



2016/17 QUALITY IMPROVEMENT PROGRAMME

Progress Report: December 2016








January 2017

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Definitions

<i>Project Delivery</i>	<i>Project Performance</i>
 All scheduled activities have been completed	 Performance has been met or is over 95% towards the agreed trajectory / target
 The scheduled activities are on track for completion by the due date	 Performance is between 85-95% towards the agreed trajectory / target
 The scheduled activities have been delayed and are no more than 4 weeks	 Performance is below 85% of the agreed trajectory / target
 The scheduled activities are at risk and have delays over 4 weeks	

EXECUTIVE SUMMARY

December 2016



Progress this month

- There have been a high number of deliverables due in December resulting in 16 out of 23 activities being delivered, with 70% of scheduled activities completed.

The activities that are delayed or reporting at risk relate to:

- Review of the LAS 5 year strategy and the Trust Operating Model has been delayed to allow time for the Trust Board in conjunction with McKinsey to revise the strategy.
- Clinical Education Strategy has been delayed, the first draft has been completed and is currently scheduled to go to Trust Board on 31 January 2017.
- Development of a staff behaviour model has been delayed to ensure full partnership engagement with staff and staff side representatives
- Design and publish the annual training plan has been delayed. The annual training plan is awaiting the finalised clinical training plan in order for this to be incorporated into the annual training plan.
- EOC - Embed outcomes of the review to include recruitment has been delayed due to Operational Research in Health Limited re-visiting some of the assumptions in the original review. This work is still ongoing and embedding the outcomes is now due for completion by March 2017.
- Roll out a single process for pre-booking palliative care patients has been delayed by one month due to the late start of rolling out the pilot. The single process for pre-booking palliative care patients is due to be rolled out by the end of January 2017.
- Scope and implement a method of assuring the quality of the Occupational Workplace Reviews (OWR), Clinical Information and Support Overview (CISO) and Clinical Performance Indicators (CPI) feedback has been delayed due a review of the OWR process which is currently being reviewed and due for completion by the end of March 2017.
- Review the existing 111 service to further improve the service and the cost of the service has been delayed as ongoing work is carried out to complete this comprehensive review.

Theme	Executive Director	Planned December Deliverables			Deliverables to date		
		# Complete	% Complete	RAG	# Complete	% Complete	RAG
Making LAS a great place to work	Mark Hirst	3/5	60%	Red	37/40	93%	Yellow
Achieving good governance	Sandra Adams	9/9	100%	Blue	84/85	99%	Green
Improving patient experience	Briony Sloper	1/2	50%	Red	21/22	95%	Green
Improving environment and resources	Andrew Grimshaw	3/3	100%	Blue	65/65	100%	Blue
Taking pride and responsibility	Fenella Wrigley	0/4	0%	Red	28/32	88%	Yellow

PROGRAMME SUMMARY

Forecast View



Programme:

- Preparation and planning for the comprehensive inspection of the London Ambulance Service in February 2017.
- January managers' briefing focussing on "Lightning Talks" covering EOC, Drug Packs and being a learning organisation.
- Throughout January the "Making the LAS Great" campaign will focus on managing confidential and personal information in a secure way. The campaign will include top tips on managing information safely and looking at how this applies to frontline, control room and support staff.

		Jan 2017				Feb 2017			
Theme	Executive Director	Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Making LAS a great place to work	Mark Hirst						1		
Achieving good governance	Sandra Adams		1				1		
Improving patient experience	Briony Sloper								
Improving environment and resources	Andrew Grimshaw		2						
Taking pride and responsibility	Fenella Wrigley								
Total			3				2		



WORKSTREAM PROGRESS REPORTS

1 | MAKING THE LAS A GREAT PLACE TO WORK

Executive Lead: Mark Hirst



HIGHLIGHTS THIS MONTH

BULLYING AND HARASSMENT

- The Round table skills facilitators workshops were launched in December with 20 attendees, this was aimed at staff who had attended the Practical skills in mediation workshops – this gave attendees an opportunity to share process and procedures and gain peer support for this new service.
- With the addition of two further workshops conducted on Bullying and Harassment Awareness, we have now increased the total number trained to 716.
- Bullying and Harassment Specialist, Cathe Gaskell was interviewed in December about the progressive work that has been done at LAS which will be featured on the NHS Employers website as an example of good practice.

