

**Paper 14**

<b>Recommendation</b>  <input type="checkbox"/> <b>DECISION</b>  <input checked="" type="checkbox"/> <b>NOTE</b>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"><b>Trust Board</b></div> <p>is asked to <b>note</b> the:</p> <ul style="list-style-type: none"> <li>Positive engagement of our senior staff in ALT training</li> <li>The step change in the activity of the KPO kaizen plan</li> <li>The next two value streams due to be launched (Emergency Department and Radiology)</li> <li>The open invitation to visit any areas undertaking this work or the KPO Team</li> </ul>
<b>Reporting to:</b>	<b>Trust Board</b>
<b>Date</b>	8 February 2018
<b>Paper Title</b>	Transforming Care Update – February 2018
<b>Brief Description</b>	This update the KPO Team are delighted to inform the Board that the partnership with Virginia Mason Institute continues to progress in a timely and positive manner. Evidence of the Transforming Care Production System being used in wards and departments is materialising. In particular, 5S, Production Boards and PeopleLink Boards.
<b>Sponsoring Director</b>	Simon Wright, Chief Executive
<b>Author(s)</b>	Cathy Smith, KPO Lead
<b>Recommended / escalated by</b>	Simon Wright, Chief Executive
<b>Previously considered by</b>	
<b>Link to strategic objectives</b>	Safer and kinder organisation.
<b>Link to Board Assurance Framework</b>	
<b>Outline of public/patient involvement</b>	Patients involved in Rapid Process Improvement events supporting the improvement in our processes to develop kinder care.
<b>Equality Impact Assessment</b>	<input type="radio"/> <b>Stage 1 only (no negative impacts identified)</b>  <input checked="" type="radio"/> <b>Stage 2 recommended (negative impacts identified)</b> * EIA must be attached for Board Approval  <input type="radio"/> negative impacts have been mitigated  <input type="radio"/> negative impacts balanced against overall positive impacts

**Freedom of  
Information Act  
(2000) status**

- ☒ This document is for full publication
- ☐ This document includes FOIA exempt information
- ☐ This whole document is exempt under the FOIA

## **Introduction**

During 2018 we will increase the pace at which we deploy the Transforming Care Production System (TCPS). Already we have 20 rapid process improvement weeks (RPIWs) planned, the launch of three new value streams, in addition to the continued support for Respiratory, Sepsis, Recruitment, and Ophthalmology Outpatients value streams. Over 40 additional future Lean Leaders have already signed up for this year's training and the Advanced Lean graduates are planning their accreditation for team and workshop lead roles. Lean leaders who have already demonstrated their TCPS knowledge and completed their training will be supported to continue applying the elements of world class management and lean tools. This will include demonstrating daily huddles, production boards and people link report outs are all in place in their areas.

## **National**

### **Transformation Guiding Board (TGB)**

Further opportunities are being developed to:

- Strengthen **NED engagement**
- Share examples of **leader standard work**
- Share how Trusts develop against their assessment on the **continuum tool**
- Strengthen strategies to develop **medical engagement** in the work (including junior Docs)
- Produce standard work for **induction for new Board members** and including a partnership element to it

## **Local Delivery: Next Steps**

- Support lean leader graduates to teach elements of TCPS, lead 5S events, and implement a standard ward/department approach using TCPS.
- Support ALT graduates to undertake Workshop Lead roles.
- Develop our approach to co-designing our pathways with patients in more of our RPIWs.

## **Transforming Care Institute**

We welcomed back Rosemary King, Transformational Sensei from VMI who co-led with Cathy Smith, KPO Lead the second session cohort of ALT candidates. Cathy is now fully accredited to teach ALT, coach and assess workshop lead competences

## **Transforming Care Update Trust Board Meeting – February 2018**

<b>Reporting to:</b>	Trust Board Meeting (08.02.18)
<b>Title:</b>	Transforming Care in Partnership with the Virginia Mason Institute
<b>Author:</b>	Cathy Smith – KPO Lead
<b>Date:</b>	January 2018

### **1.0 Introduction**

- 2.0 As we move into 2018 and into the first quarter of our third year of the accelerated transformation journey and the establishment of the Transforming Care Production System (TCPS), we can look ahead to the year and the opportunity for improvement that the partnership with Virginia Mason institute brings. Deborah Dollard (VMI Sensei) will continue to support the Guiding team on a monthly basis; in addition, a VMI Sensei will visit SaTH to teach and challenge to support the embedding of TCPS and accelerate the approach to our lean journey.
- 2.1 During 2018 we will increase the pace at which we deploy the Transforming Care Production System (TCPS). Already we have 20 rapid process improvement weeks (RPIWs) planned, the launch of three new value streams, in addition to the continued support for Respiratory, Sepsis, Recruitment, and Ophthalmology Outpatients value streams. Over 40 additional future Lean Leaders have already signed up for this year's training and the Advanced Lean graduates are planning their accreditation for team and workshop lead roles. Lean leaders who have already demonstrated their TCPS knowledge and completed their training will be supported to continue applying the elements of world class management and lean tools. This will include demonstrating daily huddles, production boards and people link report outs are all in place in their areas.

