

**Transforming Care Update
Trust Board Meeting – November 2017**

Reporting to:	Trust Board Meeting (30.11.17)
Title:	Transforming Care in Partnership with the Virginia Mason Institute
Author:	Cathy Smith – KPO Lead
Date:	November 2017

1.0 Introduction

- 1.1 We celebrate a milestone in our partnership with Virginia Mason this month, having moved into our third year of the accelerated transformation journey we are able to look back and appraise the achievements to date and the opportunities that lie ahead.
- 1.2 We had the perfect opportunity for reflection as we welcomed the NHSI second year review team to meet our staff using the transforming care methodology and our guiding team.
- 1.3 The NHSI feedback and our own reflections conclude that we are further ahead in our transformational journey than anticipated at this two year junction. We have many great examples of staff engagement and evidence of substantial improvements generated with the methodology, philosophy and lean tools.

2.0 Background to NHSI visit

- 2.1 NHSI visited all five trusts to review progress and understand how best the NHSI and VMI teams could support and accelerated the work. Key lines of enquiry included **Board Engagement** and in particular Board engagement with and staff using the production system,

Exec engagement with value streams and personal learning, Non-exec engagement. **Leader standard work** in particular the structure on e.g. Genba walks and elements such as huddles, production boards and people link boards. **Staff engagement** focused on compacts, engaging multiple, language, communication and medical engagement. **Opportunities for shared learning** within the five Trusts and the wider health community were gathered and will be shared with us following individual feedback to involved Trusts.

3.0 National

3.1 Transformation Guiding Board (TGB)

Initial thoughts at around further work to consider at partnership level: were shared and discussed including the possibility of:

- A piece of work to look at how to **strengthen NED engagement**/best practice
- All Trusts to **share examples of leader standard work** as it emerges
- **Share where all Trusts rated themselves** on the continuum tool with each other
- Exploration of strategies to strengthen **medical engagement** in the work (including junior Docs) and **possibly Nurse engagement** too (both dependent on discussion with MDs and NDs)
- Sharing approaches to **induction for new Board members** and including a partnership element to it – e.g. buddy from another Trust/visit and also **sharing approaches about ongoing engagement of boards**

4.0 Local Delivery

4.1 Considerable thought was given to scheduling an agenda for the NHSI review that met the needs and objectives of the visiting team and gave an overview of the depth and breadth of work undertaken by our staff on both our main sites. **Engagement from our staff and the positive feedback we received from staff was remarkable** given how busy the hospitals have been.

4.2 We are now working to achieve greater alignments of our Lean for Leaders work with the exemplar programme and establish standard work for wards.

4.3 Implement the **strategic decision to support all leaders** (who line manage 1 or more member of staff) to undertake Lean for Leaders programme, and then to continuously use the Transforming Care Production System to improve patient care and reduce the burden of work for staff.

- 4.4 Looks for ways to actively demonstrate that **SaTH has one improvement method, Transforming Care Production System (TCPS)** embedded within the Trust and this is now the way we do our work.

5.0 Transforming Care Institute

- 5.1 The Transforming Care Institute (TCI) continues to provide and host a range of training, coaching and development opportunities for our staff and recently has hosted an NHSI visit from Ian Hall, Head of Service Improvement (Midlands and East).
- 5.2 We celebrate the first 4 accredited advance lean trained staff at SATH and look forward to seeing their development to RPIW workshop leads. In addition we welcome back Rosemary King, transformational Sensei from VMI to co-lead with Cathy Smith KPO lead the next cohort of ALT candidates.
- 5.3 Cathy also co- facilitated with Erica Cumbee, Transformational Sensei from VMI, a two-day work shop supporting the implementation of innovation. This workshop was particularly well received by our staff, the majority of whom had completed either the one and half day methodology training or the lean 4 leader course.
- 5.4 All the training offer by the TCI is aimed at increasing the capacity within the Trust to implement the TCPS and maximise the potential improvements to move us further toads a safer and kinder organisation.
- 5.5 The KPO Team, working within the Transforming Care Institute have once again been asked to host NHS Graduate Trainees for a day and introduce them to this work. They will spend time in the TCI understanding the work being undertaken, visiting genbas and being introduced to the methodology through interactive activities. This request has been received following the positive feedback from previous trainees.

