**Implementation tool for**

 **the NCEPOD report**

**‘A Balanced Solution’**

Driver diagrams

<https://ncepod.org.uk/2025bs.html>

Driver diagrams are used to visually display a team’s theory of what can lead to or “drives,” the achievement of a project aim. The diagram is a useful tool for communicating to a range of stakeholders where, and how an aim can be achieved and how, and by who, change can be delivered.

* The **AIMS** can be based on an issues identified in the study
* The **PRIMARY DRIVERS** can illustrate ways of achieving the initial aims
* The **SECONDARY DRIVERS** are components of the primary drivers that the team believe can help achieve the aim
* The **SPECIFIC CHANGE OF IDEAS** can relate to findings in the report or ideas that can test the secondary drivers

This should be done as a multidisciplinary/team exercise to get different perspectives and as many potential drivers, aims and ways to arrive at the initial aim as possible. We have provided an example of a key issue that was identified during the study as an example. The diagrams we have provided are a starting point and should be adapted and expanded to fit your need. The second driver diagram is blank and can be copied or printed out blank for any additional issues you have identified.

Example: Abnormal blood sodium levels –

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| **Aim** | **Primary Drivers** | **Secondary Drivers** | **Ideas to change concept** |
| **Reduce variation in the assessment and management of abnormal blood sodium levels.** | Failure to optimally treat abnormal blood sodium levels. | Standardise treatment choices for the different ‘severities’ of abnormal blood sodium.  | Develop a Care bundle that provides clinicians with clear information on what investigations and treatment need to be undertaken and the timeframe in which this should happen. |
| Inconsistent monitoring of changes in sodium levels once treatment has commenced. |
| Standardise the monitoring of blood sodium levels when treatment for severe hyponatraemia commences. | Development of eLearning training packages for non-specialist healthcare professionals to assess and treat patients with abnormal blood sodium levels, including ‘red flags‘ for escalation to specialists. |
| Failure to appropriately investigate the underlying causes of the abnormal blood sodium. | Develop appropriate guidance on determining which investigation(s) for different abnormal sodium clinical scenarios should be undertaken to prevent over-investigation | Local service level agreements should be put in place specifying turnaround times for urgent investigations and these should be regularly audited |
| Variation in turnaround times for urgent investigations related to abnormal blood sodium levels blood  |

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