

## Quality Account 2022-2023

Health Scrutiny Panel – 21st September 2023



### Introduction



- The Royal Wolverhampton NHS Trust (RWT) welcomes the opportunity to be transparent and able to demonstrate how we are performing, considering the views of service users, carers, staff and the public. We use this information to make decisions about our services and to identify areas for improvement.
- This Quality Account provides information on progress against the 2022/23 agreed key priorities, which include patient safety, clinical effectiveness and patient experience, and sets out priorities and plans for the upcoming year.
- During 2022/23, The Trust continued to further progress its strategic collaboration with Walsall Healthcare NHS Trust (WHT) and as part of the wider Black Country acute provider collaboration arrangements, with the aim of ensuring that our patients and the diverse communities we serve, experience the best possible care, and are supported to achieve improved health outcomes.
- To set out the strategic vision for RWT and WHT, a joint Trust strategy was launched. The strategy focuses on 4 Cs, which include: Care excel in the delivery of care; Colleagues support our colleagues; Collaboration effective collaboration; Communities improve the health and wellbeing of our communities.



### Key points

- Despite the challenges associated with the Covid-19 pandemic and its wider reaching and long-term impact, the Trust has either achieved or made good progress with the objectives set out in the 2022/23 Quality Account.
- The Quality Account objectives for 2023/24 have been set based on the priorities of the joint Trust strategy and key enabling strategies such as, the Quality and Safety Enabling Strategy and Patient Experience Enabling Strategy.
- We recognise, and have plans in place, to drive further improvements in the critical areas such as, Infection Prevention, diagnostics, cancer performance, Referral to Treatment, improvements in staff satisfaction and retention.
- The Quality Account will be presented to Annual General Meeting in the autumn of 2023.

### Quality Priorities - Looking Back 2022/23



#### **Patient Safety**

PS 1 - Covid-19 – minimising impact

PS2 - Reduce harm by assessing, recognising, and responding to minimise patient deterioration

PS3 - Promote equality out of outcomes by routinely reporting user outcomes (reducing health inequalities)

PS 4 - We will aim to improve mental health care and treatment for all ages

PS 5 - We aim to review our services, working with our partners to deliver a flexible service to meet the needs of mental health patients

PS 6 - As a registered provider of mental health, we aim to adhere to the legislation within the Mental Health Act 1983 and to ensure all patients are treated in a person-centred way

PS 7 - We aim to support and deliver excellent care for some of our most vulnerable patients and their carers, including children and those living with a learning disability, mental health issues or dementia

PS 8 - We aim to deliver parity of esteem by having embedded mental health services and skills across the workforce

# Clinical Effectiveness

CE 1 - (Nurses and Midwives) - To ensure we improve and continue to have an appropriate workforce to support clinical effectiveness, patient safety and a positive patient experience

CE 1 - (AHPs) - To ensure we improve and continue to have an appropriate workforce to support clinical effectiveness, patient safety and a positive patient experience

CE 1 - (Medical workforce) - To ensure we improve and continue to have an appropriate workforce to support clinical effectiveness, patient safety and a positive patient experience

CE 2 - To continue with our multiprofessional Clinical Services Framework (CSF) to further enhance our ability to work as integrated teams and support our patient needs

### The Royal Wolverhampton

#### **Patient Experience**

PE 1 - To maintain and improve patient engagement and to continue to place patient engagement and involvement at the heart of decision making, driving forward improvements in delivery of care

PE 2 - To continue to improve complaints responses to patients and ensure learning is identified and areas are provided with e-learning

PE 3 - To build on the success of volunteer services

PE 4 - Patient access waiting times: A focus on waiting times to improve 62-day cancer performance, a reduction in long waiting patients (+78 weeks) and elimination of 104 week waits



### **The Royal Wolverhampton**

**NHS Trust** 

## Quality Priorities – Patient Safety



Looking forward 2023/24

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Priority 1 - Patient Safety	
Embed a culture of learning and continuous	Key actions we will take:
improvement at all levels of the organisation.	Transition to the Patient Safety Incident Response Framework (PSIRF)
	Transition to Learn from Patient Safety Events (LfPSE)
Priority area - Patient safety	Increase uptake of Level 2 syllabus training
	The aim for 2023/24
	Transition to PSIRF achieved by the national deadline
	100% of incidents uploaded to LfPSE by the national deadline
Deliver safe and responsive urgent and	Key actions we will take:
emergency care in the community and in hospital.	Working with partners from across the system, we will support the flow of patients through UEC, by:
	<ul> <li>expanding and maintaining the use of same day emergency care (SDEC) services to avoid unnecessary hospital stay</li> </ul>
	<ul> <li>expanding virtual wards, allowing people to be safely monitored from the comfort of their own homes</li> </ul>
Priority area -	<ul> <li>working with partners to speed up discharge from hospital and reduce the number of patients without criteria to</li> </ul>
Urgent and emergency care and patient flow	reside
	The aim for 2023/24
	Year on year improvement in the percentage of patients seen within four hours in A&E
	Reduce adult general and acute bed occupancy to 92%
	Consistently meet the 70% two-hour urgent community response time
Embed a culture of learning and continuous improvement at all levels of the organisation.  Priority area - Quality improvement	Key actions we will take:
	<ul> <li>Produce a gap analysis on how both trusts (RWT/WHT) rank against the four components of a quality management system (quality planning, quality control, quality improvement and quality assurance), and review how we triangulate data to understand priorities</li> </ul>
	<ul> <li>All members of divisional and care group/directorate leadership teams to attend one day quality service improvement and redesign fundamentals (sessions scheduled from January 2023)</li> </ul>
	<ul> <li>Year-on-year roll-out plan for QI huddle boards across both trusts to targeted areas e.g., low evidence of improvement work, non-clinical areas</li> </ul>
	The aim for 2023/24
	Completed gap analysis by end of 2023/24
	Increase in the number of staff trained following triumvirate training
	Introduction of 10 QI huddle boards per site/annum