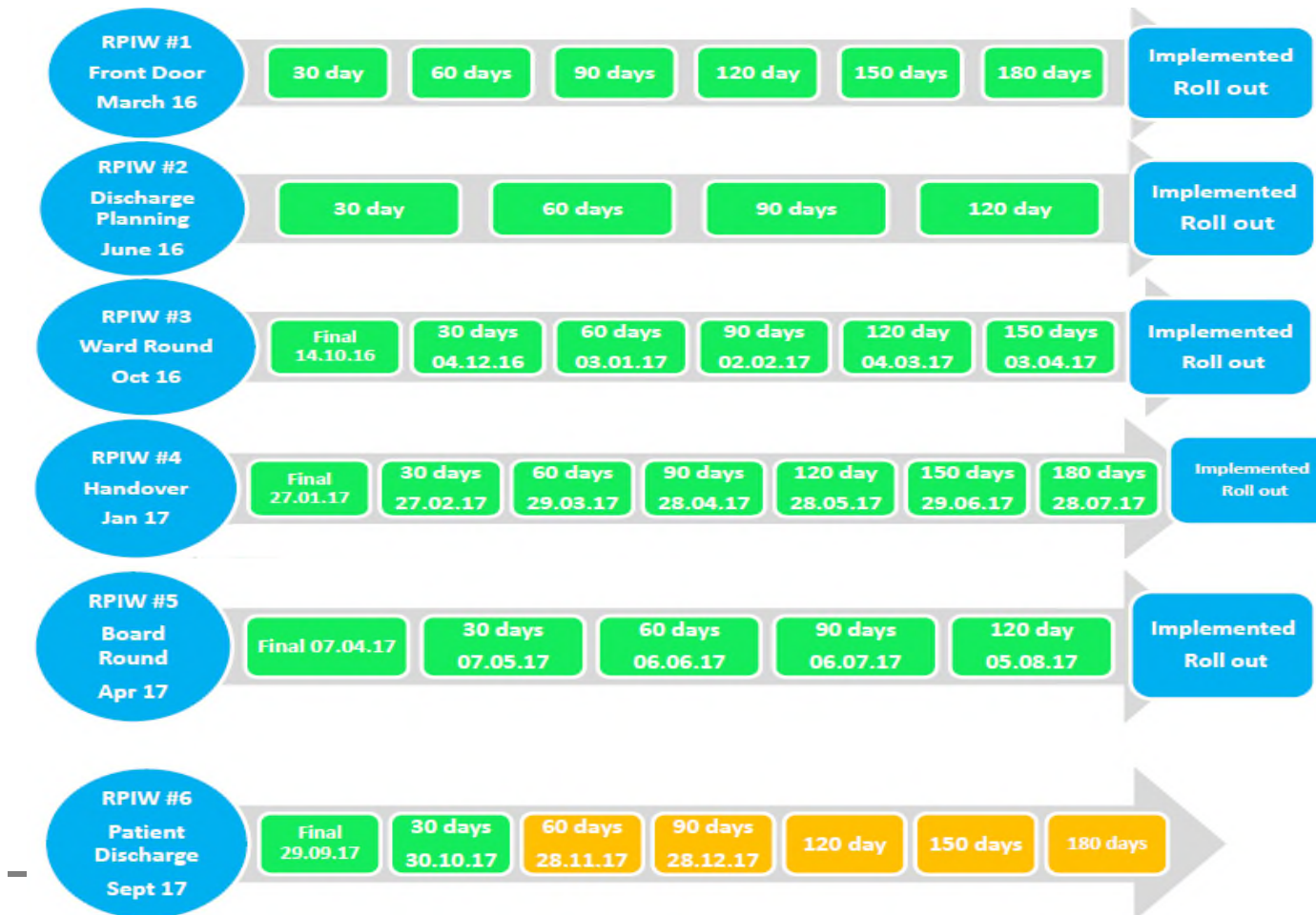
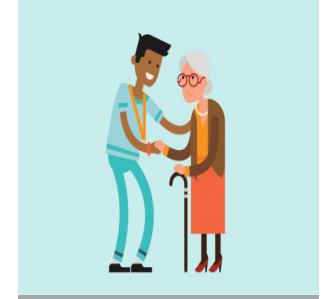
6.0 Value Streams

6.1 Value Steam #1 Respiratory Discharge Pathway

Value Stream #1 (Respiratory) was chosen as at least 40% of our emergency admissions to the Trust are patients who have respiratory disease.

