Overview of a Breakthrough Series Collaborative (BSC)

Background
The Breakthrough Series Collaborative (BSC) is a quality improvement methodology that uses small-scale rapid tests of change. This means that instead of making a change throughout the entire system that requires years of planning for implementation, changes are made quickly in very small increments. These changes are measured and monitored closely so that successes can be expanded quickly and that failures are not replicated.

This methodology has been used extensively by the Institute for Healthcare Improvement (IHI) in the field of health care. They have done Breakthrough Series Collaboratives on topics ranging from decreasing waiting time in emergency rooms to improving asthma care. More than 600 teams over the past 10 years have participated in these Collaboratives. From January 2001 – April 2002, Casey Family Programs partnered with the IHI to conduct a BSC for public child welfare agencies for “Improving Healthcare for Children in Foster Care.” Casey recently co-sponsored a BSC on “Recruiting and Retaining Resource Families,” which included 22 public child welfare agencies from across the country.

In a BSC, organizations and agencies that share a commitment to a specific issue and to making major, rapid changes that will produce breakthrough results are brought together to share knowledge, challenges, and successes. Each agency/organization puts together a “team” that makes changes and implements new systems over the course of one year. Each team is guided and mentored by experts in the field as they plan, test, study, and implement the latest knowledge and evidence available.

There are five key premises of the BSC:

1) There is a gap between knowledge and practice. The BSC does not “create” new knowledge. It uses existing knowledge based on evidence of what has worked in the past and tries to help systems modify and apply the knowledge to fit their systems’ individual needs.

2) There is significant variation in practice in the field. Some agencies already may do it well; others do not have as much success. Thus, there is a lot of room for improvement.

3) All improvement requires change, but not all changes lead to improvement. Measurement for improvement is important to make sure that all changes are resulting in positive outcomes. Small tests of change are done to allow for rapid implementation and careful tracking of the impact each small change has on the system.

4) “Every system is perfectly designed to achieve the results it gets.” People within the system want to do good work; they are mission-driven and well-intentioned, but systems are typically designed to achieve the results they get. It is the system that needs fixing -- not the people in the system.

5) We can learn more from collaborating than from working alone. There is no need for every agency in the country to make the same mistakes -- and every reason for them to benefit from others’ successes. Collaboration done in a thoughtful, systematic, carefully facilitated way ensures that this sharing occurs.

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