



SaTH on a journey to provide the 'safest and kindest care'

The Shrewsbury and Telford Hospital NHS Trust (SaTH) is on a journey to provide the safest and kindest care in the NHS, and a number of positive changes have already been delivered through our partnership with the Virginia Mason Institute (VMI) and the introduction of lean methodology.

By developing our own lean methodology - our **Transforming Care Production** System (TCPS) - we have proved, with the support of VMI, it is possible for patients at the Royal Shrewsbury Hospital (RSH) and the Princess Royal Hospital (PRH) in Telford to receive life-saving medication faster than ever before.

This was done during one of our **Rapid Process Improvement** Workshops (RPIWs) when staff were challenged to improve the processes for Sepsis patients on the Surgical Assessment Unit (SAU) at RSH.

By taking a step back from what most staff traditionally call 'the day job' and asking staff to look



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at ways to eliminate waste and quality defects we managed to reduce the time it took for patients to receive treatment from more than five hours to less than one hour. The results have been sustained for patients on SAU, and now the challenge going forward is to roll the methodology and potential solutions out to benefit far more patients at our hospitals.

During a different RPIW, which

this time took place on the Acute Medical Unit at PRH. we challenged staff to improve the screening and recognition of Sepsis. The work done during this week was really impressive - an information leaflet created by our staff has been shared with the UK Sepsis Trust - and there have been significant improvements made to patients' privacy and dignity.

There are around 150,000 cases of Sepsis in the UK every year and approximately 44,000 deaths. Sadly, in our hospitals, approximately six patients die from Sepsis each month, hence we want to reduce that number by increasing awareness of the condition and shortening recognition and treatment times.

During the first year of our partnership with VMI, the Trust has also carried out RPIWs that looks at ways to improve care for Respiratory patients.

Again, what our staff have achieved in a short amount of time has been really impressive. For example, through the

introduction of lean methodology, all patients on Ward 9 at PRH are now provided with written confirmation of their expected discharge date within the first hour of arriving on the ward. This is really important for our patients as often the first thing they ask is 'when can I go home?' and going forward we will look to implement what we have done into other areas of our hospitals. Before making that step we always ask the team to present their findings after 30 days, 60 days and 90 days to ensure the work is sustainable.

Each of our Value Streams are carefully chosen to help deliver the organisational priorities. This is clearly demonstrated in our third Value Stream -Recruitment.

SaTH, like many other Trusts, faces difficulty recruiting medical and nursing staff, resulting in the use of expensive agency staff and unsustainable pressures on our own staff.

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The work of the first RPIW in the Recruitment Value Stream has resulted in a 50% reduction for the pre-employment check lead time and a dramatic reduction in the turnaround time for references.

Recently, staff involved in the Outpatient process for Ophthalmology clinics launched our fourth Value Stream - Outpatients.

In March we will hold the first RPIW for this Value Stream and this will be the first in SaTH that includes external suppliers. The

confidence to include patients and contracted companies in this work demonstrates the maturing process that our Trust has in the methodology.

In a short space of time we have come a long way, and in September 2016 we reached another milestone with the launch of our Transforming Care Institute (TCI) aimed at supporting our managers to become 'lean leaders'.

We knew when we started our partnership with Virginia Mason that we would take over the ownership of the work —to make it SaTH's way of doing things.

With that in mind, we set ourselves a first year target of sharing with 1,000 of our people the work and having 100 people directly involved in it. To date, we have exposed more than 1,450 people to the work and have had nearly 400 colleagues directly involved. We set ourselves ambitious targets, but we have exceeded them.

The establishment of our Transforming Care Institute is a significant step in our work of improvement. It is our opportunity to say: 'This is our work, the TCPS, is not a

> VMI programme, it's the way our staff make improvements every single day for the benefit of our patients'.

We don't want anyone to feel that this is a fad; we

won't be throwing away the methodology if results aren't always what we want. We will hold true to this course and have faith in our staff.

By the time we get to year five, we at SaTH will be all doing our own work and improving every day. It will be natural to us and part of making sure we are going in the right direction in our ambition to be the safest and kindest organisation in the NHS.















