

Cover page	
Meeting	SaTH Trust Board
Paper Title	Transforming Care/Improvement Plan Update
Date of meeting	Thursday 6 th February 2020
Date paper was written	Friday 24 January 2020
Responsible Director	Bev Tabernacle – Director of Transformation and Strategy
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Executive Summary	
<p>This paper provide an update on the work being undertaken to refresh the Trust’s approach to Quality Improvement and provide an update on the work that has been supported by the Trust’s Transforming Care Production System (TCPS) since November.</p> <p>The Transforming Care Partnership Board in December agreed that a number of value streams would transition into business as usual and that the Patient Safety, ED/ Flow, Deteriorating Patient/Sepsis, Surgical and Standard Work value streams will be re - scoped and new Kaizen plans established to support delivery of the improvements required. Initially those improvements linked to the conditions set within the Section 29 and 31 notices will be prioritised.</p> <p>A new Transformation and Strategy structure that aligns the work been undertaken by the PMO and KPO teams and will provide additional capacity to deliver quality and cost improvement programmes has been approved and new post are currently being recruited to with an aim of the new structure being in place in quarter 1 of 2020/2021.</p> <p>The Board are asked to:</p> <p>To formally receive and discuss a report and approve its recommendations.</p>	
Previously considered by	Sustainability Committee

The Board (Committee) is asked to:				
<input type="checkbox"/> Approve	<input type="checkbox"/> Receive	<input checked="" type="checkbox"/> Note	<input type="checkbox"/> Take Assurance	
To formally receive and discuss a report and approve its recommendations or a particular course of action	To discuss, in depth, noting the implications for the Board or Trust without formally approving it	For the intelligence of the Board without in-depth discussion required	To assure the Board that effective systems of control are in place	
Link to CQC domain:				
<input type="checkbox"/> Safe	<input checked="" type="checkbox"/> Effective	<input type="checkbox"/> Caring	<input type="checkbox"/> Responsive	<input type="checkbox"/> Well-led

Link to strategic objective(s)	<i>Select the strategic objective which this paper supports</i>
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	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> PATIENT AND FAMILY Listening to and working with our patients and families to improve healthcare <input checked="" type="checkbox"/> SAFEST AND KINDEST Our patients and staff will tell us they feel safe and received kind care <input checked="" type="checkbox"/> HEALTHIEST HALF MILLION Working with our partners to promote 'Healthy Choices' for all our communities <input checked="" type="checkbox"/> LEADERSHIP Innovative and Inspiration Leadership to deliver our ambitions <input checked="" type="checkbox"/> OUR PEOPLE Creating a great place to work
Link to Board Assurance Framework risk(s)	RR1533 We need to implement all of the 'integrated improvement plan' which responds to CQC concerns so that we can evidence provision of outstanding care to our patients

Equality Impact Assessment	<ul style="list-style-type: none"> <input checked="" type="radio"/> Stage 1 only (no negative impact identified) <input type="radio"/> Stage 2 recommended (negative impact identified and equality impact assessment attached for Board approval)
Freedom of Information Act (2000) status	<ul style="list-style-type: none"> <input checked="" type="radio"/> This document is for full publication <input type="radio"/> This document includes FOIA exempt information <input type="radio"/> This whole document is exempt under the FOIA
Financial assessment	<i>Is there a financial impact associated with the paper?</i>

Main Paper

Introduction

Since the last update to Trust Board the Improving Care Project Management Office (PMO) and the KPO team have been working closer together along with colleagues in other corporate functions such as Corporate Nursing to look at how the Quality Improvement Plan (Phase 2) and work undertaken by the Value Streams can better align.

The Transforming Care Partnership Board in December agreed that a number of value streams would transition into business as usual and that the Patient Safety, ED/ Flow, Deteriorating patient/ Sepsis, Surgical and Standard Work value streams will be re - scoped and new Kaizen plans established to support delivery of the improvements required. Initially those improvements linked to the conditions set within the Section 29 and 31 notices will be prioritised.

We have also aligned the ThinkOn methodology adopted by the Trust 18 months ago to the improvement work in order to ensure we are getting the engagement in the improvement process. Each value stream will also have a Think on Master coach aligned to them and the Lead Master Coaches have developed a Think on action plan with a specific focus on supporting ED and also Paediatric Pathway and Mental Health Improvements.