Improvements

- Six RPIWs have been undertaken
- Lead time target has been met with a reduction of over 40 hours
- Additional spells have been accommodated
- Standard work to transfer the work from the VSST to the care group is in place
- Continued measurement and report out will be received via the CEO stand ups
- We thank Debbie Kadum for excellent executive leadership

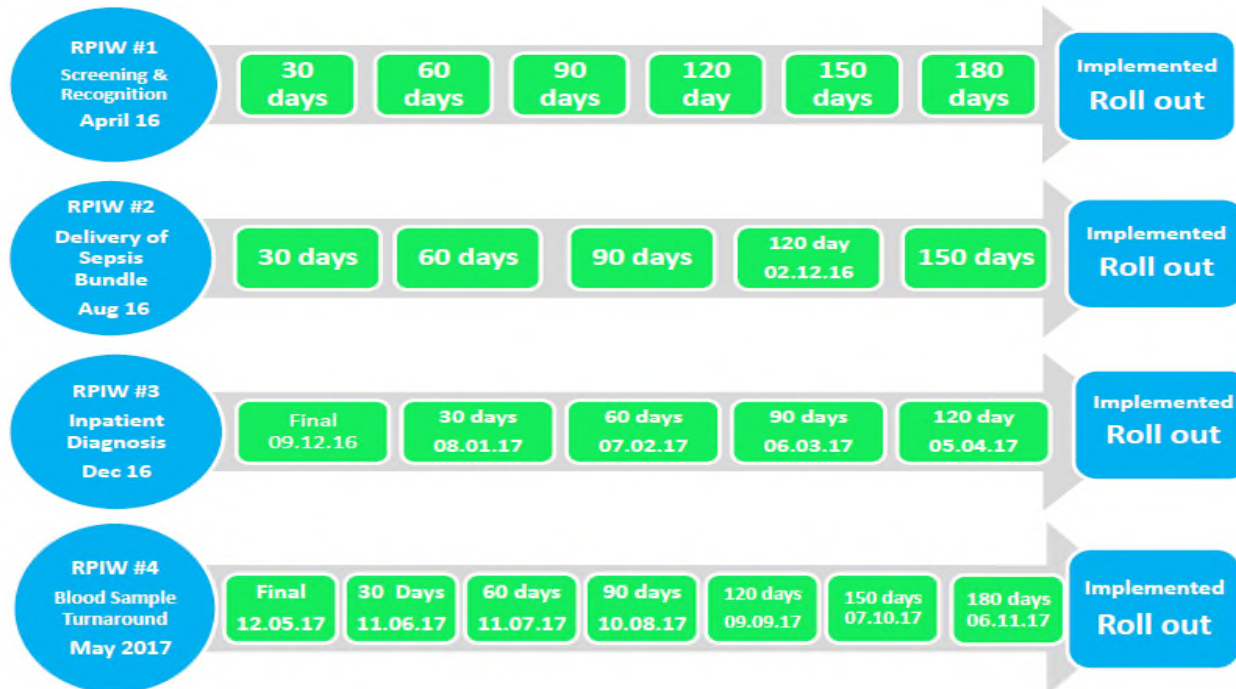
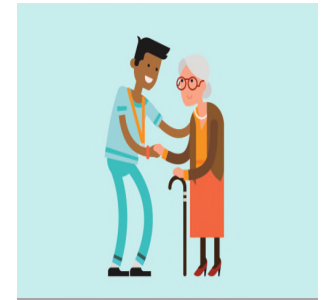


6.2 Value Stream #2 Sepsis

Value Stream #2 (Sepsis) was chosen as at least 4 patients will die each month from Sepsis and within the UK 44,000 people die each year. Early recognition and screening for Sepsis is vital to ensure timely and effective treatment.

