



2016/17 QUALITY IMPROVEMENT PROGRAMME

Progress Report: July 2016

August 2016







CONTENTS






1. Executive Summary	3
2. Programme Summary	4
3. Workstream progress reports	
4.1 Making the LAS a great place to work	6
4.2 Achieving good governance	10
4.3 Improving patient experience	13
4.4 Improving environment and resources	16
4.5 Taking pride and responsibility	19
4. Programme Risks and Issues	22

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

July 2016



Progress this month

- There has been steady progress made on the programme during July resulting in 13 out of 17 activities delivered, with 76% of scheduled activities completed.
- NHSI conducted a review on progress made against recommendations from the June 2015 CQC inspection . The review consisted of; a review of data and documentation, site visit, focus groups and ride-outs on emergency response vehicles and patient transportation.
- The activities that are delayed or reporting at risk relate to:
- Design and deliver sector based sessions to engage staff on the design of the LAS staff charter – A change request for a staff behaviour model instead of a staff charter will be submitted with an expected delivery date of Jan 2017.
- Complete a strategic risk review of the Trust risk register – This was not completed at the Board Strategy meeting in June and will now take place on 6th September at the Trust Board Session.
- Roll out pilot of pan-London process for pre-booking palliative care patients – Due to the CQC visit ,the roll out of the pilot will now commence in August. This delay is unlikely to have an impact on the other milestones in this project .
- Development of the quality and clinical strategy - there will be a delay in the development of this strategy to ensure it aligns with external strategies.

Theme	Executive Director	# Complete	% Complete	RAG
Making LAS a great place to work	Karen Broughton	4/5	80%	Yellow
Achieving good governance	Sandra Adams	3/4	75%	Yellow
Improving patient experience	Briony Sloper	2/3	67%	Yellow
Improving environment and resources	Andrew Grimshaw	3/3	100%	Blue
Taking pride and responsibility	Fenella Wrigley	1/2	50%	Red



PROGRAMME SUMMARY

Forecast View



Programme:

- There are very few activities to be delivered in August which will enable project teams to focus on delivering the high number of activities in September.
- There was a review in first half 2016 to look at adjusting resources to deliver the QIP programme as it moves into Phase 2. Phase 2 will focus on preparing for re-inspection and embed a robust assurance function within PMO. Head of assurance is now in place and a PMO Manager will start in August. Recruitment is on-going for the other vacancies in the programme delivery support team with a fully resourced team expected to be in place by the end of September.
- CQRG have requested a deep dive review on Theme 2 – Achieving Good Governance in September. The specific areas within this theme that CQRG would like the project team to focus on is still to be confirmed.
- Develop and create an action plan for the Clinical review.

		August 2016				September 2016			
Theme	Executive Director	Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Making LAS a great place to work	Karen Broughton			1			6		
Achieving good governance	Sandra Adams		2				9	1	
Improving patient experience	Briony Sloper						3		
Improving environment and resources	Andrew Grimshaw						8		
Taking pride and responsibility	Fenella Wrigley						6		
Total			2	1			32	1	





WORKSTREAM PROGRESS REPORTS



1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Karen Broughton



HIGHLIGHTS THIS MONTH

Equality And Inclusion

- Following the appointment of the interim Equality and Inclusion Manager, there has been substantial progress to recover delayed activities in this work stream. An initial assessment of processes and organisational documentation has been completed, and following the appointment to the Head of Recruitment post a comprehensive review of recruitment and selection practices will be carried out.
- A review of the Workforce Race Equality Standard (WRES) has been carried out and considered by the Executive Leadership Team. A seminar by the national WRES leads is scheduled to be presented to the Trust Board in early September.
- Establishment of an Equality and Diversity Committee is underway, and it is anticipated that the group will convene six times per annum with focus on matters relating to both our workforce and patients.

Vision and Strategy

- Activities to promote the Trust's vision and values were incorporated into the 'Making the LAS Great' communications campaign in June 2016. Phase two of the campaign is substantially underway, and an agreed schedule of targeted information will be published on a monthly basis in relation to eight priority areas.
- Through the new appraisal and personal development review (PDR) process launched in May 2016 there are opportunities for managers to talk to individuals about their contribution to 'Making the LAS Great', and this is also reinforced in the updated induction process for new staff members that was launched in July 2016.

