

Improvement Strategy Annual Update

30th November 2023

Presented for:	Assurance
Presented by:	Magnus Harrison, CMO
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Previous Committees:	Quality Assurance Committee, Oct 23 Quality and Safety Assurance Group, Nov 23

Our Annual Commitments for 2023/24 are:	
Effectively develop and deploy new assets (buildings, equipment, IT)	
Reduce healthcare associated infections	✓
Improve staff retention	✓
Deliver the financial plan	✓
Reduce average length of stay by 0.5 days per patient	✓
Achieve the Access Targets for Patients	
Support a culture of research	

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
Workforce Risk		Workforce Supply Risk - We will deliver safe and effective patient care through having adequate systems and processes in place to ensure the Trust has access to appropriate levels of workforce supply.	Cautious	Moving Towards
Operational Risk		Change Risk - We will deliver change aligned to the Trust's strategy on time and to budget with benefits achieved and no significant adverse impacts.	Cautious	Moving Towards
Clinical Risk		Patient Safety & Outcomes Risk - We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.	Cautious	Moving Towards
Financial Risk		Change Risk - We will deliver change aligned to the Trust's strategy on time and to budget with benefits achieved and no	Cautious	Moving Towards

		significant adverse impacts, focussing on the delivery of large-scale capital developments and waste reduction programmes.		
External Risk		Strategic Planning Risk - We will deliver Our Vision “to be the best for specialist and integrated care” through the delivery of a set of Strategic Goals and operating in line with Our Values.	Cautious	Moving Towards

Key points	
<ol style="list-style-type: none"> 1. This paper and associated presentation provide an update on the LTHT Improvement Strategy 2022-27, 1 year after its launch. The strategy was approved by the Board in November 2022. 2. This annual update provides the Board an opportunity to have assurance and oversight that the goals and ambitions of the strategy are being effectively delivered and embedded throughout the organisation. 3. The Improvement Strategy combines the best of Quality Improvement with the tools and philosophy of the Leeds Improvement Method. Embedding the principles of the strategy underpins our vision and goals for LTHT and our commitment to become an outstanding organisation where continuous improvement is at the heart of everything we do. 	For assurance

1. Summary

This paper and accompanying presentation covers an update on progress made against the 7 goals and ambitions of the strategy (shown below) to continually improve quality of care and services we provide.



The Trust Board is asked to review the progress made in the first 12 months of the Strategy.

Template Committee & Board papers – 1 April 2023 (Risk Appetite – second edition March 2023)

2. Background

The Improvement Strategy was discussed at Board September 2022 and approved in November 2022. It demonstrates our commitment to continually learn and adapt our approach to improvement as an organisation and brought together our approaches over the last 5+years.

The Leeds Improvement Method (LIM) is our philosophy of continuous improvement that underpins all of our organisational strategies. The LIM has been developed from our work with the Virgin Mason Institute (VMI), bringing the principles of daily management methods, improvement methodology, respectful behaviours and the removal of waste from processes together. The LIM philosophy and core continuous quality improvement principles are at the forefront of this improvement strategy.

This Improvement Strategy underpins how we as an organisation will achieve our wider strategic ambitions in the coming years. Our ethos of continuous improvement will be the “go to” way and the “golden thread” within all our organisational strategies of how to change, adapt and improve our work.

3. Proposal

The presentation provides an update on progress and key achievements against all 7 strategic goals and ambitions of the Strategy. Evidence is provided to demonstrate progress that they are consistently being embedded across the organisation.

- The Quality Improvement Steering group (QiSG) determines, and reviews improvement priorities based on organisational intelligence of patient safety issues, including use of organisational data, themes arising from the Patient Safety Incident Reporting Framework and patient experience.
- Our improvement programmes are developed in partnership with our patients, and a quality partner is a core member of QiSG. This learning has helped us progress towards partners being integrated into other quality committees. Quality partners are trained alongside staff in Improvement methodology and participate in a wide range of work.
- We continually grow and develop improvement skills and capabilities throughout our workforce, with over 3500 staff trained in improvement principles.
- Strengthening relationships and supporting our staff are at the heart of our improvement culture. Coaching surgeries run fortnightly to support individuals and teams in improvement; >50% of CSUs now have a LIM facilitator, and improvement network and celebration events run every few months
- Measurement for improvement is used across all the QI collaboratives and data is used to guide direction and ensure continuous improvement.
- We celebrate and spread improvements and have held 2 external open days sharing our learning related to continuous improvement across the system and continue to work with the Virginia Mason Institute, supporting our ambition to be an organisation recognised for excellence in reducing waste. LTHT has contributed research by Warwick Business School that has heavily influenced the new NHS Impact (**Improving Patient Care Together**) agenda,

Our ambition is that over the next few years the strategy becomes even more embedded and that it supports us to drive the culture of improvement at LTHT. A culture where improvement is not seen as an additional activity for some, but truly embedded within everyone’s job role and their daily work, and where all our staff have the desire and support to continually improve the quality of care for our patients.

4. Financial Implications

There are no specific financial implications arising from this paper.

5. Risk

This strategy is consistent with the Trusts five-year plan and in keeping with the defined risk appetites agreed by the Board. Embedding the ambitions of the strategy and supporting the organisation's commitment to continuous improvement, will continue to support the Trust's approach to reduce risk.

6. Communication and Involvement

The strategy is on the intranet and available to external partners.

Updates and oversight are reviewed at quarterly QISG

Annual updates of progress are provided QASG and QAC

7. Equality Analysis

The impact of Health Inequalities has been considered directly within this strategy and our approach to improvement underpins how we as an organisation will achieve our wider strategic ambitions. Within our Operational Transformation Strategy (2022-27), and Health Inequalities Strategy, our ethos of continuous improvement is the "go to" way and our "golden thread" of how to change, adapt and improve our work.

8. Publication Under Freedom of Information Act

- This paper is exempt from publication under Section 22 of the Freedom of Information Act 2000, as it contains information which is in draft format and may not reflect the organisation's final decision.

9. Recommendation

Trust Board are asked to review the assurance provided on the first 12months progress of the Improvement Strategy 2022-2027.

10. Supporting Information

The following papers make up this report:

Improvement Strategy 2022-27

And a presentation will be shared at Board meeting 30th November by Magnus Harrison

Alison Cracknell

Associate Medical Director for Quality Improvement

19/11/23