



2016/17 QUALITY IMPROVEMENT PROGRAMME

Progress & KPI Report: September 2016

October 2016







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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

September 2016



Progress this month

- A review of all milestone delivery dates was carried out in September to ensure they reflect change requests and priority actions over the forthcoming months. This resulted in 26 deliverables for September with 77% of scheduled activities completed.
- The CQC have notified the Trust that they will be undertaking a comprehensive inspection of the London Ambulance Service on 7,8 & 9 February 2017.
- The activities that are delayed or reporting at risk relate to:
 - The roll out of pan-London process for pre-booking palliative care patients which was due to be delivered at the end of July, roll out is now expected in October.
 - The implementation and the communicating of agreed protective clothing pack for staff have both been delayed. Further training options are being explored to expedite the implementation of the clothing pack.
 - The development of the Estate strategy - a change request has been submitted to the QIP Board for consideration.
 - Information Management and Technology implementation plan has been delayed as we await funding approval.

Theme	Executive Director	# Complete	% Complete	RAG
Making LAS a great place to work	Mark Hirst	6/6	100%	■
Achieving good governance	Sandra Adams	8/8	100%	■
Improving patient experience	Briony Sloper	0/2	0%	■
Improving environment and resources	Andrew Grimshaw	4/8	50%	■
Taking pride and responsibility	Fenella Wrigley	2/2	100%	■

PROGRAMME SUMMARY

Forecast View



Programme:

- There are small amount of activities to be delivered by the end of October 2016. Teams will be focussing on ensuring all delayed activities are also delivered.
- The start of a series of road shows that will take place in October and November.
- Preparation and planning for the comprehensive inspection of the London Ambulance Service in February 2017.
- The roll out of the audit plan along with implementing the restructuring of the PMO to ensure resources are in place to deliver the QIP, and adequately prepare for the CQC inspection.
- The 'Speak Up' communications campaign will commence in October.

		October 2016				November 2016			
Theme	Executive Director	Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Making LAS a great place to work	Mark Hirst		3						
Achieving good governance	Sandra Adams		1				3		
Improving patient experience	Briony Sloper		-						
Improving environment and resources	Andrew Grimshaw		1						
Taking pride and responsibility	Fenella Wrigley		3						
Total			8				3		



WORKSTREAM PROGRESS REPORTS



3.1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Mark Hirst



HIGHLIGHTS THIS MONTH

Advert to Action:

- The graduate recruitment process redesign has been completed, with a guidance document currently in draft to be issued to all graduates explaining what they can expect when they join the Trust as well as any tax implications of the current package offered. A paper will be going to the Executive Leadership Team setting out the lessons learnt from the graduate recruitment for 15/16; along with the mitigations put in place to ensure there are minimal areas for improvement next year.

Bullying and Harassment:

- By the end of September 46 workshops had been delivered in total, with targeted training delivered to those departments who have shown limited attendance via our current training database. Five of these sessions have been delivered to the members of HART in response to some feedback received from this cohort of staff.
- Final session of Investigations Training for B&H was undertaken, with a cumulative total of 68 staff completing a two day course in investigation skills to drive forward the new dignity at work policy. A further 15 staff have also undertaken practical skills in mediation, which will enable staff to be able to develop their skills in dealing with conflict and round table resolutions, all of which will be supported with a newly designed suite of documents in line with the new policy.
- Planning has commenced with three operational sectors regarding developing pilots for local champions for Dignity and Respect, along with a recruitment process to ensure they are recruited in an open and transparent manner.
- A new communications plan has been drafted, setting out the priorities moving forward.

Equality and Inclusion:

- A board seminar was held with Executive and Non Executive Directors and led by the NHSE Joint WRES (Workforce Race Equality Scheme) Programme Directors, followed by a further meeting with the Chair and Interim Head of Equality and Inclusion to discuss next steps with the Workforce Race Equality Standard.
- The Executive Leadership Team has approved two additional posts to work within the Equality & Inclusion function to support future delivery.
- Lessons learnt meetings have been undertaken with the Metropolitan Police, Health Education England, the Patients' Forum and current members of the LAS BME Staff Forum to understand their experiences in developing BME staff in the workplace.



