

Guidance

Please complete all relevant sections for your award *over this reporting period*. We may ask for supporting evidence. Leave other sections blank.

For further assistance, contact the SFC project officer named in your award letter.

The completed return should be emailed to rosi@sfc.ac.uk including an electronic signature or a scanned, signed cover page by **12:00 on 30 September**.

Annual return [Section 1]

Return approval

Reporting period:		01/08/2018	31/07/2019
Award activity:		01/08/2014	31/07/2020
SFC project code:	H13049		
Award title:	Scottish Improvement Science Collaborating Centre (SISCC)		
Reporting institution:	University of Dundee		
Award contact:	Dr Nicola Gray 01382 381957 / n.y.gray@dundee.ac.uk		

Signature (Reporting Lead)	 Nicola Gray, Associate Director, SISCC, University of Dundee	Date	30/08/19
Signature (authorised financial officer of reporting institution)	 Michael Hassall, Research Accountant, University of Dundee	Date	30/08/19

Award summary

The Scottish Improvement Science Collaborating Centre is a cross-sectoral collaboration of academic institutes, health and social care organisations and third sector groups to enhance the evidence-base for large-scale sustainable change.

Guidance

Please complete the table for each of the agreed outcomes, as set out in your SFC letter of award, with progress over the reporting period.

Progress on agreed outcomes

1. How many outcomes does your award have? 6

	<p>Agreed outcome Use most up-to-date version. If <u>Outcome</u> has been revised since your award letter, insert date of revision.</p>	<p>Is your award on track to achieve this outcome?</p>	<p>Commentary on and evidence of your progress achieved in current reporting year If you have reported yes, provide supporting evidence referring to any key <u>progress indicators</u> set out in your <u>award letter</u>. If you have reported pending, please explain circumstances e.g. work not scheduled to start until later. If you have reported no, please provide an explanation of the specific circumstances. Also briefly outline the effect this is having / will have on the delivery of award.</p>	<p>Geographical Reach of outcome to date</p>
1	<p>Strengthen the evidence base for improving quality of care, and delivering better quality outcomes including staff and service user experience</p>	<p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Pending <input type="checkbox"/></p>	<p>Underpinning all of our activities is the ambition of improving the quality of care, how it is delivered and experienced. Our purpose is to support effective evidence based change, which will deliver improved outcomes for all.</p> <p>This year, we have completed six projects, commissioned seven new projects and have three PhD students nearing completion of their studies. Our projects have focussed on strengthening the evidence base across the themes of:</p> <ul style="list-style-type: none"> • Methods for Improvement – balanced accounting of quality improvement impact, interventions for healthy behaviours in pregnant women, integrating research and QI methods, co-creation and service planners and managers. • Large-scale sustainable change – testing an approach to getting evidence into practice in neonatal units across 	<p>International</p>

			<p>Scotland, mobilising medical students as agents of change, and implementation of NICE guidelines in osteoarthritis.</p> <ul style="list-style-type: none"> • Informatics for Improvement – utilising pharmacists and informatics to address preventable drug related morbidity, data to support improvement in GP clusters. • Mobilising Evidence – evaluating the national SQSF programme, using behaviour change resources to change behaviour at scale through an online course, reviewing the evidence on the role of contextual factors on improvement initiatives, and understanding policy implementation in complex environments. <p>All of our activities involve working with external organisations, who have a range of roles in ensuring the co-development of work with service users and practitioners. For example, we have worked with The Alliance, who represent the third sector and can incorporate the service users’ voice. Over the last year we have also worked closely with organisations involved in delivering education for health and social care practitioners (e.g. NHS Education Scotland, HEI’s) and large-scale improvement activities (e.g. Healthcare Improvement Scotland, NHS boards, Care Inspectorate and Scottish Social Services Council) and policy makers (Scottish Government).</p>	
2	Disseminate the improvement science knowledge base to practitioners and decision-makers	<p>YES <input checked="" type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>Pending <input type="checkbox"/></p>	We have identified, in collaboration with our partners, specific pathways to impact, which we are using to ensure that the knowledge and insights gained from the work of	International