- 2.2 We have many great examples of staff engagement and evidence of substantial improvements generated with the methodology, philosophy and lean tools; most recently a 60% reduction in unnecessary stool sample testing for C-Dif and improvement in swallow testing for patients with symptoms of CVA (stroke).
- 2.3 Our challenge this year is to join the various pockets of excellent application of the methodology we see across the Trust, and create standard work. Any value stream may have 20-30 separate pieces of standard work these will need pulling together in a pathway to support the spread and maintenance of these improvements. Creating standard work and a culture where our staff look for the standard work, actively learning from each other, and participate in using that standard work to offer all our patients a high quality service

### 3.0 Next steps from NHSI visit

- 2.1 We received excellent feedback from NHSI following their visits to all five trusts to review progress and understand how best the NHSI and VMI teams could support the accelerated the work. Opportunities for shared learning within the five Trusts and the wider health community are being considered and will include future sharing events, videos and joint training material and events. Consideration is being given to a NHS wide offer to six additional Trusts support to implement lean methodology. SaTH will support the next wave of Trust by sharing our learning and experiences.

### 3.0 National

#### 3.1 Transformation Guiding Board (TGB)

Further opportunities are being developed to:

- Strengthen **NED engagement**
- Share examples of **leader standard work**
- Share how Trusts develop against their assessment on the **continuum tool**
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- Produce standard work for **induction for new Board members** and including a partnership element to it

## 4.0 Local Delivery

- 4.1 Increase the Kaizen activity programme of work from 12 to 20 RPIWs this year and introduce 3 day kaizen events.
- 4.2 Support ALT graduates to undertake workshop lead roles.
- 4.3 Support lean leader graduates to teach elements of TCPS, lead 5S events, and implement a standard ward/department approach using TCPS.
- 4.4 Achieve greater alignments of our Lean for Leaders work with the exemplar programme.
- 4.5 Monitor 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.
- 4.6 Actively demonstrate that **SaTH has one improvement method, Transforming Care Production System (TCPS)** embedded within the Trust through alignment with the organisational strategy

## 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 will publish dates for four sharing/open day events this year.
- 5.2 We welcomed back Rosemary King, Transformational Sensei from VMI who co-led with Cathy Smith, KPO Lead the second session cohort of ALT candidates. Cathy is now fully accredited to teach ALT, coach and assess workshop lead competences.
- 5.3 We celebrate the next three successful Advanced Lean Training graduates, Alan Jackson (Head Biomedical Scientist), Deirdre Fowler (Director of Nursing, Quality and Safety) and Tony Fox (Consultant Surgeon/Deputy Medical Director) and look forward to seeing the first development to RPIW team leads later this year. Paula Dabbs (Head of Organisational Development and Transformation) ALT

graduate undertakes her first team led role in February 2018 supporting the RPIW for improvement to the ocular eye injection outpatient process.

- 5.4 In order to increase the capacity within the Trust to implement the TCPS and maximise the potential improvements to move us further towards a safer and kinder organisation, the KPO Team will need to expand this year.

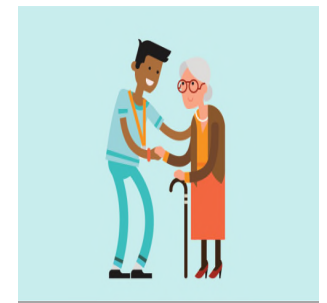
## 6.0 Value Streams

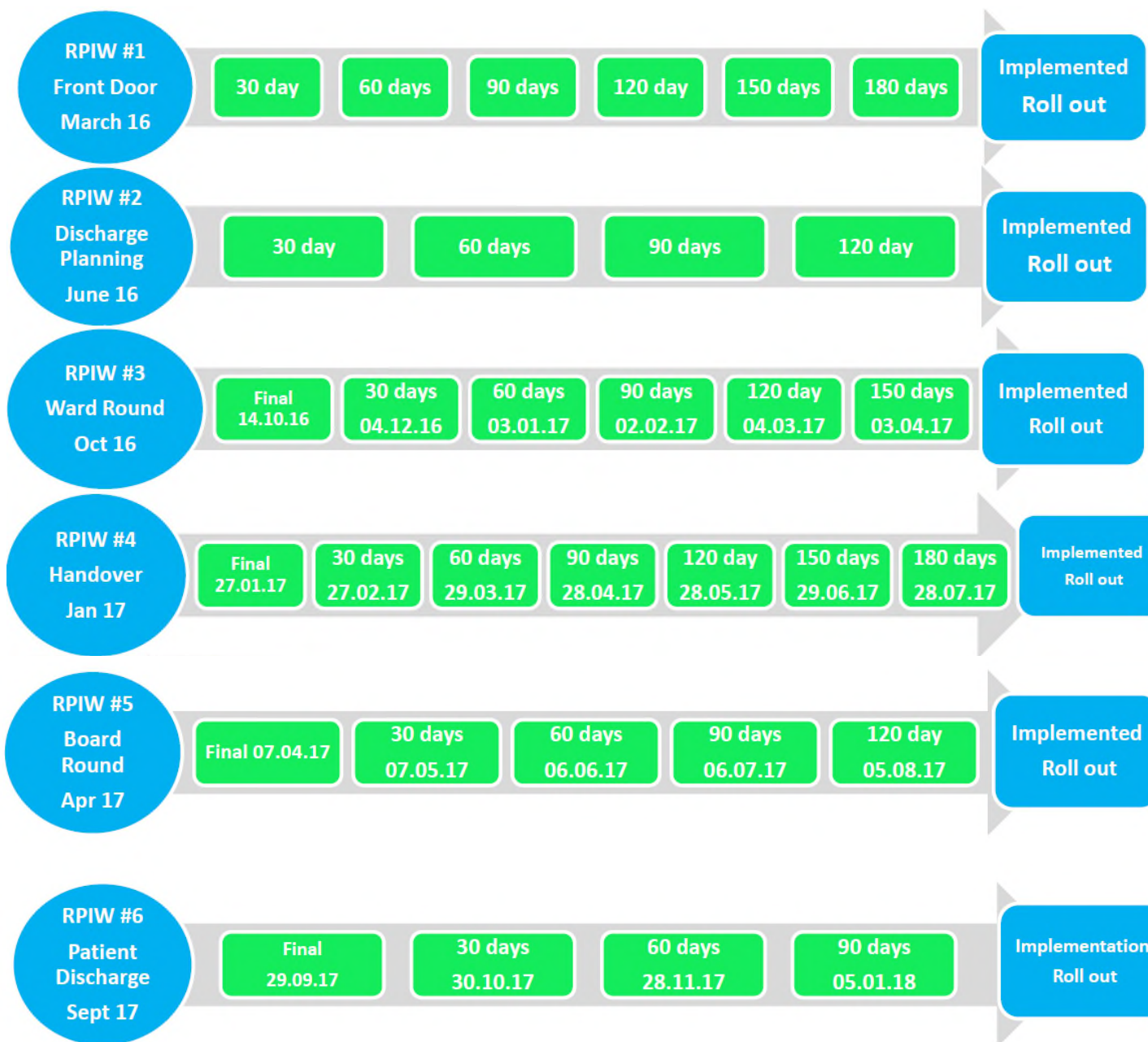
### 6.1 Value Stream #1 Respiratory Discharge Pathway

