

**To:** The Board

**For meeting on:** 28 September 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 August and September 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**

### **Transformational Change through System Leadership (TCSL) programmes**

3. Two of the Transformational Change through System Leadership programmes have been successfully recruited to, with the themed programme on Urgent and Emergency Care heavily oversubscribed. The first of these cohorts started in September 2017 with a workshop in Leeds for 15 senior cross-system teams consisting of more than 100 NHS and wider system staff.

### **How Allied Health Professions (AHP) Leadership can improve its workforce productivity**

4. Earlier this summer, we hosted a successful event for AHP Leadership with representation from 118 trusts. This focused on exploring the new framework for improving health and wellbeing across England. The AHPs Care Leads discussed areas for improvement, focussing on three significant topics which will help to transform health care and wellbeing for #AHPsintoAction through the impact of the effective and efficient use of AHPs for people and populations; commitment to the way services are delivered; and priorities to meet the challenges of changing care needs.

## **Leadership for Improvement**

5. This is a modular offering of Board-level training which has a steering group, including patient representation established and leads for each subject area identified. The first module in development is 'Measurement for Improvement' and will be tested with a small sample of NHS providers.
6. Support has been provided to trusts in special measures and the first organisation has been selected for use of culture toolkit.

## **Smith Award**

7. Initiation of the Smith Award – to design and deliver opportunities for two senior women leaders who aspire to move into an executive director role within the next two years through three month long placements in industry during FY 2018/19.

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

### **Patient Experience**

8. In July the contract to deliver learning opportunities to Heads of Patient Experience, via the HoPE (Heads of Patient Experience) network was awarded to the Point of Care Foundation. Content will be focussed on leadership for improvement, with specific input on using Improvement tools and approaches, which utilise patient feedback. The network is being delivered through a partnership between NHS England and NHS Improvement.

### **Culture and Leadership Programme**

9. A refresh of phase one of the Culture and Leadership Programme has been completed with short guides produced for circulation and the website updated. Phase two of the toolkit was launched at Expo and includes a suite of new case studies.
10. The Culture Community of Practice is to be relaunched and will include an Action-Learning Set offer.
11. The Aspiring Chief Operating Officer programme is to be added to the suite of programmes offered, funded through the movement of the Aspiring Chief Executive Programme to the Leadership Academy.

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

### **Maternity and Neonatal Collaborative - Greater Manchester and Lancashire**

12. Phase one of the Maternity and Neonatal Collaborative is progressing with five trusts participating in Wave 1. The collaborative is fundamental to developing a

national learning system and a culture of continuous quality improvement in every maternal and neonatal service in England and all trusts across three waves will participate.

13. Improvement leads and executive sponsors are sharing maternal and neonatal quality improvement learning across the country.
14. The collaborative is providing improvement coach training, peer support and opportunities for sharing learning and generating solutions.

### **Mental Health Collaborative**

15. Trusts are participating in a Mental Health Collaborative and are sharing quality improvement learning across the country. These events are bringing together key stakeholders and experts to accelerate change by exchanging ideas.
16. The collaborative is providing improvement coach training, peer support and opportunities for sharing learning and generating solutions. Local teams are submitting plans followed up by progress reports to the central support team.

### **National Cancer IST**

17. The Elective Intensive Support Team (IST) has been given funding to establish a national cancer expert team to support delivery of the cancer 62 day standard. The team will be part of the existing Elective IST, and have a specific focus on development and dissemination of national tools, guidance and best practice and will work with regional teams and others to transfer knowledge and skills and develop enhanced support locally. The team will also provide direct bespoke support to trusts with significant challenges in delivery of the 62 day standard. The team is expected to be fully established by December.

### **Criteria led discharge collaborative**

18. The aim of this collaborative is to support trusts to improve patient experience regarding discharge, as well as improving operational flow by implementing appropriate criteria led discharge. A second wave for this collaborative is planned, which will include trusts who self-select as well as priority trusts highlighted by regional teams.

### **Quality, Service Improvement and Redesign (QSIR)**

19. In the first weeks of September we held 84 teaching assessments for 42 NHS and wider system staff who are hoping to become accredited associate members of the QSIR teaching faculty, supported to rollout QSIR Practitioner and QSIR Fundamentals programmes in their local organisations and systems.
20. Increasing numbers of STPs are adopting QSIR as their improvement methodology approach and the Royal College of Anaesthetists are also adopting QSIR as their improvement methodology approach.

## **End of Life Care Collaborative**

21. The purpose of this collaborative is to improve the quality of care received by patients at end of life, for trusts to learn about the quality improvement tools and techniques and put these into practice, as an opportunity to share best practice and improve Care Quality Commission (CQC) ratings for End of Life Care. 16 acute, community and integrated trusts have taken part in this collaborative (across all 4 regions); all have selected an area of improvement to focus on during the 150 day programme.

## **Nutrition and Hydration**

22. A Nutrition and Hydration 180 day improvement collaborative will be taking place from November 2017 focusing on improving the accuracy of nutritional screening and the implementation of appropriate nutritional interventions. The collaborative is being co-designed with representatives from NHS Improvement, professional associations and NHS providers.

## **Patient Experience**

23. Following the appointment of a national lead for the Always Event Programme, the next development phase of the work will be rolled out, this will include support to the existing 22 trusts to rollout and scale up the work, as well as expansion of the programme.
24. There will be WebEx's targeted at NHS England and NHS Improvement staff, and a joint learning event on the 14 November 2017. Always Events is a co-productive improvement approach backed by IHI and The Picker Institute.

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

### **Improvement Directors Network**

25. The Improvement Directorate hosted two events in Leeds and London during September 2017 to launch the first Improvement Directors Network in England. Both events were well attended and included a mixture of presentations from trusts sharing their improvement journeys. Discussion was held regarding the remit of the network and how NHS Improvement can facilitate colleagues who lead on improvement within their trusts to drive the improvement agenda locally, regionally and nationally.

## **Mental Health**

26. The nine Mental Health Trust partners have agreed on 12 chapters for the Mental Health Improvement model publication, with content complete for nine of those chapters. There are now an additional 13 mental health trusts contributing to the resource, including members from the Healthcare Financial

Managers' Association mental health faculty network and all of the 7 Global Digital Exemplar sites, totalling 22 trusts (40% of mental health trusts).

27. Henley Business School are supporting by leading on the literature review to support the resource. The Group have agreed to incorporate case studies, vignettes and anecdotes from each Partner trust to add richness to the resource and bring it to life for the readers.

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

#### **Stop the Pressure**

28. The focus of the national Stop the Pressure improvement programme in 17/18 is on prevention, and in 18/19 the objective will be to improve effective treatment being implemented.
29. Work has been undertaken with the Operational Productivity directorate to support delivery of efficiencies in relation to wound care, with particular focus on effective treatment of wounds. The scope of work has been agreed and metrics are being developed, with objective of reducing variation in practice. An expert Advisory group has been established.

#### **Joint working**

30. Published revised guidance for developmental reviews of leadership and governance using the joint CQC-NHS Improvement well-led framework in June 2017. Now working on supplementary guidance for commissioning of reviews, and to develop the use of peer input from current NHS leaders to these reviews, which we expect to publish in the autumn.
31. A Measurement for Improvement session with the NHS Improvement Board has been booked for early October 2017.
32. A contract has been awarded for the evaluation of system-level change brought about by Developing People – Improving Care, focussing on the regulatory and oversight activity in condition five.