

То:	The Board
For meeting on:	30 November 2017
Agenda item:	9
Report by:	Adam Sewell-Jones, Executive Director of Improvement
Report on:	Improvement report

## Introduction

- 1. This paper provides a summary of improvement highlights across the organisation in October and November 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.

## <u>Condition 1: Leaders equipped to develop high quality local health and care</u> <u>systems in partnership</u>

#### **Patient experience**

- 3. A successful co-production Patient Experience workshop was held with representation from trusts, patients, NHS Improvement regional quality leads and partners from NHS England, to shape a range of Patient Experience Improvement Resources.
- 4. NHS Improvement and NHS England ran two WebEx's in October on patient experience and Always Events targeted at NHS England and NHS Improvement staff and a joint learning event is due to take place in Birmingham on the 14 November 2017. Always Events is a co-productive improvement approach backed by IHI and The Picker Institute.

## **Developing our people**

5. We continue to strengthen the Midlands and East Executive Talent Scheme and have 44 aspirant and current directors available to undertake director level interim appointments. New guides have been produced for potential applicants and trusts, with a resultant increase in enquiries. 6. The Regional Talent Board has agreed the Midlands and East talent management vision, which is based upon a 'one NHS' approach to talent management. The implementation plan has been designed, and delivery is being supported by all relevant regional NHS bodies, with the aim of implementing the new approach by spring 2018.

## Transformation Change through System Leadership

7. The programme is ongoing and included Jim Mackey speaking at the second two day workshop of the open programme for 90 delegates. Another 59 are on the Urgent and Emergency Care themed programme. The next cohort is being marketed for up to 120 participants, commencing in the spring.

## **Board Member Development programme**

8. Following a tender process over the summer, we have awarded a 12 month contract for a series of development sessions open to provider board members to start in November 2017. Topics will be aligned to the joint CQC-NHS Improvement well-led framework and key issues that providers and our regional teams have told us they are facing in leading their organisations.

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

#### **Midwifery Leadership**

9. A development programme will be delivered for each region, aiming to reach up to 100 Heads of Midwifery nationally this year. This leadership programme aims to increase resilience and develop leadership capabilities aligned to the Secretary of State Maternity Ambition (2015) and Better Births (2016).

## **Mental Health First Aid**

10. In September, we trained 15 new Mental Health First Aiders and have scheduled another course for January 2018 to train a further 16. The courses are in high demand and attract a wide range of people from across the organisation.

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

## **Referral to treatment (RTT)**

11. The Midlands and East regional team are running three further training workshops for provider teams in quarter four to support improvement in patient pathways, with a focus on diagnostics, pathway re-design, scheduling and theatre productivity.

# **Behavioural Insights**

12. The behavioural insights team has recently been working with Chelsea & Westminster NHS Foundation Trust to improve infection prevention and control in operating theatres. It is currently working with the Medical Directorate and the Behavioural Insights Team (previously part of Cabinet Office) to improve incident reporting. The Isle of Wight NHS Trust has volunteered to work with us on this. It is also scoping work with University College London Hospitals NHS Foundation Trust and Nursing / London region to improve patient experience of criteria-led discharge.

# Quality, Service Improvement and Redesign (QSIR)

- 13. With a further 34 Quality, Service Improvement and Redesign (QSIR) College graduates successfully accredited in October 2017, we are now supporting 64 associate members of the QSIR Teaching Faculty (QSIR associates) across England in rolling out QSIR Fundamentals and QSIR Practitioner courses across their local organisation and/or system. This will lead to hundreds more going through the QSIR Practitioner programme.
  - 14. The five finalist pairs of the Sir Peter Carr Award have signed up to attend the January 2018 QSIR Practitioner programme and have begun coaching sessions with the Advancing Change & Transformation Academy faculty.

# Action on Accident and Emergency (A&E)

15. The summit for the action on A&E programme (whole system working together) for trusts in the north region was held on 9 November 2017. Every acute provider in the region is engaged and has participated in the programme. The intended outcome is to support system-wide improvement across the urgent and emergency care pathway and its associated indicators / measures.

