

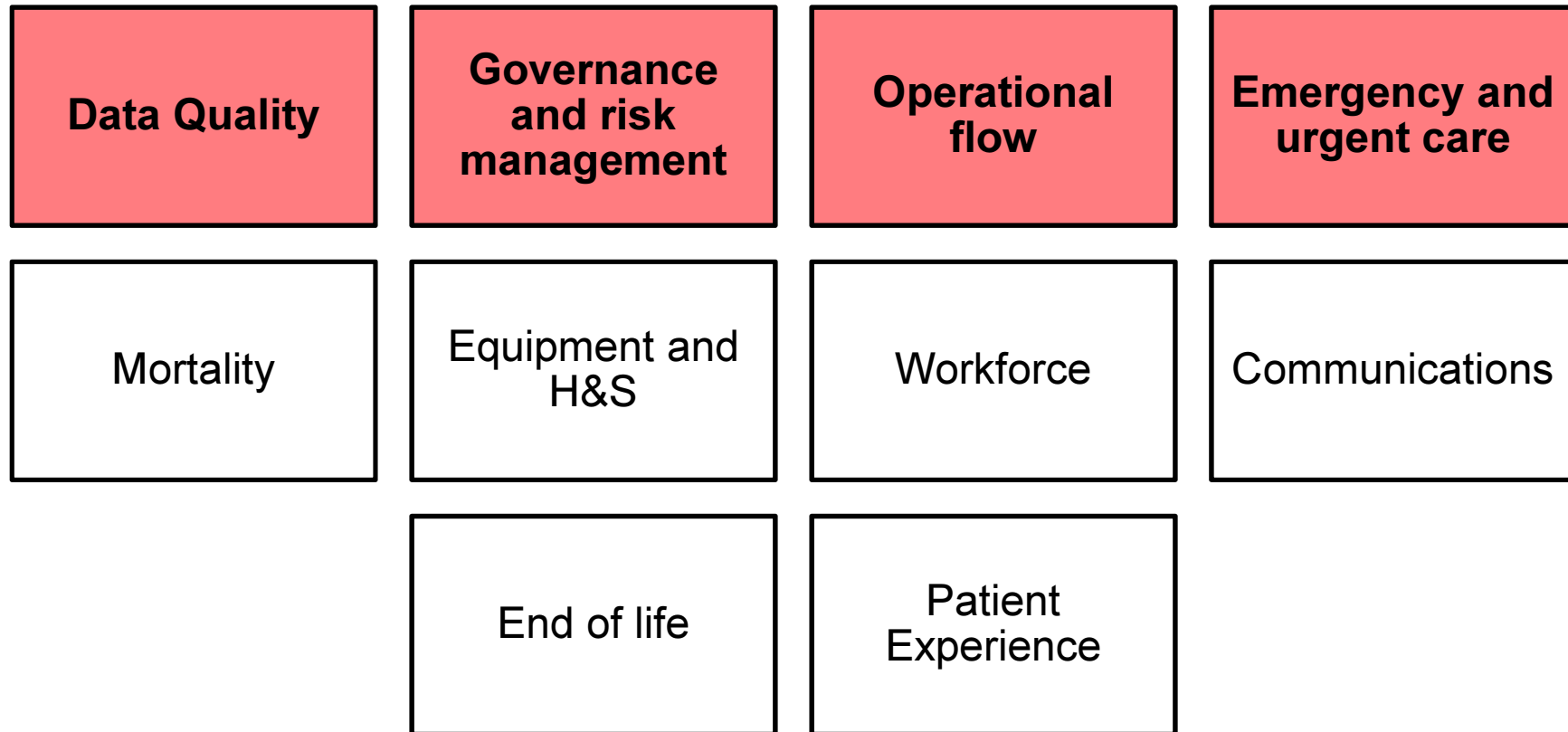
Quality Summit

4 July 2014

The Quality Report

- Accept the findings
- Recognised as an opportunity to reset our improvement journey
- Consistent with our journey and experiences so far
- Increased organisational maturity and ‘self awareness’
- But recognise there are still significant gaps
- Need to build confidence with patients, staff and our partners

Quality Report themes



Actions already taken

Data Quality

Commissioned PwC to review
ED, RTT and Cancer data

Strategic review of the Patient
Administration System (with
UHB)