Improvements

- 12 quality improvements made within the sepsis pathway including use of screening tools, Sepsis trolley, reduction in late observations and blood culture processing
- 11 ½ hours of non value adding time removed from screening for sepsis , diagnosis of sepsis and delivery of sepsis bundle pathway (single patient pathways)
- 968 steps no longer required to collect equipment and collect/deliver blood culture samples (single patient episodes)
- Sepsis Trolley rolling out to AMU, Emergency Departments at RSH and PRH

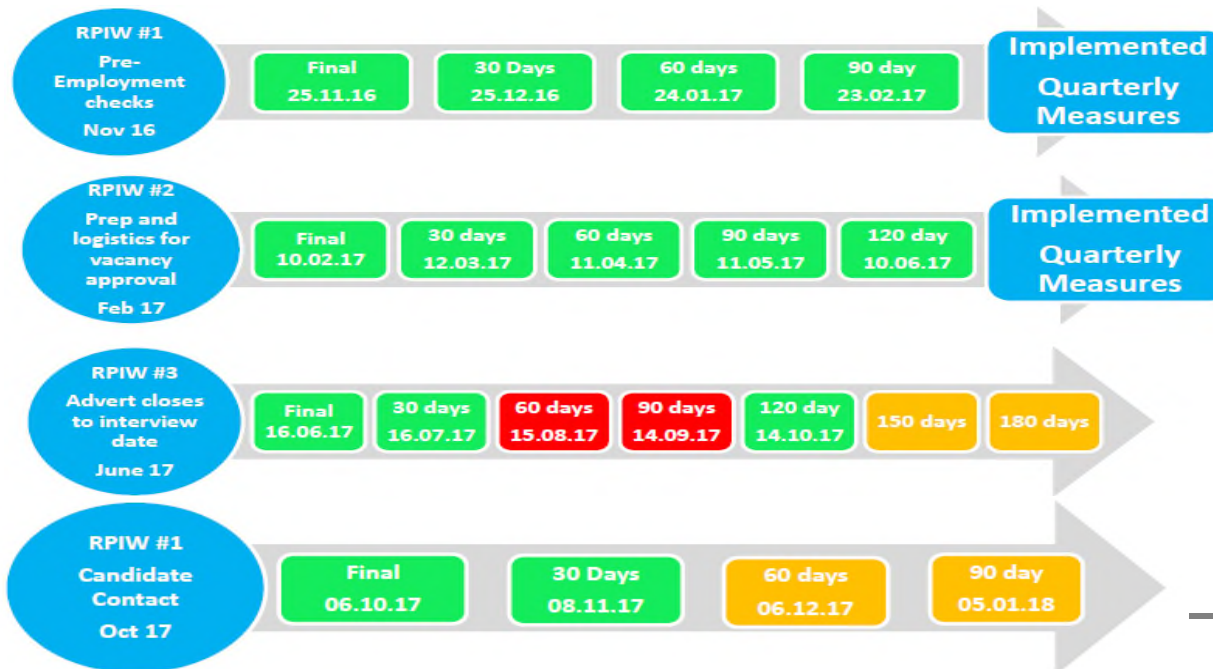
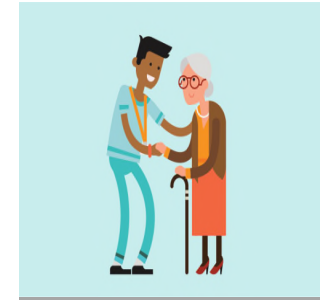


6.3 Value Stream #3 Recruitment

Value Stream #3 (Recruitment) was chosen because the current recruitment process, from when a vacancy arises and is approved, to when the successful candidate commences in post, is lengthy, with many waits and delays.

Improvements

- Lead time (from vacancy identified to staff member's first day) reduced by 10 weeks from 135 days to 63 days
- Delay in receiving candidate references reduced from 21 days to 1 day
- Reduction in length of time from approval to post being advertised reduced to 1 day (in test genba and having sustained at 90-days now suitable for roll-out)
- Potential new staff aware of interview date at advert stage – 19 day improvement
- Lead time from close of advert to interview reduced by 15 days

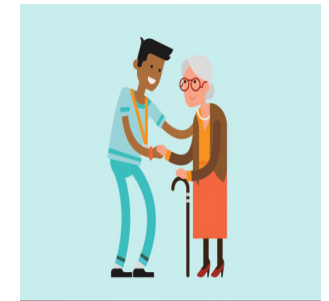


6.4 Value Stream #4 Outpatient Clinics – Ophthalmology

Value Stream #4 (Outpatient Clinics (Ophthalmology)) was chosen to continue the focus on improving the quality of our patients' experience when attending our eye clinics. Clinical staff providing these services are committed to improving processes and keen to progress the work in their new premises. Currently, there is variance in the quality of patient experience and the communication they receive. Additionally, some of our patients were arriving at the wrong clinic, or at the wrong time and tell us they are not sure whether they should bring family members with them, or how to contact the clinic if running late; all as a result of the quality of the letters we are sending out.

