

To: The Board

For meeting on: 24 May 2018

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 aligned to the conditions in Developing People, Improving Care (DPIC), 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 Programme

3. We are expanding relationships into other countries including the devolved health system in Northern Ireland and into the Republic of Ireland, via the University of Dublin. In both cases there will be future collaboration and shared learning to build on work to date. The programme is currently being used by 35 providers in England with a further 16 planning to start to use the resources.

Transformational Change through System Leadership (TCSL)

4. The ACT Academy are working with NHS England's Urgent and Emergency Care team to recruit to the two-day programme in June, and with organisations in Essex for an Insights into TCSL programme in July 2018.

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

Aspiring Chief Operating Officers (COO) Programme

5. The Aspiring COO application process has now closed. Interviews are scheduled for June 2018 with the programme to commence in September.

Internship for Women Leaders

6. Four internships for senior women have now been awarded and being arranged. The programme provides the opportunity for women in positions just below board level to spend six months in industry, facilitated by the Whitehall Industry Group. The first placement has been agreed at BAE Systems.

Rosamund Snow Community

7. With the blessing of Rosamund's mother, the patient leaders group was renamed and is establishing itself as a space for patient leaders to network and share their experience of quality improvement in healthcare.

Talent Management

8. The Midlands and East Regional Talent Board (RTB) is intended to drive a fresh approach to talent management in the NHS. Its focus is to ensure that talent management is more strategic and effective, in order that the NHS has the leadership capacity it needs for the future.
9. It is currently overseeing the development of success profiles for executive director roles and the process for assessing aspirant directors and their entry into the regional talent pool, with the first cohort of aspirant directors expected to undertake the assessment process in September 2018. Existing Executive Directors will also be invited to join the pool to support them in their future career development.

Professional Leadership – Learning Disability

10. We have developed a national prison network for health practitioners working with people with learning disabilities in the prison service. The first of its kind, the aim is bring together practitioners to help share good practice, develop new initiatives and become an expert reference source for policy development.

Allied Health Professional (AHP) Leadership

11. There is an emergent need for a stronger allied professional health voice in trusts, driven by the growing allied professional health agenda and the realisation of the potential this could offer in the transformation of services.
12. A summary document and report following evaluation carried out by Kingston University Enterprise Limited will be published on the 20 June 2018 and launched at the Chief Allied Health Professions Officers conference.
13. The 'Quick Guide: AHPs supporting patient flow' was published in April 2018. Following on from this publication an improvement collaborative is planned to commence in July 2018 and complete in October 2018.

Executive Nurse Handbook

14. An Executive Nurse Handbook will be published in May 2018. The handbook will be launched at the Florence Nightingale Foundation annual conference on 7 June 2018

Workforce – Black and Minority Ethnic (BME) Nurse and Midwifery Progression

15. We delivered a master class to 40 delegates gaining commitment from attendees to develop Workforce Race Equality Standard (WRES) action plans. A series of masterclasses with NHSE has been agreed.

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

Mental Health

16. *Valued Care in Mental Health: Improving for Excellence* was published at the end of March 2018. This improvement tool, coproduced with nine trusts, has been designed to support continuous improvement of services, drawing on the wealth of experience and skill from mental health providers.

The ‘Vital signs’ programme

17. Based upon the knowledge gained from working in partnership with the Virginia Mason Institute and five NHS trusts, we have now recruited our own expert lean team and selected an initial cohort of seven trusts from those that applied to join the three-year programme.
18. The model is currently being finalised in partnership with the cohort, trusts already implementing lean-based improvement and other NHS Improvement offers in order to create an offer beyond pure lean tools.
19. The trusts will each have commenced the programme by July 2018.

Quality, Service Improvement and Redesign (QSIR)

20. A digital library of QSIR tools has now been published on the NHS Improvement website with almost 100 tools available to be used by NHS staff.
21. We are recruiting to the one day QSIR Fundamentals for NHS Improvement staff on the 6 June 2018.

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

Launch of the Amateur Radio Station ‘GB1NHS’

22. GB1NHS is the National Health Service amateur radio station founded by staff from the Emergency Care Improvement Programme team.