		<p>SISCC is disseminated in a way that is most likely to achieve improvements in health and social care.</p> <p>Our dissemination strategy is underpinned by traditional academic activities such as the publishing of peer reviewed papers in journals, eight new academic papers based on SISCC projects were published 2018/19, and attendance at academic conferences.</p> <p>In addition, we have sought out opportunities to discuss and present the work of SISCC with audiences who are involved in delivering care. For example our “Can behavioural factors influence the delivery and sustainability of improvement initiatives?” seminar was attended by delegates from health and social care, (eg practitioners), education (eg NES, HEIs), those implementing improvement and policy (e.g. (eg HIS, QI Leads from NHS boards and social care, Best Start team), and service user representatives (e.g third sector groups supporting families with babies in neonatal units).</p> <p>We have a dedicated website on which we disseminate the outputs from SISCC and signpost visitors to other organisations and sources of information that can help inform improvement. Our twitter account, is also a key mechanism used to disseminate the work of the centre and others, and updates are sent via our mailing lists.</p> <p>We have also hosted a number of collaborative meetings/workshops to help promote the work of SISCC and develop new collaborative working relationships. From the</p>	
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			<p>Behaviour Change and QI workshop that involved delegates from academia, NHS, social care, third sector organisations and a wide range of public sector organisations, we were able to identify participants to support the co-development of the Compassionate Care behaviour change techniques.</p> <p>The outputs from our Capacity and Capability Research theme was the focus of a workshop involving practitioners and academics from a range of organisations, exploring the delivering of quality improvement education within an pre-graduate environment. This work has led to a knowledge exchange programme funding application and developed a network to take this work forward.</p> <p>The SISCC Associate Director (Partnerships & Engagement) now sits on the QI Executive Leads Group, run by Healthcare Improvement Scotland and has presented the work of SISCC to this Group.</p> <p>In addition, the team undertake teaching and supervision of healthcare students, through the support of post graduate students and undertake guest lectures to discuss the work of SISCC. And, two of the current cohort of the Scottish Improvement Leaders Course (SclL) are mentored by the Associate Director (Partnerships & Engagement). Further maintaining links between practice and SISCC's work.</p>	
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3	Facilitate translation of improvement knowledge into improvement activity, practice and policy	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Pending <input type="checkbox"/>	<p>Practical mobilisation of evidence by working with health boards and large-scale organisations to test the findings of SISCC work to date in practice is in progress. For example, we have worked with NHS improvement practitioners to refine the Unintended Consequences Framework.</p> <p>We are also currently planning work with Healthcare Improvement Scotland to test our recently published and co-created Motivating Change Framework (doi: 10.1136/bmj-2018-000553) in the context of Improving Observation Practice. The paper and framework resulted from a collaboration across the University of Dundee, Unicef UK, Healthcare Improvement Scotland and NHS Highland.</p> <p>These examples will support practitioners to implement the evidence-base and will also further develop research methodology in this area.</p> <p>We worked with NHS Education Scotland (NES) to evaluate the international Scottish Quality and Safety Fellowship programme (SQSF) exploring the barriers, facilitators and strategies to build and translate improvement knowledge and skills at individual and organisational levels. A report has been submitted and we are currently working with NES towards a publication targeted at practitioners.</p> <p>We have recently completed a commissioned rapid review of evidence for interventions to reduce unplanned admissions, which will be used by the Living Well in</p>	National (Scotland)
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			<p>Communities team within Healthcare Improvement Scotland to inform their work programme.</p> <p>The outputs from the Evidence-into-Practice consultation exercise was presented at The Best Start Journey – Two Years On national conference, organised by Scottish Government, attended by practitioners, senior managers and policy makers. Two workshops were held for delegates working within the field of neonatal care across Scotland entitled “Evidencing Improvements – measurement and evaluation of skin-to-skin kangaroo care”.</p> <p>Both Associate Directors and SISCC Executive Leads contributed to the Primary Care Evidence Collaborative, a Scottish Government led Group, which brings together academics and practitioners to enhance the delivery of primary care in Scotland. This ensures a wide-spread awareness of the SISCC primary care projects and effective links between activities are made.</p>	
4	Build engagement, capacity and capability across a network of researchers, practitioners and policymakers, helping to create, disseminate and apply improvement knowledge, to support widespread improvement in Scotland’s health and care.	<p>YES <input checked="" type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>Pending <input type="checkbox"/></p>	<p>The Behaviour Change and Quality Improvement workshop had over 70 delegates from a wide range of public sector and higher education organisations. This was an opportunity to enable participants to hear from experts in this field to consider how to take forward quality improvement activities using behaviour change approaches. It was a great opportunity for delegates to make cross-sectoral connections – many of which have led to further collaborations, i.e. the behaviour change MOOC.</p>	International

