



### **Council of Governors - Cover Sheet**

Subject:		15 Steps Challenge Update			Date: 14th November 2023		
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Purpose							
This report provides a summary of the visits undertaken as part of Approval							
the 15 Steps Challenge from July to September 2023.					Assurance		
					Update	X	
					Consider		
Strategic Objectives							
Provide		Improve health	Empower and	То	Sustainable	Work	
outstanding		and well-being	support our	continuously	use of	collaboratively	
care in the		within our	people to be the	learn and	resources and	with partners in	
best place at		communities	best they can be	improve	estate	the community	
the right time							
<b>.</b> .				X			
Principal Risk							
PR1		ant deterioration in standards of safety and care					
PR2		that overwhelms capacity					
PR3	Critical shortage of workforce capacity and capability						
PR4		Failure to achieve the Trust's financial strategy					
PR5	Inability to initiate and implement evidence-based Improvement and innovation x						
PR6		king more closely with local health and care partners does not fully deliver equired benefits					
PR7							
PR8		Major disruptive incident  Egilure to deliver sustainable reductions in the Trust's impact on climate					
FKO	R8 Failure to deliver sustainable reductions in the Trust's impact on climate change						
Committees/groups where this item has been presented before							
Quality Committee							
addity Committee							
Acronyms							
Kolonymo							

# **Executive Summary**

The purpose of this paper is to update the Council of Governors on the 15 Steps Challenge visits, that have taken place from July to September 2023. This paper will detail the clinical areas visited, the feedback identified by the visiting teams, and any themes within these.

The importance of the 15 Steps Challenge is to provide a valuable source of qualitative information that aligns patient and staff experience to promote a positive experience for all and to encourage staff to initiate local service improvement.

During the reporting period from July to September 2023, there were a total of 19 visits confirmed as undertaken, with reports completed and returned.

The programme of visits continues to endorse engagement and visibility of the Senior Leadership Team and Governor representation. The Governor makes a unique contribution to the 15-step process as they seek to capture real-time honest patient feedback. The outcomes of the visits continue to be positive with many examples of person-centred, compassionate care, pride and positivity, and a strong sense of CARE values being demonstrated across the organisation.

# Healthier Communities, Outstanding Care



### Introduction

The purpose of this paper is to update the Council of Governors on the 15 Steps Challenge visits that have taken place between July and September 2023. This paper details the clinical and non-clinical areas visited, the feedback identified by the visiting teams, and any themes or trends noted.

It is important to acknowledge that the 15 Steps process is not a tool for traditional clinical auditing assurance, the 15 Steps Challenge is to provide a valuable source of qualitative information that aligns patient and staff experience, to promote a positive experience for all, whilst encouraging staff to initiate local service improvement.

During the reporting period, there was a total of 19 visits confirmed, with completed reports returned, visit areas were as follows:

### July visits:

- Oakham Ward
- ➤ Ward 32
- Sconce Ward
- Ward 25
- Ward 52
- Patient Experience

### **August Visits:**

- Same Day Emergency Care, (SDEC)
- New Theatre Newark
- Minster Ward
- Clinics 9 & 10
- Radiology
- ➤ Therapies Clinic 2
- ➤ Therapies Clinic 10
- Welcome Treatment Centre

### September Visits:

- Sexual Health
- ➤ Short Stay Unit, (SSU)
- Intensive Critical Care Unit, (ICCU)
- Day Case
- Case Notes

When analysing the qualitative data, themes, and trends can clearly be seen throughout all visits and are of a positive nature, below are examples of the feedback received.

# Welcoming:

- All areas noted to be welcoming and happy to engage with the teams.
- The staff were friendly, very welcoming, and keen to share the good news of a colleague who had just passed her OSCE Exams.

# Healthier Communities, Outstanding Care



- All staff greeted all visitors with a "hello".
- A lovely ward mission statement was identified at the entrance of one ward and a detailed dementia information board was displayed.

# Caring and Involving:

- All the team engaged with the doctor who was very friendly. The doctor stated that he enjoyed working on that particular ward.
- Good feedback was received from a patient.
- The Ward Sister was engaged in caring activity on the ward.
- Staff were walking with patients up and down the corridor.
- An end-of-life (EOL), patient was being cared for in a cubical, so privacy was supported but enabling the patient's relatives to be present outside visiting hours.
- ➤ A Clinical Governance Board was identified as a great communication/ education aid highlighting information such as top 3 Datix reports/ top 3 risks for area, incidents, and number of falls.
- Great to see staff achievements and feedback.
- Patients were complimentary about the staff that had been involved in their care and had no complaints.
- PALS information was clearly visible.

### Safe:

- ➤ Good discussion about the new theatre at Newark, and the increase in activity from the surgical division.
- Ward maintenance was noted to be good.
- Observed appropriate IPC practice from the clinical team with patients.
- Wards were noted to be clean, and uncluttered.
- Doctors and Nurses, HCAS and Housekeepers and Receptionists working well together.

# Well organised and calm:

- All areas were noted to be clean, calm, and well organised.
- There is clear signage on all doors to cubicles, bays, and toilets/bathrooms.
- Aligns with Trust uniform policy and IPC expectations.

### Issues identified during the visits:

The majority of actions identified during the visits were addressed at the point of contact, seeing immediate action being taken, where appropriate, with assurance given that where required communication would be shared with the wider team, to prevent similar occurrences. These included:

- Inappropriate language used in ear shot of patients and visiting Governors. Not in line with trust values and behaviours, feedback was provided to the nurse in charge.
- Nursing notes were found on top of nurse bases on both sides, feedback to the nurse in charge, ensuring notes are stored in line with IG and confidentiality expectations.
- ➤ A patient disclosed that they didn't know how long they were waiting for a procedure, and that the Nurse had not communicated with them. Immediate action the nurse informed of the situation and went to the patient straight away to inform them of the plan.





Below is an indication of actions that require updates currently:

A Nurse in charge raised that she felt there should be a TV available because patients can be waiting for long periods in the unit. She was going to speak to the Charity and raise it with the Divisional Director of Nursing, for further discussion.

Staff commented that when they get busy, there are not enough chairs for patients, but this is restricted by the physical space, raised with the Divisional Director of Nursing.

#### Patient feedback:

Feedback received from patients and carers was positive during the visits, with a strong sense of compassion being seen throughout the conversations.

When triangulating this with the Friends and Family Test feedback, concerns, and compliments you can see below some of the positive words used to describe the Trust, staff and the care received.



### Visiting team's feedback:

The Trust CARE values and behaviours were reflected throughout the language used within all the reports and demonstrated an alignment with patient feedback.

Feedback was provided to area owners by the visiting teams if any issues were identified allowing them to act on this, improving as required, and sharing the positive findings.







# **Conclusion:**

The 15 Steps Challenge is a valuable source of qualitative information that aligns patient and staff experience to collectively promote a positive experience for all and support staff to initiate local service improvement. It is not to be used as a single process of quality measurement; the 15 Steps Challenge is used in conjunction with several clinical audits that support the triangulation of the delivery of quality care from a multifaceted approach.

The programme of visits also continues to endorse engagement and visibility of the Senior Leadership Team and Governor representation. The Governor's representation is a valuable element in the 15-step process as they provide a unique opportunity to capture real-time honest patient feedback. The outcomes of the visits continue to be overwhelmingly positive with many examples of person-centred compassionate care, pride and positivity, and a strong sense of CARE values being demonstrated across the organisation.

# **Next Steps:**

Moving forward visits will be planned through, December, January, February, March, and April, results will be analysed on a month-by-month basis, ensuring area owners have been made aware of any issues.