EQUALITY AND INCLUSION

- Chairman Heather Lawrence and Interim Equality and Inclusion Lead Melissa Berry held the first of a series of open discussions on 7 December; 17 people attended this meeting which invited staff from BME backgrounds to talk about working for the Service and discuss their experiences.

ADVERT TO ACTION – Frontline resourcing

- In order to further develop visibility on current and future frontline resourcing numbers a workforce profile model, using ESR and TRAC data, is currently in development. This model will be able to accommodate recruitment pipeline (planned starters), staff in training, staff fully operational, secondments and planned leavers and is due for completion in February 2017.

VISION & STRATEGY – Staff behaviour model

- The staff behaviour model which sets out mutually agreed standards of conduct for the staff and organisation has been delayed while the workforce and OD team ensure this model is developed in full partnership with employees and staff side representatives.

SUPPORTING STAFF – Annual Training plan

- The design and publishing of the annual training plan; incorporating both patient and non patient facing staff development activities has been delayed but is due to be completed when the Education Group finalizes the clinical training plan which will be incorporated into the overall plan by March 2017.



1 | MAKING THE LAS A GREAT PLACE TO WORK

Progress – December 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

December 2016		
Complete	Delayed	At Risk
2		
	1	
1	1	

Outstanding actions
<p>The 5 year strategy refresh is currently being planned and will now be developed in May and June 2017.</p> <p>At the December QIP Board it was agreed that the new delivery date for the Workforce and OD strategy will be February 2017.</p> <p>The staff behaviour model requires further employee and staff side engagement.</p> <p>The annual training plan is awaiting the finalised clinical training plan.</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"> There are no deliverables in January and one deliverable in February for Theme 1, teams will be focussed on completing delayed deliverables and detailed actions as part of the countdown action plan. 	

Deliverable	Lead	Jan 2017				Feb 2017			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Advert to Action (Recruitment)	Julie Cook								
Bullying and Harassment	Cathe Gaskell								
Training	Jane Thomas								
Equality and Inclusion	Melissa Berry								
Vision and Strategy	Karen Broughton						1		
Supporting Staff	Gill Heuchan								
Retention	Lindsay Koppenhol								
Workforce and Organisational Development	Karen Broughton								



2 | ACHIEVING GOOD GOVERNANCE

Executive Lead: Sandra Adams



HIGHLIGHTS THIS MONTH

IMPROVING INCIDENT REPORTING

- The evaluation of Datix has now been completed and a report will be submitted to ELT in January 2017. As at the end of December over 5000 incidents have been reported since May 2016, an increase of approximately 50% on the previous year.

CAPACITY AND CAPABILITY OF HEALTH, SAFETY AND RISK FUNCTION

- The December Health & Safety newsletter focussed on Display Screen Assessments (DSA), the newsletter included frequently asked questions on DSA within this issue.

OPERATIONAL PLANNING – EOC

- A small test of change with a group of EMD call handlers from one watch has been introduced; this involves call handlers asking three new pre-triage questions. This process will allow the Emergency Operations Centres to identify those patients who will have a triage outcome as 'Red 1' earlier and supports a number of actions being taken to make sure that the Trust is responding to the most critical patients quickly, protecting their chance of survival.

BUSINESS INTELLIGENCE SYSTEMS

- Performance Management Strategy has been revised and submitted to ELT. Clinical indicators have now been introduced into the Integrated Trust Board Report providing national benchmarking against other ambulance trusts.
- A new section on risk has been included into the Integrated Trust Board Report which provides the top three corporate risks along with a breakdown of directorate risk levels.

2 | ACHIEVING GOOD GOVERNANCE

Progress – December 2016



Deliverable	Lead	Dec 2016			Outstanding actions
		Complete	Delayed	At Risk	
Risk Management	Sandra Adams	1			<p>EOC – Operational Planning The work by ORH is still ongoing it is anticipated that embedding outcomes from the review will be completed by March 2017.</p>
Capability and capacity of Health, Safety and Risk function	Sandra Adams				
Improving incident reporting	Sandra Adams	2			
Duty of Candour	Sandra Adams	1			
Operational planning	Pauline Cranmer			1	
Listening to patients	Fenella Wrigley				
Blue light collaboration	Karen Broughton				
CQC reinspection	Fionna Moore	1			
Business intelligence systems	Jill Patterson	2			
Internal audit	Sandra Adams	1			
Policy and guidance review	Sandra Adams	1			

2 | ACHIEVING GOOD GOVERNANCE

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> Continue to progress with implementing quick wins within EOC. Preparation and planning for CQC re-inspection in February. 	<ul style="list-style-type: none"> Capacity issues within EOC and the delay of ORH revising assumptions in the EOC review has had an impact on deliverable time scales.