		<p>In May 2019 a meeting was held with a wide range of researchers involved in improvement/implementation science to consider the development of an Improvement Research Network. A Special Interest Group will be established, as part of the Health Foundation's Q Network (an electronic forum) and further meetings are planned for 2019-20 to develop the Network. The aim is to develop a mechanism to support the collaboration between improvement researchers and practitioners and increase the opportunities of co-creation and learning dissemination. This work is being carried out in conjunction with Healthcare Improvement Scotland.</p> <p>There is input into undergraduate curriculum, PhD studentships and clinical academic fellowships working across SISCC projects.</p> <p>The two successful THIS Institute Fellows (University of Aberdeen and University of Dundee) are beginning their Fellowships, working with SISCC. One of these Fellows is heavily involved in the Better Data to Support Improvement SISCC project, which is a multi-centre collaboration between universities and the NHS to deliver a more effective primary care indicators dashboard.</p> <p>In 2018/19 our continued working relationship with national social care organisations, including the Care Inspectorate and Scottish Care, has led to discussions around joint grant funding applications and the delivery of new compassionate care resources.</p>	
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			<p>Across the third sector, we have continue to support our relationships developed with organisations involved in supporting families in neonatal units, through the Evidence-into-Practice project and there is a stronger connection with The Alliance to ensure better third sector engagement with SISCC’s work.</p> <p>Key contacts established at Healthcare Improvement Scotland and NHS Education Scotland, to ensure appropriate representation and input from these key improvement organisations on the SISCC Strategic Steering Group and Executive Groups – which supports the development of the SISCC network.</p> <p>Following the National Workshop on the Evidence into Practice Project, there was further unit collaboration and sharing information on resources to support breastfeeding and skin-to-skin care practices between units. The SISCC workstream facilitator sits on the national Becoming Breastfeeding Friendly group looking at breastfeeding from a country wide perspective and the knowledge gathered will help contribute to the prioritisation process.</p>	
5	Define new approaches to improvement methodology including data analysis	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Pending <input type="checkbox"/>	We are testing the implementation of the Unintended Consequences Framework and the ‘improvement pause’ with the next cohort of Scottish Quality and Safety Fellows in conjunction with NHS Education for Scotland.	National (Scotland)

			Series of collaborative studies to test the capability and effectiveness of the informatics platform; evaluating the Evidence-into-Practice approach; use of participatory action research; testing approaches to co-creation; use of informatics for polypharmacy.	
6	Evidence the changes in and impact of the improvements in quality of care delivered by the project	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Pending <input type="checkbox"/>	<p>There will undoubtedly be a lag in the time from dissemination of findings to implementation of changes in practice to changes in care, however, there is already early evidence of change.</p> <p>Undergraduate medical school curriculum at University of Dundee has been changed to include improvement projects as standard and methods used are being explored by other disciplines.</p> <p>Informatics tool developed through PDQIP project has been rolled out by the Scottish Government to all (~1000) general practices across Scotland.</p> <p>EiP project – the outputs from the consultation exercise are being used to support the planning of a national programme to improve kangaroo care across Scottish neonatal units. The SISCC team are engaged in supporting the programme, which will address some of the key barriers identified through our work. Our work contributed to the formation of NEOSIFAN (Neonatal Scottish Infant Feeding Advisors Network) to share practice around particular feeding issues relating to preterm babies and close links are maintained with the Maternity Quality Improvement Collaborative</p>	National (Scotland)

		<p>(MCQIC) to ensure relevant findings can be incorporated into their ongoing work.</p> <p>Knowledge Into Action At Scale (KIAAS) MOOCs research - change in attitudes, increased awareness of and confidence when practicing compassionate care were reported by learners.</p>	
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Add more rows to the table if you have more outcomes.

Unanticipated outcomes

2. Have there been any unanticipated outcomes arising from your award in this reporting period? YES NO

	Details of the unanticipated outcome	How did this outcome come about?	<u>Geographical reach of this outcome?</u>
a	The establishment of a new funding profile	It was agreed at the Funders meeting in December 2018 that a revised funding profile for the remainder of the project (to July 2020) should be established to ensure appropriate funding release based on projected expenditure. The issues resolved by this revised funding profile had resulted in a delay to the contracts being issued for the prioritised projects agreed by the Strategic Steering Group in June 2018. This has led to delays in some of the projects commencing.	<i>National (Scotland)</i>
b		[max 200 words]	[Choose an item]
c		[max 200 words]	[Choose an item]

Add more rows to the table if you have more unanticipated outcomes.