Improvements

- 52 day reduction in the time from receipt of referral until first contact is made with patient
- 47% reduction in the number of times letters are delayed due to requesting a letter after the deadline for electronic transfer to next process
- 100% reduction in the number of Booking staff unaware of overall process for sending patient letters (Process = from referral arriving at SATH, to patient arriving in clinic)
- Staff training to assist patients who need guiding planned. Video created.
- 5S applied to Ophthalmology clinic letters resulting in reduction from 17 letters to 1 letter





7.0 Education & Training (GTM Executive Lead: Victoria Maher)

- 7.1 This month we set new targets for our third year having already educated over 2000 of our staff and have over 5000 staff using the TCPS methodology. We have seen Consultants undertaking the role of Sponsors and Process Owners within the RPIW weeks; our Executives developing their knowledge of TCPS through the Lean for Leaders Training and Advanced Lean Training. We have many health care assistants, nurses, midwives and administration staff undertaking 5S.
- 7.2 Our capability and capacity continues to increase, leading us ever nearer to a point where we will have a sustainable improvement methodology, understood, delivered and developed by our own staff. Marie-Claire Wigley, KPO Specialist has completed her accreditation to Team Lead. In our third year, we will concentrate on supporting the 500 staff to utilise their TCPS skills and knowledge.



7.3 Of particular celebration is the progress that our KPO Facilitators and KPO Administrator are making in the roll-out of the 5S methodology. They are being supported in their own development by undertaking the Lean for Leaders programme. They now share that knowledge through the teaching of 5S across the Trust, the outcome of which is to provide a safer and more efficient environment for both our patients, their relatives and our staff.

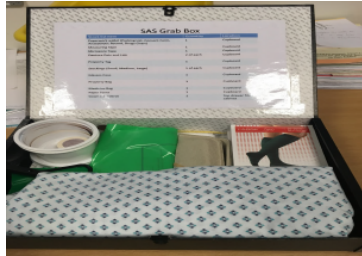


Fig 1: Pre-Op at RSH, Store Cupboard and Grab Bags

Fig 2: 5S Diagram

Fig 3: Catering Store Cupboard (before and after)

7.4 The 5S training continues across the Trust and over 30 areas/wards have now undertaken 5S either through an RPIW, Lean for Leaders and/or a 5S workshop (See Fig 1: 5S Training Spread).

8.0 Engagement and Pace (GTM Executive Lead: Deirdre Fowler)

8.1 Examples of the impact of the lean methodology and the team leaders training are appearing across the Trust. Vicky Jefferson and Mark Robathan from the Pharmacy Department at PRH have introduced a PeopleLink Board, using them for PeopleLink report outs on a weekly basis. It is of note that engagement within the team has been enhanced and the completion rate of the staff survey has increased by 60%. (See Fig 2: PeopleLink Board and Production Board in Pharmacy Department).

Fig 1: 5S Training Spread

5S Training Spread

RSH	CCU	Chemotherapy Day unit	Day Surgery Unit	EM Dept EM Dept	Endoscopy	HDU	ITU	O'Connor Suite	Renal unit
	Ward 21	Ward 22	Ward 23	Ward 24	Ward 25	Ward 26	Ward 27	Ward 28 Ward 28	Ward 29 (AMU)
	Ward 30	Ward 31	Ward 32	Ward 33 Ward 33	Catering	Pre-Op	Procurement		
PRH	CCU	Day Surgery Unit	EM Dept EM Dept	HDU	ITU	Renal Unit	Ward 1 AMU Ward 1 AMU	Ward 4	Ward 6
	Ward 7	Ward 8	Ward 9	Ward 10	Ward 11	Ward 14	Ward 15	Ward 16	Ward 17
	Ward 19	Ward 21	Ward 22	Ward 23	Ward 24	Pre-Op			
Other	Catering (RSH) Catering	Catering (PRH)	OPD (RSH)	Procure (SBP) Procure	Pharmacy (PRH)	Pharmacy (RSH) Pharmacy	Occupational Therapy (PRH)		

Key:

