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La Piramide della Collaborazione

Marco Bettoni, Steinbeis Consulting Center
Knowledge Management and Collaboration (KMC)

24. KNOWLEDGE MANAGEMENT TRACKS
31 Ottobre 2019, Milano, Italia

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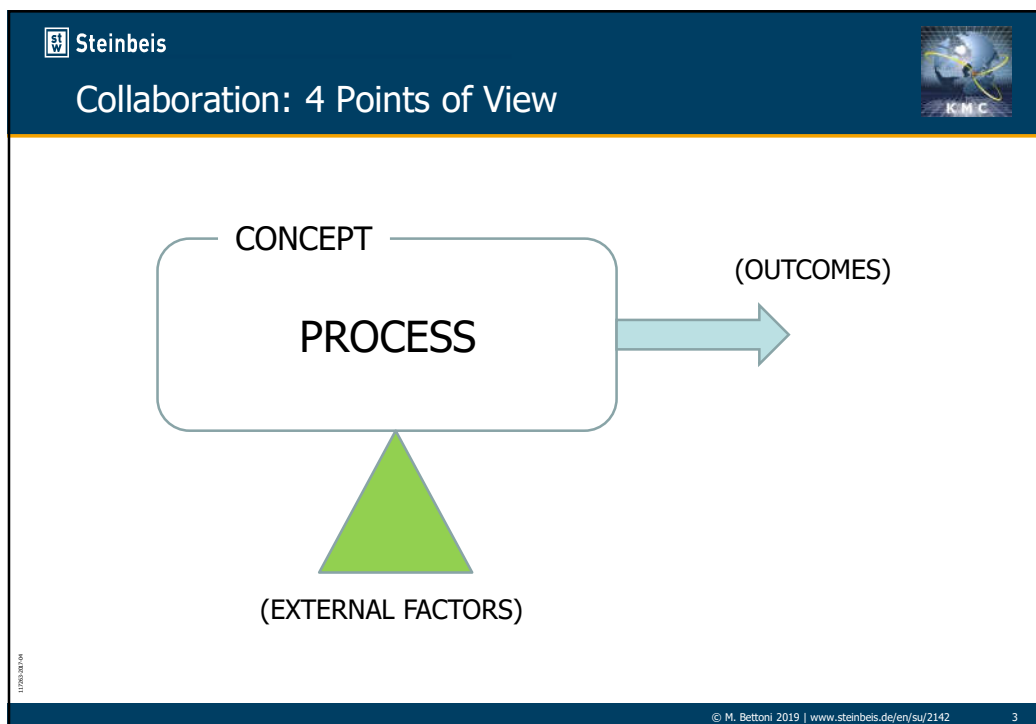
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Agenda