Deliverable	Lead	Jan 2017				Feb 2017			
		Complete	On Track	Delayed	At Risk	Complete	On Track	Delayed	At Risk
Risk Management	Sandra Adams								
Capability and capacity of Health, Safety and Risk function	Sandra Adams		1			1			
Improving incident reporting	Sandra Adams								
Duty of Candour	Sandra Adams								
Operational planning	Paul Woodrow				1				1
Listening to patients	Fenella Wrigley								
Blue light collaboration	Karen Broughton								
CQC reinspection	Andrew Grimshaw								
Business intelligence systems	Jill Patterson								
Internal audit	Sandra Adams								
Policy and guidance review	Sandra Adams								



3 | IMPROVING PATIENT EXPERIENCE

Executive Lead: Briony Sloper



HIGHLIGHTS THIS MONTH

PATIENT TRANSPORT SERVICE

- The pre-booking of end of life care journeys commenced with St Joseph's as planned in mid-December and to date has been operating without any issues. St Joseph's will be providing the Patient Transport Service with feedback on their experiences to date by Wednesday 11th January.
- The Service will be engaging with other hospices in mid January to commence the rollout of the system. Dependant on each hospice's circumstances, we anticipate operating the e-booking system with all hospices by the end of January 2017.

MEETING PEOPLE'S NEEDS – BARIATRIC

- The Bariatric Working Group met in December and discussed finalising a process to be able to accurately capture calls by bariatric patients. Recommendations from the Bariatric Working Group, which focussed on type of equipment, vehicles required and staffing options, have been approved by the Operations Board and will now be developed into a business case and implementation for consideration by the Trust's Executive Leadership Team.

LEARNING FROM EXPERIENCES

- Insight magazine, the Trust's new Learning from Experience casebook, was published on 1 December 2016. Insight will be published quarterly and will contain case studies along with key learning points. The first issue included case studies on an obstetric emergency, a spinal injury serious incident, a cardiac arrest serious incident, an IM&T virus alert serious incident, an airway obstruction serious incident and a severe shock incident.



3 | IMPROVING PATIENT EXPERIENCE

Progress – December 2016



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

Dec 2016		
Complete	Delayed	At Risk
	1	

Outstanding actions
The roll out of the single process for pre-booking palliative care has been delayed and is due to be delivered in January.

3 | IMPROVING PATIENT EXPERIENCE

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> There are no deliverables in January and February for Theme 3, teams will be focussed on completing the roll out of the single process for pre-booking palliative care patients. 	

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

Jan 2017			
Complete	On Track	Delayed	At Risk

Feb 2017			
Complete	On Track	Delayed	At Risk

4 | IMPROVE ENVIRONMENT AND RESOURCES

Executive Lead: Andrew Grimshaw



HIGHLIGHTS THIS MONTH

Vehicle Preparation / Make Ready

- All Stage 1 roll out milestones have been achieved with North West (Brent and Hillingdon) and West (Fulham and Isleworth) Gold roll outs now complete.
- Silver roll outs to the South West sector (Wimbledon and St. Helier) have also now been completed.
- Stakeholder meetings have continued with broader internal communications activities underway, in particular with the ADO group and with local management teams at hub site locations.

Zero Tolerance Maintenance Work

- Zero tolerance maintenance work is part of BAU practice and has been in place since September 2015. Approximately 1,350 zero tolerance jobs have been completed by workshop teams since September 2015 with approximately 300 jobs completed from October to December 2016.

Estates Cleaning Compliance

- There have been 275 cleaning audits conducted between the October and November period with the contractor, local LAS teams and Estates teams completing multiple audits across the estate. The average cleaning score has been 95% against a pass mark of 90%.