Retention

- Funding has now been agreed with commissioners and work is progressing on a new Band 6 role which will incorporate the current Senior Paramedic post and give access to further career progression through a new education package linking to Urgent Care.
- Discussions are on going with the Trade Unions to ensure these posts are progressed imminently.



1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Karen Broughton



HIGHLIGHTS THIS MONTH

Advert to Action

- There is an anticipated delay to the redesigned recruitment process that is scheduled for delivery in August 2016, as the Trust appoints an interim recruitment manager to lead this area of work. A change request will be submitted for consideration by the QIP Board.
- Work completed to date includes the completion of an initial three day review of the recruitment function, and evaluation and learning from the 2016 graduate recruitment process. A paper detailing a full overview of recruitment activities is due to be submitted to the Executive Leadership at the end of September and this will detail the recruitment plan for the remainder of 2016, the recruitment packages to be offered in 2017, and the anticipated recruitment pipeline for 2017/18.

Bullying and Harassment

- In preparation for deliverables in September, there is continued communication, and delivery, of bullying and harassment awareness training across the Trust, and bespoke training sessions are being provided to teams by the bullying and harassment specialist where requested.
- Included as part of phase 2 of the 'Making the LAS' campaign, the focus for October will be about staff 'Speaking Up' and raising concerns about bullying and harassment.

Training

- Due for delivery in September, the Electronic Staff Record (ESR) Transformation and Oracle Learning Management (OLM) implementation project has made substantial progress. The implementation of the project commenced in July 2016, and terms of reference for the project board and work stream plans have been agreed, with the exception of the IM&T work stream plan which needs to be agreed in conjunction with the supporting IM&T Project Manager.
- The ESR Project Board has approved the OLM Implementation Paper and the best practice approach for centralised administration for the duration of the project and rollout.



1 | MAKING THE LAS A GREAT PLACE TO WORK

Progress – July 2016



Deliverable	Lead
Advert to Action (Recruitment)	Julie Cook
Bullying and Harassment	Karen Broughton
Training	Karen Broughton
Equality and Inclusion	Andrew Buchannan
Vision and Strategy	Karen Broughton
Supporting Staff	Karen Broughton
Retention	Greg Masters
Workforce and Organisational Development	Karen Broughton

July 2016		
Complete	Delayed	At Risk
2		
1	1	
1		

Outstanding actions
<p>Delayed <i>Design and deliver sector based sessions to engage staff on the design of the LAS staff charter.</i></p> <p>A change request will be submitted to the next QIP Board meeting seeking approval for the delivery of this activity to move to January 2017. The original intention to develop a staff charter will be replaced by a staff behaviour model. A number of staff engagement workshops have been scheduled in the next few months, with a view that the LAS behaviour model will be launched in the new year.</p>

1 | MAKING THE LAS A GREAT PLACE TO WORK

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> To appoint an interim Head of Recruitment to drive and lead the work to improve recruitment processes and to appoint to substantive posts within the recruitment team. To produce a paper for the Executive Leadership detailing upcoming recruitment activities for the remainder of 2016/17 and to look forward to the recruitment pipeline in 2017/18. 	<ul style="list-style-type: none"> A change request will be submitted for consideration by the QIP Board relating to the delivery of a staff behaviour model, to replace the originally intended staff charter. There are no perceived risks in the delayed delivery of this activity, as this framework does not exist in the organisation at present.

Deliverable	Lead	August 2016				September 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Advert to Action (Recruitment)	Julie Cook			1					
Bullying and Harassment	Karen Broughton					2			
Training	Karen Broughton					1			
Equality and Inclusion	Andrew Buchannan					3			
Vision and Strategy	Karen Broughton								
Supporting Staff	Karen Broughton								
Retention	Greg Masters								
Workforce and Organisational Development	Karen Broughton								



2 | ACHIEVING GOOD GOVERNANCE

Executive Lead: Sandra Adams



HIGHLIGHTS THIS MONTH

Risk Management

- Due to other priorities, the Strategic Risk Review was unable to take place at the Board Strategy meeting on 28 June. This work will now take place at the Trust Board session on 6th September. There has been considerable work done on this review and the strategic risks are in final draft.

Health & Safety Restructure

- The consultation for the restructure of the Health & Safety team has been launched and will run until 6th September 2016. The Director of Corporate Governance/Trust Secretary met with the team to launch the consultation, the HR team is providing support for this consultation. Following the end of the consultation period the revised structure will be fully implemented by March 2017 in line with the QIP Programme Plan.

