



Moving Forward Together

2016/17 QUALITY IMPROVEMENT PROGRAMME

Progress Report

March 2016



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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

March 2016



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Progress this month

- The Trust Board agreed at their meeting on 29/03/2016 an additional 13 projects to be included within the Quality Improvement Programme.
- The TDA review of the CQC Warning Notice was completed on 16/03/2016, and a post audit review has been completed by the Trust and actions are underway to address issues raised. Learning and outcomes from this audit will be incorporated into the QIP plan and in the development of the QIP internal assurance function.
- Negotiation of the 2016/17 contract with Commissioners continues and is due for final approval in mid-April.
- In addition to QIP audits which have commenced, a draft internal assurance plan has been drafted and will be presented to the QIP Board in April for approval.
- The programme delivered 70% of scheduled activities in March, with a reported 10 delays and two activities identified as at risk:
 - Seven of the delays are scheduled to have final outputs delivered by April.
 - Three change requests will be submitted to the QIP Board for approval.
 - Delivery of activities in the Equality and Inclusion Team are reported as 'at risk' due to continued staff absences, however appointment of an interim post is being actively progressed.
 - The specification for the Health and Safety function from February still requires completion and therefore is reporting at risk.

WORKSTREAM STATUS March 2016	Theme	Executive Director	RAG	% Complete
	Making LAS a great place to work	Paul Beal	■	78
	Achieving good governance	Sandra Adams	■	53
	Improving patient experience	Zoe Packman	■	75
	Improving environment and resources	Andrew Grimshaw	■	72
	Taking pride and responsibility	Fenella Wrigley	■	100

PROGRAMME SUMMARY

Forecast View



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Programme:

- The LAS Vision and Values communications campaign is scheduled to be launched in April.
- The Quality Improvement Group will review and recommend projects that will have the greatest impact on frontline staff that can be delivered by an earlier date for approval by the QIP Board.
- The new Trust Chair will commence their duties in April 2016.

Workstream Challenges:

- There is one delay reported at present in relation to the alignment of the strategic risk review with local risk registers and the board assurance framework. This is a consequential effect of delayed training and the strategic review of the Trust risk register by the Trust Board. A change request has been raised for approval by the QIP Board in April.

		April 2016				May 2016			
Theme	Executive Director	Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Making LAS a great place to work	Paul Beal	na					2		
Achieving good governance	Sandra Adams		4	1			3		
Improving patient experience	Zoe Packman	na					1		
Improving environment and resources	Andrew Grimshaw		1				2		
Taking pride and responsibility	Fenella Wrigley	na					1		
Total			6				9		



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WORKSTREAM PROGRESS REPORTS



1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Paul Beal



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HIGHLIGHTS THIS MONTH

- The Trust has successfully appointed 717 new staff during 01/04/2015 – 31/03/2016, and the recruitment target of 3169 was met at the end of March.
- The Trust is currently negotiating the 2016/17 contract with commissioners which is due to be signed off by mid April. This features our plans to create a Band 6 role for paramedics which is fully supported by the TDA.
- The Bullying and Harassment (B&H) work stream has made significant process with the Dignity at Work policy (the rebranded B&H policy) which was ratified by the senior management team and is due to be launched in April.
- The workshops conducted by the B&H specialist have now had more than 250 staff in attendance with the aim to have a further 50 staff attend by June 2016.
- Two external organisations have been appointed to roll out approximately 50 places for staff to learn mediation and difficult conversation skills in May 2016.
- A number of key personnel changes have occurred in March with the departure of both the Interim Director of HR and the Recruitment specialist which has resulted in a change request being submitted to the QIP Board to reassign activities in their work streams
- A equality and inclusion specialist has been appointed on an interim basis and is currently undertaking a review of the equality and inclusion work stream. It is anticipated this will remain at risk whilst they complete an assessment of the current position before progressing on the deliverables detailed in the QIP.