MAKING THE LAS A GREAT PLACE TO WORK

Progress – September 2016



Deliverable	Lead
Advert to Action (Recruitment)	Tracey Watts
Bullying and Harassment	Cathe Gaskell
Training	Jane Thomas
Equality and Inclusion	Melissa Berry
Vision and Strategy	Karen Broughton
Supporting Staff	Gill Heuchan
Retention	Lindsay Koppenhol
Workforce and Organisational Development	Karen Broughton

September 2016		
Complete	Delayed	At Risk
1		
2		
1		
2		

Outstanding actions
<ul style="list-style-type: none"> A paper will be going to the ELT setting out the lessons learnt from the graduate recruitment for 15/16; along with the mitigations put in place to ensure there are minimal areas for improvement next year. Following the review of the Recruitment function the implementation of a substantive structure over the remainder of Q3.

MAKING THE LAS A GREAT PLACE TO WORK

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> • CEO Roadshows commence with corporate services, managers and support functions across the Trust • The People and Organisational Development Strategy to be approved by the Workforce and OD Committee • Targeted B&H sessions arranged for those departments with limited attendance across the Trust • Second cohort of staff to be trained in practical skills in Mediation on 10th and 11th October, these staff were requested to send through an expression of interest with line management support 	<ul style="list-style-type: none"> • Lack of IM&T engagement in the implementation of ESR and OLM has slowed the project, however the Project Sponsor is now meeting on a weekly basis with them to address the areas of concern, with a risk raised ensuring visibility is maintained at the Project Board chaired by the Interim Director of Workforce.

Deliverable	Lead
Advert to Action (Recruitment)	Tracey Watts
Bullying and Harassment	Cathe Gaskell
Training	Jane Thomas
Equality and Inclusion	Melissa Berry
Vision and Strategy	Karen Broughton
Supporting Staff	Gill Heuchan
Retention	Lindsay Koppenhol
Workforce and Organisational Development	Karen Broughton

October 2016			
Complete	On Track	Delayed	At Risk
	2		
	1		

November 2016			
Complete	On Track	Delayed	At Risk



3.2 | ACHIEVING GOOD GOVERNANCE

Executive Lead: Sandra Adams



HIGHLIGHTS THIS MONTH

Risk Management

- Risk Register audits were carried out with 86% RAG rated as green. Those areas that were not green were addressed at RCAG on 4th October 2016. The areas that were highlighted were Workforce, Comms, Fleet and IM&T and the Chief Executive asked for them all to be updated immediately. All risks have now been migrated over to Datix and the number of local risk registers has increased.
- The Trust Board had two facilitated sessions on the Risk Appetite on 6th and 21st September.

Improving Incident Reporting

- The September Health & Safety bulletin was issued on time and focussed on the outcome of the razor box trial which has now been rolled out. The newsletter also encouraged staff to report risks and issued on Datix and included a user guide.

Duty of Candour

- The new Duty of Candour policy was launched in September with communication to staff in the RIB and on the Listening in Action Facebook page.

CQC Re-inspection

- The PMO team supported our 111 service to prepare for their CQC inspection and will use lessons learned from that work to aid our planning for the full Service inspection in February
- Work has started on ensuring all the necessary documents are up to date for the Provider Information Return (PIR) submission which we expect to receive in mid-October.
- The PMO team has now been re-focussed on activities that need to be done to prepare for the CQC inspection. This includes preparing the PIR, staff engagement, ensuring departments are prepared for the inspection and an assurance function.

Internal Audit

- Internal Audit recommendations went to ELT on 31st August and to Audit Committee on 5th September. The committee was pleased to note the good progress being made on the recommended actions.

Policy & Guidance Review

- The Policy Monitoring & Approval Group met on 14th September to review and approve seven policies which have been updated. The group also discussed an action plan for ensuring that key policies are up to date in time for the PIR submission.



ACHIEVING GOOD GOVERNANCE

Progress – September 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

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

Outstanding actions
<ul style="list-style-type: none"> No outstanding actions



ACHIEVING GOOD GOVERNANCE

Forecast View



Focus for next month

- There is only one action for October which has already been completed.
- The focus is therefore going to be on preparing for November and December's deliverables.
- In particular the deliverables that will require focus will be the EOC review, the implementation of the rest break and out of service review and the Business Intelligence deliverables which are due in December.
- The CQC re-inspection preparation will also be a continued focus from now until the inspection in February.