Current Situation Update

Kaizen Promotion Office (KPO) Activity

In December 2019/January 2020, the KPO Team have supported:

- Improvement Steering Group Meetings
- Urgent care Operations Meeting
- Get It Right First Time (GIRFT) deep dive session
- Criteria Led Discharge Meetings and Implementation
- Lung Cancer Pathway Kaizen Event
- Surgical Pathway Fractured Neck of Femur Kaizen Event Planning
- Lean for Leaders Training Session 4 and three new cohorts commencing Session 1

In addition to this there have been two Rapid Process Improvement Workshops (RPIW):

- **Surgical Pathway Value Stream RPIW** (2-6 December 2019) - the scope of the RPIW was to explore list lockdown for Urology operation lists. This was the first RPIW at SaTH to be led by two non KPO members of SaTH, Tony Fox (Vascular Consultant and Advanced Lean Graduate) and Mark Cheetham (Colorectal Consultant and Advanced Lean Graduate)
- **Emergency Department Value Stream RPIW** (9- 13 December 2019) – the aim of this RPIW was to ensure:
 - All staff in the Trust’s two EDs, as well as the on-call teams, know the correct process for the admission of 16 and 17-year-olds presenting in the EDs with a mental health condition
 - All patients in the EDs are triaged using a newly-created Mental Health Triage Tool
 - Increase the number of patients triaged within 15 minutes of arrival in the EDs
 - The team was made up of doctors, nurses and other healthcare professionals. During the week the team were also joined by a Lynda Jones, an independent mental health activist, who has been inputting and guiding the team from a patient perspective.

Improvements made during the week include:

- The creation of a Mental Health Triage Tool – all patients presenting in ED are currently assessed using a Physical Health Tool. A Mental Health Triage Tool is to be introduced – there is one in place but it has been developed and improved this week alongside this

- which will help decide the next course of action for the patient
- The creation of a flowchart for all staff in the Emergency Departments - a step-by-step guide has been created to ensure all staff are fully aware of the correct pathway for 16 to 17-year-olds presenting in ED with a mental health condition
- Improved education and awareness - information folders are to be created containing important information, including the flowchart and the Mental Health Triage Tool, and contact details of external organisations that may be able to assist in the delivery of great patient care of those presenting with a mental health condition

Further detailed updates on each of the value stream will be provided to Sustainability Committee.

Transforming Care Partnership Board (TCPB) Update and Progress

The Trust's Transforming Care Partnership Board (formerly known as SaTH Guiding Team) has undergone a review and the terms of reference have been reviewed and updated. The 'Think on' guiding team has been integrated into the TCPB. TCPB have agreed that the following value streams will transition into business as normal:

- Radiology
- Ophthalmology
- Recruitment
- Respiratory

The TCPB team received the Virginia Mason Institute Transformation Journey Quarterly Report at the January 2020 meeting which can be seen in **Appendix 1**.

The following recommendations have guided the actions and outcomes for the team:

- Development Session with the Senior Leadership Team to confirm expectations of SLT in respect of TCPS
- Realignment of quality improvements under the appropriate value streams
- Revised Genba templates/guidance to support a review of Trust strategic objectives and values
- Introduction of a Lean for Leaders network that will meet monthly.

TCPS Planned RPIW and Kaizen events

Date	Event
24-28 February 2020	RPIW OPD reception RSH
24-28 February 2020	RPIW Correct Site Marking PRH
09-13 March 2020	RPIW Deteriorating Patient and Sepsis ED PRH
17/18/19 March 2020	Kaizen Event Deteriorating Patient and Sepsis ED RSH
23-27 March 2020	RPIW Streaming and Triage ED RSH
23-27 March 2020	RPIW Emergency Theatres list (CEPOD)
31 March-2 April 2020	Kaizen Event Streaming and Triage ED PRH