UHB work stream on data quality
and governance

Governance and risk management

Commissioned a review of
governance and risk
management

Reviewed our Datix incident
process

Revised governance and risk
management structure agreed

UHB work stream on governance
and risk management

Operational flow

Clinical site team proposal
developed - position within a
division

IDT increased establishment and
functionality

Enhanced interim AMU identified
and operational early August

Emergency and urgent care

New ED Consultant appointed

New ED Consultant (clinical
Lead) appointed

Business case for the
redevelopment approved

Additional senior nursing support
being recruited

Associate Director of Operations
commenced in post

Additional ECIST support
commissioned

Operational review of STAR

Next step actions

Data Quality

Map performance and quality data flows

Review divisional and Board reporting quality

Develop and implement consistent data standards and SOPs

Implement recommendations from the UHB diagnostic assessment

Implement recommendations from PwC

Complete PAS review and develop a critical path for delivery

Governance and risk management

Implement revised corporate and divisional governance structure

Implement recommendations from the UHB diagnostic assessment

Complete QGAF actions

Revise and implement the risk management strategy

Operational flow

Fully operationalise an increased AMU

Agree and implement admission alternatives with partners

Implement revised clinical site management

Implement the 6-4-2 theatre planning process

Review CEPD activity planning

Emergency and urgent care

Implement Internal Professional Standards and address any blocks

Undertake a strategic review of 24/7 children's A&E services

Implement the full emergency flow action plan with support from ECIST

Right size workforce and leadership across the pathway

Continue and complete reconfiguration

Review and implement new location for STAR

Incremental gains in 13/14

Safe

ED business case

Improved incident reporting

Better Care Together Inspections

Safety huddles

RM/RN staffing

Cultural shift

Caring

FFT insight

Health Watch Medway

Car parking

Schwartz Rounds

WoW awards

Responsive

Integrated Discharge Team

Admission and Discharge Lounge

24/7 Mental Health Liaison

Effective

Improvements in crude mortality

Improvements in Enhanced Recovery

Improvements through Enhancing Quality

Management of the deteriorating patient

Ambulatory pathways established

Well led

Acting CEO

Refreshed Board

New divisions

Strengthening clinical leadership

Improved external relationships

External support from UHB

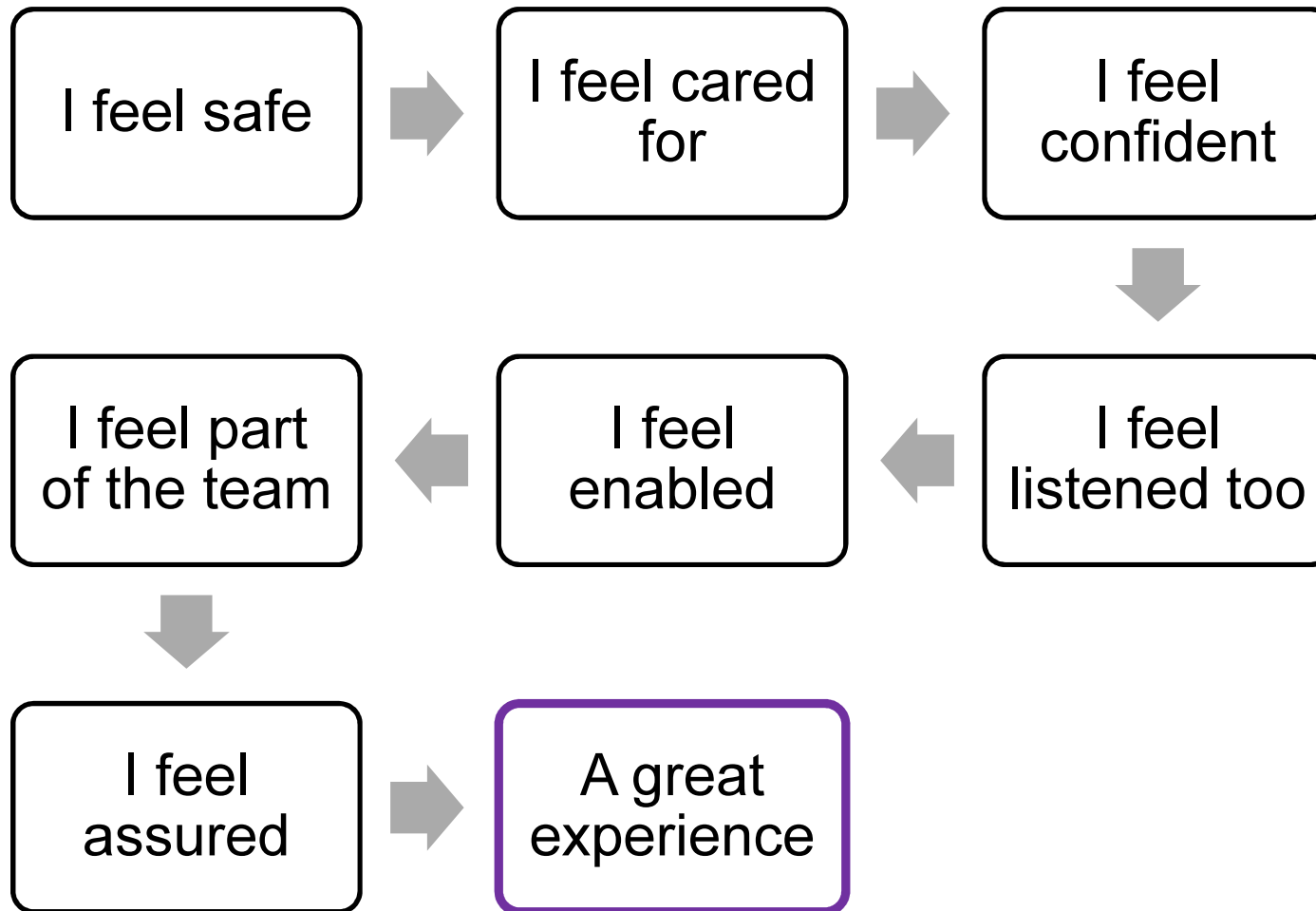
Challenges

- External high challenge
- Continued governance, data, operational flow and affordability concerns
- Recruiting and retaining staff
- Improving in the context of chronic capital underinvestment
- Balancing finance, safe staffing, operations and quality
- Making 7 day discharges a reality
- What don't we know? What haven't we found?

What does good look like?

- Right patient, right bed – first time
- Consistent delivery of basic standards
- Better patient experience (FFT)
- Better staff experience (FFT)
- Delivery of access standards i.e. ED
- System confidence
- Lower tolerance
- No surprises

For patients and staff



How we will deliver

- Overarching improvement plan – supported corporately but owned by our divisions
- Prioritising flow and emergency care, governance and data quality
- Accountability to our regulators, but importantly to our communities and patients
- Right sized workforce
- A mature ‘system’
- Able divisional leadership teams