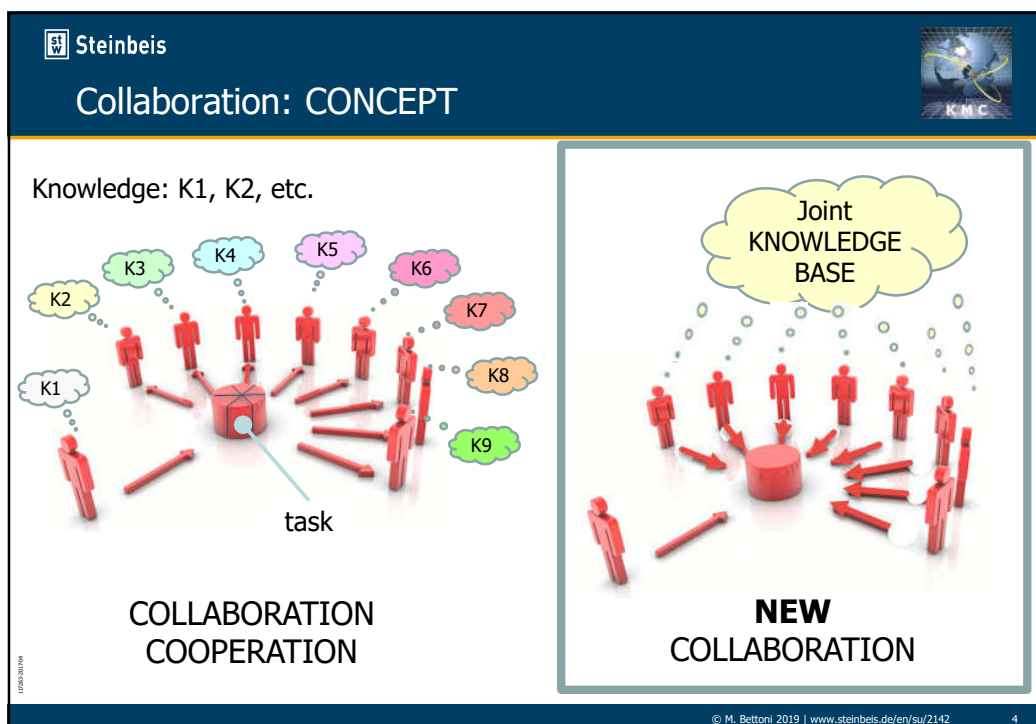
1. Punti di vista sulla Collaborazione
2. Cooperazione / Collaborazione
3. Modello della Piramide
4. Piattaforma 3D «QUBE»
5. Applicazioni pratiche – ambito sanità / salute

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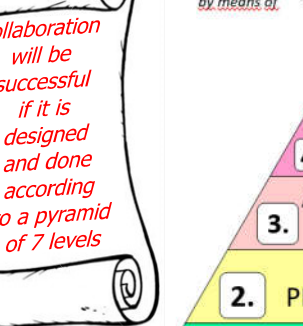
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Pyramid Principle of New Collaboration



Collaboration will be successful if it is designed and done according to a pyramid of 7 levels




END
MEANS END
MEANS END
MEANS END
MEANS END
MEANS END
MEANS

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QUBE – Group meets in plenum




The screenshot shows a virtual meeting room with several avatars represented by colorful, blocky figures. They are arranged in a circle, facing each other. The room has a yellow wall on the right and a striped wall on the left. There are various posters and notices on the walls, and a large screen displaying a presentation. The interface at the top includes a menu bar with options like Meeting, Tools, Admin, Guides, and Extras. The bottom of the screen shows a toolbar with icons for various functions and a status bar indicating the current view.

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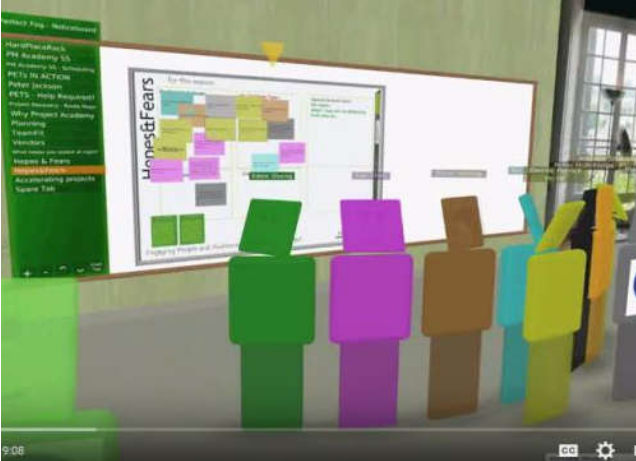
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QUBE – Group posts at a panel




