


**Board of Directors' Meeting**  
**14 July 2022**

<b>Agenda item</b>	132/22			
<b>Report</b>	Board Listening and Learning by Genba methods			
<b>Executive Lead</b>	Rhia Boyode, Director of People & OD			
	<b>Link to strategic pillar:</b>		<b>Link to CQC domain:</b>	
	Our patients and community		Safe	
	Our people	√	Effective	
	Our service delivery	√	Caring	
	Our partners		Responsive	
	Our governance		Well Led	√
	<b>Report recommendations:</b>		<b>Link to BAF / risk:</b>	
	For assurance		<b>Link to risk register:</b>	
	For decision / approval			
	For review / discussion			
	For noting	√		
	For information			
	For consent			
<b>Presented to:</b>	-			
<b>Dependent upon</b> (if applicable):				
<b>Executive summary:</b>	<p>On the 8th June 2022, the Trust undertook 3 'Genba Walks'. These walks took place in the following areas, Radiotherapy at RSH, Medical Records at Atcham and Medical Staffing at PRH.</p> <p>Board members are asked to <b>NOTE</b> this paper, which demonstrates the reflections from the Genba walks held in June, and as a result, the specific actions that are being led by Executive members.</p>			
<b>Appendices:</b>	Appendix 1: Action log			
<b>Lead Executive:</b>				

## **1.0 Introduction**

- 1.1 On the 8<sup>th</sup> June 2022, the Trust undertook 3 'Genba Walks'. These walks took place in the following areas, Radiotherapy at RSH, Medical Records at Atcham at SBP and Medical Staffing at PRH.
- 1.2 Board members are asked to note this paper, which demonstrates the reflections from the Genba walks held in May, and as a result, the specific actions that are being led by Executive members.
- 1.3 During the visits, actions were recorded and are routinely monitored through the Improvement Hub. Actions are recorded in the 'reverse RAG' format and high-level actions will be detailed within this report.

## **2.0 Radiotherapy Department**

- 2.1 The following Board of Directors' members and additional colleagues conducted a Genba walk to the Radiotherapy Department at RSH: Acting Medical Director, Deputy Director of Nursing, Director of Finance, Non-Executive Director, Clinical Lead for Improvement and Deputy Director of Education and Improvement. The team was hosted by the Centre Manager, Chief Dosimetrist, Radiotherapy Services Manager and Pre-Treatment Superintendent Radiographer.
- 2.2 The hosting team had obviously put a lot of thought and effort into the visit, which was excellent from start to finish. The visit was a tour of the department, following the pathway a patient would take, which included pre-treatment, radiotherapy planning and treatment on the linear accelerators. The team were also fortunate to witness a quality control test that routinely takes place each week to get a comprehensive idea of the work undertaken in the department.
- 2.3 The visiting team were warmly welcomed to the department and were struck by the obvious display of strong teamwork, passion and innovation in radiotherapy at SaTH. There have been a large number of changes in radiotherapy over the past few years, including great leaps in improvement of technology at SaTH, funded in part through support from the Lingen Davies charity. The improvements to equipment and treatment offers, including the ability to offer SABR, a more accurate and powerful treatment, and a new CT scanner due to be opened next month, have led to the team being able to offer more treatments, to a higher standard, which has led to better outcomes and decreased mortality for our patients. Although this is incredibly positive, and something of which the team are very proud, it was obvious on the visit that these advances have also led to a higher workload for the team to construct these new, complex plans for treatment. The team are also very pleased with their new consultation rooms, however if they were to rebuild one of the consultation spaces again they would consider building 'pods' so that they could have smaller spaces for virtual consultations to take place.

- 2.4 The team reported that during the 'first wave' of the COVID-19 pandemic, they saw an initial reduction in numbers of patients being seen, however numbers of patients coming through the service have increased to pre-pandemic levels. A challenge brought about by COVID-19 is that the team have seen later presentations of cancers, which has led to a number of larger, more complex tumours having to be treated in the centre. Some instances have been traumatic to the team, due to the nature of the tumours. The team have been proactive in providing support for colleagues using both Trust resources, and internal support. COVID-19 has also created an opportunity to review preassessment and resources available online for patients. The team have reduced the number of attendances required for patients and a virtual tour of the department is available on the Trust's website.
- 2.5 Despite strong network links with other regional centres, staffing is an issue in the team. A national shortage of oncologists is one of a number of issues causing a challenge to staffing establishment. The team have embraced initiatives such as apprenticeships to fill some gaps, but are exploring other solutions such as the use of AI to reduce the burden on colleagues. The team are also planning to review follow up for patients, after a successful trial of more support following treatment for more complex patients.
- 2.6 Action plan:
- All actions assigned during the visit have been completed.

