



MEETING TITLE Trust Board in Public		MEETING DATE 24/05/2018	
TITLE of PAPER		Quality Improvement Update	PAPER REF 3.1
STRATEGIC OBJECTIVE(S)		Ensure continuous service improvement and innovation Deliver world class health outcomes in urgent and emergency care	
PURPOSE OF THE PAPER		To update the Board on the development of the Quality Improvement Strategy and progress in implementation.	
For Approval		<input type="checkbox"/>	For Assurance
For Decision		<input type="checkbox"/>	Discussion/Information
AUTHOR / LEAD	Dave Green Head of Quality Improvement Karen Owens-Deputy Director Quality and Nursing	ACCOUNTABLE DIRECTOR	Steve Page-Executive Director of Quality, Governance and Performance Assurance
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper): Trust Management Group, Trust Board June 2017, November 2017, Board Development Meeting February 2018			
PREVIOUSLY AGREED AT:		Committee/Group: Choose an item.	Date: Click to enter date
RECOMMENDATION(S)		It is recommended that the Board: <ul style="list-style-type: none"> • Notes and is assured by the progress to-date • Supports the next steps in implementation as outlined 	
RISK ASSESSMENT			Yes
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>			<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>			<input type="checkbox"/>
Diversity and Inclusion Implications <i>If 'Yes' – please attach to the back of this paper</i>			<input type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		All	
NHSI Single Oversight Framework Choose a THEME(s)		1. All	

1. PURPOSE/AIM

- 1.1 To update the Board on the development of the Quality Improvement Strategy and progress in implementation.

2. BACKGROUND/CONTEXT

- 2.1 Quality Improvement (QI) can be broadly summarised as a systematic approach to continually improving an organisation. This is achieved through utilising the expertise of staff within their own areas of work, combined with education and support in QI methodology. The Trust Board received and approved the paper Quality Improvement, "Outline proposal for a YAS approach" on the 31 August 2017.
- 2.2 This paper outlined an approach to Quality Improvement based on the *Model for Improvement*. The proposed approach draws on international evidence of best practice, and focuses on the engagement and support of individuals and teams at all levels in making improvements in their own work areas.
- 2.3 A subsequent paper received by the Board in November 2017 outlined the initial steps towards implementation and the investment required to support this.
- 2.4 This paper provides an update on the progress that has been made towards achieving the first steps in a adopting a Trust wide QI approach.

3. PROGRESS TO-DATE

Quality Improvement Strategy

- 3.1 The development of the Quality Improvement (QI) Strategy has been the result of widespread consultation within the Trust at all levels. This has included Board and senior management, frontline colleagues and patients and carers through the Critical Friends Network. Research has also been undertaken externally looking at other organisations that have successfully introduced similar strategies. The proposed QI Strategy is designed to support delivery of the overarching Trust Strategy and complements other enabling strategies such as the Clinical Strategy and strategies for leadership, OD and staff engagement. The document provides a framework for the systematic implementation of QI across the Trust, supporting us to:
 - Continually improve patient care
 - Make YAS a great place to work
 - Increase efficiency and effectiveness
- 3.2 The draft QI Strategy is attached as Appendix 1, with the initial 12 month implementation plan at Appendix 2.
- 3.3 The strategy is now complete and is being used to guide implementation. It is proposed that formal launch and distribution takes place during 2018, aligned to publication of the wider Trust strategy.

Strategic Partnership with the Improvement Academy

- 3.4 YAS has entered an initial twelve month partnership with the Improvement Academy (IA). The IA is part of the Yorkshire and Humber Academic Health Science Network and has extensive experience in QI, working throughout the region and nationally. IA are providing the education, mentoring and coaching for the core QI team and newly recruited QI fellows. Alongside this support the IA will also provide education and expertise to the Board and senior leaders in the form of improvement workshops to be delivered during quarter 2/3. IA have also contributed and advised with the development of the YAS QI Strategy and will continue to support the Trust on the implementation and embedding of the QI agenda at all levels. It is envisaged that a form of strategic partnership will continue into future years of implementation, although the support provided will change as increased internal capacity and capability to support QI is developed.

QI Core Team

- 3.5 The core staff in the Quality Improvement team and identified individuals in the Programme Management Office (PMO) have accessed QI or service improvement training to equip them for their role in supporting the wider organisation. The training focuses on the *Model for Improvement* and is complemented by individuals within the PMO team with lean/process improvement training. Training places for 4 individuals on the Virginia Mason Production System methodology has also been procured, to broaden the range of tools available to the team and opportunities to engage with partner organisations. During the year, opportunities will also be explored to increase the direct involvement of individuals with relevant skills within other Directorate teams in supporting the core leadership process.