4. CO-CONSTRUCTION OF KNOWLEDGE

3. ARTEFACTS-MEDIATED INTERACTION


<http://www.pentaclethevbs.com/>
<http://qube.cc>

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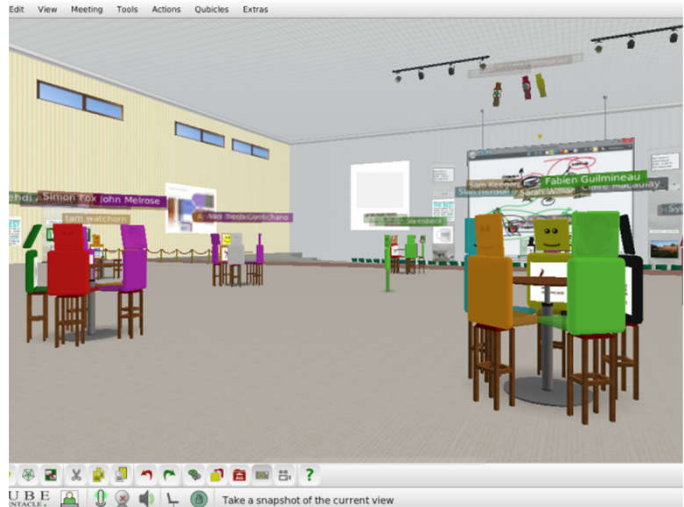
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QUBE – Breakout session