# **Patient leaders**

16. A four day coaching/mentoring training programme was held for the patient leaders group to upskill other service users in improvement skills. A design event with the Patient Leaders group was held on 23 October to agree next steps and refresh the NHS Improvement support approach.

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

# 7 Day Hospital Services (7DS)

17. NHS Improvement and NHS England have continued to work closely to build on progress in recent months. Regional teams have also carried out a gap analysis with providers, to identify key areas of work, and to inform a clear delivery trajectory and actions for each trust.

# **Collaborative learning events**

- At the end of September, the Maternal and Neonatal Health Safety Collaborative (MNHSC) brought together 180 improvement leads for three days of intensive support and coaching, designed to give staff the confidence and skills to deliver quality improvement.
- 19. The Midlands and East 62 day cancer waiting times collaborative has been running since July with the aim of supporting sustainable improvement in 62 day pathway waiting times. Each provider also has a senior improvement coach who provides on-site support.
- 20. Four Criteria Led Discharge improvement collaborative events have been delivered to date (cohort 19 trusts), and an NHS Improvement web page has also been developed to share improvement resources. Trusts involved in the first wave collaborative presented an update on their improvement journey at the final celebration event which took place on 9 October 2017.
- 21. The launch event of the Nutrition and Hydration 180 day improvement collaborative will be taking place on 29<sup>th</sup> November 2017, with a cohort of 26 trusts. This collaborative will focus on improving the accuracy of nutritional screening and the implementation of appropriate nutritional interventions.
- 22. The collaborative focused on improving end of life care, concluded with a celebration event on 5 October 2017, where the 16 participating trusts presented their improvement work. Trusts used a range of innovative and creative ways to share the progress of their projects, demonstrating how they were using quality improvement skills to improve care for patients at the end of their life.
- 23. We are commencing an End of Life Care Hospital Improvement Programme, which will be delivered jointly with Hospice UK (cohort of eight Trusts). The aim of the programme is to improve the quality of care for patients who may be in their last three months of life, who attend or are admitted to an acute hospital in an emergency, recognising the specific needs of these patients in order to facilitate the right care, in the right place, by the right person.
- 24. A Public Health and Prevention Collaborative was jointly delivered by AHPs4PH, Public Health England and NHS Improvement, to support 11 provider organisations to implement an improvement initiative within Allied Health Professional services which addressed public health and prevention.
- 25. The Midlands and East region has established a mental health advisory group to facilitate input into service improvement from provider leaders. The programme is being designed and incorporates a focus on out of area placements, suicide prevention, pathway re-design and a focus on building quality improvement leadership and capability in mental health providers.

# New video to support trusts in creating local learning from deaths policies

26. We have made a new video as a guide to support NHS trusts in producing and evaluating their learning from deaths policies. As part of the National Quality Board Learning from Deaths guidance, trusts were required to publish their own learning from deaths policies setting out how they will respond to the deaths of patients who die under their management and care by September 2017.

## Maternity transformation

- 27. Wave 1 sites within the MNHSC had at least two visits from their respective Improvement Manager.
- 28. A project group was brought together chaired by the Atain lead within NHS Improvement and an Improving Value scheme developed. The Atain e-Learning programme continues to be developed in readiness for launch in November 2017. Two films are being made to support this work.

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

## Moving to good

29. As part of the work to support at least a third of trusts to be rated as good or outstanding by 2020, 30 trusts have signed up to take part in regional development programmes. The first workshop has been held in the North in partnership with Advancing Quality Alliance. Trusts are now booking into the first Midlands and East event in December. Programmes in South and London are in the final stages of design and will follow in the next few months.

## **Measurement for Improvement**

- 30. A measurement for improvement session was delivered to the NHS Improvement Board and executive team. It agreed to:
  - Make changes to executive level reports to include measurement for improvement.
  - Seek to use time series data for the regular Department of Health performance meetings.
  - Develop internal staff capability to better support performance improvement including the use of time series data.

## Well-Led

31. Supplementary guidance on making the most of developmental reviews of leadership and governance and peer reviewers has been published and share with the Company Secretaries network, included within the provider bulletin and on the NHS Improvement website.