23. The aim is to promote NHS initiatives that lead to patients receiving excellent urgent and emergency care and returning home as quickly as possible to live their lives without being harmed by their hospitalisation.
24. The radio station will boost the social movement for #EndPJparalysis.
25. GB1NHS transmitted for the first time at 10:45 on Tuesday 8th May 2018 from the Radio Society of Great Britain's National Radio Centre at Bletchley Park.

Outpatient RTT Improvement Benchmarking

26. We are working on benchmarking outpatients across 120 trusts. The 14 week programme has started, leading to regional workshops and trust improvement plans across outpatient efficiency, productivity and shift to digital.
27. There will be regional workshops over the summer to share the analysis and provide improvement methodology workshops to give trusts the tools and techniques they need. In parallel, four regional digital outpatient events have been scheduled with the Academic Health Science Networks focussing on digital alternatives for outpatient services and identify common development areas where a digital solution is already in use within the NHS.

Digital Workflow in Support of Emergency and Elective Bed Capacity

28. We are working with the National Director Urgent & Emergency Care, NHS England and Department Health & Social Care to look at digital flow approaches to help improve flow and reduce length of stay.
29. Patient flow systems provide live information to front line staff in order to optimise flow across beds in a system. Some can also cover community and social care at an STP level. They extract information from clinical systems or electronic medical records to provide real time information on patients and key items of equipment such as pumps and pressure mattresses.

Mental Health Safety Improvement Programme

30. The pilot phase of the programme is almost complete. Priorities have been agreed with each of the trusts and improvement offers are being developed for sign-off. Recruitment to the team is underway ahead of the launch of the national restraint and restrictive practice improvement collaborative.

NHS Experience of Care Week 2018

31. NHS Improvement and NHS England delivered a week of learning activities for NHS Experience of Care week, from 22- 27 April 2018.
32. A set of engaging graphics were developed in partnership with 'We Communities'. Over 100 trusts utilised the images to run their own experience

of care week activities. Social media extended the reach of the activity, and there were over 37 million twitter impressions.

Gram-negative Bloodstream Infection (GNBSI) Reduction

33. Scoping of the programme for the next three years has commenced. The 2018/19 GNBSI support offer to providers will include: an extended resource hub to share good practice; working at sub-regional level with 16 STP footprints; and regional targeted quality improvement support.

Collaboratives

34. In April 2018 we commenced the second wave of the Maternal and Neonatal Health Safety collaborative working with 43 trusts. We will continue to intensively support the teams participating for the next 12 months after which improvement work will continue to be supported through local learning systems.
35. The Acute Observation and Engagement collaborative is now underway and there are 27 trusts participating in the programme. Trusts baseline data collection has been completed, and first collaborative launch event took place in April with follow up site visits due to take place in June.
36. The first cohort of the Nutrition Collaborative will end on the 23 May 2018 with a celebration event. 25 organisations remain involved in the collaborative from acute, mental health and community providers. We have made links with the Malnutrition Quality Improvement Initiative in the United States and there are early discussions on a joint collaborative in the autumn.
37. A second Pressure Ulcer Improvement Collaborative is being launched in May for another 25 Trusts.

Employee Health and Wellbeing Improvement Programme

38. The programme has now commenced with 73 Trusts selected to receive support between April and September 2018 with 36 Trusts already having received their data packs.

Condition 5: Enabling, supportive and aligned regulation and oversight

Measurement for Improvement

39. A series of videos have been created to be included within an interactive pdf.
40. Three provider organisations have received board sessions on the use of Measurement for Improvement, and the Care Quality Commission have also been engaged by the team.
41. Following its pilot phase the first feedback on the Emergency Flow Improvement Tool has been received and is broadly positive.

Safe Sustainable and Productive Staffing

42. The final three national Safe, Sustainable and Productive staffing improvement resources; Children & Young People; Urgent & Emergency Care and Neonatal Care are undergoing final review and approval from Sir Robert Francis QC. Publication date was due in April but a delay in receiving feedback has led to slippage, and publication is now expected in late May 2018.