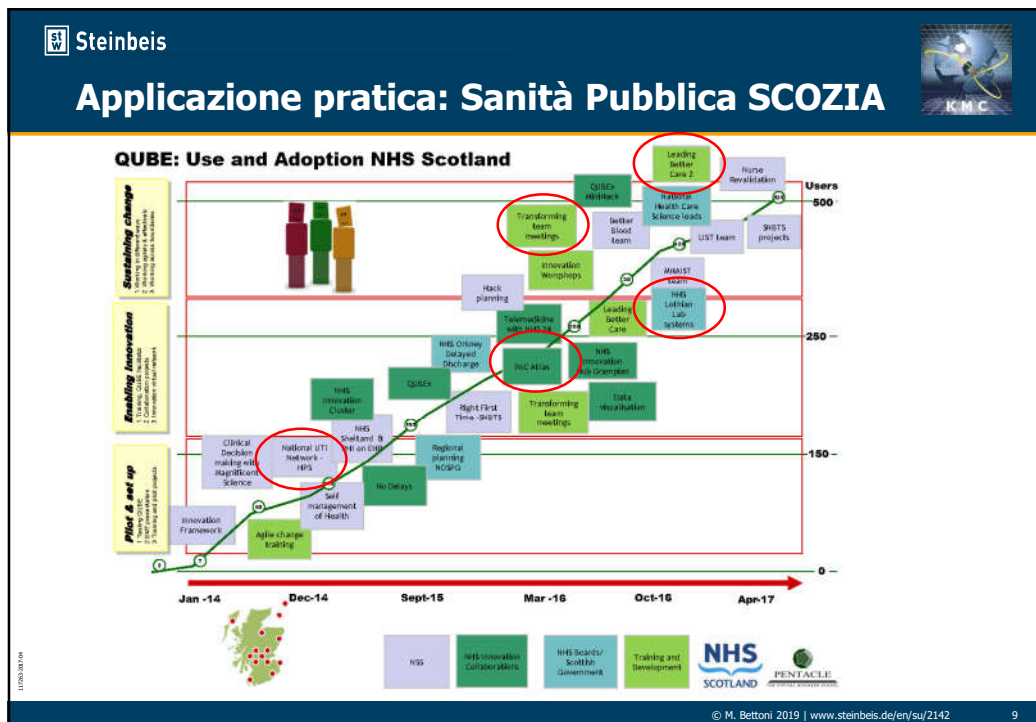


5. NEGOTIATION OF MEANING

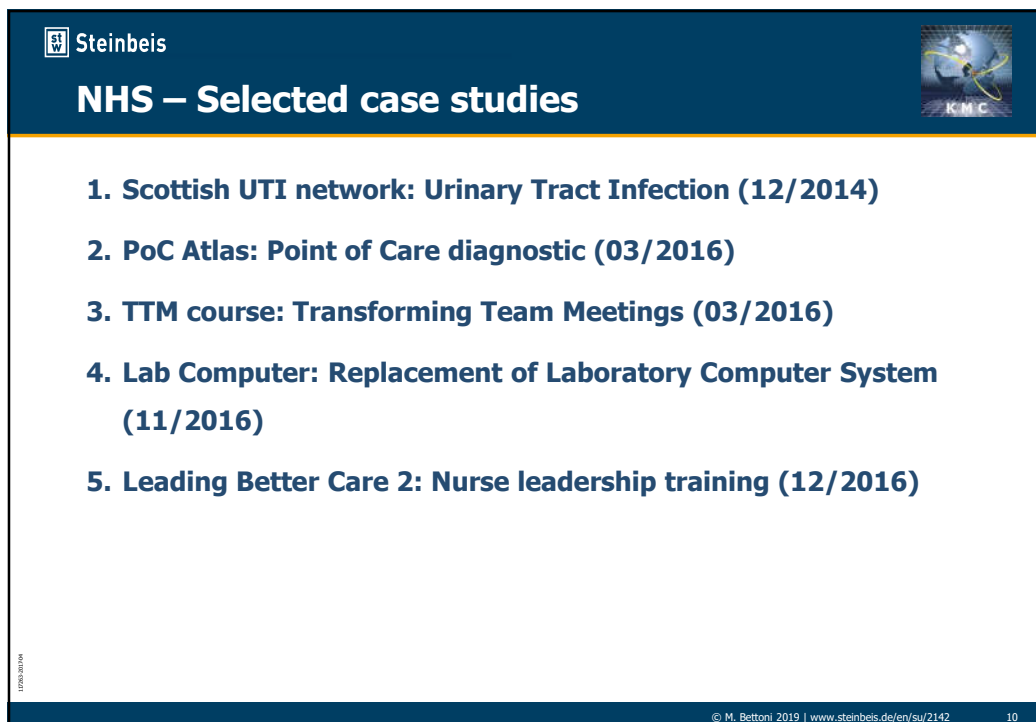
<http://www.pentaclethevbs.com/>
<http://qube.cc>

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1. Scottish UTI network (1/2)

Using QUBE to drive innovation and change; an NHS case study for the Scottish UTI network


Jane McNeish
Lisa Ritchie
Health Protection Scotland
December 2015

A new way of working
Our interest started when a colleague told us she'd found a new way of working - on an organisation-wide, 3D fully-immersive platform, called QUBE. QUBE enabled her to work with a geographically dispersed team of people who had never met in person. She said that within 15 mins, the team were working effectively and the project was being developed at real speed. The organisation (NHS) had approved wider testing of QUBE to help drive innovation and apply new ways of working. She suggested we attend the 'Accelerating Change' programme on QUBE with other NHS colleagues, to learn how to work differently, based on 'new world principles'. (www.workstationforlife.com)



Learning how to innovate in National Services Scotland

Accelerating change
The accelerating change programme started with a "gathering" which allowed us to familiarise ourselves with working on QUBE, ensuring we could all navigate around the Qube and find out who was there and what they were working on. The programme required us to bring along a project, to apply our learning directly to our work, and to then share that learning with our teams. This meant that we remembered what we'd learnt and our teams benefited immediately from new knowledge, learning how to do things differently too.




By meeting on QUBE, we learned that if our project is stuck in the fog, there is a way out of it!

Sharing our experiences
Over the course of 4 workshops and group tutorials, we discovered new ways of working to ensure we had engaged our stakeholders, aligned our teams on the deliverables and understand new ways to develop communications, business cases and project plans quickly. We also learned how to deal with different types of project and that we can manage risk more effectively if we remember the plot of alien sci fi movies!

Killing risks is just like killing aliens

We formed a network of QUBE champions, and finished off with a QUBE show and tell of what we'd done in such a short time to our Directors. We found we loved working on QUBE. It was fun, effective, saved time and most importantly made us behave in a more collaborative way. It helped us really ask ourselves questions around our assumptions and proposals and develop new ideas and creative solutions to meet the needs of our customers and stakeholders. We could immediately apply all of our learning to our work and engage our teams in new ways of working.