Improving Incident Reporting

- The July Health & Safety newsletter was published on time and focuses on Personal Emergency Evacuation Plans. It also includes information on manual handling and what action the Trust takes following an assault on a member of staff. We have also written an annual programme for Health & Safety newsletters which is included as a change request to close this off as a monthly recurring deliverable.
- Last month we reported that the Emergency Bed Service (EBS) role had been extended to include Incident Reporting service had been established. The service had its initial 4 week review before rolling out fully to a 24 hour service. It was determined that there were some issues with how it was operating with Datix which meant that it was not ready for full roll out and the 12 hour phase was extended for a further 4 weeks. Datixweb is receiving an upgrade on 24.08.2016 which will rectify the problem and streamline the workflow within EBS. Once this update has been successfully implemented we will increase the communications to all staff to promote this service as a way of front line staff, out on the road, reporting incidents in real time.

Policy & Guidance Review

- The new Policy Management & Guidance group (PMAG) met on 5th July and 3rd August. The schedule of policies was reviewed to assess which policies are in need of review and ensure that there is a named person from each department responsible for ensuring that the policies have an appropriate review timetable. The first two meetings have seen 15 policies reviewed at the groups to be discussed, challenged or approved.



2 | ACHIEVING GOOD GOVERNANCE

Progress – July 2016



Deliverable	Lead
Risk Management	Sandra Adams
Capability and capacity of Health, Safety and Risk function	Sandra Adams
Improving incident reporting	Sandra Adams
Duty of Candour	Sandra Adams
Operational planning	Paul Woodrow
Listening to patients	Fenella Wrigley
Blue light collaboration	Karen Broughton
CQC reinspection	Fionna Moore
Business intelligence systems	Jill Patterson
Internal audit	Sandra Adams
Policy and guidance review	Sandra Adams

July 2016		
Complete	Delayed	At Risk
	1	
1		
1		
1		

Outstanding actions
<p>Delayed <i>Complete a strategic risk review of the Trust risk register</i></p> <p>The strategic risk review of the Trust Risk Register is to be completed at the Trust Board session on 6th September 2016.</p>



2 | ACHIEVING GOOD GOVERNANCE

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> August's actions are now business as usual so focus will be on September's actions. 	<ul style="list-style-type: none"> EOC review – The project to implement and embed improvements to EOC is at risk of delay. This project is being given priority and the team are urgently reviewing timescales and resourcing as well as aligning deliverables to the CQUIN. The project plan will be updated to help inform any proposed change request which will be submitted for approval to the QIP Board.

Deliverable	Lead
Risk Management	Sandra Adams
Capability and capacity of Health, Safety and Risk function	Sandra Adams
Improving incident reporting	Sandra Adams
Duty of Candour	Sandra Adams
Operational planning	Paul Woodrow
Listening to patients	Fenella Wrigley
Blue light collaboration	Karen Broughton
CQC reinspection	Fionna Moore
Business intelligence systems	Jill Patterson
Internal audit	Sandra Adams
Policy and guidance review	Sandra Adams

August 2016			
Complete	On Track	Delayed	At Risk
	1		
	1		

September 2016			
Complete	On Track	Delayed	At Risk
	2		
	2		
	1		
	1	1	
	1		
	1		
	1		

3 | IMPROVING PATIENT EXPERIENCE

Executive Lead: Briony Sloper



HIGHLIGHTS THIS MONTH

Patient Transport Service (PTS)

The roll out of the pan London process for pre-booking palliative care patients pilot was due to be delivered in July. There has been a slight delay in the roll out which will now start in August. The delay is not expected to impact on any consequent milestones and the review of this pilot is still scheduled to be delivered in September.

There has been good engagement with the pilot site and the LAS team have also been approached by a hospice as a second site, this is actively being progressed.

Meeting people's needs

A key deliverable in developing operational plans to respond to the growing bariatric population in London is, working with fleet, logistics, operations and clinical education to scope the implementation plans and required training in respect of new fleet vehicles and/or processes. We have been progressing with this work through the bariatric working group.

The bariatric working group, which has representation from clinical, training, logistics and fleet, meets regularly. Following the review of the data gathering process the group is now focussing on potential suitable specialist equipment. The selection of the required specialist equipment will require procurement and additional training going forward.

A series of testing will be required and specific bariatric equipment testing date has been arranged for 10 August. It is envisaged that once all the testing has been completed an options paper will be developed for consideration by the Board.

Develop a patient strategy.

