective good. He called this ‘the Tragedy of the Commons.’<sup>12</sup>
- 3.4 Around the same time, the economist Elinor Ostrom<sup>13</sup>, was working on an alternative theory, which demonstrated - in very practical ways, that people could co-produce, guided by design principles which promoted local, collective, non-hierarchical decision-making. She worked with communities around the world on projects ranging from town planning, to policing, water supplies, and fishing. All of these used 8 design principles (see Appendix 2) for ‘*Governing the Commons*’ and always involved bringing multi-professional groups together in ‘workshops,” converging around a common problem they all wanted to solve. Ostrom worked on the premise that complex, multi-level solutions were required for complex, multi-level problems, and the best way to achieve those was through co-production. Through active, committed consensual stewardship and cooperation, ‘the common resource’ in whatever context, had the potential to become more productive for a greater number of people.
- 3.5 For Berwick, adopting this ‘commons’ approach relates directly to achieving better health, better care at lower cost. Berwick<sup>9</sup> describes a healthcare facility in Cedar Springs, based on this model, which not only delivers better outcomes and has reduced professional rivalry, but costs 27% less than the average per capita cost across the US. In a similar vein, Ham and Alderwick refer to Ostrom’s model when they suggest that NHS organisations need to move away from a ‘fortress mentality’ and replace this with a collaborative, place-based approach to delivering care. This will require a new kind of leadership in which stewardship of the ‘common pool of resources’ in health and care becomes a driver for change.
- 3.6 In her keynote speech at Q’s third design event in 2015, Mary Dixon-Woods<sup>14</sup> argued that community-based approaches have huge potential for large scale learning in quality improvement. She suggested that ideally, quality improvement work has to happen locally, nationally and internationally to achieve the desired outcomes. This needs the commitment of policymakers but it also needs strong and effective networks that become the delivery mechanism for change, working *with* people rather than *on* them. In this context, Dixon-Woods referred to Elinor Ostrom’s design principles, suggesting that these might provide a steer for the Q Initiative going forward, and a way of ensuring collective decision-making was at the heart of Q.

- 3.7 Building on these reflections, this paper proposes that by using the language and spirit of 'the Commons,' Q would be communicating a clear message about the non-hierarchical, diverse nature of the Q community, embedding the values of co-production, shared decision-making and stewardship within its national and regional structures as well as with existing QI infrastructures. This would also draw on the strengths of a distributed and shared governance and organising model, in which Q member input into decision making operates on multiple levels, and connections and interactions between members in different parts of the UK is maximized.
- 3.8 The collective scarce resource or 'commons' in the context of Q would be (a) any resources made available specifically for Q activities and at least as importantly (b) the expertise and energy that Q members choose to bring to Q. We know that time and space are scarce and precious to Q members: their decision to voluntarily make time and commit to Q will be critical to its vitality. For members to do this, they will need to feel like collective spaces and time is well used and not inappropriately dominated by one group or agenda.
- 3.9 The model would allow members freedom to work together and to make decisions locally, and to self organize within regional structures. It would hold individuals to account in ways that are proportionate to the task in hand, and provide an underpinning logic and framework for groups who choose to work together on projects. An analogy used by one stakeholder was of people on a modern-day common, where there may be less grazing, but multiple users. Some people take responsibility for managing and improving the space and agreeing and ensuring the rules of the common are met (such as not cutting down trees or digging up the grass). However the vibrancy of the space depends on people bringing their picnics, ball games, more organized sports or activities and occasional fairs.

## What might the Commons model look like for Q?

- 3.10 The commons principles would be something that would apply across Q, with all members having a chance to influence how the 'common space' of Q is run (see Appendix 3). For most people, this might mean occasional input into decisions and active involvement in specific aspects of running Q (such as helping lead specific activities, recruitment processes or lab projects). We would then seek to identify a small group of people in each area that are willing to take a more active stewardship and leadership role for Q, forming a **Q Commons Stewardship Group** (provisional working title) for that region or UK country. Representatives of those who take responsibility at a regional level in this way would be the members of a central Q commons stewardship group.
- 3.11 The **Central Q Commons Stewardship Group** would become in effect a unitary board with between 14-16 members. There would be Q executive and non-executive members, all appointed, and chaired by an appointed Convenor. It would have a representative from the English regions and from Scotland, Wales and Northern Ireland's Commons Stewardship Groups. It would have some responsibilities for financial, strategic and performance oversight for Q.
- 3.12 The commons groups in the English regions, Scotland, Northern Ireland and Wales would provide a local platform for stewardship of Q members and activities at regional level, facilitating learning and development and knowledge exchange within and between the different local commons with a direct, two-way link to the Central Q Commons group. Each of these might have up to 7 members, depending on the context, some of whom might have a specified remit or role to ensure the right skill mix of individuals. They would form strong alliances with other QI organisations (AHSNs, collaboratives, and other QI initiatives) where these exist.

