

Board of Directors (in Public)

Item 4.1

Subject: Service Improvement Plan and LIA update
 Date of Meeting: 3rd July 2018
 Prepared by: Sue Pemberton/Director of Nursing & Quality
 Lynda Robinson/Head of Quality Improvement Support Team
 Presented by: Sue Pemberton/Director for Nursing & Quality
 Purpose of Report: Note

| BAF Ref | Impact on BAF |
|---------|---------------|
| 4 | None |

1.0 Executive Summary

LHCH has a track record of continuous improvement which influenced the Trust receiving an outstanding rating from the Care Quality Commission (CQC) in September 2016. The Trust has continued to meet all targets and expectations both qualitative and financial. However, the economic challenges that face the Trust over the forthcoming years are significant therefore, the pace and scale of change to meet these challenges, needs to be expedited.

The Trust has completed a review of its quality improvement, cost improvement and staff engagement portfolios, to ensure a better co-ordination moving forward to meet the challenges the NHS faces. It has commissioned the use of the Listening into Action (LIA) methodology as a vehicle to drive the service improvement agenda. This will ensure a much improved engaged and empowered workforce, resulting in quality and cost improvements led by front line staff. In addition, the Trust is mandated to provide clarity on its service improvement methodology to NHSI to support transformational change, as a means to address the challenges for the future.

The Executive team have made a decision to launch a revised service improvement offering, with support for the divisions and corporate teams. This refreshed approach will also support the delivery of the Trust's Quality Strategy. This will be through the creation of a Quality Improvement Support Team who will co-ordinate and support Improvement activity in the Trust. Training, advice and guidance will be provided to support our staff to deliver improvement projects.

2.0 Background

In 2015/16 the Trust embarked on a programme of LiA. This resulted in a high level of staff engagement Trust wide and successful delivery of many improvement projects, of which the majority were generated from frontline staff. Following completion of the one year LIA programme, the Trust has continued to drive improvement utilising the various strategies it has in place – namely the Quality Strategy, which incorporates schemes of improvement work both cross-divisional and corporate. This has been supported somewhat by the PMO,

whose primary focus has been on the cost improvement programme and some project support. The Trust has recognised that it needs to strengthen its approach to quality/service improvement and look at how this can transform the way in which care and pathways can be improved to meet the challenges for the future.

3.0 The Quality Improvement Approach

The refreshed Quality Improvement approach that has been developed, aims to bring together cost, service and quality improvements and innovation that have been previously fragmented within the Trust. The Executive team took the decision to re-commission the LIA methodology as a launch pad to a refreshed improvement approach. This included a Trust wide staff Pulse check survey and a Leadership Audit, at the beginning of May 2018.

The LIA survey ran for three weeks and resulted in a 1064 returns (63%) and 92 returns (88%) of the Leadership Audit. The external LIA Team fed back the results to the Board of Directors on 29th May 2018. The survey also allowed staff to make three suggestions for improvements either in their own areas or larger scale, this resulted in 875 suggestions. Two Trust wide improvement priority events have also taken place in June with a high level of engagement at each event. A further Improvement/LIA team event is planned for the 30th July, where the leads for each of the improvement projects will launch their projects. The first cycle of improvement will then begin in September with a 2nd cycle planned for January 2019.

The improvement methodology the Trust will utilise is the Innovation for Healthcare improvement (IHI) methodology which will be facilitated through A3 reporting utilising the 90 day cycle concept. A3 reporting is a structured 'project on a page' tool which guides staff through the improvement steps. This approach is familiar to many staff as they have previously experienced the A3 methodology or have used these common techniques for incident investigation etc. Each improvement project is completed within a 90 day cycle, and at the conclusion of each cycle a celebratory session will be held to share outcomes of projects for both quality and finance.

Operational monitoring of these improvement projects will be tracked through a central Team. The key priority improvement projects will also be monitored through an improvement wall where project leads will update the Executive Team weekly between 9-9:30am on progress – this is located in the Trust HQ. The Improvement approach will underpin and support the delivery of the Trust's Quality Strategy.

4.0 The Quality Improvement Support Team

The way to strengthen and support the improvement approach is to consolidate resources into a central team called the Quality Improvement Support Team. The Executive leadership would be from the Executive Director of Nursing and Quality (Sue Pemberton) and the lead for this team would be the previously Head of PMO and Business Transformation (Lynda Robinson).

The Quality Improvement Support Team (QI Team) is also supporting the Director of Workforce with the LIA staff engagement, and Chief Finance Officer on the Cost Improvement Programme.

5.0 Implementation plan

An implementation plan has been developed, led by the Head of Quality Improvement Support Team. The governance of the improvement work will be monitored through a Quality Improvement Support Team Steering Group which meets monthly and will oversee to ensure progress at the expected pace. This group will also report through to the Business Transformation Steering Group each month, and Operations Board as necessary.

6.0 Conclusion

A refreshed Improvement approach, launched through the LIA engagement survey is the proposed route by which the Trust will be able to meet its challenges, as well as enhancing a quality driven culture.

7.0 Recommendation

The Board of Directors are asked to note:

- i) This report, and approve the Plan to address the quality and financial challenges and improve staff engagement over the forthcoming years.
- ii) Support adoption of Institute for Healthcare Improvement methodology for all service improvement projects.