



The Leeds  
Teaching Hospitals  
NHS Trust

# Improvement | 2022 Strategy | 2027



# Foreword

Welcome to our Improvement Strategy, an ambitious plan that shapes how we will continually improve services to achieve our vision to provide the best specialist and integrated care services for our patients.

This strategy really shapes our future commitment to improve the quality and timeliness of care whilst delivering first class patient experience and improving outcomes. It does this by bringing together our improvement work over the last five years and more, by combining the best of Quality Improvement with the tools and philosophy of the Leeds Improvement Method.

At the time of writing this strategy, health and social care is facing huge operational challenges. We have increasing demand on our services, significant backlogs in elective care, waves of Covid-19 cases, areas of workforce shortages and staff exhaustion. Despite facing these challenges, we have continued to see improvement work take place and have been overwhelmed by our staff efforts to engage in and continually improve the services they provide. This strategy will further support all our staff to get involved, go further and never stop improving.

This Improvement Strategy describes how Leeds Teaching Hospitals NHS Trust (LTHT) will achieve and measure the impact of our seven clear improvement goals, and of course utilises the principles of our Leeds Way values - ***Patient-Centred, Fair, Collaborative, Accountable and Empowered.***



Our approach to improvement within this strategy underpins how we as an organisation will achieve our wider strategic ambitions in the coming years. Within our Operational Transformation Strategy (2022-27), Clinical Services Strategy, Building the Leeds Way “Hospitals of the Future” and Health Inequalities Strategy, our ethos of continuous improvement will be the “go to” way and our “golden thread” of how to change, adapt and improve our work.

Our ambition is that this strategy becomes far more than this document alone, that it drives the culture of improvement at LHT. 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.



**Dame Linda Pollard, DBE DL Hon LLD**  
Chair



**Prof. Phil Wood**  
Chief Executive



**Dr Hamish McLure**  
Interim Chief Medical Officer

# Background

With learning taken from our partnership with the Virginia Mason Institute (VMI), and our ongoing Quality Improvement (QI) work we move into an exciting new era for improvement at LTHT.

We wish to continually learn and adapt our approach from our experiences, and by bringing these approaches together we can become an outstanding organisation where continuous improvement is at the heart of everything we do.

The Leeds Improvement Method (LIM) is our philosophy of continuous improvement that underpins all of our organisational strategies. It brings the principles of daily management methods, improvement methodology, respectful behaviours and the removal of waste from processes together. The LIM philosophy and principles are at the forefront of this improvement strategy, which is underpinned by our quality improvement principles.

The strategy incorporates developing all our staff with the skills and capability to deliver meaningful changes in their services, increasing value and reducing waste. Our approach to continuous learning and use of data for improvement equips senior leaders and executives to better understand the current challenges in the local system and determine our key priority areas.

In addition, we will actively be seeking to involve more patients, carers and partners in our improvement work, programmes and priorities. We will support our Clinical Service Units (CSUs) and Specialties to plan their improvement priorities in partnership with patients and families, and support individual members of their staff and their teams.

The strategy and our improvement culture will help us shape all our wider ambitions to bring benefits to the population of Leeds, including tackling health inequalities and working in partnership with West Yorkshire Integrated Care System.

The NHS and the challenges it faces are continually changing and therefore our Improvement Strategy will be dynamic and evolve to be able to accommodate the new issues that can develop, and priorities that change over time.

# Our goals and ambitions

Our goals and ambitions to continually improve quality of care and services at Leeds Teaching Hospitals are that:



# Our improvement priorities are determined by organisational intelligence of patient safety issues



## Goals and ambitions

- We will have awareness of our key patient safety risks, patient outcomes and an understanding of the quality and experience of our patients, to determine improvement priorities at organisational and CSU level.
- We will have open and honest discussions about how organisational and CSU level improvement programmes respond to current and emerging themes from these areas.

## How we will achieve this

- The Trust Quality Improvement Steering Group will provide senior leadership and accountability for the Trust's Improvement Strategy. This group will determine and review organisational improvement priorities by:
  - Reviewing emerging themes from the local Patient Safety Incident Response Framework and other reported incidents; feedback from patient experience; and performance and outcomes at organisational level
  - Monitoring the progress of Trust wide QI Collaboratives
  - Reviewing current and emerging regional and national reports into safety and cultural concerns within the NHS.
- CSU Governance structures will review emerging themes and priorities for improvement at CSU level.
- Each CSU will have an embedded "Improvement Specialist" to support identification, development and implementation of CSU led improvements. These individuals will be inter-connected and supported across CSU boundaries from organisational improvement leads.
- Data will be available at CSU and Organisational level for key patient safety areas and performance measures.
- We will create strong links with regional and national Patient Safety Collaboratives and NHSE improvement programmes.