## **Q Commons Stewardship Groups**

### **indicative responsibilities**

1. Work with stakeholders to develop the delivery strategy for Q at a regional level, including how it connects with the wider strategy for improvement and other initiatives and organisations. This should help Q evolve over time as an important platform for cross-system collaboration and development.
2. Oversee Q recruitment processes and wider action to attract and develop a pipeline of applicants for Q.
3. Secure resources and make decisions about the allocation of Q-specific funding, involving members as appropriate.
4. Develop and oversee the 'common spaces' of Q within the area, agreeing ground rules with members, the ways of monitoring the health of the community locally and sanctions for departures from the values of the commons.
5. Encourage and support a core of active members to play particular roles in leading Q locally, ensuring they are appropriately recognized for their contribution.
6. Oversee design, delivery, evaluation and improvement of Q specific events and activities.
7. Promote engagement in Q lab projects and the outputs of these projects.
8. Protect and enhance the reputation of Q regionally, promoting it to employers and other stakeholders within the area, ensuring they understand and respect the basis on which Q works.

3.11 We would invest in a selection process and some development for the convenors and members of each commons group. Once established, these Q commons stewardship groups would self-organize and evolve to reflect the local context and infrastructures in line with some general principles that would be agreed collectively for Q. These principles would align with Ostrom's principles and might include:

- Transparency: meetings held in public with minutes shared online
- Thoughtful collectivism: creating opportunities for members to help make decisions and deliver aspects of Q, in ways that are likely to feel satisfying for members and ensure high quality outcomes.
- Inclusivity and respect for diversity: encouraging involvement of different groups



- Connected but independent: making the most of connections with existing groups and institutions, but avoiding capture by any one agenda or organization.
- Open learning and improvement: creating ways to reflect openly on what's going well and not so well as a way of helping continually improve
- Mature management of conflict: seeing disagreement as an inevitable and often creative part of a cross-boundary passionate community and finding productive ways to use or resolve such conflicts
- Proportionate accountability and recognition for contributions: finding ways to enable delivery of Q activities and leadership that predominately works on a voluntary basis, but recognises when more formal delivery contracts will be needed.

## 4. Conclusions

- 4.1 The Commons governance model combines elements of centralised structures, such as clear lines of accountability, whilst drawing on the creative elements of less formal structures, such as freedom to self organize in ways which foster local stewardship for the common good. It is visionary, values-based and inclusive. Its regional structures would work with existing infrastructures where appropriate. Finally, and importantly, the model has the support of the Q team.
- 4.2 Q members from the regions are invited to consider piloting the commons model described above, with support from the Q team. We would be looking for up to three regions to act as pilot sites and to work with us to test the model, and look at ways in which it enhances existing work through Q as well as other established QI organisations and structures.

## 5. References

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## Appendix 1 Advantages and disadvantage of different governance structures

Model	+	-
Centralised	<p>Strong control, Easier to control brand Single voice to ensure consistency</p>	<p>Reduces diversity, Weaker relationships, Stakeholders have sense of being 'told' what to do by the centre Unique needs of 'units' not well served Cultivates command and control culture</p>
Federated	<p>Balances freedom with control, Fosters a strategic, longer term approach through agreements, Creates opportunities for diverse approaches and standardises the best ones</p>	<p>Too little central influence Consensus decision making can delay action, Some groups may opt out, and risk of fragmentation unless there are multiple rules and regulations in place</p>
Adhocracy	<p>Flexible, informal, Inclusive, non hierarchical, based on shared decision making, Used in other networked organisations</p>	<p>Too fluid for funders Supports the strong voices but inhibits the weaker ones Same potential disadvantages of federated model – delay, opt out and risk of fragmentation</p>
The Commons	<p>Aligns with Q values of stewardship, promoting and maintaining the 'common good' Builds an ethical dimension into Q Creates a representative filter which works 2 way – to and from national to regional levels 'Commons' is a known concept within the Q community Promotes shared responsibility and decision making Allows innovation and flexibility but clear structures and boundaries in place Promotes diversity Responsive to change</p>	<p>Some potential disadvantages of federated model – delay, opt out but mitigated by shared values of stewardship and 'maintaining the common good' in terms of Q activities and QI in health and care, strong links between the regions and the centre</p>

## Appendix 2 Ostrom's Design Principles for Governing the Commons

### Design Principles

1. Define clear group boundaries
2. Match the rules governing use of common goods with local needs
3. Ensure those affected by the rules can participate in modifying them
4. Make sure the rule making rights are respected by outside authorities
5. Develop a system, carried out by community members, for monitoring members' behaviour
6. Use graduated sanctions for departures from the values of the commons
7. Provide accessible, low cost means for dispute resolution
8. Build responsibility for governing the commons resource in nested structures through the entire interconnected system

*Governing the Commons*

## Appendix 3 Proposed Q Commons Structures