### **3.0 Medical Staffing, PRH**

- 3.1 The following Board of Directors' members and additional colleagues conducted a Genba walk to the Medical Staffing Department at PRH: Chief Executive, Interim Director of Strategy and Partnerships, Chair, Non-Executive Director, Associate Non-Executive Director, and Service Improvement Business Partner. The team was hosted by the Medical Staffing Improvement Lead.
- The Genba team initially met with the Medical Staffing Improvement Lead and were briefed on the layout of the department and the current structure of the service. The team were very receptive to the Genba walk and pleased to welcome the team.
- 3.2 The team provide medical staffing services for the Trust. There have been a large number of changes within the Medical Staffing team over the past year and there is a big opportunity to develop and improve the team. The focus of the team is to use the expertise of the current Medical Staffing Improvement Lead to review and redesign the rotas to ensure sustainability and adherence to the current standards.

- 3.3 It was recognised that the current structure of the Medical Staffing Team requires recruitment into substantive posts to ensure the sustainability and continued improvements to the service. Staff morale is good and there is an excitement within the team, despite the pressures caused by the current workload. The team are currently working extremely hard with the Divisions to ensure that relationships are built and buy-in is gained to implement the necessary changes to ensure that rotas are compliant to current guidelines and working practices.
- 3.4 The team have been working on developing a 12-month recruitment plan, aligning the financial ledger to the rota to ensure all posts are funded and planned for within the establishment and that gaps are highlighted in advance to enable appropriate recruitment. The development of the 12-month plan will enable posts to be filled safely, ensuring the skills within the department are reflective of the needs of the service whilst emphasising the importance of work life balance. A reduction in agency and locum cover should follow. The importance of effective rota design was highlighted as an enabler to improved flow within the hospital.
- 3.5 A large amount of work has been carried out to rebranding of the current job advertisements, which has resulted in an increase in applications and increased recruitment. Further improvements will be carried out to strengthen future recruitment campaigns in order to attract a diverse workforce.
- 3.6 Discussions were had on retention of current doctors along with the recruitment into new posts and whether there was any best practice or lessons to be learned from the international nursing onboarding work that was carried out.
- 3.7 The Genba team was keen to share the improvements made to the service with the wider trust and encouraged the Medical Staffing team to recognise the large number of improvements that have already been made to the service, whilst recognising the complexity and enormity of the future challenges within the service. Members of the Medical Staffing team are booked on to SaTH's Improvement Practitioner course developed by the Service Improvement Team, to strengthen the impact of the improvements made.
- 3.8 Action Plan – see Appendix 1.

#### **4.0 Medical Records and Clinic Preparation, Atcham**

- 4.1 The following Board of Directors' members and additional colleagues conducted a Genba walk to the the Medical Records and Clinic Preparation Teams at Atcham Business Park Shrewsbury. The visiting Team consisted of Director of Governance and Communication, Non-Executive Director and Non-Executive Director. The team was hosted by the Outpatients Service Manager and Patient Access Manager.

- 4.2 The team welcomed the visit as it gave them the opportunity to reflect on the move from the Copthorne Building to Atcham and the coming together of the two site teams. The move has created a positive workspace with its own kitchen and staff room space that has helped the team morale since the move. The large clean space has allowed the records to be stored and recovered with greater efficiency and more safely, not only for the team's health and safety but also for the records. The host team were proud of the environment they had created for their colleagues, the support they give to the day-to-day activities taking place across the trust, and the secure storage of an estimated 1.5-2 million patient record volumes they store and retain.
- 4.3 The team have worked particularly hard following the move and through COVID-19, improving the process for loose document recording and distribution of notes to the sites with 8 pickup and deliveries a day. But acknowledge that there is more work to be done in retrieving loose documents throughout the sites. The team felt they were fortunate regarding sickness during the height of COVID-19 as they had relatively few absences and the pause in outpatients, planned surgery and reduced attendance to ED allowed them to focus on the move to Atcham, which was critical for the future of the teams. They found the restore and recovery phase of the pandemic more challenging as demand increased but so too did their team's absence rate due to COVID-19.
- 4.4 It was recognised by all attendees on the Genba that there are still large areas that require specific focus moving forward. The destruction of records that no longer need to be retained, therefore creating more space and less need for storage held by external companies and the need to digitise the records moving forward to support the retention and destruction of records in the future. It was highlighted that not all records are held in SaTH owned locations and that investing in the time and money required to cull the notes no longer legally required for retention could give the department the need space for growth but also a cost saving regarding offsite storage. All of the attendees agreed that digitising the notes was a complex process that required an understanding of the next steps regarding EPR and well managed programme approach.
- 4.5 Following the move to Atcham, the teams have had several visits not only from their senior management but also from the Executives and they feel they are supported, heard, and recognised. They felt they could have easily been 'forgotten' about since the move, but this has not been allowed to happen and has helped with the settling into the new premises and staff morale. The Acting Chief Operating Officer was unable to attend the Genba walk, has since organised a walkabout with the host team and the Non-Executive Director has asked to revisit the team in person when COVID-19 restrictions allow.
- 4.6 Action Plan – see Appendix 1.