Deliverable	Executive Lead	Outstanding actions	March 2016		
			Complete	Delayed	At Risk
Advert to Action (Recruitment)	Paul Beal	Delayed <ul style="list-style-type: none"> • Negotiate the funding for Band 6 paramedics as part of contracting round 2016/17 At Risk <ul style="list-style-type: none"> • Undertake baseline assessment against the Equality Delivery System 2 and Racial Equality Strategy 	1		
Bullying and Harassment	Paul Beal		4		
Training	Karen Broughton		2		
Equality and Inclusion	Paul Beal				1
Vision and Strategy	Karen Broughton		n/a		
Supporting Staff	Karen Broughton		n/a		
Retention	Paul Beal			1	



1 | MAKING THE LAS A GREAT PLACE TO WORK



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Focus for next month	Key challenges
<ul style="list-style-type: none"> Although there are no milestone deliverables scheduled in April, the month ahead will be focusing on corporate induction and the signing of the 2016/17 contract Progress on the Oracle Learning Management (OLM) and Electronic Staff Record (ESR) will be taken forward in April and project managed by the Strategy and Planning Manager. 	<ul style="list-style-type: none"> Whilst the Director of HR post remains vacant, there is a potential capacity issue with the SRO and PMO leads taking on additional deliverables. The Director of Transformation and Strategy will takeover responsibility for Theme One whilst progress is made to recruit to the permanent post.

Deliverable	Executive Lead	April 2016				May 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Advert to Action (Recruitment)	Paul Beal	n/a				n/a			
Bullying and Harassment	Paul Beal	n/a				n/a			
Training	Karen Broughton	n/a					1		
Equality and Inclusion	Paul Beal	n/a				n/a			
Vision and Strategy	Karen Broughton	n/a					1		
Supporting Staff	Karen Broughton	n/a				n/a			
Retention	Paul Beal	n/a				n/a			

2 | ACHIEVING GOOD GOVERNANCE

Executive Lead: Sandra Adams



Moving Forward Together

HIGHLIGHTS THIS MONTH

- A number of key actions relating to risk management have been completed this month, with a scheduled risk register audit completed. This will be presented to the Risk, Compliance and Audit Group in April for assurance and review, and will be completed regularly on a quarterly basis.
- The Risk Management Policy was ratified by the Trust Board at their meeting in March 2016.
- Risk management training has been completed by the Risk and Audit Team with attendance of 263 managers from across all directorates in the Trust. A schedule of training sessions has been agreed to ensure that new and current managers who were absent on the scheduled dates to undertake the same training to ensure full compliance across the Trust.
- A monthly Health and Safety bulletin has been released to staff focusing on the Health & Safety Executive new 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations' (RIDDOR) 2013 reporting regulations. A newsletter has been created and is due for circulation to all staff focusing on security management, manual handling and reaffirming the RIDDOR reporting regulations.
- Six tasks for March are currently showing as delayed or at risk. There are change request forms in place as mitigation for three of these areas; strategic risk review and risk training for Board members which has been postponed to align with the 2016/17 business plan, and a delay to the creation of the 'single point of access team' to align with the timeframe for introducing DatixWeb into the Trust.
- Listening to patients is currently showing delays on two tasks relating to the creation of patient leaflets to be available on LAS vehicles and the publicising of how patients can provide feedback on the external website. These delays encountered are due to issues relating to a third party supplier.

Deliverable	Executive Lead	Outstanding actions	March 2016		
			Complete	Delayed	At Risk
Risk Management	Sandra Adams	Delayed: <ul style="list-style-type: none"> • Complete a strategic risk review of the Trust risk register – change request submitted for approval. • Risk management training for NEDs and Executive Directors– change request submitted for approval. • Scope, design and create information materials to be available on LAS vehicles for patients. • Update external website and develop mechanisms to improve the process for patient feedback. • Implement the outcomes following the scope in creating a single point of access At risk <ul style="list-style-type: none"> • Outcome of benchmarking will inform specification for external review of the function – change request submitted for approval. 	3	2	
Capability and capacity of Health, Safety and Risk function	Sandra Adams				1
Improving incident reporting	Sandra Adams		2	1	
Duty of Candour	Sandra Adams		2		
Operational planning	Paul Woodrow		n/a		
Listening to patients	Zoe Packman			2	



2 | ACHIEVING GOOD GOVERNANCE



Moving Forward Together

Focus for next month	Key challenges
<ul style="list-style-type: none"> Recovering the delayed elements within the 'listening to patients' project with the introduction of information materials and updates to the Trust external website to ensure an improved process for obtaining feedback from complainants. Publication of the newly updated Risk Management Policy to all staff. Start the consultation process for the Health and Safety function / structure. 	<ul style="list-style-type: none"> Key members of the Patient Experiences Team have been unavailable due to unexpected absences, which may impact on delivery on the listening to patients actions. Therefore the Deputy Director of Nursing and Quality will advise on the available options to obtain patient feedback. Achieving a mutually agreed rest break policy between all parties within the scheduled timeframe may be challenging.

