



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

Subject:		The first six months of the improvement faculty		Date: 14th November 2023			
Prepared By:		Jim Millns – Associate Director of Transformation					
Appro	oved By:	Claire Hinchley – Deputy Director of Strategy and Partnerships					
Prese	Presented By: David Ainsworth – Director of Strategy and Partnerships						
Purpo							
The purpose of this paper is to provide the Council of Governors with Approval							
an overview of the first six months of the Improvement Faculty, share Assurance						X	
initial outcomes of a national self-assessment on improvement, and <b>Update</b>						X	
provide a high-level summary of the emerging themes that will form Consider						Х	
the basis of the Trust's Continuous Quality Improvement Strategy.							
Strategic Objectives							
Provide		Improve health	Empower and	То	Sustainable	Work	
outstanding		and well-being	support our	continuously	use of	collaboratively	
	e 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 r	ight time						
	Χ	X	X	X			
Princ	X ipal Risk						
Princ PR1	X ipal Risk Significa	nt deterioration in	standards of safety				
Princ PR1 PR2	X ipal Risk Significa Demand	nt deterioration in that overwhelms	standards of safety capacity	and care			
Princ PR1 PR2 PR3	X ipal Risk Significar Demand Critical s	nt deterioration in that overwhelms hortage of workfo	standards of safety capacity rce capacity and ca	and care			
Princ PR1 PR2 PR3 PR4	X ipal Risk Significan Demand Critical s Failure to	nt deterioration in that overwhelms hortage of workfo a achieve the Trus	standards of safety capacity rce capacity and ca st's financial strateg	and care pability			
Princ PR1 PR2 PR3 PR4 PR5	X ipal Risk Significan Demand Critical s Failure to Inability t	nt deterioration in that overwhelms hortage of workfo a achieve the Trus o initiate and imp	standards of safety capacity rce capacity and ca st's financial strateg lement evidence-ba	and care pability y used Improvemen		X	
Princ PR1 PR2 PR3 PR4	X ipal Risk Significan Demand Critical si Failure to Inability t Working	nt deterioration in that overwhelms hortage of workfo achieve the Trus o initiate and impl more closely with	standards of safety capacity rce capacity and ca st's financial strateg	and care pability y used Improvemen		X	
Princ PR1 PR2 PR3 PR4 PR5 PR6	X ipal Risk Significan Demand Critical si Failure to Inability t Working the requi	nt deterioration in that overwhelms hortage of workfo achieve the Trus o initiate and impl more closely with red benefits	standards of safety capacity rce capacity and ca st's financial strateg lement evidence-ba	and care pability y used Improvemen		X	
Princ PR1 PR2 PR3 PR4 PR5 PR6	X ipal Risk Significan Demand Critical s Failure to Inability t Working the requi Major dis	nt deterioration in that overwhelms hortage of workfor achieve the Trusto initiate and implemore closely with red benefits	standards of safety capacity rce capacity and ca st's financial strateg lement evidence-ba local health and ca	r and care pability y used Improvementire partners does	not fully deliver	X	
Princ PR1 PR2 PR3 PR4 PR5 PR6	X ipal Risk Significan Demand Critical si Failure to Inability ti Working the requi Major dis Failure to	nt deterioration in that overwhelms hortage of workfor achieve the Trusto initiate and implemore closely with red benefits	standards of safety capacity rce capacity and ca st's financial strateg lement evidence-ba	r and care pability y used Improvementire partners does	not fully deliver	X	
Princ PR1 PR2 PR3 PR4 PR5 PR6	X Significant Demand Critical si Failure to Inability to Working the requi Major dis Failure to change	nt deterioration in that overwhelms hortage of workfo achieve the Trus o initiate and implemore closely with red benefits truptive incident o deliver sustainal	standards of safety capacity rce capacity and cast's financial strategoriement evidence-ballocal health and castle reductions in the	y and care pability y sed Improvemen are partners does e Trust's impact o	not fully deliver	X	
Princ PR1 PR2 PR3 PR4 PR5 PR6 PR7 PR8	X Significant Demand Critical single for the requion Major distributes/grownittees/growning  X Significant Demand Critical single Failure to change Tittees/grownittees/growning  Significant Signific	nt deterioration in that overwhelms hortage of workfo achieve the Trus o initiate and implemore closely with red benefits truptive incident o deliver sustainal	standards of safety capacity rce capacity and ca st's financial strateg lement evidence-ba local health and ca	y and care pability y sed Improvemen are partners does e Trust's impact o	not fully deliver	X	

## **Improvement Advisory Group**

# **Acronyms**

QSIR = Quality, Service Improvement and Redesign

QI = Quality Improvement

OD = Organisational Development

PDSA = Plan, Do, Study, Act

CFO = Chief Finance Officer

TMT = Trust Management Team

CoG = Council of Governors

SLT = Senior Leadership Team

## **Executive Summary**

- 1. <u>Overview</u>
- 1.1 The purpose of this paper is to provide the Council of Governors with an update on the development and delivery of the Sherwood Forest Hospitals Improvement Faculty (herein referred to as 'the Faculty'). The Faculty was launched on 4<sup>th</sup> May 2023; and has been operational for just over six months.
- 1.2 The attached slide deck provides a recap on the four pillars of the Faculty and progress against these in the last 6 months (slides 2-6).
- 1.3 NHS Impact is a new national body that seeks to improve and embed the culture of improvement



across the NHS. It requested all NHS providers complete an improvement self-assessment baseline during October which had 22 questions. Each question had 4 layers of maturity to assess against: starting, developing, progressing, spreading, improving & sustaining. The assessment questions can be found here: <a href="NHS England">NHS IMPACT (Improving Patient Care Together)</a> self-assessment

- 1.4 The multidisciplinary Improvement Advisory Group completed the self assessment, outcomes are included on slides 7-11. Most responses for SFH are within the 'starting' level of maturity with a handful reaching the 'developing' level of maturity. The outcomes of the self assessment will be fed into the continuous quality improvement strategy to ensure alignment with the national direction and to create a development plan for the Trust to embed continuous improvement. The outcomes of the assessment have been shared with colleagues from other NHS providers within the Integrated Care System, for shared insight and learning.
- 1.5 The paper also provides a high-level summary of the emerging themes that will form the basis of the Trust's Continuous Quality Improvement Strategy
- Our vision is: to create an open and transparent culture where colleagues feel able to report incidents and speak up about concerns. We will listen and learn from these events collectively through shared governance and quality improvement. We will be recognised as a centre of excellence for learning and continuous quality improvement that is clinically led. This will be reflected via delivery of the strategy, underpinned by a commitment to embedding Quality Improvement skills and methodology across the Trust.
- 1.7 The approach to developing the strategy is on slides 12-15.

### 2. Recommendation

- a. The Council of Governors are asked to note the paper.
- b. The Council of Governors are asked to provide feedback on the following questions:
  - Does the vision and aims of the Continuous quality improvement strategy align to the Trust strategic vision and direction?
  - Does the vision and aims feel appropriately ambitious for SFH?
  - How do you want to help shape the developing strategy?