Value Stream #1 (Respiratory) was chosen as at least 40% of our emergency admissions to the Trust are patients who have respiratory disease. This work has now been transitioned over to the unscheduled care group to maintain the gains and spread across the care group. The Care Group Value Stream Sponsor Team (CGVSST) will co-ordinate a Kaizen plan of continuous improvement work aimed at removing remaining waste from the process for discharge and sharing the learning across the Care Group.

#### Improvements

- Six RPIWs have been undertaken, RPIW to improve the criteria led discharge process is planned
- Lead time target has been met with a reduction of over 40 hours
- Additional patient spells have been accommodated by wards 9 (PRH) and 27 (RSH)
- Standard work has been implemented including for 4pm huddles, board round and ward round
- Visual controls to aid timely provision of medication, discharge summary and handovers are supporting the process
- Continued measurement and report out will be received via care group board and the transforming care stand ups
- We acknowledge and thank the original VSST for their tenacity and achievements





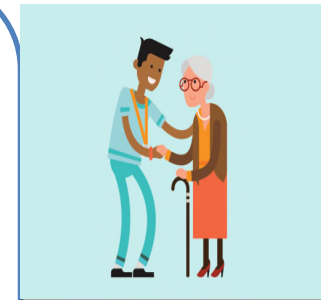


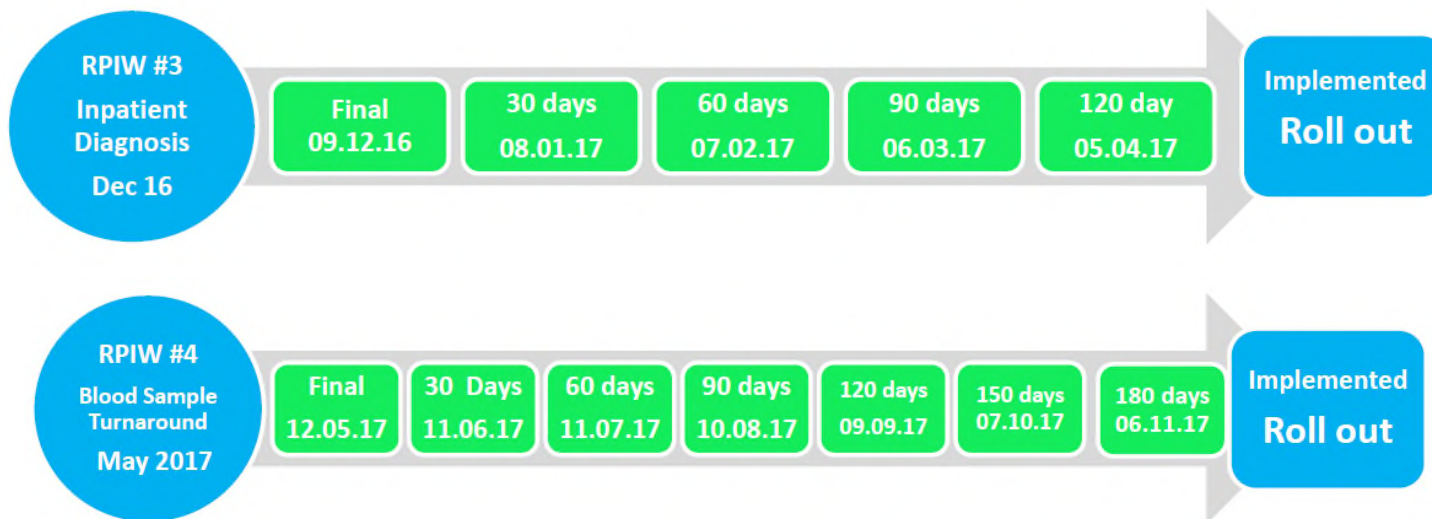
## 6.2 Value Stream #2 Sepsis

Value Stream #2 (Sepsis) was chosen Early recognition and screening for Sepsis is vital to ensure timely and effective treatment. At SaTH at least 4 patients will die each month from Sepsis and within the UK 44,000 people die each year reducing these deaths is a local and national imperative. The next step for this work is an RPIW looking at the process of guideline development that supports standard work

