



Moving Forward Together

2016/17 QUALITY IMPROVEMENT PROGRAMME

Progress Report

January 2016



CONTENTS







Moving Forward Together




1. Executive Summary	3
2. Programme Summary	4
3. Workstream progress reports	
5.1 Making the LAS a great place to work	5
5.2 Achieving good governance	7
5.3 Improving patient experience	9
5.4 Improving environment and resources	11
5.5 Taking pride and responsibility	13

Definitions

Project Delivery

	All scheduled activities have been completed
	The scheduled activities are on track for completion by the due date
	The scheduled activities have been delayed and are no more than 4 weeks
	The scheduled activities are at risk and have delays over 4 weeks

Project Performance

	Performance has been met or is over 95% towards the agreed trajectory / target
	Performance is between 85-95% towards the agreed trajectory / target
	Performance is below 85% of the agreed trajectory / target

EXECUTIVE SUMMARY

January 2016



Moving Forward Together

Progress this month

- The Quality Improvement Programme (QIP) milestone plan and narrative was submitted to the CQC on 15 January 2016, followed by publication and communication to staff and stakeholders.
- A total of 31 quick win activities have been delivered prior to the launch of the QIP in the areas of: resilience, medicines management, risk and governance, culture, and workforce & staff morale.
- All milestones scheduled for January 2016 have been completed and delivered to time. Specific details are included in the workstream updates within the pack.
- A programme initiation document has been produced that defines the management and approach to delivering the QIP.
- The governance arrangements for the QIP have been defined, and terms of reference drafted.
- Workstream meetings have been held with those responsible for delivering activities against the QIP to ensure there are clear expectations of programme delivery set.
- Progress has been made in the development of key performance indicators for the programme.

	Theme	Executive Director	RAG
WORKSTREAM STATUS JANUARY 2016	Making LAS a great place to work	Director of Human Resources	<input type="checkbox"/>
	Achieving good governance	Director of Corporate Affairs	<input type="checkbox"/>
	Improving patient experience	Director of Nursing & Quality	<input type="checkbox"/>
	Improving environment and resources	Director of Finance & Performance	<input type="checkbox"/>
	Taking pride and responsibility	Medical Director	<input type="checkbox"/>

PROGRAMME SUMMARY

Forecast View



Moving Forward Together

Programme:

- Finalisation of detailed action plans for each project is in progress and will be completed by mid-February.
- Work has commenced to integrate other Trust strategies and actions plans to be included in the Quality Improvement Programme.
- Risk and issues for the programme and individual projects are being reviewed and will be reported through the Board Assurance Framework as necessary.
- Trust wide manager briefings on the Quality Improvement Programme are scheduled for the week commencing 22/02/2016.
- A quality assurance approach and audit regime for the programme is currently being scoped.
- The first Quality Improvement Group and Quality Improvement Programme Board meeting are scheduled for the week commencing 08/02/2016.

Workstream Challenges:

- There is a potential delay to the delivery of the Bullying and Harassment policy, which will be resolved through ongoing discussions with partnership organisations.

		February 2016				March 2016			
Theme	Executive Director	Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Making LAS a great place to work	Dir. HR		1				8		1
Achieving good governance	Dir. Corporate Affairs		6				12		
Improving patient experience	Dir. Nursing & Quality		4				4		
Improving environment & resources	Dir. Finance & Performance		5				11		
Taking pride & responsibility	Medical Director		0				3		
Total			16				38		1

1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Director of Human Resources



Moving Forward Together

**HIGHLIGHTS
THIS MONTH**

COMPLETE

Activities delivered prior to January 2016 include:

- Awareness training in bullying and harassment has been completed for the Executive and Senior Leadership team.
- A specialist Bullying and Harassment lead was appointed in November 2015 to raise awareness of bullying and harassment within the organisation and to deliver tailored training programmes for staff.
- An Organisational Development specialist was appointed in November 2015 to support our work on changing the culture within the service.
- Since the CQC inspection in June 2015, our end of December 2015 figures report an additional 284 frontline staff who are responding to patients.