Frontline Equipment

- Reviews and improvements to frontline equipment have been conducted throughout the year with upgrades introduced to Airwave radios in August 2016, MDT software enhancements in September 2016, Olympic map books in October 2016 and Life Pak 1000 upgrades in November 2016.

Blankets

- Further meetings have been arranged with laundry providers to finalise an agreeable solution to the issues with blankets provision. There has been a steady improvement in the provision of four blankets at the start of shift in the past two months.



4 | IMPROVE ENVIRONMENT AND RESOURCES

Progress – December 2016



Deliverable	Lead	Dec 2016			Outstanding actions
		Complete	Delayed	At Risk	
Fleet / Vehicle Preparation	Andrew Grimshaw	1			
Information Management and Technology	Andrew Watson				
Infection prevention and control	Fenella Wrigley				
Facilities and Estates	Andrew Grimshaw	1			
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	1			

4 | IMPROVE ENVIRONMENT AND RESOURCES

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> Maintain progress against Vehicle Preparation delivery timeline and continue stakeholder meetings with upcoming roll out locations. Finalise Fleet Strategy for approvals process in early January. Finalise Estates Strategy hypothetical options model and define the timeline. Continue to work with laundry providers to identify a suitable solution for implementation. 	<p>Blankets</p> <ul style="list-style-type: none"> Working with laundry providers to resolve the blanket issue for the LAS is a key challenge as a collaborative and cooperative working arrangement between contracting parties is required. <p>Fleet / Vehicle Preparation: Make Ready</p> <ul style="list-style-type: none"> Contractor recruitment is a key risk to the timely roll out of gold service vehicle preparation hub sites.

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

Jan 2017			
Complete	On Track	Delayed	At Risk
	1		
	1		

Feb 2017			
Complete	On Track	Delayed	At Risk

5 | TAKING PRIDE AND RESPONSIBILITY

Executive Lead: Fenella Wrigley



HIGHLIGHTS THIS MONTH

Clinical Supervision

- The scoping and implementing of a method of assuring the quality of Occupational Workplace Reviews (OWR), Clinical Information and Support Overview (CISO) and Clinical Performance Indicators (CPI) feedback was due for completion in December. This has been delayed as the OWR process is undergoing a thorough review to ensure the OWR adds value to clinical supervision. It is envisaged that once the review of this process has been completed that quality assurance aspect of this work will be completed.

Medicine Management

- In December the reporting aspect of the Med Man portal has been further improved to provide more detailed breakdown of drug usage, dosage and drug form compliance.
- Four hundred general packs and 400 paramedic packs have been distributed throughout all sites matching stock levels to the volume of shift starts at each station.
- As part of the robust Medicines Management Action plan developed in response to the warning notice issues by the CQC, a Medicines Management Strategy has been developed. The strategy outlines the Trust strategic Medicine Management focus and improvements for the next 18 months.
- Perfect Ward – In December, Ilford pilot site was set up to test the app for signing drug packs in and out and extensive hardware testing was also carried out.

Developing the 111 Service

- A comprehensive review of the 111 service to further improve the work and cost of the service was due for completion in December. Further work is being carried out to ensure that in depth cost modelling of this service has been completed to allow the Trust to gain competitive advantage when bidding for 111 procurement opportunities across London.



5 | TAKING PRIDE AND RESPONSIBILITY

Progress – December 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 training strategy	Paul Woodrow / Karen Broughton
Developing the 111 Service	Paul Woodrow / Karen Broughton

December 2016		
Complete	Delayed	At Risk
	1	
	2	
	1	

Outstanding actions
<ul style="list-style-type: none"> • OWR process requires a through review before a method of quality assurance can be implemented for Clinical Supervision. The review is likely to be completed in March 2017. • The operating model is still being developed and the clinical training strategy will be submitted to the next Trust Board. • Comprehensive review of the 111 service is still ongoing and is due for completion by April 2017.

5 | TAKING PRIDE AND RESPONSIBILITY

Forecast View



Focus for next month	Key risks and challenges
<ul style="list-style-type: none"> There are no deliverables in January and February for Theme 5, teams will be focussed on completing delayed deliverables and detailed actions as part of the countdown action plan . 	

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

Jan 2017			
Complete	On Track	Delayed	At Risk

Feb 2017			
Complete	On Track	Delayed	At Risk