### 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
- Sepsis Box rolling out to AMU at PRH



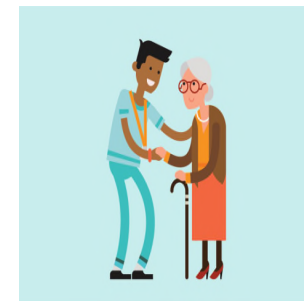


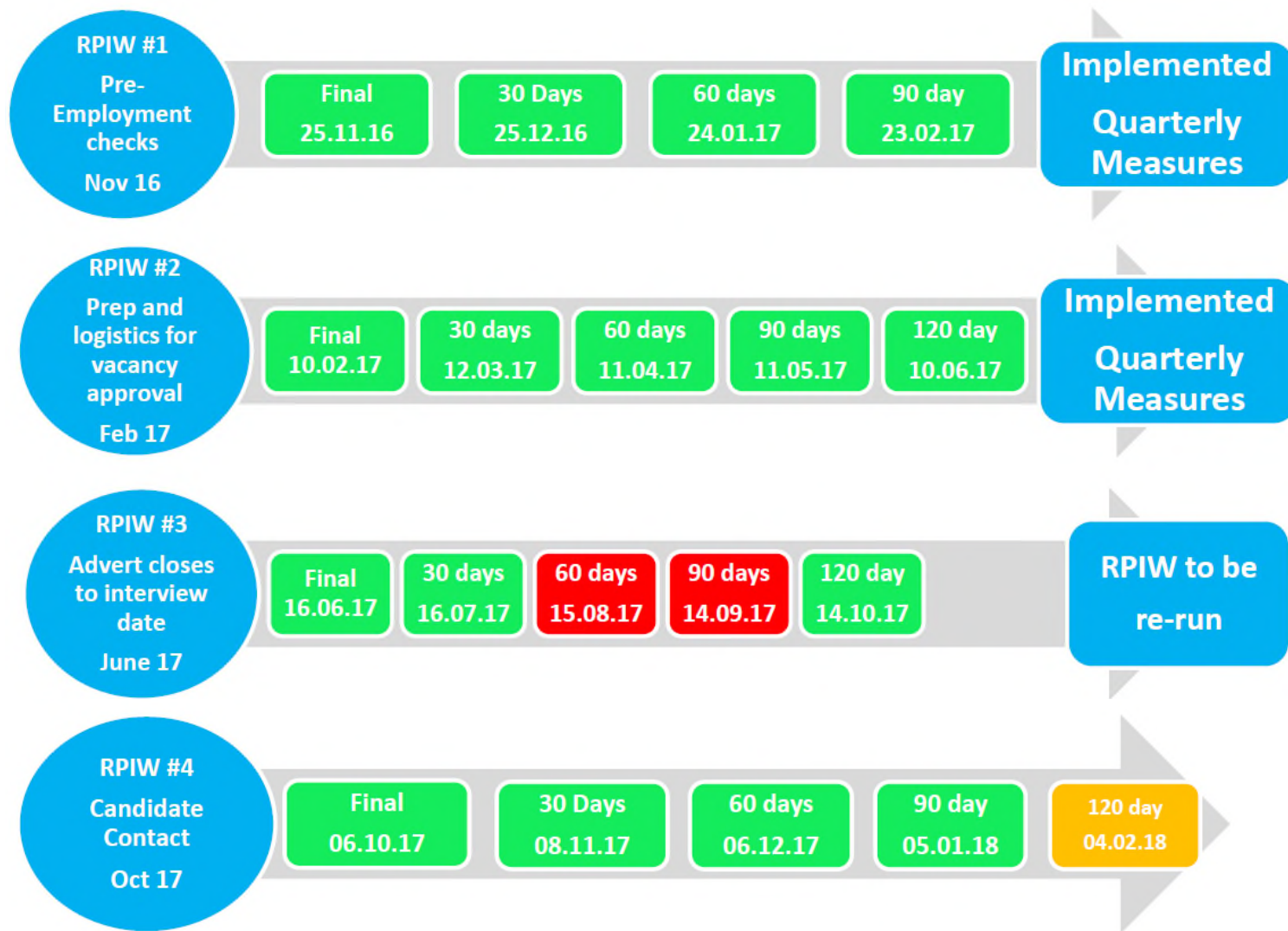
### 6.3 Value Stream #3 Recruitment

Value Stream #3 (Recruitment) was chosen as recruiting the right staff in a timely process that provides a positive experience for new employees is an essential element in our work to address the current level of vacancies at the Trust and retain our staff. The next step is to review the experience of our staff on their first day of employment at the Trust and remove the non-value adding elements from the process during an RPIW w/c 29/1/2018

