DELIVERING OUR POTENTIAL: IMPROVEMENT PLAN UPDATE

Sarah Tedford
Chief Operating Officer

Barking & Dagenham Health and Adult Social Services Committee

13 April 2016
Targeted programme of service improvement

30 ‘new’ must do actions
5 ‘previous’ must do actions
24 ‘should do’ actions
GGI quality and safety systems recommendations
## PROGRESS AGAINST OUR ‘MUST DO’ ACTIONS

<table>
<thead>
<tr>
<th>Status</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>24 actions delivered and evidence</td>
<td>24</td>
</tr>
<tr>
<td>2 action delivered – awaiting evidence</td>
<td>2</td>
</tr>
<tr>
<td>9 actions on track</td>
<td>9</td>
</tr>
<tr>
<td>0 actions off track</td>
<td>0</td>
</tr>
</tbody>
</table>
EXECUTIVE SPONSORS – ‘MUST DO’ ACTIONS

<table>
<thead>
<tr>
<th>Must Do</th>
<th>Executive lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED Senior Recruitment</td>
<td>Steve Russell, Deputy Chief Executive</td>
</tr>
<tr>
<td>Diagnostics</td>
<td>Nadeem Moghal, Medical Director</td>
</tr>
<tr>
<td>Outpatients (excluding Referral to Treatment)</td>
<td>Kathryn Halford, Chief Nurse</td>
</tr>
<tr>
<td>Children and Young People</td>
<td>Deborah Tarrant, Director of People and Organisational Development</td>
</tr>
</tbody>
</table>

- Increased executive support
- Intensive project management
- Further layer of assurance of improvements
- Weekly progress review
RECENT KEY HIGHLIGHTS

December highlights

SAFE
Patient risk assessments are regularly being carried out and we're consistently performing above the 80% target.

EFFECTIVE
We have signed 80% of our "must do" actions set by CQC within the Effective domain.

CARING
A team of Feeding Buddies are now working with nurses to provide support to patients with dementia.

RESPONSIVE
A new system ensures that all babies born in our hospitals are discharged with their NHS number.

WELL LED
Weekly Patient Safety Summits are now taking place at both Queen's and King George hospitals.

January highlights

SAFE
We were 100% complaint in meeting Duty of Candour standards in January.

EFFECTIVE
Speech and language therapists are working with patients who have received a tracheotomy.

CARING
Our patient's dignity is being maintained thanks to new privacy gowns.

RESPONSIVE
Our radiology department saw 87% of urgent referral patients within two weeks.

WELL LED
Our fifth Patient Safety Memo has been launched, focusing on patient records.
Monthly audits show our Trust has been consistently performing above target for its NEWS score calculation and compliance with a consistent upward trajectory.

Average NEWS Score Compliance

<table>
<thead>
<tr>
<th>Month</th>
<th>Average Trust Score</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov</td>
<td>93%</td>
<td>80%</td>
</tr>
<tr>
<td>Dec</td>
<td>95%</td>
<td>80%</td>
</tr>
<tr>
<td>Jan</td>
<td>96%</td>
<td>80%</td>
</tr>
</tbody>
</table>

Compliance Percentage

- Nov: 93%
- Dec: 95%
- Jan: 96%

Target: 80%
Dementia screening compliance has been consistently above the 90% target, with January seeing 99.9% of compliance Trust-wide.
IMPROVEMENT WALKS

Purpose:
• Review, test, rectify and provide immediate feedback on compliance with Trust policy and Care Quality Commission (CQC) domains

Focus:
• Record storage and information governance
• Medicines management
• Equipment and environment
• Infection control
• Patient feedback and experience
• Staff behaviours – PRIDE

Plus:
• Now increased CQC focus
• Introduced twilight walks to triangulate progress with staff and patients and provide executive and senior management support in resolving local issues
HOW ARE WE DOING?

There has been much progress since walks launched, including:

- Estates issues resolved
- Closed fire doors
- Increased patient confidentiality compliance
- Locked medicines cabinets and fridges
- Increased Control of Substances Hazardous to Health (COSHH) storage compliance
BEFORE...
...AND AFTER
<table>
<thead>
<tr>
<th>Number of actions delivered at end February</th>
<th>BRAG</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Completed and evidenced</td>
</tr>
<tr>
<td>3</td>
<td>Delivered – awaiting evidence</td>
</tr>
<tr>
<td>3</td>
<td>Action on track</td>
</tr>
<tr>
<td>3</td>
<td>Action off track</td>
</tr>
</tbody>
</table>