

TRUST BOARD IN PUBLIC		Date: 22 December 2016	
		Agenda Item: 4.5	
REPORT TITLE:		SASH+ (in partnership with the Virginia Mason Institute) update	
EXECUTIVE SPONSOR:		Michael Wilson Chief Executive	
REPORT AUTHOR (s):		Sue Jenkins Director of Strategy & KPO Lead	
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)		Executive Committee	
Action Required:			
Approval ()	Discussion ()	Assurance (√)	
Purpose of Report:			
This report provides the Board with assurance that the SaSH + work (in partnership with Virginia Mason) is progressing to plan.			
Summary of key issues			
<p>This paper provides the Trust Board with an update on progress since September 2016 including details about:-</p> <ul style="list-style-type: none"> • each of the value streams • training and development • stakeholder engagement 			
Recommendation:			
The Board is asked to consider this report and ensure that it provides assurance around delivery of the SaSH + work (in partnership with Virginia Mason).			
Relationship to Trust Strategic Objectives & Assurance Framework:			
<p>SO1: Safe -Deliver safe services and be in the top 20% against our peers SO2: Effective - Deliver effective and sustainable clinical services within the local health economy SO3: Caring – Ensure patients are cared for and feel cared about SO4: Responsive – Become the secondary care provider and employer of choice our catchment population SO5: Well led: Become an employer of choice and deliver financial and clinical sustainability around a clinical leadership model</p>			

Corporate Impact Assessment:	
Legal and regulatory implications	The Trust has a contractual commitment to participate fully in this programme for a five year period
Financial implications	The programme is being centrally funded by NHS Improvement (NHSI) and the Department of Health. The programme is expected to achieve improvements in quality, performance and efficiency over the next five years
Patient Experience/Engagement	Patients will be involved in value stream work wherever possible
Risk & Performance Management	A Trust Guiding Team has been established to oversee this work. This group reports to a national Trust Guiding Board
NHS Constitution/Equality & Diversity/Communication	A national communications plan is being delivered to support the work and internally communications is being rolled out across the organisation
Attachment:	
SaSH + update	

TRUST BOARD REPORT –22 December 2016**SASH+ update – working in partnership with the Virginia Mason Institute****1. Introduction**

1.1 The Board receives regular updates relating to the Trust's SASH+ work.

1.2 This paper provides the Trust Board with an update on progress since July 2016 including details about:-

- each of the value streams
- training and development
- stakeholder engagement
- culture indicators and evaluation

2. Value stream updates

2.1 The Trust has identified three value streams which will be the initial focus of improvement work.

2.2 They are:-

- Inpatient flow – cardiology
- Outpatients
- Management of diarrhoea

2.2.1 Seven rapid process improvement workshops (RPIWs) across the three value streams have now been completed. Two in cardiology, two in management of diarrhoea and three in outpatients.

2.2.2 The emerging results for the value streams are as follows:-

Cardiology

2.2.3 FFT scores for cardiology patients maintained at 100%

2.2.4 Cardiology patients knowing EDD prior to date of discharge has improved from 50% to 88%

Outpatients

2.2.5 Time from the patient arriving at the hospital to the end of their consultation with the Breast Clinician reduced more than half from 52 mins to 25 mins

2.2.6 The number of breast patients seen after their allocated appointment time has reduced from 94% to 0%

2.2.7 Time from receipt of urgent ophthalmology referrals to date of first appointment has gone from 28 days and 3 hrs to 10 days (64% improvement)

2.2.8 Time from receipt of routine referrals to date of first appointment has improved from 107 days 18 hrs to 32 days (67% improvement)

2.2.9 Number of referral letters in the system waiting to be processed has reduced from 1331 to 296

2.2.10 The reduction of processing time for medical records to prepare clinic lists for the day from 41 minutes to 9 minutes (78% improvement)

Management of diarrhoea

2.2.11 Lead time reduced from 2 days and 9 hrs to 6 hrs which is 91% improvement

2.2.12 % of patients with differential diagnosis for diarrhoea has improved from 50% to 100%

2.2.13 Time spent by nurses gathering supplies for personal care has reduced from 7.5 mins to 1.5 mins

2.2.14 Distance walked by staff to collect linen from the main stores was 346 steps. It is now 0 steps.

2.2.15 The time taken from a documented differential diagnosis being made to the treatment plan being implemented has reduced from 29 hrs and 15 minutes to 30 minutes

2.2.16 The number of times a nurse is interrupted on a drug round has reduced from 25 times to zero

3 Training and development

3.1 In June the Trust launched the first module of its Lean for Leaders programme. This is an eight month development programme which consists of:

- Six taught days delivered in partnership by colleagues from the Virginia Mason Institute and our own Kaizen Promotion Office team
- On-site coaching and mentoring for all candidates
- An opportunity to apply the learning from the taught days to undertake marked improvement assignments in your own work areas
- Compulsory pre-reading of various books and articles

3.2 It is aimed at staff in key leadership roles and 35 candidates have progressed through the first four modules. In between each module the candidates apply the tools and techniques that they have learnt and start undertaking improvement in their own areas of work.

3.3 Lean for leaders is a key tipping point for building both capacity and capability of the tools, techniques and culture of improvement across the organisation.

3.4 VMI are co-teaching our first lean for leaders course and certifying our KPO lead to be able to deliver this course in the future.

3.5 The KPO and Trust Guiding Team are currently recruiting 40 more leaders to the Lean for Leaders cohort which will start in February 2017.

4 Stakeholder engagement

4.1 At the beginning of December both Roy Lilley, health commentator and Chris Wormold, permanent secretary for health visited the Trust to look at the impact and results of our SASH+ work. Both visitors met staff who have been involved in the value stream work as well as lean for leaders, they also saw for themselves some of the improvements that have been made. Both have fed back to the organisation very positively and Roy made particular reference to his visit as the main topic in his regular weekly blog.

“The key to the VM programme is that it provides the impetus, the fulcrum point and the levers for self managed improvement. The people I met fizzed with enthusiasm and told genuine stories of how they are enabled and empowered to move forward.”

4.2 A national stakeholder e-newsletter has been released and can be viewed here <http://releasd.com/0c18>. The content includes articles and videos from across the five partnership trusts and has a SASH video feature on our Trust Guiding Team.

4.3 The stakeholder engagement plan aims to encourage an interest in the partnership, the transformation work and outcomes as part of a broader aim to create greater awareness and understanding of the programme and the difference the developments make to the provision of high quality safe care for patients

5 Recommendation

6.1 The Board is asked to consider this report and ensure that it provides assurance around delivery of the SaSH + work

Sue Jenkins
Director of Strategy & Kaizen Promotion Office (KPO) Lead
December 2016