#### 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



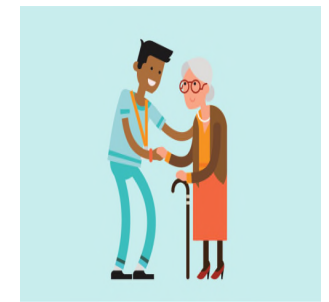


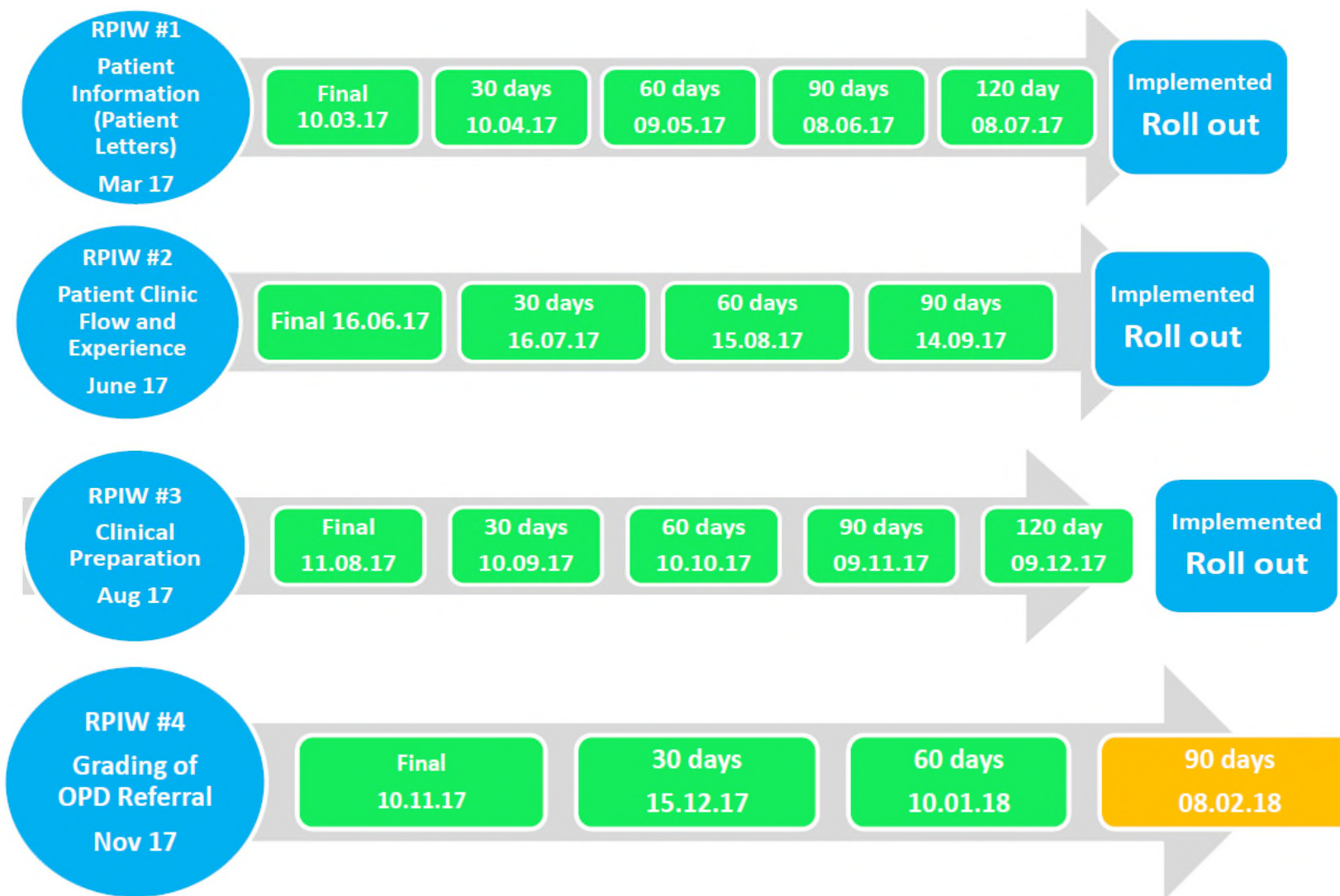
#### 6.4 Value Stream #4 Outpatient Clinics – Ophthalmology

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
- 32% reduction in lead time to prepare patient notes for a clinic
- 93% reduction in lead time with introduction of electronic grading