Quality Improvement Plan

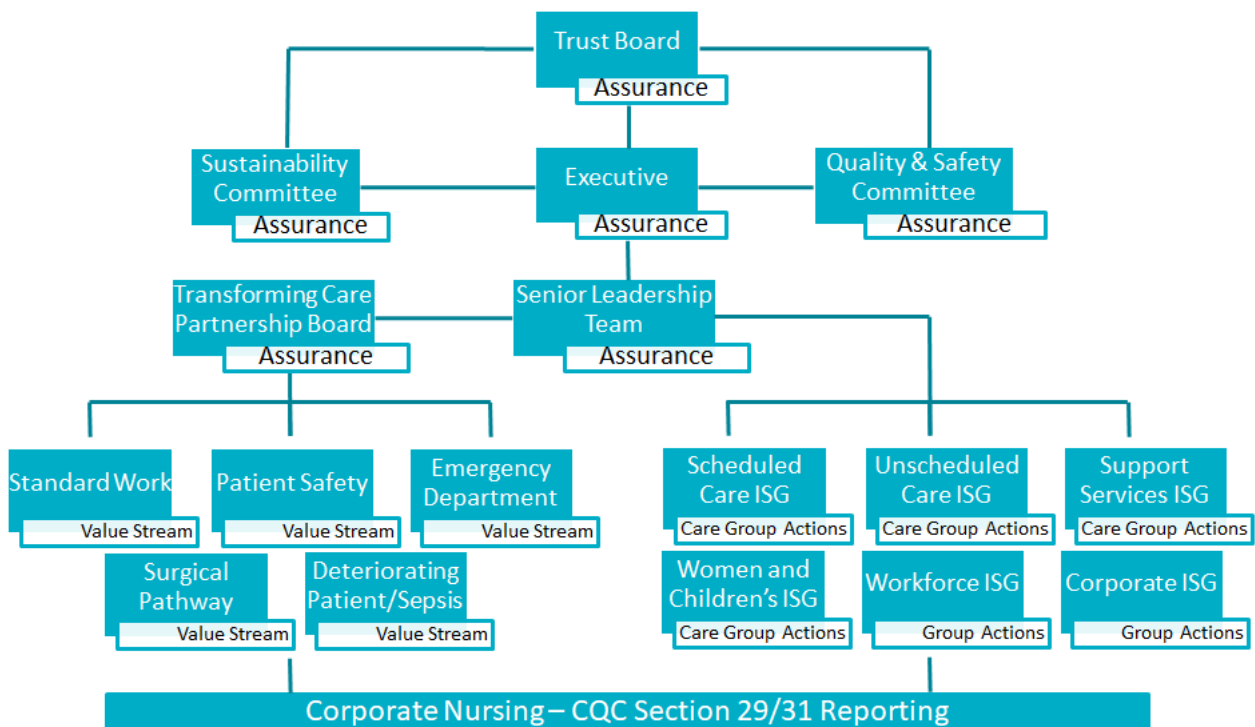
The Improving Care PMO have undertaken a review of the outstanding findings/actions from the last CQC 2018 report contained within the Trust's Quality Improvement plan (QIP) and the Section 29 and 31 conditions that have been imposed on the Trust since their visits in 2018 and November 2019 to identify the common themes that are appearing that need to be built in to the Trust Quality Improvement Plan (Phase 2) moving forward.

There has also been a lesson's learnt review with the Improvement Steering Groups that were set up

to review what work and what did not the main outcomes of this were as follows:

- Success - Excellent support for Plan owner from PMO designated support prior to, during and after ISG meetings and regular meetings enabled people to plan ahead and meant they were well attended by the right people
- Issue - services outside of current QIP have no exposure to findings/learning of current programme. Proposed Improvement for phase 2 - learning and improvement to be shared throughout the Trust not just services involved.
- Issue - Actions were not always prioritised correctly, or delivered at the pace required. Proposed Improvement for phase 2 - every finding should be prioritised based on risk, and timescale allocated accordingly.

Moving forward the implementation and delivery of the Trust Quality Improvement Plan will be underpinned by the use of the Trust’s Transforming Care Production System (TCPS) and looking to utilising existing governance and assurance process and committees to provide monitoring and assurance of the plan moving forward. The diagram below shows the current draft of the proposed governance process:



The PMO team have reviewed the current value streams with the KPO team and aligned the current outstanding actions to them. There is also a scoping exercise underway to identify the current standard monthly committee meetings to align relevant actions to their work plans for the coming year.