All actions for January 2016 were completed in good time:

- The LAS Academy started with the first 17 students starting a course.
- Plans are in place to hold informal board sessions in off site locations, with the first to be held in February 2016.
- The training bursary contract has been completed and agreed.
- Theo De Pencier was appointed as the Non Executive Director lead for Bullying and Harassment, and his first update was provided to the Trust Board in February 2016.

Deliverable	Executive Lead	Outstanding actions	January 2016		
			Complete	Delayed	At Risk
Advert to Action (Recruitment)	Dir. Human Resources	There are currently no outstanding or delayed actions	1		
Bullying and Harassment	Dir. Human Resources		1		
Training	Dir. Transformation & Strategy		1		
Equality and Inclusion	Dir. Human Resources		n/a		
Vision and Strategy	Dir. Transformation & Strategy		1		
Supporting Staff	Dir. Transformation & Strategy		n/a		
Retention	Dir. Transformation & Strategy		n/a		



1 | MAKING THE LAS A GREAT PLACE TO WORK



Moving Forward Together

Focus for next month	Key challenges
<ul style="list-style-type: none"> Focus will be to ensure the visibility of the Executive Leadership Team increases across their relevant sectors, with scheduled visits scheduled. An action plan relating to the electronic staff record (ESR) to be finalised and implementation to begin, which will assist in reporting of workforce data and collation of staff training records March sees a number of actions requiring delivery, therefore the remaining focus will be on achieving these deliverables 	<ul style="list-style-type: none"> There is a potential delay to the delivery of the Bullying and Harassment policy , which will be resolved through ongoing discussions with partnership organisations. The ESR Health Check completed showed a reduction in utilisation from 32% to 28% . A Project team is currently been scoped to address and implement required changes across the Trust

Deliverable	Executive Lead	February 2016				March 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Advert to Action (Recruitment)	Director of HR		n/a				1		
Bullying and Harassment	Director of HR		n/a				3		1
Training	Dir. Transformation & Strategy		n/a				2		
Equality and Inclusion	Director of HR		n/a				1		
Vision and Strategy	Dir. Transformation & Strategy		1				n/a		
Supporting Staff	Dir. Transformation & Strategy		n/a				n/a		
Retention	Dir. Transformation & Strategy		n/a				1		

2 | ACHIEVING GOOD GOVERNANCE

Executive Lead: Director of Corporate Affairs



Moving Forward Together

HIGHLIGHTS THIS MONTH

COMPLETE

Activities delivered prior to January 2016 include:

- A baseline review undertaken of all local risk registers and gap analysis completed.
- The creation of a 24 hour single access point team has been scoped, with the purpose to simplify reporting of incidents for frontline staff.
- Duty of Candour training has been in place since the end of 2015 for staff leading Serious Incident investigations.

All actions for January 2016 were completed in good time:

- The benchmarking of health, safety and risk resourcing was completed.
- Continued training has been provided to managers on risk management.
- Continued progress has been made to address the backlog of incidents reported on Datix.

Deliverable	Executive Lead	Outstanding actions	January 2016		
		There are currently no outstanding or delayed actions	Complete	Delayed	At Risk
Risk Management	Dir. Corporate Affairs				
Capability and capacity of Health, Safety and Risk function	Dir. Corporate Affairs				
Improving incident reporting	Dir. Corporate Affairs				
Duty of Candour	Dir. Corporate Affairs				
Operational planning	Dir. Operations / Director of HR				
Listening to patients	Dir. Nursing & Quality				



2 | ACHIEVING GOOD GOVERNANCE



Moving Forward Together

Focus for next month	Key challenges
<ul style="list-style-type: none"> • The outcome of the benchmarking exercise for the Health, Risk and Safety function will inform the specification for an external review . • A review of the incident reporting awareness tools will be undertaken in addition to the introduction of monthly safety and incident bulletins. • Regular audits will commence to ensure LA52 pads (incident reporting forms) are available at every station via routine site checks. • A scoping exercise is underway to introduce a web based system to assist with the collection of audit reports. • Incorporation of Duty of Candour training into existing training programmes is being progressed. • An internal communications plan is being developed to provide information to staff about the responsibilities of applying Duty of Candour. 	<ul style="list-style-type: none"> • There are no challenges identified to date in the upcoming months