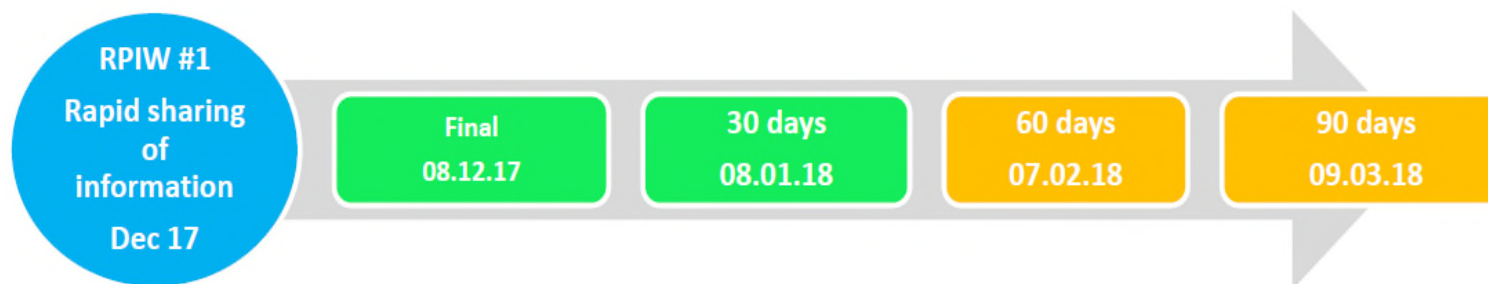
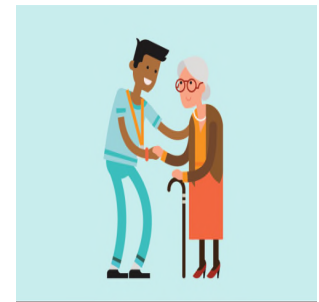
## 6.5 Value Stream #5 Patient Safety

This value stream work is a fantastic opportunity for the staff in Women and children's care group to participate in the improvement to the processes to highlight actual or potential patient harm events and respond appropriately. The aim is to encourage more staff to raise alerts using a process free of defects and where efficient information flow leads to appropriate and timely action, investigation and learning.

Next step is an RPIW to review and improve the process for completing the incident alert, (DATX). This is planned for w/c 26/02/18

### Improvements

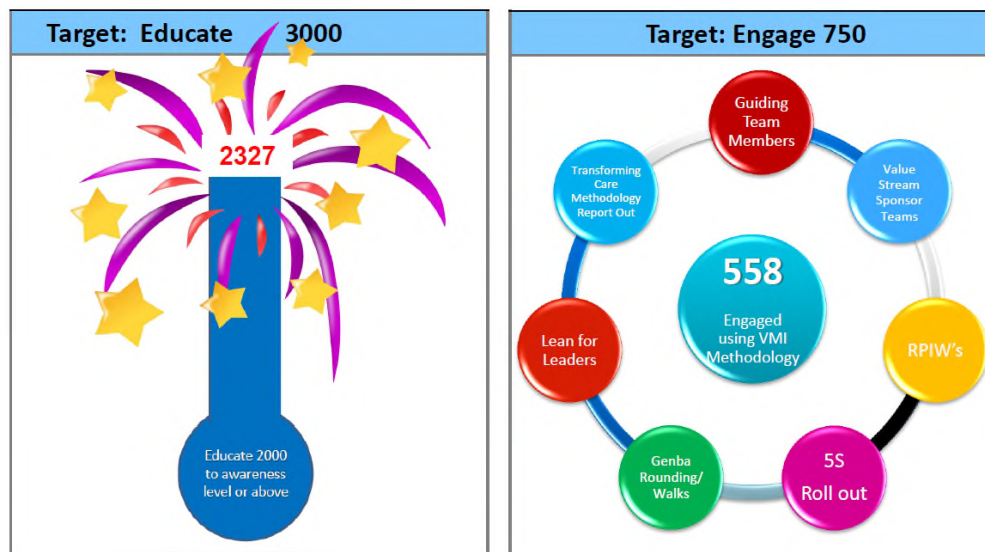
- Safety huddle implemented with 100% compliance to standard work at 30 days
- 80% reduction in time (229 mins to 90 mins ) following an incident to reporting an incident
- Level 3 5S achieved for the environment of the antenatal office
- Production board implemented to support requirement for daily safety huddle





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

- 7.1 This month we set new targets for our third year aiming to have educated 3000 of our staff by 1 October 2018 and have over 750 staff consistently 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 house keepers, health care assistants, nurses, midwives, administration staff, catering teams, facilities staff and managerial teams undertaking 5S improvement work. There appears to be no slowdown in the interest, energy and commitment of our staff to learn the methodology and implement improvements using the TCPS.



- 7.2 Our KPO and wider Trust 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 and Workshop Lead. Cathy Smith, KPO Lead can now independently teach and coach ALT trainees through to ALT graduation and Workshop Lead roles.

- 7.3 In our third year, we are concentrating on supporting our six SaTH ALT graduates and 80 lean leaders to utilise their TCPS skills and knowledge to benefit patients, demonstrating their commitment to continuous improvement through standard work and kaizen activity
- 7.4 Of particular celebration is the upcoming launch of two new value streams. The first is focusing on improving the pathway for patients requiring care in our Emergency departments (ED), and following shortly after that, the launch of the radiology value stream, focusing on processes the request and completion of those radiology investigations.
- 8.0 Engagement and Pace (GTM Executive Lead: Deirdre Fowler)**
- 8.1 5S training continues to be a popular workshop and 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%.