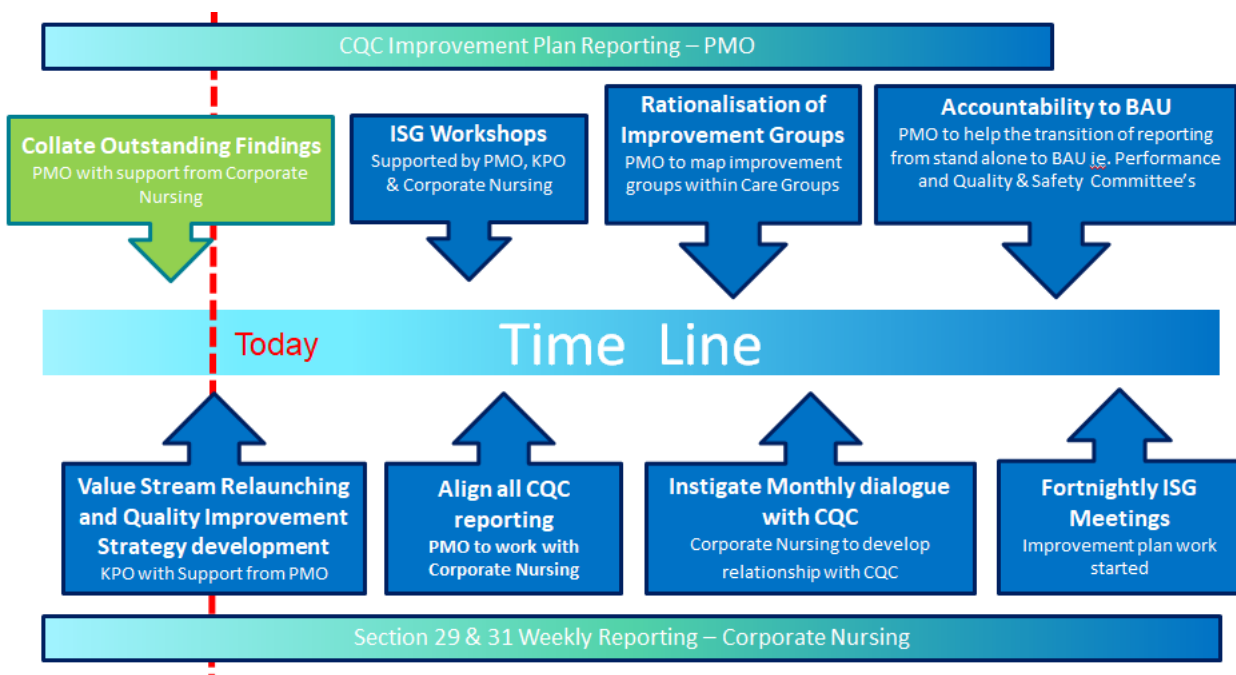
2019/20 Outstanding Findings

Staffing	27%
Mental Health	12%
Documentation	9%
Training	7%
Deteriorating Patient / Sepsis	7%
Triage	5%
Environment	5%
Process	5%
DoLS	4%
Governance	3%
Environment	3%
Flow	3%
Equipment	2%
Medicines Management	2%
Privacy & Dignity	2%
Incidents	1%
Environment	1%
Process	1%
IPC	1%
Well Led	1%
	100%

Mapping to Value Streams

Patient Safety	Governance	3%	} 20%
	Incidents	1%	
	Mental Health	12%	
	DoLS	4%	
ED	Environment	3%	} 11%
	Flow	3%	
	Triage	5%	
Sepsis	Deteriorating Patient / Sepsis	7%	} 2%
Surgical Pathway	Environment	1%	
	Process	1%	
Standard Work	Documentation	9%	} 16%
	Equipment	2%	
	IPC	1%	
	Medicines Management	2%	
Staffing	Privacy & Dignity	2%	} 35%
	Staffing	27%	
	Training	7%	
	Well Led	1%	
Other	Environment	5%	} 10%
	Process	5%	
		100%	

The following diagram shows the steps that are being taken to further develop the quality improvement programme phase 2.



Transforming Care Team Structure

Now that the Director of Transformation and Strategy and the Associate Director of Transformation and Strategy are in post a review of the existing structure has been undertaken and a Business Case for the new structure has been agreed to support the delivery of the Trust's Quality and Cost Improvement Programme's moving forward. The Transformation and Strategy team currently have a number of vacancies and acting up arrangements in place so work is underway to ensure that a substantive structure is put in place. The new structure will enable the Trust KPO team to be more aligned with the Trust's PMO team and ensure that the Trust TCPB is being utilised in delivering the Trust quality and cost improvement programmes. In the new structure the Head of KPO will report

into the Head of PMO and Transformation to ensure work is aligned and that the Trust's improvement methodology is embedded in everything we do.

Recruitment to the roles of Head of PMO and Transformation, Head of KPO, and four Transformation Partner roles will be advertised by the end of January 2020, with interviews planned for end of February 2020.

