Inspiring Improvement 2017: share, learn, connect and celebrate

support  collaborate  challenge  improve  inspire
Improvement under pressure

Dr Sonia Swart
Chief Executive, Northampton General Hospital NHS Trust
### Northampton General Hospital NHS Trust

#### CQC 2014 - 2017

<table>
<thead>
<tr>
<th>Service</th>
<th>27 March 2014</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical care (including older people's care)</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Urgent and emergency services (A&amp;E)</td>
<td>Requires Improvement</td>
<td>Unable to rate</td>
</tr>
<tr>
<td>Surgery</td>
<td>Requires Improvement</td>
<td>Good</td>
</tr>
<tr>
<td>End of Life Care</td>
<td>Requires Improvement</td>
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</tr>
</tbody>
</table>

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<th>Service</th>
<th>23 May 2017</th>
<th>Overall</th>
</tr>
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<td>Good</td>
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About us

• Built 1767
• 757 beds
• 4800 staff
• 300m turnover
• DGH plus cancer, renal, vascular and stroke services
• Population 380,000-800,000
The Emperor Elephant of Urgent Care
ED 2014 – 2017: Honesty about issues

in nearby A&E centres (Type 1 only)
Apr 2009 – Mar 2014,

1 Type 1 units are consultant led A&E services; 2 Data annualised for March 2014
RI to Outstanding for well led – what was the route in ED?

Managerially Led

Staff on the ground told what to do – veto ruled
ED is an ED problem
Managers talk to managers and clinicians talk to clinicians
Most of the senior team leave ED to the chief operating officer
Performance targets frame the conversation

Clinically Led – Team ED

Staff on the ground supported to make changes
ED is everyone’s problem
Capital investment and investment in staff
Team NGH
Clinical and managerial staff work together and there is respectful challenge
Everyone supports ED
Executives are on site at weekends

Quality/safety frames the conversation – compliments
QI

Listen

Honesty
2014 – Leadership Requires Improvement

• We’re as safe as we need to be
• It’s not our fault

2017 – Leadership Outstanding

• We need to be safer
• How good is our safety culture?
• What can we do better?

Entitlement

Privilege
<table>
<thead>
<tr>
<th>Safety domain</th>
<th>NGH ED score</th>
<th>East Midlands mean score(^1)</th>
<th>East Midlands range of scores(^2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall perceptions of patient safety</td>
<td>60%</td>
<td>39%</td>
<td>21% - 60%</td>
</tr>
<tr>
<td>Safety climate</td>
<td>80%</td>
<td>58%</td>
<td>41% - 80%</td>
</tr>
<tr>
<td>Teamwork</td>
<td>84%</td>
<td>63%</td>
<td>43% - 84%</td>
</tr>
<tr>
<td>Job satisfaction</td>
<td>84%</td>
<td>60%</td>
<td>37% - 84%</td>
</tr>
<tr>
<td>Working conditions</td>
<td>61%</td>
<td>39%</td>
<td>21% - 61%</td>
</tr>
<tr>
<td>Exhaustion / resilience</td>
<td>58%</td>
<td>36%</td>
<td>23% - 58%</td>
</tr>
<tr>
<td>Perceptions of senior management(^3)</td>
<td>40%</td>
<td>17%</td>
<td>7% - 40%</td>
</tr>
<tr>
<td>Perceptions of local management(^3)</td>
<td>61%</td>
<td>47%</td>
<td>34% - 61%</td>
</tr>
<tr>
<td>Nonpunitive response to errors</td>
<td>53%</td>
<td>39%</td>
<td>24% - 53%</td>
</tr>
</tbody>
</table>
• Quality is the responsibility of the MD and DN – gaps in governance

• Finance is a blocker and good quality costs more money

• Executive team is unstable – frequent change to overall aim and values

• Compliance with standards

• The staff survey each year - an HR action plan with little focus

• Quality Improvement drives the agenda for ALL and patient safety first

• Finance is an enabler and QI drives efficiency

• Stable cohesive team with clear aim and values One story – Two jobs: Deliver Care - Improve Care

• Excellence is the Aim

• Response to staff survey is people strategy Development and support awards, celebration and thank you is valued

• Executive team and board are visible to staff Team NGH is CLINICALLY LED
QI – Quality Improvement

QI – our unifying principle for engagement, quality, efficiency, training, development, celebration, fun, university links, collaborative links, chief registrar key underpinning element of clinical strategy

Achieving Excellence

Aspiring to Excellence

Pathway to Excellence
Celebrating excellence through QI – supporting junior doctors and others

- East Midlands QIF (June 2016): Five poster submissions, 1st prize - Innovation
- Patient Safety Congress (July 2016): Six poster submissions – ALL shortlisted
- Patient First Conference (September 2016): Seventeen poster submissions, five shortlisted
- RCP Excellence in Patient Care Awards (September 2016): One submission
- PrescQiPP (October 2016): One award submission
- Medical Womens FEDERATION (November 2016): One award submitted: 1st prize Innovation
- NHS England National Learning Disability Conference (October 2016): One submission
- HSJ Awards (November 2016) – Eleven submissions
- HSJ Value in Healthcare Awards (May 2017): Two awards submissions – one shortlisted
- Patient Safety Awards (July 2017): Six awards submissions, one shortlisted
- Patient Safety Congress (July 2017): Twelve poster submissions ALL shortlisted
- Results of Patient Safety Awards/Congress awaited
Staff survey

NGH staff survey results 2005 to 2016

- Bottom 20%
- Average
- Top 20%
Q&A

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