

Board of Directors' Meeting: 12 October 2023

Agenda item	123/23		
Report Title	Getting to Good Progress Report		
Executive Lead	Louise Barnett, Chief Executive Officer		
Report Author	Matt Mellors, Head of PMO		
CQC Domain:			
		Link to Strategic Goal:	Link to BAF / risk:
Safe	√	Our patients and community	BAF1, BAF2, BAF3, BAF4, BAF5, BAF7, BAF8, BAF9, BAF10
Effective	√	Our people	
Caring	√	Our service delivery	Trust Risk Register id:
Responsive	√	Our governance	
Well Led	√	Our partners	
Consultation Communication	2023.10.03: Senior Leadership Committee - Operational		
Executive summary:			
		<p>The move towards implementing the revised RAG rating in line with other Trust programmes such as Maternity Transformation and the Emergency Care Transformation Programme has continued to progress.</p> <p>The Board's attention is drawn to sections 3, 4 and 5. Ten projects are rated as Amber, due to delay or risks to delivery of key milestones. 12 projects in the overall programme are all on track and rated Green.</p> <p>The key risks projects are currently Theatre Productivity; Outpatient Transformation; and Medical Staffing all of which are off track and rated Red.</p>	
Recommendations for the Board:		The Board is asked to Note the issues highlighted and the progress made in August 2023 of the Getting to Good Programme.	
Appendices:		Appendix 1: Included within Supplementary Information Pack - (i) Project Status Overview (ii) Month on Month Status with Trend (iii) Progress status by Programme (iv) G2G RAG Rating Definitions	

1.0 Purpose of this report

- 1.1 This report provides information and assurance on the position in relation to the progress of the delivery of the Getting to Good (G2G) programme as of August 2023.
- 1.2 The aim and focus of G2G Phase 2, is to embed the improvement projects which are within the relevant Executive Director portfolios to deliver sustainable change that supports the organisation in achieving an overall Care Quality Commission (CQC) rating of 'Good'.
- 1.3 G2G incorporates eight programmes, each of which are led by an Executive Director. The accountability for improvement and effectively embedding the change remains with the Executive Director. Oversight is provided through the weekly G2G Operational Delivery Group (ODG) to track and monitor progress to achieving this and is chaired by the G2G Programme Director. Furthermore, support is provided by colleagues from the Programme Management Office (PMO), Improvement Hub, Communications Team, Performance and Business Intelligence Team and NHS England.
- 1.4 The move towards implementing the revised RAG rating in line with other Trust programmes such as Maternity Transformation and the Emergency Care Transformation Programme has continued to progress.
- 1.5 For the purposes of this report, both the Delivery Status and Progress Status RAG rating has been incorporated at the project (progress status) and milestone level (delivery and progress status). The definitions of these can be found in Appendix One.

2.0 Context: The Getting to Good Programme (2020 – Current Status)

- 2.1 The Getting to Good (G2G) Programme is the key delivery programme for the organisation's priorities for this year. The G2G Programme has demonstrated an improvement journey as we now progress to moving into an exciting new chapter of our transformational journey – Phase 3 of Getting to Good.
- 2.2 Getting to Good is our three-year improvement programme which aims to help us achieve our overarching vision to provide excellent care for the communities we serve. It will ensure that the changes and improvements being made fully address root causes, are sustainable and lay the foundations for future success.



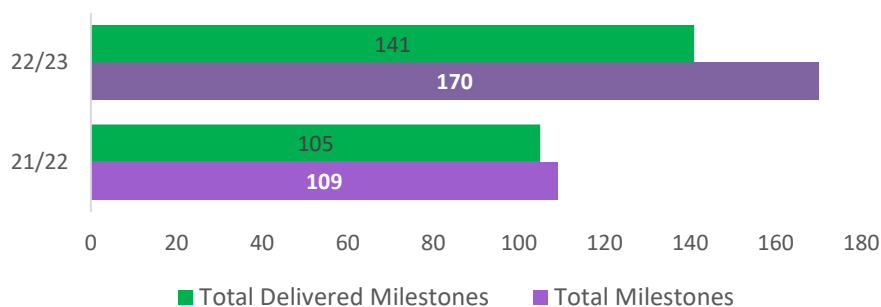
3.0 Getting to Good Programme Structure

3.1 The Getting to Good programme consists of eight programmes, within which are 26 individual projects.



3.2 The graph below shows the delivery profile of the milestones since the start of the Getting to Good programme. In the previous two operational years (2021-22 and 2022-23) 246 milestones have been delivered within the Getting to Good programme.