Award achievements

3. Please provide details of the achievements of your award during this reporting period.

If your response is **yes** to the questions below, please complete the relevant table as requested restricting your answers to this reporting period.

Has your award <u>enhanced people capacity</u> ?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 1
Were there any difficulties in filling any of the posts?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Table 1
Has your award <u>improved facilities or infrastructure</u> at your or other institutions?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 2
Was further funding secured by your award over this reporting period?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 3
Has your award created new products or inventions?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 4
Has your award contributed to colleges' and universities' engagement with external bodies?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 5
Is your award connected to any wider recognition for the work of your project or team members?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 6
Has your award delivered any other significant achievements that we should be aware of?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 7
Have you put in place arrangements to sustain the <u>outcomes</u> of your award after our funding has ended?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 8
Has your award contributed to advances relevant to SFC's <u>statutory responsibilities</u> ?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Table 9

NB You are only required to complete the sections in Tables 1-5 which are relevant to your award. All other sections should be left blank.

Table 1	Type of <u>enhanced people capacity</u> (You should report here on all additional posts created for this project <i>in this reporting period</i> at both HEIs and colleges, not just those funded directly from this SFC funding, but not replacements for existing posts.) (Please do not include any personal details)	Total full-time Equivalents (FTEs) recruited	Nos of FTEs recruited on a permanent appointment	Nos of FTEs recruited on a fixed term basis for the duration of the project
a	Academic research posts			

b	Academic teaching posts		
c	<u>Non-academic professional / managerial posts</u>		
d	<u>Non-academic technical posts</u>		
e	<u>Non-academic communications posts</u>		
f	Administrative posts, including clerical posts, secretary and receptionists		
g	Studentships or other student opportunities e.g. apprenticeship place		
h	<u>Consultant</u>		
i	<u>Business secondment</u>		
j	Other (please describe) Clinical Academic Fellow – focused on Research rather than Teaching	One - 0.5 wte	1 (annual fellowship)
Total			
h	Please describe any recruitment difficulties		
<p>Commentary: SISCC hosts a clinical academic research fellow (physiotherapist) within the School of Nursing and Health Sciences, co-funded by NHS Tayside. The fellow works as part of the SISCC team and is being provided with academic mentorship by Dr Gray, SISCC Associate Director, to secure PhD funding.</p>			

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Table 2	<u>New or improved facilities or infrastructure created in this reporting period?</u>	Please provide details here about improvements created by your award	What was the reach of this improvement?
a	Equipment	[max 100 words]	[Choose an item]
b	Teaching / training facilities		[Choose an item]
c	Research facilities		[Choose an item]

d	Buildings e.g. laboratories / accommodation		[Choose an item]
f	Institutional or sectoral collaborations, including college and university collaborations		[Choose an item]
g	Teaching / training networks / training delivery partnerships		[Choose an item]
h	Research networks / knowledge exchange partnerships		[Choose an item]
i	Other (please describe the improvement)	<i>As part of the PDQIP project, software developed to facilitate case-finding for identification of patients at high risk of drug related harm and decision support to facilitate identification of drug therapy risks at individual patient level, has been rolled out by the Scottish Government across all (~1000) general practices across Scotland.</i>	[Choose an item]
Commentary: Use this box to provide more information on your answers in this Table [max 200 words]			

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Table 3	Source of further funding secured in this reporting period and its purposes (please tick all that apply)	How much further funding was secured? £K	Academic staff (Teaching & Research)	Non-academic staff	Studentships / other student opportunities	Facilities & Infrastructure	Teaching & Learning activities	Research activities	Knowledge Exchange & commercialisation activities	Other purposes (please describe in box below)
1	Own Institution(s)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2	UK Research Councils		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Scottish Government		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	UK Government		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Enterprise agencies		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Industry / Business		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Charities	£15k	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	EU		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	International sources		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Others		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
	Total									

Commentary: One of our research fellows successfully applied for her first grant as principal investigator from the Carnegie Trust. The title of her work is “Central policies, national improvement programmes and sustained local change; An exploratory study of access to specialised mental health treatment for children and young people in Scotland”. The work is focussed on the implementation of national policy into practice.