## How we will measure this

- Themes from the Trust Patient Safety Incident Response Plan reviewed at Quality Improvement Steering group.
- Monitoring and governance of CSU and Organisational improvement plans.

# Our improvement programmes of work are developed in true partnership with our patients



## Goals and ambitions

- The voice and experience of our Quality Partners will be embedded throughout all our improvement work.
- The culture in our organisation is where Quality Partners and Improvement Leaders are truly equal.
- Our Quality Partner scheme will continually evolve and develop as a nationally recognised example of excellence.

## How we will achieve this

- Our Quality Partners will be key members of the Quality Improvement Steering Group, helping determine organisational improvement priorities and bringing their unique insights, knowledge and expertise into the group.
- Our Quality Partners will be key Faculty members of every Quality Improvement Collaborative, coproducing improvement ideas and bringing service user perspectives throughout the programmes of work.
- Quality Partners will train with staff in Improvement methodology, have peer and QI mentorship, 1:1 supervision, be part of our QI network and have an annual celebration event.
- Quality Partners will work with CSU Improvement Specialists to bring added value to all CSU Improvement plans.
- We will offer staff drop in clinics and staff peer support for those working with partners, to ensure the partnerships are truly successful.

## How we will measure this

- Feedback from staff and Quality Partners to understand their experience of the Quality Partner programme.
- Growth in the number and diversity of applicants to the Quality Partner programme.



# We continually grow and develop improvement skills and capabilities throughout our workforce



## Goals and ambitions

- All staff will have access to education, training and coaching in improvement methodology.
- All staff will feel empowered and capable to improve an area within their own service.

## How will we achieve this

- Education and training will be available and accessible to all. There will be a suite of modules available to staff and CSUs so they can access the most appropriate training for their needs including: Lean principles, using data for improvement, how to get started in Quality Improvement, and principles of daily management.
- Coaching in improvement will be available to any member of staff.
- Each CSU will have their own “Improvement Specialist”. These individuals will have mentorship from organisational improvement leaders alongside having a peer support network. They will be supported to gain further specialist improvement skills and expertise and be equipped to support training others within their CSUs. They will also work in partnership and collaboration with Quality Partners.

## How will we measure this

- Uptake of training modules and coaching sessions.
- Feedback from staff on quality and impact of training and coaching sessions and their confidence to undertake improvement work.
- Monitoring of our database for Quality Improvement projects recorded and their outcomes.
- Measurement of impact of improvement projects supported at CSU level.





# Strengthening relationships and supporting our staff are at the heart of our improvement culture



## Goals and ambitions

- We will have a real focus on relationships and culture, where all staff and Quality Partners feel empowered to generate ideas for improvement, are truly supported to engage, participate in improvement and share their journeys.
- We will create a culture that values diversity, voluntary participation and inclusiveness.
- Improvement leaders will collaborate to ensure engaging in improvement is simple and effective for all.

## How we will achieve this

- We will work closely with our staff networks to ensure training in improvement methodology and participation is accessible to all, and where appropriate offer bespoke training and coaching support to individuals and groups of staff.
- Our trust wide improvement collaboratives, focusing on organisational wide priorities will be open to any member of staff to participate.
- Staff involvement in improvement activities should form part of annual appraisal and personal development plans.
- Quality Improvement network events and Report Outs will be held regularly to showcase local improvement projects, celebrate successes and share learning.
- Improvement leaders will collaborate to simplify access to training and support for improvement work. They will enable colleagues to deliver meaningful and sustainable change by providing the best possible tools, frameworks and resources for the improvement ideas offered.

## How we will measure this

- Monitoring of staff responses to relevant parts of NHSE Staff Survey to understand their views and experiences.
- Improvement Projects led by frontline staff and our Quality Partners presented at national and international improvement conferences.
- Uptake of improvement training and coaching sessions across different staff groups and across all CSUs.
- Attendance and participation in improvement showcase events where colleague share improvement project progress and learning.

# We are an organisation recognised for excellence in measurement for improvement



## Goals and ambitions

- High quality data and measurement of improvement will be used and analysed to inform our improvement priorities and programmes of work.
- We will be regarded by NHSE as an outstanding organisation for measurement and impact of our improvement programmes.
- We will adopt a balanced approach to measurement and monitoring to be confident the changes we make are sustainable as well as sensitive to the needs of service users and providers.