RPIW
5S Workshop
L4L

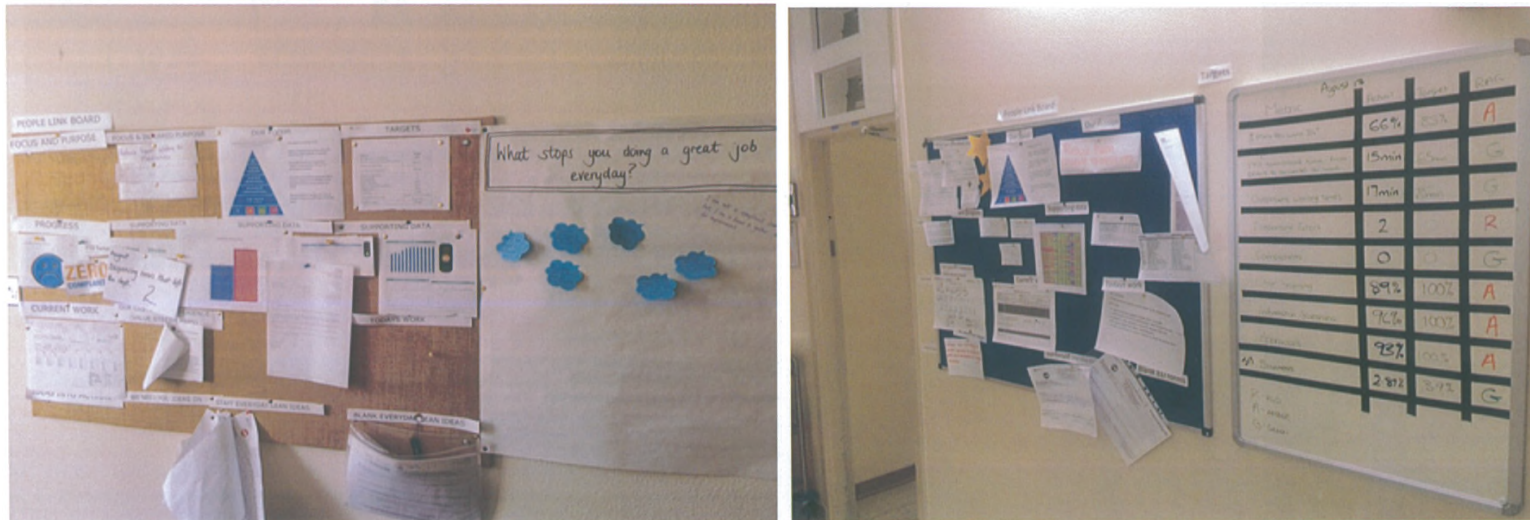


Fig 2: PeopleLink Board and Production Board within the Pharmacy Department

8.2 Paula Davies, Head of Procurement/Lean for Leader/ALT Graduate has been instrumental in applying the Transforming Care Production System to our procurement processes. She has reported many improvements including absorbing additional work without the need for new resource. We are delighted that she has notified the KPO Team that *“the Procurement Department has been assessed at ‘exceeding expectations’ in relation to our procurement processes, this includes reaching level 1 of the NHS standards of procurement (being the first Trust in the West Midlands to achieve the new standard). The work we have undertaken to achieve ‘exceeding expectations’ has been supported by all the work we have undertaken as part of the Transforming Care/Lean Leaders/ALT learning and its application in procurement and the stores/logistics service we provide”*.

9.0 Leadership (GTM Executive Lead: Victoria Maher)

9.1 The work of the Transforming Care Institute and the Leadership Academy are aligned and continue to support and complement each other in the delivery of the Trust Strategy. We now look to celebrate the graduation of our Lean Leaders in the New Year.

9.2 Dates for the next four cohorts of Lean Leader training are available and will support the next 60 leaders undertaking this training.

10.0 Strategy and Policy (GTM Executive Lead: Neil Nisbet)

10.1 Guiding Team continues to support and develop standard work for Trust Executive, implementing daily huddles and regular Executive Genba Rounding. The move towards greater leadership within the genba, 'the place where the work happens' and using the TCPS methodology to improve processes is an approach that will take time to embed but one that we are already seeing, resonates well with leaders and our staff alike.

10.2 The Guiding Team continues to identify opportunities to reinforce our one improvement methodology approach, enabling a greater degree of focus on TCPS work. Our senior leaders will refocus on genba rounding to support the implementation of improvements and sharing of ideas.

