



Title of Paper: <u>Progress Report: Quality4All Strategic Priorities</u>		
<u>For Approval</u> A document requiring Board Members majority decision prior to implementation or action.	<u>For Discussion</u> A document requiring Board Members consideration and debate.	<u>For Noting</u> A document that contains information regarding issues of which requiring Board Members should be made aware.

1.0 Background

Work continues on the Domiciliary Care, Unallocated Cases in Childrens and Unscheduled Care improvement priorities.

2.0 Key Issues

Please find below details on progress made since the Trust Board meeting held on 28 June 2023:

- **Domiciliary Care**

Following the ECO System Mapping exercise, the Project Senior Sponsor has created an Operational Change Manager post for one year. This post has been appointed and Pamela Fillis will commence as Project Lead on 16 August 2023. Pamela will be embedded in the Quality Team as part of a fellowship to train them in design thinking and change management techniques. The Patient Survey has been completed with analysis now being conducted. It is envisaged the learning will be embedded in co-design of the improvement projects.

The Improvement Advisor working with the Domiciliary Care team has started working with the Planning, Performance & Informatics team to establish the structure and conditions for creating a Service User panel which will influence the improvement and establish co-production across all the re-modernisation initiatives. In parallel, the digital modernisation of Domiciliary Care allocation continues to increase capacity of provision. The Project Team is establishing a Data Group to quantify the impact of the improvement so far and establish baseline data for the next improvement stages.

- **Unscheduled Care**

UHD - Care of Elderly – Length of Stay on Ward

The driver diagram developed from work to date highlights the need for incremental and transformational change.

Incremental - tests of change in relation to efficiency of ward rounds and subsequent preparation for discharge processes continue. There are indications the ward profile may have changed due to changes elsewhere in the system. This

relates to complexity of patients/LOS and is being explored. This will influence opportunities for further change.

Transformation – Frailty Management is being explored within the wider system.

Downe Hospital – Access - Right Person, Right Place, Right Time

Process mapping of the current operational status of the Rapid Assessment Centre commenced on 8 June 2023 and considered the current process and challenges therein. The second stage of the mapping on the 22 June 2023 considered potential solutions to challenges. Some initial findings involve the need to clarify the purpose of RAC, develop a better understanding of the types of patients using RAC, rethink the location of RAC for more efficient and effective use, how RAC interfaces with other services and getting rid of wastes such as duplication, overworking within the current processes. These will be given further consideration across the next eight weeks.

Unscheduled Care Eco System Mapping

Tom Inns (system designer) commenced work with the Unscheduled Care Task and Finish group on 19 June 2023 to Eco Map and understand the system. In doing so, this initiative will focus the strategic improvement effort. Eco Mapping workshops ran in the weeks commencing 17 & 24 July 2023 with a wide range of stakeholders including HSC and non HSC partners.

- **Unallocated Cases in Children**

The CUP Project Group will work with Southern Trust, who have been developing another aspect of this work, to develop a melded model for further testing as part of the HSCQI Scale /TASC 2 work. This will involve a wider use of the tool within the Trust as well as the development of the Family Support Service which is instrumental to the success of this model.

3.0 Resources Implications (inc Organisational, Financial, Human Resources)

This is an ongoing project which involves focusing resources on agreed key QI Strategic Priorities.

4.0 Impact on Safety, Quality and Experience (SQE)

Implementation of key actions in support of delivering our QI Strategic Priorities will deliver improved SQE outcomes.

5.0 Key Risks and Proposals to Mitigate

Not applicable.

Lead Director: Clare-Marie Dickson, Director of Primary Care & Older People's Services

Date: 30 August 2023