Deliverable	Executive Lead	April 2016				May 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Risk Management	Sandra Adams		2			n/a			
Capability and capacity of Health, Safety and Risk function	Sandra Adams	n/a					1		
Improving incident reporting	Sandra Adams		1				1		
Duty of Candour	Sandra Adams	n/a				n/a			
Operational planning	Paul Woodrow / Paul Beal		1			n/a			
Listening to patients	Zoe Packman		1			n/a			

3 | IMPROVING PATIENT EXPERIENCE

Executive Lead: Zoe Packman



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HIGHLIGHTS THIS MONTH

- The Patient Transport Service (PTS) consistently achieve the estimated waiting times as contractually required. All contracting Trusts have confirmed that they are satisfied with LAS compliance, however LAS have been unable to reach mutual agreement with contracting acute Trusts on how to obtain patient feedback on their experience of the PTS service. Alternative arrangements are now in place to seek feedback directly from patients from April through a direct letter and questionnaire.
- The guidance for managing mental health patients has been completed and communication with staff is underway, and has been shared with the Quality, Governance and Assurance Manager in the Emergency Operations Centre. In order to monitor feedback, a survey has been set up to assess the before and after impact of the promotional materials, and a dedicated email address has also been established to enable staff to provide feedback.
- The outcome of the HAS-pin (hospital notification) system review has been completed and shared with the Director of Operations who is in regular communication with representatives from the TDA.

Deliverable	Executive Lead	Outstanding actions	March 2016		
		Delayed:	Complete	Delayed	At Risk
Patient Transport Service	Paul Woodrow	<ul style="list-style-type: none"> • Communication to patients and providers regarding estimated PTS waiting times and action plan 	1	1	
Meeting peoples needs	Fenella Wrigley/ Paul Woodrow		1		
Response Times	Paul Woodrow		1		



3 | IMPROVING PATIENT EXPERIENCE



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Focus for next month	Key challenges
<ul style="list-style-type: none"> Although there are no specific milestones to be delivered for this theme in April and May, each project will be focussing on the delivery of the detailed actions in order to ensure the projects remain on track. PTS will focus on delivering the mitigating actions for the delayed activity from March. Communication on the new mental health guidance will continue, in addition to support provided by dedicated mental health nurses within the Control Room. In the project 'meeting people's needs', the focus will be on the detailed plans for bariatric patients including establishment of the working group and review of benchmarking data. 	<ul style="list-style-type: none"> PTS communication with patients – this delayed action is being mitigated throughout April as alternative approaches to communication have been implemented. The report on response times was shared with colleagues from the TDA. As this is a system-wide issue the challenge is how to support the system via the TDA to deliver the actions required for the project.

Deliverable	Executive Lead
Patient Transport Service	Paul Woodrow
Meeting peoples needs	Fenella Wrigley/ Paul Woodrow
Response Times	Paul Woodrow

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

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

4 | IMPROVE ENVIRONMENT AND RESOURCES

Executive Lead: Andrew Grimshaw



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HIGHLIGHTS THIS MONTH

- An initial review of the process relating to vehicle checks at the start of shift has been completed. This has identified a number of complexities relating to the current use of vehicles, and therefore a formal review of the resource requirement to undertake vehicle checks will be completed by the end of April.
- It is recognised there are synergies between a number of activities within the QIP which could be addressed if the current boundaries of the make ready process was extended. Discussions with relevant Executive Leads will determine the feasibility of transferring additional operational responsibilities to the make ready team, and the subsequent impact.
- A stable volume of minor defects to be repaired under the 'zero tolerance' criteria continue to be managed by the workshops through both planned and unplanned vehicle maintenance jobs.
- The review of out of hours cover and potential extended coverage for workshop maintenance has been completed. A report sets out recommendations to increase the number of workshop technicians to manage the current workload, and an outline of the resource requirements if it is agreed to extend workshop services over the weekend.
- Review of third party contracts has been completed, resulting in a revised service level agreement for breakdown coverage. Discussions have been initiated with the tyre replacement provider, and a improved call centre capacity has been arranged
- Guidance for staff on 'bare below the elbows' has been approved by the Uniform Working Group, and is awaiting ratification by the Senior Management Team. The compliance monitoring process has been established and will be implemented following approval of the Uniform policy.
- The implementation of the revised regime for station cleaning is underway.
- Newly recruited staff in the HART team have completed their core training and are fully deployed in operational posts, with the exception of one staff member who is due to complete a final component of their training in April.
- Development of the 2016/17 training plan for the HART resilience function is complete.