11.0 Communication and Media (GTM Executive Lead: Julia Clarke)

11.1 Great communication regarding Sepsis value stream work and videoing to highlight Lean Leaders training and work.

12.0 Outcomes

12.1 Transforming Care Production System continues to demonstrate incremental improvements in the following areas:

12.2 This month we would like to celebrate:

- The first Advanced Lean Training (ALT) accredited staff members
- Successful 2-day Promoting Innovation Workshop
- Positive feedback from our NHSI Review Visit held 16 November 2017
- Pharmacy Department and Procurement Department utilisation of the Transforming Care Production System

13.0 Recommendation

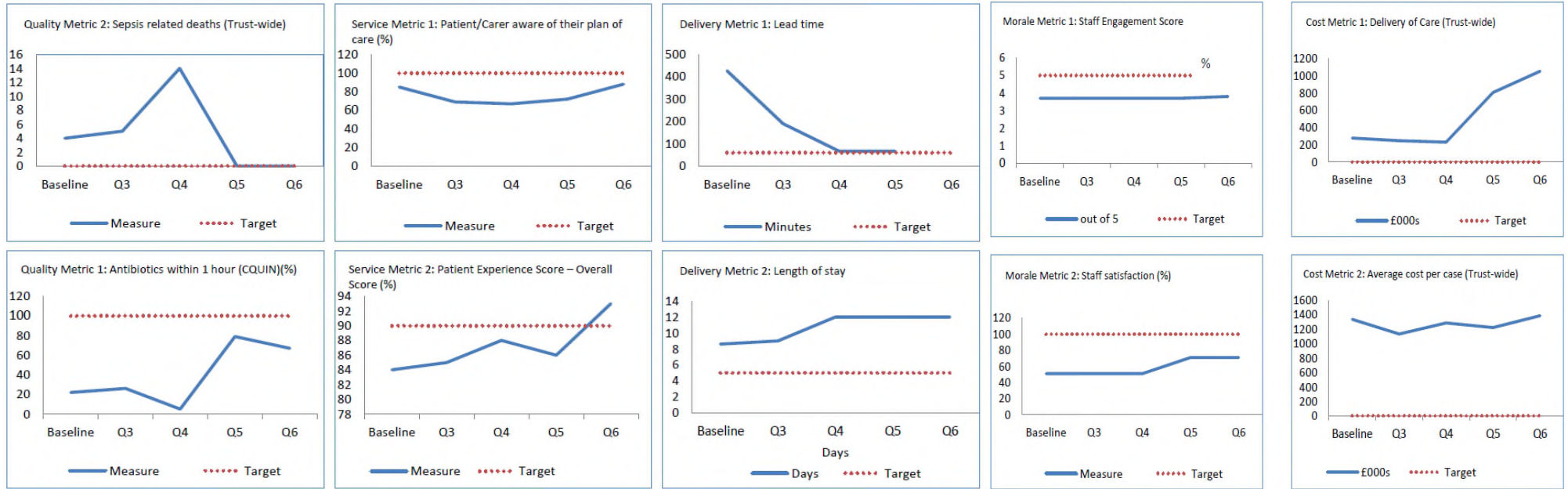
13.1 The Trust Board is asked:

- To acknowledge the positive engagement of our staff in the NHSI review at the two year point in our transformational journey in partnership with VMI.
- To acknowledge Debbie Kadum's contribution to the success of our first value stream respiratory discharge and in the work of the Guiding Team.
- To acknowledge the aim to increase capacity to support further expansion to the breadth and depth of our implementation of the Transforming Care Production System as our one improvement method.