*Fig 2: 5S activity in the Pharmacy Department at RSH*





Fig 1: 5S Spread

### 5S 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 TO Ward	Ward 23	Ward 24	Ward 25	Ward 26	Ward 27	Ward 28 Ward 28	AC
	Ward 29 / 30 AMU CDU	Stores	Ward 32	SAU 33/34 SAU	Catering	Pre-Op	Procurement Procurements	Pathology Histology	Booking
	ENT	IT	Therapies (physio)						
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 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	Theatres	Paeds	
Other	Catering (RSH) RSH Catering	Catering (PRH)	OPD (RSH)	Procurement (SBP)	Pharmacy (PRH)	Pharmacy (RSH) (RSH) Pharmacy	Occupational Therapy (PRH)	Executive	Corporate Nursing
	Sustainability Services	Stores PRH	Eye Clinic	Portering RSH					
Other	Catering (RSH) RSH Catering	Catering (PRH)	OPD (RSH)	Procurement (SBP)	Pharmacy (PRH)	Pharmacy (RSH) (RSH) Pharmacy	Occupational Therapy (PRH)	Executive	Corporate Nursing
	Sustainability Services	Stores PRH	Eye Clinic	Cleanliness Team OPD (PRH)					

Key:

RPIW
5S Workshop
L4L
TCPS Methodology
5s training required

## **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 and show case their work.
- 9.2 The next cohorts of Lean Leader training are available and will support up to 60 new lean leaders. In addition, KPO Specialist Richard Stephens will be supported by our KPO Lead in his first delivery of this course.

## **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. We move towards greater leadership within the genba, 'the place where the work happens' with visible use of the TCPS methodology is an approach that will take time to embed. We aim to support all ward managers to develop these skills over the next two years.
- 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.
- 10.3 A refresh of the organisational strategy annual goals with greater alignment with TCPS is underway aimed at making it easier for departmental managers to join the dots for staff between the strategy and the work of each employee.

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

- 11.1 Focus currently is on the Sepsis Value stream work and videos to highlight Lean Leaders training and work. The recently purchased plasma screens are being used to highlight the work and training opportunities

## **12.0 Outcomes**

- 12.1 This month we would like to celebrate:

- The next three Advanced Lean Training (ALT) accredited staff members
- Successful Workshop Lead accreditation for Marie-Claire Wiggle (KPO Specialist)
- Successful completion of ALT and Workshop Lead accreditation training for Cathy Smith (KPO Lead)
- Positive feedback from our NHSI Review Visit

### **13.0 Recommendation**

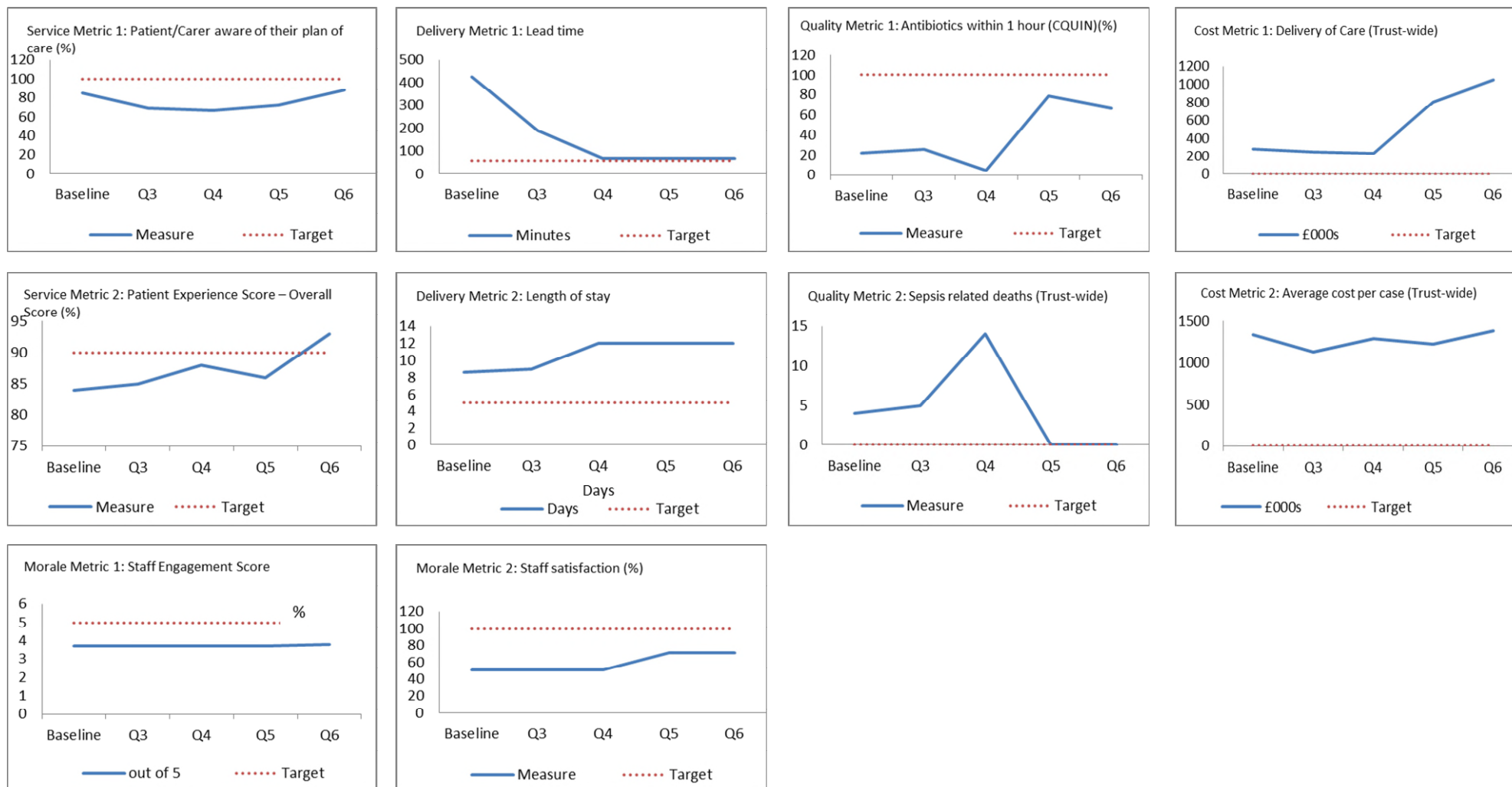
#### **13.1 The Trust Board is asked to:**