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Table 4	New products and inventions created <i>in this reporting period?</i>	Total number created?	Estimated total financial value?
a	Software products	1	£ n/a
b	Technical products		£
c	Artwork and other creative products		£

d	Diagnostic tools or other interventions		£
e	Training packages	1	£
f	Curriculum enhancements		£
g	Good practice guidelines		£
h	Toolkits	1	£
i	Research tools / methods / databases / models	3	£
j	New communities of practice	2	£ n/a
k	Other (please describe)		£
		Total	£

Commentary:

Software - as part of the PDQIP project, software developed to facilitate case-finding for identification of patients at high risk of drug related harm and decision support to facilitate identification of drug therapy risks at individual patient level, has been rolled out by the Scottish Government across all (~1000) general practices across Scotland.

Training packages – we have developed a three week online course around the topic of compassionate care, which is based on our previous five week course.

Toolkits – as part of our Knowledge Into Action At Scale work package we have developed a behaviour change toolkit to support learners to make improvements in how care is managed and delivered.

Research tools / methods / databases / models - We have developed a balanced accounting framework, co-designed with quality improvement practitioners, that develops the concept of balancing measures into an effective longitudinal means of monitoring goals and unintended consequences. This framework is going to be tested by the Scottish Quality and Safety Fellows, in conjunction with NHS Education for Scotland. Through the Context Research Theme, in consultation with senior improvement practitioners, we have developed a Model to demonstrate how contextual factors impact on the improvement journey at different levels of the system. Plans are in place to test the applicability of this model in September 2019. Our work examining spread and sustainability led to the co-creation of the recently published Motivating Change Framework (doi: 10.1136/bmjog-2018-000553). We will be supporting Healthcare Improvement Scotland in applying this framework in their work programme “Improving Observation Practice”.

Communities of practice - we have been informed that the project contributed to the formation of NEOSIFAN (Neonatal Scottish Infant Feeding Advisors Network) to share practice around particular feeding issues relating to preterm babies. The SISCC workstream lead, continues to attend these meetings to maintain the engagement with this community.

Development of the Improvement Research Network – SISCC has taken a lead role in establishing a network that will provide a conduit for improvement researchers and practitioners to have closer links and opportunities to collaborate.

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Table 5	Type of engagement with external stakeholders <i>in this reporting period</i> (Tick all that apply)	General public	Local authorities including schools	Other public sector	Business (including SMEs)	Charities/ Third sector	Other (please briefly describe)
a	Communicating knowledge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c	Sharing / exchanging knowledge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d	Building relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
f	Informing decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h	Contractual relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i	Other (please describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Commentary:

The Evidence-into-Practice project shared knowledge and engaged with a range healthcare staff from NHS boards across Scotland, policy makers and third sector representatives at the Best Start conference. This event enabled us to share the evidence gathered through our consultation exercise and present practical application of it within neonatal units.

The Behaviour Change workshop engaged a wide number of stakeholders, imparting knowledge around approaches to quality improvement and facilitated the building of relationships between delegates.

We have strengthened our relationship with The Alliance, a key third sector membership organisation that will enable us to effectively engage with groups to co-produce our research and enhance the dissemination activities, i.e. the exploratory study of access to mental health treatment for children and young people in Scotland; which has examined the relationship between central policies, wider national improvement approaches and sustained local change.

We have public partners involved in our research, for example, we have two members of the public who are part of the P-DQIP project team.

The Massive Open Online Courses – engaged carers, health and social care practitioners and the general public. These courses shared subject-specific knowledge about compassionate care and inequalities and quality improvement approaches and facilitated wider engagement through discussion boards. The courses promoted Scotland’s approach to quality improvement and highlighted national, regional and local improvement projects.

Ongoing work has maintained the strong, strategic links with health and social care organisations, i.e. the Care Inspectorate and Scottish Care and national quality improvement organisations in Scotland, NES and Healthcare Improvement Scotland and stronger relationships with territorial Boards is being developed.