Deliverable	Executive Lead
Fleet / Vehicle Preparation	Andrew Grimshaw
Information Management and Technology	Andrew Grimshaw
Infection prevention and control	Zoe Packman
Facilities and Estates	Sandra Adams
Resilience functions	Paul Woodrow

Outstanding actions
<p>Delayed</p> <ul style="list-style-type: none"> • Scope and review process to provide time and resource to enable statutory vehicle checks at start of shift. • Define implementation plan for agreed changes (following agreement of the responsibilities for all resource and equipment on stations). • Review current guidance on bare below the elbows and reissue to staff.

March 2016		
Complete	Delayed	At Risk
4	2	
n/a		
1	1	
1		
2		



4 | IMPROVE ENVIRONMENT AND RESOURCES



Moving Forward Together

Focus for next month	Key challenges:
<ul style="list-style-type: none"> The Make Ready pilot continues, and a review of the processes will be completed by the end of May 2016. 	<ul style="list-style-type: none"> The complexities relating to vehicle check processes at the start of shift, may mean an extended implementation programme. Development of the implementation plan in April will determine whether this will be future issue.

Deliverable	Executive Lead
Fleet / Vehicle Preparation	Andrew Grimshaw
Information Management and Technology	Andrew Grimshaw
Infection prevention and control	Zoe Packman
Facilities and Estates	Sandra Adams
Resilience functions	Paul Woodrow

April 2016			
Complete	On Track	Delayed	At Risk
	1		
n/a			
n/a			
n/a			
n/a			

May 2016			
Complete	On Track	Delayed	At Risk
	2		
n/a			
n/a			
n/a			
n/a			



5 | TAKING PRIDE AND RESPONSIBILITY

Executive Lead: Fenella Wrigley



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HIGHLIGHTS THIS MONTH

Medicine Management:

- Addressing medicines management across the Trust remains a high priority, and focus is being applied to deliver actions that will have a positive impact on our frontline staff and reduces clinical risk. To promote a unified approach on the delivery of the medicines management activities across multidisciplinary groups, a dedicated a project group will be established to coordinate all activities so that there is full visibility and clarity of what is being delivered, by whom, and the timeframe for delivery.
- In order to achieve the outcomes to review and reinforce the current process to capture batch numbers and to allow for reporting, monitoring and assurance of compliance, we have:
 - reissued the drugs promotional posters, and have conducted an audit at Logistics to investigate the number of drugs packs with completed usage data
 - added a criterion for completion of drug pack codes where staff administer drugs from drug packs. It is expected the CARU will start reporting from April.
 - Completed train-the-trainer CSR sessions

Safeguarding:

- A standard paragraph relating to safeguarding has been agreed and is being added to all new and revised job descriptions. This activity was scheduled for delivery in March, however was completed in February.
- Funding has been agreed by NHS England to appoint safeguarding supervisors.

Deliverable	Executive Lead
Clinical supervision	Fenella Wrigley
Consent MCA	Zoe Packman
Medicine Management	Fenella Wrigley
Safeguarding	Zoe Packman

Outstanding actions
There are currently no outstanding or delayed actions

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



5 | TAKING PRIDE AND RESPONSIBILITY



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Focus for next month	Key challenges
<ul style="list-style-type: none"> For clinical supervision the focus will be on completing the implementation of the operational workplace reviews (OWRs), CISO and CPI feedback for all front line staff. Work to deliver this implementation plan is already underway. To engage support from external pharmacists to undertake a full analysis for drug packs and audit . To finalise the roll out of medicine management training in CSR. To finalise alternative methods of sharing medicine management messages. 	<ul style="list-style-type: none"> Medicine Management improvement is a complex workstream and requires a period of time for changes to be embedded. This is a key priority for the Trust and we are focusing effort and attention into ensuring our medicines management risks are mitigated. To identify, source and fund external pharmacy support. To fund an IT solution for drug tracking. To fund additional ongoing pharmacy support.

Deliverable	Executive Lead	April 2016				May 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Clinical supervision	Fenella Wrigley	n/a					1		
Consent MCA	Zoe Packman	n/a				n/a			
Medicine Management	Fenella Wrigley	n/a				n/a			
Safeguarding	Zoe Packman	n/a				n/a			