The updated strategy was approved by the Board in July with publication expected in August.



3 | IMPROVING PATIENT EXPERIENCE

Progress – July 2016



Deliverable	Lead
Patient Transport Service	Paul Woodrow
Meeting people's needs	Briony Sloper/ Paul Woodrow
Response Times	Paul Woodrow
Learning from experiences	Briony Sloper

July 2016		
Complete	Delayed	At Risk
	1	
1		
1		

Outstanding actions
<p>Delayed <i>Roll out pilot of pan-London process for pre-booking palliative care patients.</i></p> <p>LAS have been approached by another site to roll out another pilot. Following up this opportunity caused a slight delay in the roll out of the initial pilot site. The rollout will now start in August but this is not expected to impact consequent milestones.</p>

3 | IMPROVING PATIENT EXPERIENCE

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> Although there are not milestones in August focus will be on progress with September deliverables. Continue with the testing of bariatric equipment and data gathering Review the pilot of pan-London process for pre-booking palliative care patients Implement feedback survey to providers to assess impact of actions on the service. 	

Deliverable	Lead
Patient Transport Service	Paul Woodrow
Meeting peoples needs	Briony Sloper / Paul Woodrow
Response Times	Paul Woodrow
Learning from experiences	Briony Sloper

August 2016			
Complete	On Track	Delayed	At Risk
No milestones for Theme 3 in August 2016			

September 2016			
Complete	On Track	Delayed	At Risk
	2		
	1		





4 | IMPROVE ENVIRONMENT AND RESOURCES

Executive Lead: Andrew Grimshaw

HIGHLIGHTS THIS MONTH

Information Management and Technology

- An Options paper/Business case has been completed and will be submitted to ELT on 10 August for approval. This paper contains the review of IM&T provision on station and hot desk areas. The findings from the review shows that there is an adequate number of desktop hardware but as the workforce is mobile the hot desk areas go largely unused and a mobile solution will be needed moving forward.

The preferred option would be the issue of personal handheld devices which are currently being trialled as a part of the E-Solutions CQUIN. If this option is to be progressed a business case will be developed and funding identified, which is in line with the CQUIN plan.

Fleet/Vehicle Prep: Vehicle Make Ready

- The North East Pilot Evaluation report was completed with refinements and enhancements identified. A business case has been drafted to support the roll out of the Hub model to the 14 remaining sites. Project planning has continued with project documentation nearing completion. There has been extensive collaborative work with the contractors to explore all opportunities to bring forward the completion date. There have been investigations into additional actions in all areas prior to the make ready roll out to enhance existing service.

HART Recruitment – Standing Item

- The Trust has 85 whole time equivalent staff members in post against a establishment of 84 which is the National NARU specification. Of those 85, the final four new staff members will commence their national training on the 1st August. They will then go on to complete their full core training by September 2016.



4 | IMPROVE ENVIRONMENT AND RESOURCES

Progress – July 2016



Deliverable	Lead
Fleet / Vehicle Preparation	Andrew Grimshaw
Information Management and Technology	Andrew Grimshaw
Infection prevention and control	Fenella Wrigley
Facilities and Estates	Sandra Adams
Resilience functions	Paul Woodrow
Operations Management	Paul Woodrow
Improving operational productivity	Paul Woodrow
Cost improvement programme	Andrew Grimshaw
Frontline equipment and uniforms	Paul Woodrow / Andrew Grimshaw

July 2016		
Complete	Delayed	At Risk
1		
2		

Outstanding actions



4 | IMPROVE ENVIRONMENT AND RESOURCES

Forecast View



Focus for next month	Key risks and challenges
<p>There are no milestones in this theme in August. In preparation for September milestones the focus for August will be the following:</p> <p>Fleet/Vehicle Prep: Make Ready</p> <ul style="list-style-type: none"> Continue project planning activities relating to the Vehicle Preparation. <p>Vehicle Procurement</p> <ul style="list-style-type: none"> Continue to work with Fast Response Unit supplier to deliver vehicles in accordance with the revised production plan. Approval being sought for the Double Crewed Ambulance business case. <p>Information Management & Technology</p> <ul style="list-style-type: none"> Ensure that the IM&T QIP milestones correspond with the E-solutions CQUIN quarterly milestones. <p>Infection Control and Prevention</p> <ul style="list-style-type: none"> Begin roll out of agreed protective clothing packs. <p>Strategy</p> <ul style="list-style-type: none"> Draft estates and fleet strategies Deliver in line with plan (30/09). 	<p>Vehicle Procurement</p> <p>Fast Response Units</p> <ul style="list-style-type: none"> Remains challenging due to deadline and on-going issues with supplier. <p>Double Crew Ambulance – March Milestone</p> <ul style="list-style-type: none"> Final Approval of business case not achieved from NHSI, until approval received, final date of completion of 140 vehicles can not be confirmed. Any risks associated with Brexit being assessed. <p>Make Ready</p> <ul style="list-style-type: none"> Make ready in place by Mar 17 – At risk, being mitigated through Vehicle prep.

