



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

Subje	ect:	15 Steps Challenge Update		Date: 13 <sup>th</sup> February 2024				
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Purpose								
This report provides a summary of the visits undertaken as part of Approval								
the 15 Steps Challenge from October to December 2023.  Assurar					Assurance			
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the right time								
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# **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 October to December 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 October to December 2023, there were a total of 24 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 October and December 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 24 visits completed, with reports returned, visit areas were as follows:

October	November	December
Welcome Treatment Centre (WTC)	Case Notes	Ward 51
Maternity Unit	Ward 31	Clinic 11 (Paediatrics)
Ward 12	Ward 11	Endoscopy
Ward 22	Day Case Unit	Clinics 3a and 3b
Hydrotherapy & Orthotics	Ward 52	Ward 23
Short Stay	Ward 44	
Discharge Lounge	MEMD	
	Ward 33	
	Same Day Emergency Care,	
	(SDEC)	
	Emergency Assessment Unit,	
	(EAU)	
	Urgent Treatment Centre (UTC)	

It should be noted it was not possible to complete a number of the planned visits over the quarter, due to Industrial Action and Critical Incidents occurring throughout this time.

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.

In conjunction with the 15 Steps Challenge a significant number of peer views have been undertaken covering all divisions, over all three sites. High level feedback has been provided to the Divisional Directors, and Executives, highlighting areas for improvement and the sharing of positive findings, this has been triangulated with patient experience, seeing the teams gather feedback from patients during the peer review visits, collating and reviewing alongside the 15 Steps Challenge.





## Welcoming:

- All areas noted to be welcoming and happy to engage with the teams.
- > The staff were ready for the day ahead and were happy to explain their processes.
- > Staff were polite and professional.
- Clear signage and facilities to support patients of all abilities were demonstrated.
- > Welcoming department with staff passionate about their role and service.

# **Caring and Involving:**

- Discussions with staff demonstrated a clear focus on improving patients.
- Bank staff advised they regularly choose shifts for this area as the team were friendly and inclusive.
- ➤ Ward Sister was a true example of the Trust values and behaviours, demonstrating strong leadership.

#### Safe:

- Staff responded well to an emergency buzzer.
- Staff described a patient-centred service that is supported by a workshop providing a support service that is faster and more effective than those from significantly larger hospitals.
- Ward Sister recognised the importance of staff wellbeing.
- Fire exits clear from clutter and hand gel noted at all points of care.

## Well organised and calm:

- Staff described a timely service provision for patients.
- ➤ The ward felt very calm, clean, and tidy. Staff remained calm during an emergency that occurred during the visit.
- ➤ All patients looked well cared for and comfortable, most were resting in rooms or behind curtains maintaining privacy and dignity.
- ➤ Patients all stated they received outstanding care from the staff and appreciated reviews form the same staff members throughout their treatment.

## 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. A number of issues were resolved shortly following the visits. These included:

- ➤ Concerns were raised regarding tape on a broken desk corner, Ward Sister confirmed following the visit Skanska had attended and the issue was now resolved.
- The hand gel at the entrance to the department was empty, this was immediately replenished once highlighted to the team.
- > Outdated posters were immediately removed.
- It was noted clinic 3b was a very cluttered, small department. Further to the Project Initiation Documents the Department Sister confirmed efforts will be made to ensure bins





are collected/moved outside of usual working hours to reduce disruption to staff in the department.

Below is an indication of actions that require updates currently:

Deep scratch to the Phlebotomy room floor from a patient's wheelchair to be raised with Skanska. Endoscopy to consider identifying gender neutral changing rooms.

Actions are followed up by the Patient Experience Team and to provide support where required.

## 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.

## Healthier Communities, Outstanding Care





### **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 March, April, May, June, July, August, September and October 2024, results will be analysed on a month-by-month basis, ensuring area owners have been made aware of any issues allowing for improvements.