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Table 6	<p>Wider recognition for the work of your project or team members? (Please do not include here any personal details)</p>	<p>Our researcher was invited to present the work from the Improvement Methods research theme at the Research Symposium at the International Forum on Quality and Safety in Healthcare in May 2019.</p> <p>Eight academic papers across the SISCC work programme were <u>published</u> in the last year.</p>
Table 7	<p>Any other significant achievements of your award in this reporting period?</p>	<p>The outputs from the Evidence-into-Practice consultation exercise are being incorporated into a national programme to enhance the delivery of kangaroo care within neonatal units across Scotland.</p>

Table 8	<p>Have any <u>sustainability arrangements</u> been developed or implemented in this reporting period?</p>	<p>A Needs Assessment exercise has been carried out – engaging a wide range of organisations across Scotland to understand the need for a national ‘improvement research resource’ and ongoing strategic conversations are taking place to explore the opportunities to fund a legacy for SISCC activities. This has involved senior management from the University of Dundee and other HEIs across the SSICC network and the Strategic Steering Group.</p> <p>The prioritised projects are all ongoing – the aim behind these is to develop a stronger application for future large grant applications, which would bring in additional funding streams for SISCC.</p>
Table 9	<p>Have any contributions relevant to SFC’s <u>statutory responsibilities</u> been made during this reporting period?</p>	<p>An Equality and Impact Assessment has been carried out for the overall SISCC programme of work and the large-scale projects and all new projects with effect from August 2018.</p>

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Overall award progress

4. What is your overall assessment of award progress within the reporting period?

a	<p>Please summarise your award’s progress during the reporting period. (This summary may be used to illustrate your award to various audiences.)</p>	<p>This has been an exciting reporting period, with a real momentum on the back of the dissemination of publications and completed projects. There were eight new publications across the SISCC work programme this year, which have been well received and represent the foundation of ongoing work. These have led to a number of collaborative projects around the translation and application of the new SISCC generated evidence-base.</p> <p>There has been a significant amount of work, bringing two of our key projects to completion in 2018/19. A Realist Review of the Influence of Contextual Factors on Quality Improvement Initiatives (September 2019) and the Realist Evaluation of the Evidence into Practice Project (October 2019); plans are currently being developed to support the dissemination of the findings from these key projects, providing a further</p>
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	<p>platform for engagement and collaboration with the ‘improvement community’ in Scotland and internationally.</p> <p>Good engagement has been achieved across NHS boards, through our projects in neonatal units and pharmacist-led polypharmacy reviews in primary care and our strategic relationships have grown in social care and the third sector. This has led to discussions around potential joint working and funding applications, and we hope to build on these in 2019/20.</p> <p>One of the highlights is the number of joint projects involving the national improvement organisations in Scotland. In 2018/19 we conducted a joint evaluation with NES on the Scottish Quality and Safety Fellowship and also working with NES and the Fellowship, we have co-developed a mechanism to test the Unintended Consequences Framework with the next Fellowship cohort during their training in 2019/20. The SISCC team led on a review of interventions to prevent unplanned hospital admissions to support the development of a new Healthcare Improvement Scotland (HIS) programme of work and we are currently co-developing a new methodology to test the translation and practical application of the co-developed Motivating Change Framework, with HIS’s Improving Observation Practice programme. This is part of HIS’s mental health portfolio, supporting one of Scottish Government’s key priorities. There are also, ongoing discussions around how SISCC can support the production of ihub “How To Guides” which support consistency and rigour in the implementation of improvements in health and social care.</p> <p>Our Better Data for Improvement cross-sectoral project, is an exemplar of the added value that academic approaches can bring to support the delivery of services that will directly impact on care. Over a 12 month period this project, that includes three Universities and one national NHS board, will use qualitative research outputs to develop data analytics prototypes, to be tested and co-developed with primary care staff to deliver the re-development of the Primary Care Indicators dashboard which will be operationalised by NHS National Services Scotland, to all practices across Scotland. This is another project which aligns and closely supports Scottish Government priorities and will help accelerate changes to the way the national</p>
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		<p>primary care dashboard is designed to provide improvements in the way primary care services are delivered; with the potential to impact on population health.</p> <p>The needs assessment exercise has also provided an additional platform for the open discussion about the needs for improvement research and this has led to greater understanding of what SISCC can deliver, how the SISCC outputs can be applied and the additional/added value that SISCC can bring to the public sector improvement community in Scotland.</p>
b	Please describe any <u>impacts</u> of your award realised over the reporting period.	<p>The National Workshop as part of the Evidence-into-Practice project, presented to over 80 delegates from NHS boards across Scotland the findings of the consultation exercise on the evidence-based statements to support the practices of breastfeeding and kangaroo care in neonatal units. This event facilitated units to develop action plans to improve evidence-based care in these areas. In addition to the national event, barriers and enablers at national, organisational and local level have been presented to Scottish Government and national groups supporting infant feeding and work is being taken forward by these groups to address the relevant barriers. A large-scale evaluation is currently ongoing to assess the impact of this approach to translating evidence into practice.</p> <p>The informatics tool to support polypharmacy reviews is being rolled out nationally by Scottish Government.</p>
c	Any other comments on your award for this reporting period?	