### Quality Priorities – Clinical Effectiveness

Looking forward 2023/24



The right workforce with the right skills,	Key actions we will take:
in the right place at the right time	Recruit and retain staff using targeted interventions for different career stages
	Improve retention using bundles of recommended high impact actions
Priority area - Our people	<ul> <li>Develop and deliver the workforce required to deliver multidisciplinary care closer to home, including supporting the rollout of virt wards and discharge to assess models</li> </ul>
	The aim for 2023/24
	To improve staff turnover by the end of 2023/24
Prioritise the treatment of cancer	Key actions we will take:
patients, focusing on improving outcomes for those diagnosed with the disease	<ul> <li>Maintain focus on operational performance, prioritising capacity for cancer patients to support the reduction in patients waiting over 62 days</li> </ul>
	<ul> <li>Increase and prioritise diagnostic and treatment capacity for suspected cancer, including prioritising new community diagnostic centre capacity</li> </ul>
Priority area - Cancer treatment	Implement priority pathway changes for lower gastrointestinal (GI), skin, and prostate cancer
	The aim for 2023/24
	<ul> <li>Reduction in the number of patients waiting more than 62 days for treatment, and meeting the cancer faster diagnosis standard by March 2024</li> </ul>
	75% of patients who have been urgently referred by their GP for suspected cancer are diagnosed, or have cancer ruled out, within days
Deliver the priorities of the National	Key actions we will take.
Elective Care Strategy	Deliver an increase in capacity through the community diagnostic centre and theatre expansion programme
	Transform the delivery of outpatient services with the aim of avoiding unnecessary travel and stress for patients
Priority area - National Elective Care Strategy	Increase productivity using the GIRFT (Getting it Right First Time) programme and improving theatre productivity
	The aim for 2023/24
	Eliminate waits of over 65 weeks by the end of 2023/24
	Meet the 85% theatre utilisation expectation
Review of GIRFT <sup>i</sup> and Model health system data <sup>ii</sup>	Key actions we will take.
	Review model health system and Getting It Right First Time (GIRFT) data to guide relevant aspects of activity, quality, and safety

i Getting It Right First Time (GIRFT) is a national programme designed to improve the treatment and care of patients through in-depth review of services, benchmarking, and presenting a data-driven evidence base to support change.

ii The Model Health System is a data-driven improvement tool that enables NHS health systems and trusts to benchmark quality and productivity.



### Quality Priorities – Patient Experience



Looking forward 2023/24

#### **Priority 3 - Patient Experience**

Embed a culture of learning and continuous improvement at all levels of the organisation.

#### Priority area - Patient involvement

#### Key actions we will take:

The key priorities are outlined within the joint Patient Experience Enabling Strategy (2022-2025). These
include:

#### Pillar one - Involvement

We will involve patients and families in decisions about their treatment, care, and discharge plans.

#### Pillar two - Engagement

 We will develop our Patient Partner programme and use patient input to inform service change and improvements across the organisation

#### Pillar three - Experience

We will support our staff to develop a culture of learning to improve care and experience for every patient.

Within the Quality and Safety Enabling Strategy there are also several priority areas identified under the overarching theme of "fundamentals", which are based on internal and external priorities. The Trust will also be expected to deliver on the specific objectives linked to the strategy under this section. [INSERT LINK TO STRATEGY]

#### Fundamentals - based on internal and external priorities:

- Priority Area Prevention and management of patient deterioration
- Priority Area Timely sepsis recognition and treatment
- Priority Area Medicines management
- Priority Area Adult and children safeguarding
- Priority Area Infection prevention and control
- Priority Area Eat, Drink, Dress, Move to Improve
- Priority Area Patient discharge
- Priority Area Maternity and neonates
- Priority Area Mental health
- Priority Area Digitalisation

The Quality and Safety Enabling Strategy also includes the following priority area, which is part of the "Care" strategic aim of the Trust Strategy:

Deliver financial sustainability by focusing investment on the areas that will have the biggest impact on our communities and populations.

Priority Area - Financial sustainability

This will focus on ensuring that we best use the finite resources available to us, which include (but are not limited to) people, physical capacity and finances, as well as maximising opportunities offered through collaborative working between RWT and WHT.



## Thank you and questions