

**To:** The Board

**For meeting on:** 25 May 2017

**Agenda item:** 7

**Report by:** Adam Sewell-Jones, Executive Director of Improvement

**Report on:** Improvement report

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## **Introduction**

1. This paper provides a summary of Improvement highlights across the organisation in April and May 2017 aligned to the conditions within Developing People, Improving Care, which we have committed to being the guiding framework for our improvement and leadership development activities.
2. The Board is requested to note the information provided within the report.

## **Condition 1: Leaders equipped to develop high quality local health and care systems in partnership**

### Culture and Leadership

3. Advice has been given to 10 NHS Local Leadership Academies on how to successfully deploy culture and leadership resources regionally across providers, commissioners and Sustainability and Transformation Partnerships (STPs).
4. Provision of support for trusts across Manchester in the development of a single hospital has included surveys for staff and external stakeholders as part of their culture programme.

### Insights programme

5. A new sister programme to the team-based Transformational Change through System Leadership (TCSL) programme has been designed for individuals. The programme is two days long and has been marketed to NHS Improvement colleagues and is fully booked for June 2017.

## **Condition 2: Compassionate, inclusive and effective leaders at all levels**

### MEET (Midlands and East Executive Talent) Scheme

6. The Midlands and East Executive Talent (MEET) Scheme seeks to develop a talent pool of NHS-employed individuals who can be appointed into executive-level interim posts across the region. The scheme is supported by NHS IMAS, NHS Leadership Academy – Executive Search Team, Health Education England and is being led by the Chief Operating Officer, NHS Improvement Midlands and East.

### Nursing: Workforce

7. The retention programme for Nursing and for Mental Health settings will be launched in June 2017, with a series of masterclasses (14 and 22 June 2017) aimed at Directors of Nursing and HR Directors for Trusts to develop best practice. 140 providers and 160 attendees are registered for the events.

### Improving Workforce Safeguards

8. A Workforce Safeguards Development group met in Birmingham on 28 April 2017 where a workshop of 20 system leaders contributed to identifying areas of development, including support tools for boards and clinical leaders in managing complex reactive workforce challenges, workforce transformation governance models and best practice, provider level workforce planning toolkit and KPI measurement development for implementation of new workforce solutions.

### Equipping strong leadership in Gloucester

9. Real improvement has been demonstrated in Gloucester as part of the Getting It Right First Time programme. With the implementation of recommendations to reduce unwarranted variation in patient care through the leadership of managers and clinicians in partnership, the orthopaedic department agreed re-organisation of its operations with the leadership of the chief executive.

### BMJ/IHI International Forum

10. NHS Improvement ran a half-day session for 130 delegates on developing cultures to improve patient safety and quality improvement at the Forum on 28 April 2017. Excellent feedback was received from delegates and the NHS Improvement resources on culture and leadership were in the top 10 weblinks (URLs) at the event.

### Leadership development

11. An outline of Board level leadership development offers is included in Appendix A.

### **Condition 3: Knowledge of improvement methods and how to use them at all levels**

#### Capability Building

12. Work on what a practical capability building programme might look like for NHS Improvement is now underway, working with internal stakeholders, and especially the cross-organisation Developing People – Improving Care working group. A more detailed briefing will be provided to the Board in June.
13. Four days of Quality, Service Improvement & Redesign (QSIR) training have been delivered to 100 NHS Improvement staff as well as seven to more than 250 participants in the wider NHS in April and May 2017.
14. The QSIR suite of programmes has been successfully reaccredited by the Royal College of Nursing (RCN).
15. In addition, two educational sessions have been delivered at the RCN Congress on 'Tools and techniques to tackle variation and improve your service performance and reliability' and 'How to use driver diagrams to underpin measurement for improvement'.
16. A new community of practice in 'Measurement for Improvement' has been established and within one week had in excess of 200 members of NHS staff. This group will support the adoption of a better use of statistical methods in management and board reporting used across the NHS, in line with well-established improvement science.