QI Fellows

- 3.6 The QI Fellowship programme is a twelve month programme designed to be repeated over the five years in line with the proposed QI Strategy. The first cohort of the QI Fellowship programme has now been implemented and successful candidates have been recruited from EOC, PTS, A&E, and 111, YAS Academy and the Quality and Safety team. The number of QI Fellows on the first year programme is eight.
- 3.7 The QI Fellowship is pivotal in gaining the support and confidence of the frontline teams and therefore the successful implementation of the QI Strategy and will effectively act as the ambassadors for the QI Strategy. The Fellows have completed their initial training and have now chosen small improvement projects to test and embed the methodology. The initial projects will be completed by the 18 June. The lessons learned and improvements gained will be shared amongst themselves and line managers on this date.
- 3.8 The next steps for the Fellows will be to start on their larger QI projects which will run for the majority of their time on the programme. This will be supported by the core QI team and a coach from the Improvement Academy.

Executive/Senior Management sponsorship for these projects will also be an important element of support for the Fellows and their colleagues seeking to implement improvements.

Future QI Capability

- 3.9 During the programme the fellows will progressively build on their QI knowledge and experience through a series of master classes. Towards the end of their Fellowship a train the trainer package in QI will be completed. The ability to deliver QI education internally will allow the Trust to build the capacity in QI. The development of this capability will allow 'spread' amongst the wider teams. The Fellows will form part of a faculty with the experience of delivering QI projects within YAS and possess the theoretical knowledge to be able act as a mentor/local expert in QI. This expertise will be utilised Trust wide moving the QI agenda forward by encouraging current and previous Fellows to deliver internal QI training across the Trust.

Engagement

- 3.10 Alongside their improvement activities, the fellows have been spending time engaging with the wider teams from across the Trust. As part of this engagement work they will also be undertaking a series of road shows across the region from June to October 2018 engaging with as many staff as possible throughout the Trust. The aim of these engagement events is to ensure that as many colleagues as possible become aware of the QI agenda and are encouraged to contribute.
- 3.11 In addition to engagement of staff, work is under way to ensure that the Critical Friends Network is fully involved in the QI strategy and enabled to provide patient and carer input to QI ideas and projects.

QI Community

- 3.12 It is hoped the early engagement work will encourage staff to become involved in a wider 'QI Community', and the intention is to continue to grow this as a form of social movement, supported by the use of social media to share information and ideas and to celebrate successes. The encouragement and development of this community will empower teams and individuals to contribute and feel part of the QI movement. The implementation of the community will help embed a culture of innovation and continuous improvement.
- 3.13 Over the last year the Bright Ideas scheme has increased in profile and there has been a steady stream of new ideas from staff, with notable successes in implementation of improvements shared with staff via the Trust newsletters. This will remain a key element of the staff engagement process.
- 3.14 During 2018/19 the intention is to continue to raise the profile of QI through development of a more formal in-year process for recognition of ideas and improvements, and also to build this in as an integral component of the annual Trust awards ceremony.

4. PROPOSALS/NEXT STEPS

- 4.1 The core QI team and QI Fellows will continue with the building of the capacity in QI through the fellowship scheme and wider engagement. All teams will be encouraged to become involved with the wider 'QI Community' and be offered the support and expertise to be able to make improvements in their own areas. Improvement projects will be identified and widely disseminated. Work will commence during 2018/19 to recruit a second wave of Fellows for the following year.
- 4.2 There will be further face to face engagement through roadshows, complemented by development of social media and intranet to underpin the development of the QI Community.
- 4.3 Work will be taken forward with the Education and Training team to build QI into the initial induction programme for new starters within the Trust, and to ensure that leadership and educational programmes have QI built into them moving forward. Discussion will also progress with the HR team on the introduction of a QI element to all future job descriptions within the Trust.
- 4.4 The QI team will work with the Leadership and OD and Communications teams to develop systems for recognition of successful ideas and improvements including annual awards which celebrate the successes in the QI programme.

5. RISK ASSESSMENT

- 5.1 The key risk to implementation relates to the overall capacity of the organisation to deliver its core functions and the extensive change programme set out in its strategy. This has been identified as a key workstream in the wider Trust service transformation programme.
- 5.2 Resources have been allocated this year to support the initial cohort of Fellows and external partnership. Investment will need to be maintained over the life of the strategy to ensure continued progress, and specific requirements will be identified annually as part of the business planning and budget setting process.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Board:
 - Notes and is assured by the progress to-date
 - Supports the next steps in implementation as outlined

7. APPENDICES/BACKGROUND INFORMATION

- 7.1 Appendix 1 – Final Draft Quality Improvement Strategy 2018-2022
- 7.2 Appendix 2 – Quality Improvement Strategy Implementation Plan 2018/19