Deliverable	Lead	August 2016				September 2016			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Fleet / Vehicle Preparation	Andrew Grimshaw						3		
Information Management and Technology	Andrew Grimshaw					1			
Infection prevention and control	Fenella Wrigley					2			
Facilities and Estates	Sandra Adams					2			
Resilience functions	Paul Woodrow								
Operations Management	Paul Woodrow								
Improving operational productivity	Paul Woodrow								
Cost improvement programme	Andrew Grimshaw								
Frontline equipment and uniforms	Paul Woodrow / Andrew Grimshaw								

No milestones for Theme 4
In August 2016



5 | TAKING PRIDE AND RESPONSIBILITY

Executive Lead: Fenella Wrigley



HIGHLIGHTS THIS MONTH

Medicine Management

A review was carried out on the current process for checking drug locker security. The Medicines Management group agreed that current process including the daily checks was an effective way of checking security and fit for purpose. In addition to this process, frequent unannounced audits by Operational Managers are carried out to support the assurance around the process.

There has been additional Pharmacy support in place at Deptford to focus on the logistics of Medicines Management. The Job description for the Trust Pharmacist has now been completed and banded. Year 1 funding has been agreed through QIP and recruitment to this post will start with job advertising once on-going funding has been agreed.

A further meeting has taken place between ambulance services, MRHA and the Home Office to address the legislation around administration of drugs by ambulance personnel. Additional meeting will be schedule and this process is on-going at present.

The process map for Medicine Management was refreshed to reflect all stages of drug management. Audits will continue to be carried out to ascertain the level of compliance. Where there is non compliance identified all local management will be notified. Local management teams will then be required to address non compliance and confirm a resolution.

Safeguarding

Safeguarding training for EOC and PTS is progress along with the planning for CSR 2016.3. There has been a new member of staff who has joined the safeguarding team and whose role will be to concentrate on safeguarding supervision.

Quality and Clinical Strategy

There has been a delay in delivering the Quality and Clinical Strategy in July. A change request has been prepared and will be submitted to the Board for consideration.



5 | TAKING PRIDE AND RESPONSIBILITY

Progress – July 2016



Deliverable	Lead
Clinical supervision	Fenella Wrigley
Consent MCA	Fenella Wrigley
Medicine Management	Fenella Wrigley
Safeguarding	Fenella Wrigley
Quality and clinical strategy	Fenella Wrigley
Operating model and clinical education & training strategy	Paul Woodrow / Karen Broughton
Developing the 111 Service	Paul Woodrow / Karen Broughton

July 2016		
Complete	Delayed	At Risk
1		
	1	

Outstanding actions
<p>Delayed <i>Develop the quality and clinical strategy</i></p> <p>There has been a delay in the development of the Quality and Clinical Strategy. Some meetings have been held with commissioners and NSHE urgent and emergency care board to input into strategy development. A change request will be submitted at the August Board to extend the time to deliver the strategy.</p>



5 | TAKING PRIDE AND RESPONSIBILITY

Forecast View



Focus for next month	Key risks and challenges
<p>To advertise and recruit substantive pharmacy support.</p> <p>To continue to progress with the Logistics end to end process.</p>	<p>The inability to audit electronically has been challenging.</p>

Deliverable	Lead
Clinical supervision	Fenella Wrigley
Consent MCA	Fenella Wrigley
Medicine Management	Fenella Wrigley
Safeguarding	Fenella Wrigley
Quality and clinical strategy	Fenella Wrigley
Operating model and clinical education & training strategy	Paul Woodrow / Karen Broughton
Developing the 111 Service	Paul Woodrow / Karen Broughton

August 2016			
Complete	On Track	Delayed	At Risk
No milestones for Theme 5 in August 2016			

September 2016			
Complete	On Track	Delayed	At Risk
	1		
	1		
	4		