Key risks and challenges

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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

October 2016			
Complete	On Track	Delayed	At Risk
	1		

November 2016			
Complete	On Track	Delayed	At Risk
	1		
	2		



3.3 | IMPROVING PATIENT EXPERIENCE

Executive Lead: Briony Sloper



Patient Transport Service

The Palliative care pilot is still delayed due to the slow response times of the volunteer hospice. Although the LAS team is keen to move forward with the pilot we are bound by the responsiveness of the pilot organisation. A suggested start date for the pilot is now expected week commencing 17 October. The completion date of the pilot is anticipated to be in the first week of November and will be followed by evaluation. The roll out of a single process for pre-booking palliative care patients following the pilot is still expected to be delivered in December. A change request will be submitted to the next QIP Board for consideration.

Non Emergency Transport Service: We have also rolled out a pre-booked transport solution for community mental health care assessments for three Trusts and have agreed a timeline with NHS England for the remaining 6 Trusts by end of January 2017. Although this is not a direct milestone in the QIP plan, the project is an enabler for meeting mental health patients needs and is ensuring a more timely and effective service.

Mental health:

Communication to staff on continuing professional development and training opportunities continues with updates on LIA, RIB and the pulse.

The development of mental health support via Registered Nurses has also been continued.

A staff survey undertaken with staff in EOC showed that the Registered Mental health Nurses (RMN) in the control room have been utilized as a key conduit for sharing and supporting staff in the control room and the front line to interpret and apply the revised standard operating procedures (SOP) effectively – a staff survey was undertaken and the findings presented in June 2016 that demonstrated:

- 80.87% of EOC staff have found the presence of RMNs beneficial to support their interpretation and management of mental health scenarios
- 84.61% of EOC staff felt that RMNs have a key benefit including improved patient assessments and support to manage these calls effectively
- 73.03% of EOC staff felt that RMNs have improved access & communication with external agencies in relation to mental health
- 50% of EOC staff felt that RMNs have impacted on their individual learning, confidence & knowledge about MH presentations

Bariatric:

The patient representative assigned to the bariatric working group (BWG) had to decline further attendance due to other commitments; therefore the BWG proactively sought out patient forum members to obtain input and advice from outside the London Ambulance Service. A forum member was identified and has now been invited to all future meetings. There will also be a specific patient forum held on 20th October whereby other forum members will be updated on our progress and have an opportunity to provide input into the programme.

At the next BWG on 4th October we will be aiming to make a decision regarding vehicles and produce a recommended list of equipment along with justifications of benefits to patients and the service as a whole. Data collection and analysis is progressing, we will soon have CCG information for numbers and geographical locations of patients in London. This will allow us to begin planning resource allocation.

A number of the BWG travelled to South East Coast Ambulance Service NHS Foundation Trust to observe their procedures surrounding bariatric patients; this included their definition, resourcing, use and issues. This information will be used to inform our own plans.

The LAS definition for 'bariatric' has been agreed upon by the BWG and it has now gone to ELT for sign off. The LAS bariatric capability has been audited on three different occasions.

HIGHLIGHTS
THIS MONTH



IMPROVING PATIENT EXPERIENCE

Progress – September 2016



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

September 2016		
Complete	Delayed	At Risk
	2	
0		
0		
0		

Outstanding actions
Due to the pilot start date being delayed the pilot cannot be reviewed until it is complete. It is expected that despite this delay, the roll out is still expected to take place in December as per milestone plan.

IMPROVING PATIENT EXPERIENCE

Forecast View



	Key risks and challenges
<ul style="list-style-type: none"> There are no milestones for this theme in October and November but work will continue to ensure all December milestones are met. 	

Deliverable	Lead
Patient Transport Service (NETS)	Paul Woodrow
Meeting peoples needs	Fenella Wrigley/ Paul Woodrow
Response Times	Paul Woodrow
Learning from experiences	Fenella Wrigley

October 2016			
Complete	On Track	Delayed	At Risk

November 2016			
Complete	On Track	Delayed	At Risk

3.4 | IMPROVE ENVIRONMENT AND RESOURCES

Executive Lead: Andrew Grimshaw



HIGHLIGHTS THIS MONTH

Vehicle Make Ready

- The Inaugural Project Board meeting was held and project structures and governance are now in place to ensure the project is managed in a controlled environment.
- The Fulham Gold service roll out was completed on 26 September with new ways of working now embedding. The stakeholder meetings have continued with teams at the upcoming Gold and Silver service sites including St Helier (silver), Wimbledon (silver), Hillingdon (gold), Isleworth (gold) and Brent (gold).
- The Financial Investment committee (FIC) has approved the Make Ready business case.