Deliverable	Executive Lead	February 2016				March 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Risk Management	Dir. Corporate Affairs		n/a				5		
Capability and capacity of Health, Safety and Risk function	Dir. Corporate Affairs		1				2		
Improving incident reporting	Dir. Corporate Affairs		3				1		
Duty of Candour	Dir. Corporate Affairs		2				2		
Operational planning	Dir. Operations / Director of HR		n/a				n/a		
Listening to patients	Dir. Nursing & Quality		n/a				2		



3 | IMPROVING PATIENT EXPERIENCE

Executive Lead: Director of Nursing & Quality



Moving Forward Together

HIGHLIGHTS THIS MONTH

COMPLETE

Although there are no activities scheduled for delivery in January, good progress has been made on February deliverables:

- The review of current waiting times for PTS patients against contractual key performance indicators, and the identification of areas for improvement has taken place.
- Work has begun on developing clinical guidance for bariatric patients and the establishment of a bariatric working group.
- Guidelines for managing patients with mental health issues are being developed.
- The team working on response times are fully engaged with colleagues at NHSE London, and a detailed plan for the HAS pin (hospital notification system) review with a table top exercise is planned in February 2016.

Deliverable	Executive Lead	Outstanding actions	January 2016		
		Complete	Delayed	At Risk	
Patient Transport Service	Dir. Operations	There are currently no outstanding or delayed actions	n/a		
Meeting peoples needs	Medical Director / Dir. Operations		n/a		
Response Times	Dir. Operations		n/a		



3 | IMPROVING PATIENT EXPERIENCE



Moving Forward Together

Focus for next month	Key challenges
<ul style="list-style-type: none"> • Patient Transport Service – to implement the identified actions following the review of current waiting times. • Meeting peoples needs - establish a feedback process to monitor staff on the management of patients with mental health issues. • Meeting peoples needs – to commence collation of benchmarking data for bariatric patients from other Trusts, to enable review by the bariatric working group. • Response Times – Attendance at a pan London hospital workshop to discuss response times. 	<ul style="list-style-type: none"> • Response times - to ensure that LAS priorities are considered by the pan London working group in relation to hospital turnaround times, and to establish mechanisms are in place for progress to be reported .

Deliverable	Executive Lead
Patient Transport Service	Dir. Operations
Meeting peoples needs	Medical Director / Dir. Operations
Response Times	Dir. Operations

February 2016			
Complete	On Track	Delayed	At Risk
	0		
	1		
	2		

March 2016			
Complete	On Track	Delayed	At Risk
	2		
	1		
	1		



4 | IMPROVE ENVIRONMENT AND RESOURCES

Executive Lead: Director of Finance & Performance



Moving Forward Together

HIGHLIGHTS THIS MONTH

COMPLETE

Fleet / Vehicle Preparation

- A new process has been introduced to identify vehicles overdue for deep cleaning that are in Workshops for service/repair.
- Approval and funding has been secured to commence a Vehicle Preparation (VP) pilot in the North East Sector from 29/02/2016, which will include:
 - Centralised make-ready function which will take full responsibility for VP
 - Improved segregation of responsibilities, including a daytime supervisor to deal with equipment issues.
 - Implementation of the revised Vehicle Daily Inspection (VDI) form and introduction of an electronic application system
- A review of workshops has been completed, which has resulted in vehicle loadings being adjusted and identification of additional staff required.
- Maintenance of 'zero tolerance' for minor defects continues, and mechanisms are in place to report the number of repairs on a monthly basis

Estates and Facilities:

- A review was undertaken at all stations to understand the remedial work required to achieve infection control compliance
- An options analysis has been undertaken to improve ambulance station cleaning. This will ensure full infection, prevention and control compliance in the buildings and in the equipment used to clean ambulances on a daily basis.