### **Condition 4: Support systems for learning at local, regional and national levels**

#### Quality Improvement - Maternity

17. Participants from the 44 organisations in wave 1 of the Quality Improvement Programme are meeting in May to form the first national learning set and set foundation for regional communities of practice. The programme improvement leads have visited all 44 trusts to provide structured support to local teams and to assess the services and will now start rolling out the culture surveys.
18. The Improvement programme faculty has been convened, consisting of both clinical experts and QI methodology experts. The faculty is developing and overseeing the clinical interventions which services will be implementing to make local improvements.

#### Digital Flow

19. We are progressing digital workflow pilots using RFID (fitbit-like technology) and a framework or procurement options for wider roll out. This work recently featured extensively in various national media.

### End of Life Care

20. An End of Life Care (EOLC) improvement collaborative for 16 trusts has been launched. The programme adopts the Institute for Healthcare Improvement (IHI) break-through series collaborative methodology and trusts will come together at 4 events over a period of 5 months.

### Pressure Ulcer Management

21. 120 practitioners have registered to attend a national measurement consensus event, to redefine both the national definition and reporting framework for Pressure Ulcers, this has been driven by sector feedback to work to support consistency of reporting practice, and to refine appropriate benchmark data in the Patient Safety Thermometer. An improvement collaborative will be launched in late July.

### Mental Health Quality Improvement Programme

22. A programme of work with 8 mental health provider trusts as partners to deliver phase one of building a sustainable model for improvement has commenced.

23. Work has been initiated to produce guidance that will support other trusts (mental health, acute, community) with the key components required to embed improvement.

24. This work will dovetail into the national Quality Improvement programme working with other national partners and provider trusts involved in developing tools for improvement for use in providers and STPs. The programme aims to embed QI approaches in mental health provider trusts.

### Safe Sustainable and Productive Staffing Improvement Resources

25. The Adult Inpatient and Learning Disability improvement resources have closed for engagement, and 205 responses were received from the sector. Feedback has been considered in the preparation of final drafts of the improvement resources which are now ready for approval by the National Quality Board, before being formally published and released.

26. The Maternity, Emergency Care, and Children, Young People and Neonatal improvement resources are awaiting National Quality Board approval to commence engagement.

## **Condition 5: Enabling, supportive and aligned regulation and oversight.**

### Well-led review

27. New guidance for the well-led framework development reviews are expected to be published at the same time as the CQC launch their next phase of regulation in June 2017. Work to establish how NHS Improvement will input to CQC assessment process for the well-led question continues.

### Infection Prevention Control

28. The Infection, Prevention and Control Improvement Resource is now available on the Improvement hub and has been co-designed and developed in collaboration with Public Health England and staff from across the health and care sector.

## Appendix 1

### Existing NHSI Board level development support offers



NB. All interventions are aimed at Directors as individuals – we do not currently offer support to whole Boards. We need to consider how best to support Board and Director development going forwards and how this links with the well led framework and SOF. Work will be undertaken on this during May / June.

	Induction	Networking/ learning	Developing future leaders	Advice/ feedback to regulators	
System leads	None currently	NHSI / NHSE STP leads events, "Spread" <u>workstream</u>	NHSI / HEE - Senior Systems Leaders Talent Pool (under development)	STP leads events x 4 p.a.	
Chair	NHSI (Board induction day)	NHSI regional	Under development	NHSI (panel)	NHS Providers (dinners)
CEOs				NHSI / NHS LA/ NHS Providers Aspiring CEOs programme	
Exec Directors	NHSI / NHS Providers (1 day event x 3 - 4 p.a.)	NHS Providers (11 profession specific networks)	Various aspiring director programmes (NHSLA, NHSI, HFMA, others)	Via regional teams	
NEDs	NHSI / NHS Providers (2 day event x 3-4 p.a.)	NHSE / NHS "NED Talks", NHSI / NHS Providers Board Development	None	None	