Vehicle Procurement

- There has been the procurement of sixty FRU vehicles this month.

Fleet Strategy

- The Fleet Strategy has been drafted and circulated to Operations Board for review. The Fleet Strategy will be finalised in January 2017, in accordance with the QIP plan.

Estate Strategy

- A change request has been submitted to change the scope and delivery time for the Estate Strategy which will be considered at the next QIP Board. As part of the change request the Director of Finance has identified and appointed external advisors to assist the Trust to complete hypothetical model for January 2017.

IMPROVE ENVIRONMENT AND RESOURCES

Progress – September 2016



Deliverable	Lead
Fleet / Vehicle Preparation	Andrew Grimshaw
Information Management and Technology	Andrew Watson
Infection prevention and control	Fenella Wrigley
Facilities and Estates	Andrew Grimshaw
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

September 2016		
Complete	Delayed	At Risk
3		
	1	
	2	
1	1	

Outstanding actions
<p>Information Management and Technology</p> <ul style="list-style-type: none"> The handheld device business cases are currently being finalised. One case is to support limited roll out of Virtual Ward, and a second broader case for handhelds for all frontline staff. The funding for both of these options is in the process of being confirmed.
<p>Infection prevention and control</p> <p>Implement agreed protective clothing pack for staff</p> <p>Communicate availability of protective clothing to all staff</p> <ul style="list-style-type: none"> The protective clothing packs have been delivered to Greenwich. The vehicle preparation teams will begin to prepare the vehicles with the new protective clothing once they have been delivered to the site. The supporting training materials will be finalised week commencing 3 October however the training modules may not be available until January 2017; further investigations on going. This will delay the implementation of the personal protective equipment (PPE) packs as they cannot be installed on vehicles until staff training has occurred.
<p>Facilities and Estates</p> <p>Develop an estates strategy</p> <ul style="list-style-type: none"> A change request was submitted in September for consideration at the next QIP Board. The request is for the 'Develop an estates strategy' milestone to be moved to January 2017 and changed to 'Develop Hypothetical models for the future estate'

3.5 | TAKING PRIDE AND RESPONSIBILITY

Executive Lead: Fenella Wrigley



HIGHLIGHTS THIS MONTH

Medicine Management:

The new medicines management policy has been reworked and relaunched – this has involved incorporating multiple guidance documents into one overarching document. The introduction of Datix and medicines management teaching throughout CSR this financial year provides the training and means for reporting shortfalls in operations. Central Support Unit (CSU) also have a document advising what should happen if crews are missing kit including drugs and the timescales for resolving this. Operations have been working on a small review of “no drug pack availability” on stations. The outcome of the review is expected in the next couple of weeks. The information will be collected by CSU to refine Datix forms following a collaboration of CSU/Governance and Operations.

Training content

EOC and PTS safeguarding continues as does training for new clinical recruits and inductions. Clinical staff safeguarding training is planned for CSR2016.3 and is planned to be delivered as problem based learning; this is currently being developed with Clinical Education and Development.

Safeguarding supervision

Several focus groups have been held with staff and managers, and visits to several other ambulance trusts to review their safeguarding processes have been arranged.

Consent MCA:

The milestone was to deliver updated training for all patient facing staff on Mental Capacity Act as part of the 2016/2017/ CSR programme. This milestone has been completed, 3134 staff attended CSR 2016.1 which included the updated training on MCA.





TAKING PRIDE AND RESPONSIBILITY

Progress – September 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

September 2016		
Complete	Delayed	At Risk
1		
1		

Outstanding actions
<ul style="list-style-type: none"> No outstanding actions



TAKING PRIDE AND RESPONSIBILITY

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> • Completion of safeguarding milestones • There will be a continued focus on the medicine management deliverables to ensure all milestones are met 	

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

October 2016			
Complete	On Track	Delayed	At Risk
	2		

November 2016			
Complete	On Track	Delayed	At Risk