Resilience Functions

- LAS has recruited to all the 84 Hazardous Area Response Team (HART) posts.
- HART officers are currently undertaking an intensive training programme which will result in 83 officers being fully operational by 1 April 2016. There will be one officer still completing their training

Deliverable	Executive Lead	Outstanding actions	January 2016		
		There are currently no outstanding or delayed actions	Complete	Delayed	At Risk
Fleet / Vehicle Preparation	Dir. Finance & Performance		3		
Information Management and Technology	Dir. Finance & Performance		n/a		
Infection prevention and control	Dir. Nursing & Quality		n/a		
Facilities and Estates	Dir. Corporate Affairs		n/a		
Resilience functions	Dir. Operations		1		



4 | IMPROVE ENVIRONMENT AND RESOURCES



Moving Forward Together

Focus for next month	Key challenges:
<ul style="list-style-type: none"> Fleet & Logistics - The new tracking process for equipment tracking has been agreed and will be incorporated as part of a pilot to be conducted in the North East commencing 29/02/16. Resilience function - activities are currently on track and will be continually monitored to ensure the end of March delivery date is not compromised Estates & Facilities – An options appraisal for cleaning at stations has been completed and has been submitted for Executive Leadership Team consideration and approval for additional funding. 	<ul style="list-style-type: none"> An options analysis for the supply of blankets has been delivered, however further information is being gathered before a final decision is made on the preferred option. Once a preferred option has been agreed, a business case and implementation plan will be prepared

Deliverable	Executive Lead	February 2016				March 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Fleet / Vehicle Preparation	Dir. Finance & Performance		4				6		
Information Management and Technology	Dir. Finance & Performance		n/a				n/a		
Infection prevention and control	Dir. Nursing & Quality		n/a				2		
Facilities and Estates	Dir. Corporate Affairs		1				1		
Resilience functions	Dir. Operations		n/a				2		



5 | TAKING PRIDE AND RESPONSIBILITY

Executive Lead: Medical Director



Moving Forward Together

HIGHLIGHTS THIS MONTH

COMPLETE

Activities delivered prior to January 2016 include:

- Medicine Management - In December we wrote to all frontline staff and outlined the professional requirements for documentation in order to reduce incidents of incomplete drug records on patient record forms (PRFs). Audits of PRFs continue to be undertaken and completion rates have improved since the changes introduced to the Clinical Team Leader role where 50% of their time is dedicated to supporting front line staff.

All actions for January 2016 were completed in good time:

- The Medical Director has been appointed as the Board Director who has responsibility for medicine safety
- Following the preliminary audit completed on receipt of the warning notice, a repeat audit has been conducted by the Medicines Management Paramedic to review: (1) drug lockers security (2) key safe security (3) general station drugs (4) cylinder cages. The audit was completed on 31/01/16 and results are being collated and outcomes will be reported through this workflow
- Logistics have instigated a monthly review of the cylinder cages with plans to address any issues identified. This will assist with the resolution of any issues identified.
- Safeguarding- the standard paragraph for inclusion in all new job descriptions has been completed and been provided to HR. This wording will be inserted into all new job descriptions.

Deliverable	Executive Lead
Clinical supervision	Medical Director
Consent MCA	Dir. Nursing & Quality
Medicine Management	Medical Director
Safeguarding	Dir. Nursing & Quality

Outstanding actions
There are currently no outstanding or delayed actions

January 2016		
Complete	Delayed	At Risk
n/a		
n/a		
4		
n/a		



5 | TAKING PRIDE AND RESPONSIBILITY



Moving Forward Together

Focus for next month	Key challenges
<ul style="list-style-type: none"> To ensure funding for supervision (safeguarding) is confirmed so that the recruitment process can commence. A review and reinforcement of the current process to capture all drug batch numbers to allow reporting, monitoring and assurance of compliance. 	<ul style="list-style-type: none"> Secure funding for extra resource (clinical supervision) Secure funding for the full time pharmacist Secure funding for immediate solution to address the recording of batch numbers and more robust locking mechanising for drugs cabinets

Deliverable	Executive Lead
Clinical supervision	Medical Director
Consent MCA	Dir. Nursing & Quality
Medicine Management	Medical Director
Safeguarding	Dir. Nursing & Quality

February 2016			
Complete	On Track	Delayed	At Risk
	n/a		
	n/a		
	n/a		
	n/a		

March 2016			
Complete	On Track	Delayed	At Risk
	n/a		
	n/a		
	1		
	2		