Conclusion

Progress is being made on developing the next phase of the Trust's quality improvement plan. This is being supported by each of the value streams refreshing the scope and their priorities moving forward supported by the KPO and PMO team. A number of RPIW and Kaizen Events are already planned to support improvements required as a result of the CQC findings.

A new structure for the Transformation and strategy team has been approved and recruitment underway to ensure that a new structure is in place by the first quarter of 2020/2021.

Recommendation

The Trust Board are asked to note:

- The progress that has been made to date in the development of the phase 2 quality improvement plan and the planned RPIW and Kaizen events that will take place support improvements required as a result of the CQC findings.
- The progress that has been made to establish a new Transformation and Strategy structure that aligns the work been undertaken by the PMO and KPO teams and will provide additional capacity to deliver quality and cost improvement programmes.

Virginia Mason Institute: Transformation Journey Quarterly Report - Shrewsbury and Telford Hospital

Time frame: **October – December 2019**

Purpose: Report progress; facilitate focus and alignment

Upcoming Events
Jan-Mar 2020

16 Jan: GTM – VMI Onsite
20 Feb: GTM – VMI Virtual
19 Mar: GTM – VMI Virtual

Mar: Sensei Visit not yet scheduled
Monthly KPO Coaching Calls

Components	Successes, Opportunities	Recommendations
Management by Policy Strategic plan, Aligned Expectations, Improvement Methods and Infrastructure	<ul style="list-style-type: none"> Gaining confidence in language usage around TCPS/"Transforming Care" and nearing-zero use of VMI/TCI/Lean/QI/'methodology'. Delays in training <u>regs</u> embedded as policy/performance appraisals for existing/new leadership Inconsistent executive attendance at TCPB becoming a pattern. 	<ul style="list-style-type: none"> Direct the excitement and momentum surrounding "TCPS" to communicate constantly and regularly in live venues, on paper, <u>genba</u> walks, etc. Linkage of training to existing operational challenges/initiatives could be key. Follow through on June commitment to Band 7 declaration. Identify the "why" for TCPB. Renew commitment and rules of reference for all TCPB members and communicate the importance of TCPS as central, instead of separate/extra.
Cross-Functional Management Urgency, Improvement Agenda Aligned with Strategic plan, Measurement	<ul style="list-style-type: none"> Lack of a clear <u>organisational</u>/clinical strategy creates an uncertain environment for decisions to be made on improvement or operations. Realignment of <u>SaTH's</u> imp priorities under TCPS umbrella will be a significant step forward. CQC linkage to VSST priorities creating cleaner imp pathways; potential to eliminate oversight redundancy. 	<ul style="list-style-type: none"> Development of a true <u>organisational</u> strategic plan will improve and empower the executive team and SLT to clearly delineate the highest priorities for <u>SaTH</u> and direct those to <u>utilise</u> TCPS Find courage in using 5 Whys and questioning "the way we've always done it" when it comes to adding more assurance and oversight on improvement areas that already exist.
Daily Management Visible and engaged leaders, Daily Management, Standard work, Quality & Safety	<ul style="list-style-type: none"> Executive <u>genba</u> walks, linked in with Well-Led initiatives, improving in frequency and quality of coaching leaders, assessing overall TCPS progress. Continued progress of L4L participants, queries on how to reach leaders who do not have line managers supportive of their L4L enrollment. 	<ul style="list-style-type: none"> Move all executive <u>genba</u> walks to using the BRAG Board as a way to assess and coach TCPS leaders in their strengths and opportunities. Intentionally target untapped leaders who have declined multiple L4L invitations. Plan for level of accountability at SLT level, not KPO or TCPB. Celebrate those leaders who are effectively using Daily Mgmt. Identify and share through <u>Trustwide Comms</u> and venues.
Impact on Transformation (Culture): Consistency in TCPS – both in reference and in action – are needed at <u>SaTH</u> to bolster transformation journey for 2020. Beginning fruits of alignment of <u>Transforming Care</u> programme will help increase efficacy of KPO and PMO to make real improvements for patients.		Recent Delivered Services Oct-Dec 2019
		17 Oct: GTM – VMI Onsite 14 Nov: GTM – VMI Virtual 19 Dec: GTM – VMI Virtual Monthly KPO coaching calls 16-20 Dec: Sensei Visit Monthly KPO Coaching Calls