5. Has your award funding finished in this reporting period?

YES NO

If **yes**, please continue and complete [Section 2](#). If **no**, please ensure [Section 1](#) is complete and return to SFC as detailed on [page 1](#).

Definitions

Proposal	The original statement which you provided to SFC of what outcomes you want to achieve, how you will deliver and the costs of undertaking the work.
Award letter	Our letter offering funding which set out agreed outcomes, the scale of funding offered and the conditions of grant.
Outcome	The changes or differences you plan to achieve through the activity funded by our award. Outcomes are the result of the activity, not the activity itself. Outcomes can be changes in behaviour, attitudes, knowledge, infrastructure, capacities or skills.
Progress indicators	Measures which help determine your progress towards achieving the agreed outcomes during the period of your award.
Impact	<p>Any longer term effect of an activity or outcome which adds value or benefit to others, which may concern, for example:</p> <ul style="list-style-type: none"> • Improved educational and skill levels of the workforce. • Solutions to societal problems. • Economic impacts. • Improvements in survival, morbidity or quality of life. • Changes in public attitudes on social issues. • Improvements in the regulatory environment. • Improvements in public service delivery. <p>The 2014 UK Research Excellence Framework exercise used the following definition of impact.... ‘an effect on, change or benefit to the economy, society, culture, public policy or services, health, the environment or quality of life, beyond academia’.</p>

Geographical reach of outcomes and impacts	The extent of the geographical reach for each outcome / impact reported on should be recorded using the following categories: <ul style="list-style-type: none"> • Regional - within the Scottish region where your project is located (e.g. Strathclyde or the Lothians). • National (Scotland). • UK-wide. • International.
Enhanced people capacity	New posts created, at both HEIs and colleges, by the project <i>in the reporting period</i> , not just those funded directly from the SFC funding contribution, such academic teaching and research posts, non-academic posts, <u>consultants</u> , <u>secondments</u> or studentships. Current staff contributing to projects as part of their existing role or staff replacements for existing posts should not be included .
Improved facilities / infrastructure	New or enhanced training facilities, laboratories, IT infrastructure or newly created people networks including scientific or teaching collaborations (national and international) and knowledge exchange partnerships with business.
<u>SFC's statutory responsibilities</u>	These include, in summary: <p>Equality and diversity: the elimination of discrimination, harassment & victimisation and the advancement of equality of opportunity for protected groups (Equality Act 2010)</p> <p>British sign language and Gaelic: facilitation and promotion of the use of these British languages (British Sign Language (Scotland) Act 2015 and Gaelic Language (Scotland) Act 2005)</p> <p>Climate change: deliver reductions in carbon emissions (Climate Change (Scotland) Act 2009)</p> <p>Nature conservation: reduce negative effects on biodiversity (Nature Conservation (Scotland) Act 2004)</p>
Consultant	Any person or business contracted but not directly employed by an institution, i.e. HEI or college, to provide advice and services to your project, such as legal advice on commercialisation.
Secondment	Any person who continues in employment with an external body, including the private sector, public sector and voluntary or charitable bodies, while providing input to the award.
Non-academic professional / managerial	Professional / managerial posts such as knowledge exchange, business engagement or relationship management, student support and quality assurance professionals.
Non-academic technical posts	Technical posts such as laboratory, engineering, building, IT and medical technicians (including nurses).

Non-academic communication posts	Communications posts such as media, public relations and marketing posts.
Non-academic staff posts (All)	All non-teaching or research posts.
Communicating knowledge	One way transfer of knowledge from academia to wider audiences.
Sharing / exchanging knowledge	Two or multi-way communication and dialogue between academia and external communities.
Sustainability	Continuing the benefits created by the strategic investment, after SFC funding has ended. This may be in a different format from the original project.
Contractual relationship	Formal agreement to provide / exchange services, which may or may not involve financial payment