QUBE tutorial

Personal Stories Told by participants
https://www.youtube.com/watch?v=SCUy_WiDQs

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1. Scottish UTI network (2/2)


Delivering change @ speed
Once the initial course was over, we wanted to run our own project on QUBE. This was the Scottish National Urinary Tract Infection (UTI) project which Health Protection Scotland had been asked to lead. A Project Qube was set up for our team and one of our super-user colleagues facilitated us through the work. Regular weekly "drumbeats", were set up to drive the project forward. These were at the same time and day each week (no more trying to find suitable times for everyone to meet) and we never cancelled or rearranged them. Amazingly we had nearly 100% team turn out every week. We started each drumbeat with our "Hopes and Fears" to clarify what we wanted to do in the session (no more agendas) and always finished with a "Sticky steps scheduling" (actions for the team based on the work we had agreed) so no more writing up minutes. Even more impressive is that everyone did their actions before the next drumbeat.

Developing our project using Performance Enhancement Tools (PETs) embedded in QUBE



GagLap Hopes&Fears StickySteps
www.qube.cc

We came to QUBE with a project plan spanning 18 months. First, we intended to invite all our stakeholders to an event to tell them about the network and bring them on board. But was this the right thing to do? Would it be effective and deliver what we needed? How much would it cost? Our facilitator suggested a 4D event hosted and facilitated on QUBE - a workshop for around 15 key stakeholders. We challenged our thinking with different PETs (performance enhancement tools) that examined who our stakeholders are and their levels of engagement and support for the project. Just 20 minutes in, we realised that a national event may have the opposite effect of what we were trying to do, quickly making us consider alternatives, with full support from the steering group.



Conference poster describing the UTI network approach

Just 4 weeks later, through our weekly drumbeat, we had come up with new ideas, researched options, developed a solution and started to test this solution with the steering group. Not only was the solution a novel way to create a network and best practice for Scotland in UTI infections, but it also delivered a mechanism where users

monitored best practice within their own peer groups. HPS co-ordinated but did not dictate best practice, ensuring effective uptake to improve health outcomes. We continued hosting QUBE workshops with stakeholder groups to help them meet the needs of their peer groups in delivering best practice health care.

Just 6 months later, we realised we had planned drumbeats we didn't need - the project had effectively been delivered **over a year early**. We had spent less time on it - estimating that the work we did in our drumbeats meant that we achieved things 50% more quickly. No-one travelled for meetings or workshops - saving even more time and we'd come up with a solution through which the community could own, promote and self manage their own best practice, effectively embedding this practice across all stakeholder groups, so that maximum improvements to health can be achieved.

Overall outcome
An innovative solution delivered:

- ◆ In half the time, at
- ◆ Reduced costs, with
- ◆ Less resource effort, but with
- ◆ Collaboration and engagement from over 50 stakeholder groups in a novel way, to
- ◆ Ensure success, and
- ◆ Improve the health outcomes of patients

For more information contact
lr Ritchie@hps.nhs.uk
NHS.innovation.scotland/nhs.uk

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2. PoC Atlas

Working on QUBE

- Stakeholder's representatives met and developed a 5Ps* to describe the project. All Stakeholders were then identified and the 5Ps was shared with the wider group to ensure buy in.
- Four half hour project drumbeats followed, at which the required database and communication for industry were developed in collaboration.
- Between drumbeats the database was tested by the industry members and clarity was sought on how best to distribute the database. All information was captured on QUBE to allow the project plan (StickySteps*) to be updated in collaboration.
- Risk analysis (Fix-it-Now*) was completed while waiting for the pilot data to be returned.
- Final changes to database and communication were made collaboratively following the pilot in a 30 minute drumbeat before issuing to industry colleagues for data submission.