Milestones Delivered 2021/22 and 2022/23



4.0 Getting to Good Programme Performance.

4.1 Key deliverables during the reporting period include the following:

- Phase 1 of the Quality dashboard was delivered, now providing performance reporting for all metrics which are currently available within the Trust.
- Improvement in the increase in the number of Structures Judgement Reviews (SJRs) completed continues, with 60 SJRs completed within August 2023 against a minimum target of 30 to achieve the national target of 15% of deaths receiving an SJR.
- Continued preparations for an anticipated CQC inspection this year. Focus groups held as part of mock inspections have given staff groups the opportunity to reflect on improvements made since the last inspection.
- A maintained improvement in the number of simple discharges a day (68 per day in August 2023 compared with 60 in August 2022) and a maintained reduction of complex No Criteria to Reside patients (141 in August 2023, reduced from 177 in August 2022).
- A new process for the signing off of clinical incident forms has been embedded in the Emergency Department, aiming to prevent any future backlog of outstanding forms. The backlog has reduced consistently since February 2023 from approximately 1400 to approximately 500. Work continues to further reduce this backlog, which will be monitored on an ongoing basis. By addressing the backlog of incident forms trends in clinical incidents are tracked and learning is cascaded to avoid repeat occurrences.
- A further 28 nurses joined the Trust in August 2023 as part of the international nurse project for the 2022/23 business case. This brings the total number of international nurses recruited since April 2023 to 97.
- Continued reduction in Healthcare Assistant (HCA) vacancies. During August 2023, a total of 18.43 Whole Time Equivalent (WTE) HCAs joined the Trust, with a further 58.27 WTE going through recruitment checks. This recruitment will have a positive impact on quality and continuity of patient care as well as a reduction in agency usage.
- Ongoing recruitment for radiologists, radiographers, and sonographers. Offers have been made to 10 additional overseas Radiographers, with the first of these joining the Trust in September 2023. This recruitment will have a positive impact on our elective recovery.

- National recognition in relation to implementation of the People Pulse surveys and staff engagement, moving from 179 people to over 1300 people completing the survey using the Trust's 'Making a Difference Together' platform.

4.2 The remaining number of milestones within the current Getting to Good Programmes can be found in the table below.

Programme	Total Number of Milestones
Quality and Safety	13
Maternity Transformation	7
Urgent Care Improvement	7
Elective Recovery	6
Workforce Transformation	16
Finance and Resources	11
Digital Transformation	7
Corporate Governance	4
Total	71

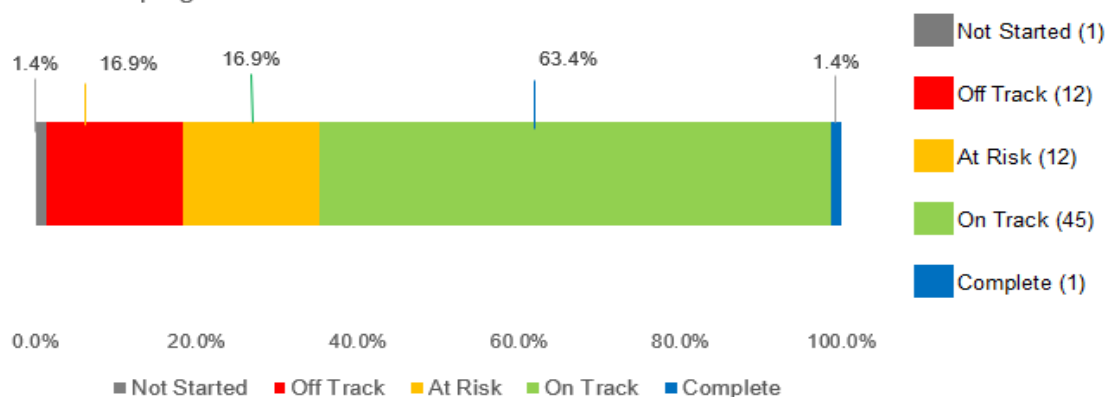
4.3 As described above, the programme has now commenced the adoption of a new RAG rating approach. Both the delivery status and progress performance of the remaining milestones using the new methodology can be found below.

4.4 For assurance it should be noted that 21 milestones have been “delivered” between March and August 2023 based on the previous reporting methodology and are highlighted on the graph below. Work continues at pace to gather the evidence to move these milestones from Red to Amber, under the new methodology. Progress status of each individual Getting to Good programme can be found in Appendix One.

Overall delivery status of milestones



Overall progress status of milestones



- 4.5 As part of the new methodology any milestones that cannot be delivered on time or are required to closed, as part of a project refresh, will be subject to an exception report signed off by the Senior Responsible Officer, Executive lead, and ODG.
- 4.6 The Operational Delivery Group (ODG) continues to meet weekly, and the statuses of the following milestones were confirmed at the ODG meeting on the 30th of August 2023.