- acknowledge the positive engagement of our senior staff in ALT training
- acknowledge the step change in the activity of the KPO kaizen plan
- acknowledge Nick Holdings contribution to the success of our KPO team in its first two years and the support he has given the sepsis value stream.
- acknowledge the next two value streams due to be launched (Emergency Department and Radiology)
- continue to support the work through report outs
- note the open invitation to visit any areas undertaking this work or the KPO team

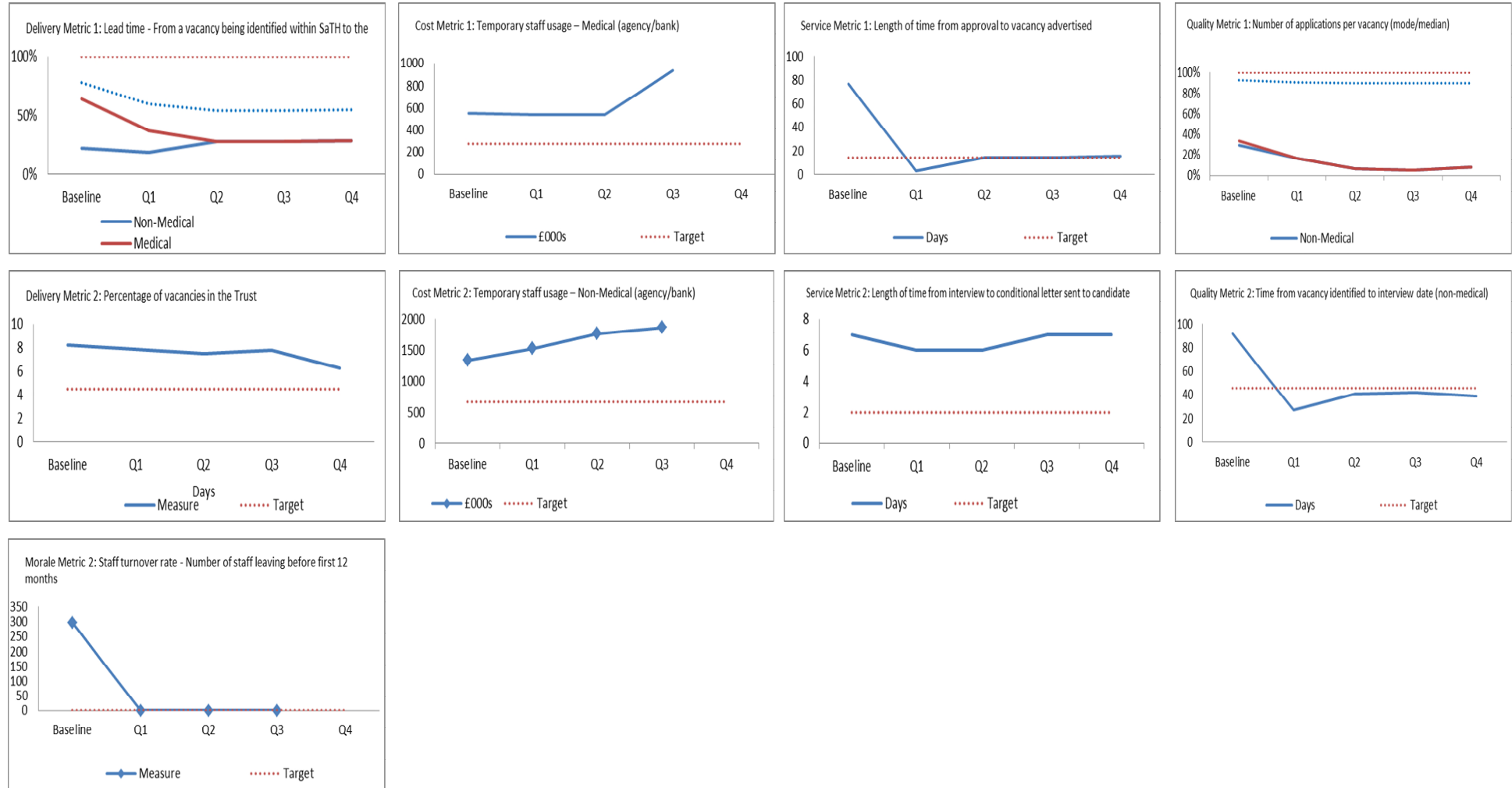
## Appendix 1a: Value Stream Metrics: Respiratory Discharge



## Appendix 1b: Value Stream Metrics: Sepsis Pathway



## Appendix 1c: Value Stream Metrics: Recruitment



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