*Performance Enhancement Tools (PETs)

Point of Care Diagnostic Atlas
NHS Scotland

Background

Across NHS Scotland Point of Care testing kits are either developed locally or resourced from a range of both large and small diagnostic companies. Currently there is no available information at a national level to help determine:

- What tests are most effective
- Which companies the NHS procure from and how much is spent on kits
- What gaps there are in the market that would benefit from new diagnostics kits

This impacts on

- The NHS: Spend (economies of scale) and provision of the most effective tests
- The patient: Range of tests available, speed and accuracy of results
- Industry: Identifying areas where better or new diagnostics could be developed

Working on QUBE we achieved in just 8 half hour sessions what we have been trying to do for 2 years

Mike Gray, Service Manager Laboratory Medicine, NHS Lothian

Performance Enhancement Tools

Outcomes

- Prototype PoC Atlas and visualisation tool to enable analytics and assessment to support efficient and effective patient services
- Total meeting (drumbeat) time 4 hours over 8 weeks with effort between drumbeats no more than 2 hours each
- Collaborative solution: NHS, Policy, Industry
- Learning new tools and changing how we work

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3. TTM course

TRANSFORMING TEAM MEETINGS

NATIONAL SERVICES SCOTLAND

Team Selfie as part of the 'tech clinic'

Drop shell from part of the Action Replay PET summarising what worked well

Action Replay

Worked well?

Not Planned? Planned?

Why did this happen? How can we repeat it?

The Course

The Transforming Team Meeting Course consisted of 3 short workshops over 2 weeks. The course was aimed at those who had experience of working on QUBE and wanting to start to be able to facilitate their own team drumbeats.

The Content

The course consisted a range of learning to support understanding why we need to work in different ways, including a range of Performance Enhancement Tools (PETs) for everyday team meetings to Align the team (Hopes&Fears), Planning (StickySteps), Risk (Fix-It-Now) and review (Here2There, Action Replay), a "Tech clinic" and understanding how to run a team Drumbeat to move us from meeting and talking to meeting and doing, from communicating to engaging and from long and infrequent meetings to regular and sort action based drumbeats.

Outcome

- Cross organisational learning and support for doing things differently
- Basic QUBE facilitation skills to support local teams & colleagues
- Range of new tools to be applied to team meetings both on and off QUBE
- Recognition of how to better engage and how to break change into manageable chunks

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4. Sistema Computer per Laboratorio

Background

It has long been recognised that the current laboratory system is built on aging technology that has been developed in an ad-hoc manner over a number of years to meet the ever changing demands of laboratory testing.

We are currently unable to improve process, safety, effectiveness or efficiency with the system that is in place just now:

- Increased tech support due to bolt on solutions
- Lack of joined up reporting and clinical decision making
- Delayed end to end process due to the number of workarounds
- Inability to meet new and future demands due to ageing technologies

These issues all add to the overall cost (staff and system support), reduced ability for both management and clinical decision and risk of reduced patient care and safety

Despite this the current system does work and the lack of resources and perceived time to develop a strategic business case has ensured this activity has not been a priority for the NHS Lothian....

Until Now....

When we discovered a new way of working, in collaboration and at speed

Its called **QUBE**

Replacement Laboratory Computer System
Strategic Business Case
NHS Lothian

HOW DID WE WORK DIFFERENTLY?

- ✓ Set ourselves up with a Virtual project Quibble
- ✓ Agreed to meet every Tuesday for 45 mins at 12 pm
- ✓ Replaced standard agendas with Hopes & Fears* to align ourselves around the teams needs on a weekly basis
- ✓ Replaced minutes and actions with RAPID* to ensure tasks were manageable, shared equally and agreed by team members
- ✓ Worked through a range of Performance Enhancement Tools (PETs) to collaboratively develop our ideas, capture our benefits, risks, options and costs
- ✓ Met and worked rather than met, talked and then worked outside of the meeting
- ✓ Removed admin – no meetings to arrange, no papers to write and share, no emails, no minutes, no agendas.
- ✓ ALL the work was captured in our virtual office and if anyone missed a session they could catch up easily after