Project	Milestone	Delivery Due Date	Delivery Status	Progress Status
Communications and Engagement	Internal communications strategy for delivering strategic objectives.	Aug-23	Red	Yellow
Medical Staffing	Roll out of Medic on Duty for Junior Doctors.	Aug-23	Yellow	Green
	Audit of historical compliance.	Aug-23	Red	Red

- 4.7 Theatre Productivity; Outpatient Transformation and Medical Staffing projects all remain off track and rated Red in the period.
- 4.8 The Urgent and Emergency Care improvement project and the Communications and Engagement project have now moved from Green to Amber in the period.
- 4.9 The Delivery of the Quality Strategy and Performance and BI projects have both improved their rating to Amber.
- 4.10 A further six projects are rated as Amber due to delay in delivery of milestones, and the remaining 12 projects are all on track and rated Green. The Critical Care Improvements project has been completed and is now closed.
- 4.11 Key topics of the weekly ODG meetings also included deep dives on Staff Retention; Culture and Behaviours; Maternity Transformation; Training and Education and the trustwide Cost Improvement Programme (CIP).

5.0 Off Track Projects

5.1 The following projects are currently rated as Red and off-track due key milestones not being delivered within the agreed deadline or no deadlines have been agreed. Further details can be found in Appendix One.

Programme	Elective Recovery
Project	Outpatient Transformation
Delivery Status	Off Track
Reason for exception	The overall project status remains off track, and work continues to engage with the clinical teams. Some of the delays can be attributed to the competing clinical demands of delivering Referral to Treatment (RTT) 78 and 65 week waits and Cancer trajectories along with the impact of the recent industrial action.

	<p>The year-to-date performance for PIFU in August was 3.7%. The virtual contacts for August 2023 accounted for 18.7% of outpatient contacts, which was an increase from the previous month by 1.2%. The national objective of 25% by March 2023 was not achieved. The Midlands regional average for Jun-23 stands at 19.5%.</p> <p>Weekly outpatient transformation meetings are in place with Centres to further develop and monitor the PIFU and virtual plans by specialty and with clinical engagement. Post treatment PIFU pathways are currently not supported by SemaHelix system and has been deferred until the implementation of Careflow, the Trusts new Patient Administration System. The opportunity within surgical specialties for post procedure PIFU is significant.</p>
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Programme	Elective Recovery
Project	Theatre Productivity
Delivery Status	Off Track
Reason for exception	<p>The utilisation for August 2023 was 73% (capped) and 77% (uncapped) at RSH and 70%. For PRH the utilisation was 74% (capped) and 70% (uncapped). The 18 Week outsourcing lists at PRH have proved difficult to plan due to the tighter exclusion criteria and challenges with the skill mix of the theatre teams being provided to SaTH.</p> <p>To support improvement the ongoing actions are taking place:</p> <ul style="list-style-type: none"> • Clinical priority of the longest waiting patients continues, and lists are allocated in line with clinical need. • Clinical lead identified to support with optimising theatre utilisation with 85% target. • Ongoing work to explore an increase in pre-operative assessment capacity to support early assessment and booking of patients which will allow the lockdown of routine operating lists at two weeks which will be part of the steering group. We are also looking at increasing our telephone assessment cohort to release capacity for patients who do need face to face appointment. • The 'Golden Patient' review paper to go to SACC committee in September. • Continued use of insourcing on weekdays and weekends. • Theatre vacancies are being addressed through a restructure of the theatre teams to develop new roles and ways of working. • In addition, recruitment campaigns are underway with options being explored in recruitment of overseas nursing. We have a recruitment trajectory in place, and we have 21 new starters at PRH but only one has theatre experience.

Programme	Workforce Transformation
Project	Medical Staffing
Delivery Status	Off Track
Reason for exception	A deputy medical people services rota manager commenced with the Trust on 24 th August 2023. A trajectory is being devised for completing the remaining 12 rotas. The T&O business case has been approved and discussions are currently ongoing with the present Tier 2 incumbents to

	approve roster templates with an imminent commencement date. Consultant rota reviews will not commence at the earliest before April 2024 and will require a robust plan put in place.
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6.0 Next Steps and Forward Look

6.1 The Operational Delivery Group (ODG) will continue to support the consistent application of improvements in the programme milestones. To achieve this, throughout September 2023, a targeted focus will be on the continuation of the rolling schedule of Deep Dives into each project which includes:

- Recruitment and Retention
- Cancer Performance
- Urgent and Emergency Care Improvement
- Risk Management
- Expansion of Medical Examiners Office

7.0 Summary

7.1 Substantial progress continues to be made against the delivery of the Getting to Good programmes of work and the adoption of the new project RAG rating methodology.

7.2 This revised report highlights 246 actions were “delivered” in the first two years of the Getting to Good programme. Of the 71 current and outstanding milestones across the programme, under the new methodology, 98% are not yet delivered, with 63% of those on track for delivery. Work continues at pace to deliver the rest of the programme and update project plans on a page.

8.0 Recommendations for the Board of Directors

8.1 The Board of Directors are recommended to:

- Receive this report for information and assurance.
- Note the issues highlighted in the Executive Summary and acknowledge the progress made in August 2023 of the Getting to Good Programme.
- Note the further implementation of the revised RAG rating methodology.

Louise Barnett
Chief Executive
3rd October 2023

Appendix One (within Supplementary Information Pack): Includes (i) Project Status Overview (ii) Month on Month Status with Trend (iii) Progress status by Programme (iv) G2G RAG Rating Definitions