## How we will achieve this

- We will use data for improvement to identify:
  - Quality problems, including a focus on health inequalities
  - Define indicators for improvement
  - Track the impact of interventions to improve quality of care and reduce inequalities.
- We will use data from direct observation of our processes, to ensure we have an explicit understanding of what we're doing well and where there is opportunity to be better.
- Data Analysts will be a key part of our organisational improvement programmes and members of our Quality Improvement Steering Group.
- Scientifically robust measurement tools including Statistical Process Control (SPC) Charts will be incorporated into our improvement programmes and reports, with data available at CSU and Organisational level.
- Data will be presented, interpreted and communicated in a user friendly way, and available in a timely manner.
- We will measure our improvement work across five primary domains: quality, delivery, service, morale and cost. This 'balanced scorecard' approach will enable us determine the impact of our efforts from different perspectives.
- A training module on measurement for improvement will be available to staff.

## How we will measure this

- Scientifically robust improvement tools and measures will be embedded within all organisational and local improvement reports.
- We will create exemplar case studies with NHSE on some of our improvement programmes and be recognised with national awards for demonstrating impact of these.

# We celebrate and spread improvements across the organisation and local healthcare system



## Goals and ambitions

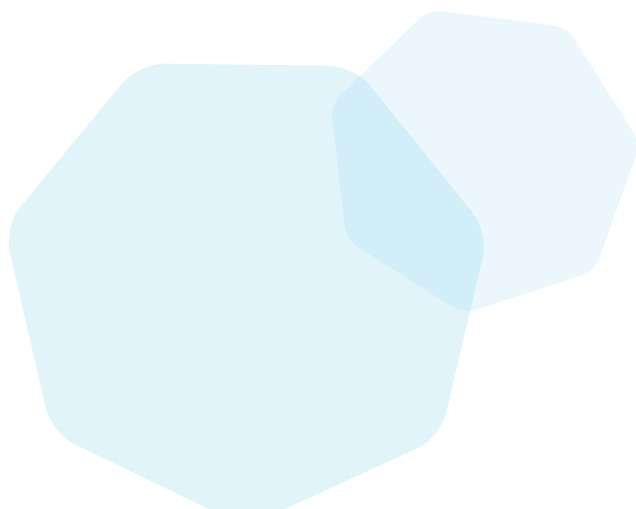
- We will celebrate our achievements and our learning within the Trust and with system partners.
- We will create strong links with improvement leaders from local partner organisations and work together on improvement priorities across the West Yorkshire Integrated Care System.

## How we will achieve this

- Improvement network events will be held to showcase local QI projects, celebrate successes and share learning, with Executive level engagement.
- Emerging improvement work will also be presented at monthly Executive led “report outs”.
- When things have worked in one area we will commit to supporting the adaptation and spread to other areas of our organisation, and embed these sustained improvements into standard work.
- We will build improvement interactions and relationships across our healthcare system (primary, acute, community and social care).
- Quality Improvement will be at the heart of our Health Inequalities Strategy and action plan.
- We will create strong relationships with the Integrated Care System Leaders, reviewing emerging themes and improvement priorities at system level.
- We will create strong networks with the Yorkshire and Humber Patient Safety Collaborative to support learning and sharing from regional and national improvement priorities.

## How we will measure this

- Our improvement programmes show evidence of impact at scale across the Trust.
- Our improvement programmes include priorities from across the local healthcare system where we work with system partners to improve together.



# We are an organisation recognised for excellence in reducing waste



## Goals and ambitions

- Waste in healthcare is anything that does not add value to patient care. We will work to eliminate waste that prevents our teams delivering the highest quality of care.
- We will create a strong culture of waste reduction in all areas to make our patient centred approach to healthcare more efficient.

## How we will achieve this:

- Waste reduction will be at the centre of our management method.
- We will promote a culture and practice of 'waste walks', to identify and reduce waste throughout our organisation.
- Individuals, teams and CSUs will be empowered and supported to reduce waste in their daily work and embrace continuous improvement.
- When applying effective "Lean" principles has worked in one area we will commit to supporting the spread to other areas of our organisation, and embed these sustained improvements into standard work.
- Waste reduction work will be presented at our improvement network events and promoted at monthly Executive led "report outs".
- An annual "waste reduction" conference will be held to celebrate improving quality of care through clinical and financial collaboration.

## How we will measure this

- Our waste reduction activities and their associated financial savings will be calculated in each department, CSU and as an organisation as a whole.
- Our improvement programmes will measure and record their reduction in waste that adds value to patients and services.