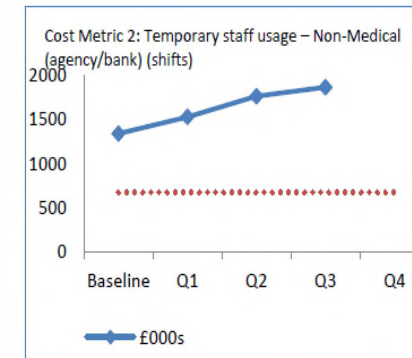
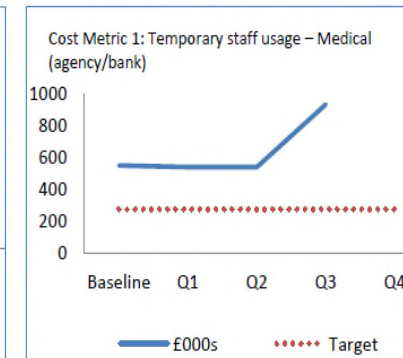
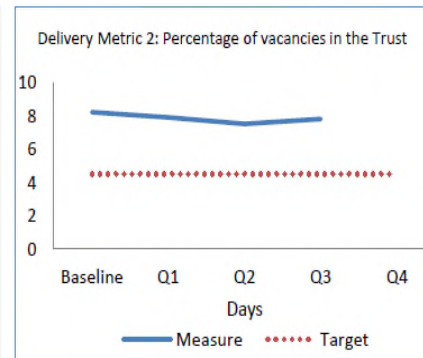
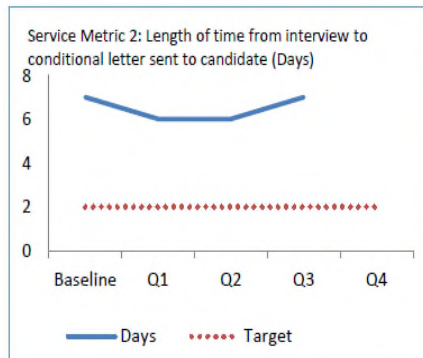
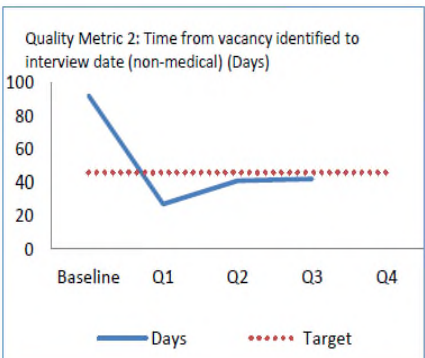
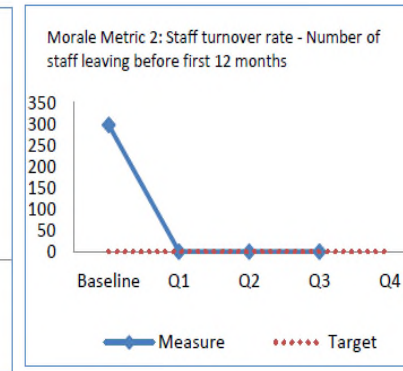
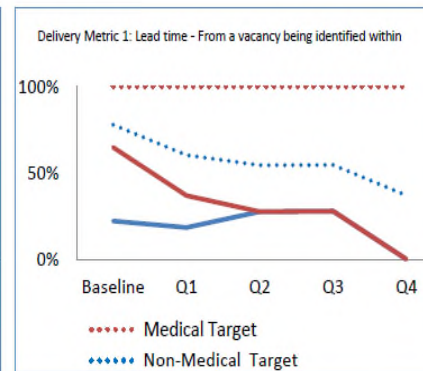
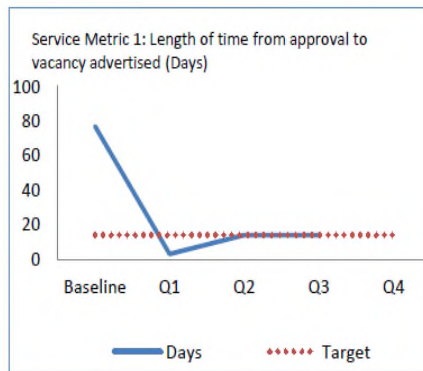
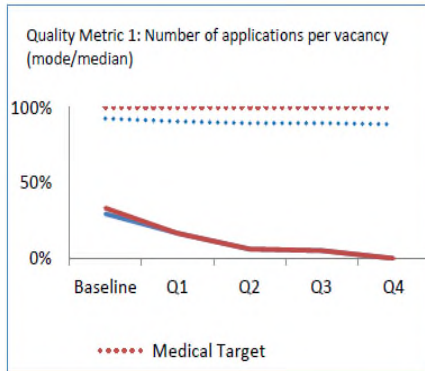
Appendix 1a: Value Stream Metrics: Respiratory Discharge



Appendix 1b: Value Stream Metrics: Sepsis Pathway



Appendix 1c: Value Stream Metrics: Recruitment



Appendix 1d: Value Stream Metrics: Outpatient Clinics – Ophthalmology