Outcomes

- Following 6 weekly sessions we had a document developed and signed off by the team
- Following the 7th session we had received input from key stakeholders and made final changes prior to engagement with the Board
- By session 8 we had reviewed the process and completed the lessons learned
- Total time spent per person on the entire project - less than 2 days

This turned a potential tortuous 'single-person' project into an inclusive sharing of ideas, with open sharing of risks, benefits and creative solutions in a defined and productive 'melting pot'

Mike Gray, Service Manager
Laboratory Medicine, NHS Lothian

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5. Leading Better Care 2

LEADING BETTER CARE NURSE LEADERSHIP TRAINING

<https://www.steinbeis.de/en/su/2142>

VIRTUAL TRAINING FOR SENIOR CHARGE NURSE LEADERSHIP TRAINING

Leading Better Care Nurse Leadership Training

NATIONAL SERVICES SCOTLAND

Survey Responses

99% Understood why we need to work in different ways

99% As having a real project to work on helped embed the learning

75% Said it was relatively easy to form new teams and relationships

99%

New World Leadership

by Calum Thomson and Tam Watchorn

Leading Better Care (LBC) is a national programme which has been consistently evolving since its inception following the Senior Charge Nurse review in 2008. The LBC programme is informed and driven by the excellence in care which described Scotland's National Approach to Assuring Nursing Midwifery and Care and the NMC Code of Professional standards of practice and behaviour for nurses and midwives

Building on the knowledge gained in LBC this year's course focused on 3 sections to demonstrate a commitment to Excellence in Care: Develop Myself, Develop the Service & Development of Resources

This year we wanted to try something completely Different

Virtual Training on QUBE

QUBE is a virtual environment that enables course participants to join workshops and tutorials from anywhere. In addition, teaching and learning are fast paced due to the unique techniques used and the variety of performance enhancement tools that are applied immediately to project work to enable peer support learning and direct application to day to day work.

LBC Programme

The course ran over 2 months with four 2 hour workshops (equating to around 4 days training in the real world) and regular tutorials (drumbeats) for cross divisional project teams (quints) to work on their assigned project. Following course completion, the project quints were asked to complete a virtual presentation that was shared with some key stakeholders from across NSS and the NHS at a "Show & Tell" to support learning

Outcomes

- ◆ New collaborative teams formed quickly to action assigned projects
- ◆ Range of new tools (PETs) to support leadership and leading change
- ◆ Understanding of why we need to work in new ways and tools to enable us to deliver quickly
- ◆ Understanding why and how to collaborate effectively on change
- ◆ Agile project management tools
- ◆ Full participation with busy & fun sessions
- ◆ Immediate application of learning to day to day business

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Prof. Dipl.-Ing. ETH Marco Cesare Bettoni
 Steinbeis Consulting Center
 Knowledge Management and Collaboration (KMC)
 Ingelsteinweg 17, CH 4053 Basel - Switzerland
 A Steinbeis-Network Enterprise

Office: +41 61 331 16 82 –
 Mobile: +41 79 426 63 59
marco.bettoni@weknow.ch
www.steinbeis.de/su/2142
www.weknow.ch/marco/events.html

Social Media Presence

1. <http://www.linkedin.com/in/marcobettoni>
2. https://www.xing.com/profile/Marco_Bettoni
3. <https://twitter.com/MarcoBettoni>
4. https://www.researchgate.net/profile/Marco_Bettoni
5. <http://ffhs.academia.edu/MarcoBettoni>
6. <http://marco-bettoni.blogspot.com/>
7. http://en.wikipedia.org/wiki/User:Marco_Bettoni
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36th ATHENS MARATHON, THE AUTHENTIC
 SUNDAY NOVEMBER 11th, 2018

TIME
 4:06:00

<http://www.weknow.ch/ok/>

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