

**Council of Governors - Cover Sheet**

<b>Subject:</b>	15 Steps Challenge Update		<b>Date:</b>	14 <sup>th</sup> May 2024	
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<b>Presented By:</b>	Sally Whittlestone, Associate Director of Nursing, Patient Experience and Complaints.				
<b>Purpose</b>					
This report provides a summary of the visits undertaken as part of the 15 Steps Challenge from January to March 2024.				<b>Approval</b>	
				<b>Assurance</b>	
				<b>Update</b>	<b>X</b>
				<b>Consider</b>	
<b>Strategic Objectives</b>					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
<b>X</b>			<b>X</b>		
<b>Principal Risk</b>					
<b>PR1</b>	Significant deterioration in standards of safety and care				
<b>PR2</b>	Demand that overwhelms capacity				
<b>PR3</b>	Critical shortage of workforce capacity and capability				
<b>PR4</b>	Failure to achieve the Trust's financial strategy				
<b>PR5</b>	Inability to initiate and implement evidence-based Improvement and innovation				<b>X</b>
<b>PR6</b>	Working more closely with local health and care partners does not fully deliver the required benefits				
<b>PR7</b>	Major disruptive incident				
<b>PR8</b>	Failure to deliver sustainable reductions in the Trust's impact on climate change				
<b>Committees/groups where this item has been presented before</b>					
<b>Acronyms</b>					
<b>Executive Summary</b>					
<p>The purpose of this paper is to update the Council of Governors on the 15 Steps Challenge visits, that have taken place from January to March 2024. This paper will detail the clinical areas visited, the feedback identified by the visiting teams, and any themes within these.</p> <p>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.</p> <p>During the reporting period from January to March 2024, there were a total of 19 visits confirmed as undertaken, with reports completed and returned.</p>					

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.

## Introduction

The purpose of this paper is to update the Council of Governors on the 15 Steps Challenge visits that have taken place between January and March 2024. 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 completed, with reports returned, visit areas were as follows:

<b>January</b>	<b>February</b>	<b>March</b>
Newark Outpatients	Minster Day Case	Ward 22
Ward 44	Sherwood Women's Centre	Occupational Health
	Clinic 10	Ward 24
	Ward 52	Surgical Day Case Unit
	Newark Theatres	Ward 34
	Ward 31	Oakham ward
	Little Millers Day Nursery	Ward 43
	Pharmacy	Faith Centre
		Canteen
	Visiting areas across the Newark site.	

It should be noted it was not possible to complete several of the planned visits over the quarter, due to the January board meeting being held via a team's meeting, which resulted in a total of 6 visits to be re-scheduled.

During February visits were re-arranged due to the board meeting being held at Newark Hospital, after the meeting the board members completed a walk around visiting several additional areas and services.

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 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 were noted to be welcoming and engaging with the visit teams.
- An agency nurse who wasn't aware of the 15-step process was keen to hear about it and very complimentary about the ward and the team.
- The Nursery Manager was very happy to engage, show the team around, answering any questions the team had. A discussion was held about recruitment, retention, finances, place availability, inspections, and OFSTED reports.
- All staff interacted well with each other, the team, and the patients.

### **Caring and Involving:**

- The team held a discussion with multiple staff members including doctors, therapy staff & nursing staff, who were all happy working on the ward visit. Some of the locum staff had indicated that they were moving on and were sad to do so, as they had enjoyed working on the ward.
- An area informed the team that they had a low staff turnover, and how they felt supported. Having the necessary equipment to undertake their roles. The ward leader in this area moved to the end of the ward to allow staff to have a safe space to feedback to the team, indicating that she is happy to receive feedback and encourages her staff to speak up. All staff members regardless of role or grade were observed as being included in the team.
- A significant number of wards and areas had informative patient information displays, including an excellent 'champions' board for link staff an information display for parents, and photographs of trips out with the children visible in the nursery.
- Patients appeared well cared for with witnessed interactions and positive feedback and compliments about the care they received, no concerns were raised to visiting teams in most areas, one patient didn't enjoy the food provided. There were many 'Thank You' cards identified by the teams, indicating that good care had been provided.
- One team spoke with a patient who was awaiting transport home, he gave a good report of his visit and was enjoying a cup of tea and a sandwich whilst he was waiting.

**Safe:**

- All wards and departments appeared clean, tidy, and organised; it was noted that some areas were using corridors for storage.
- The environment felt safe, with no safety concerns.
- Infection Control requirements are being adhered to in all areas visited.
- All staff wore identification badges and uniforms appropriately.
- A discussion took place about how one team dealt with the difficult days and the emotions of looking after patients with dementia. They informed the teams how they provide support for each other with time out and have processes in place for debriefing, when necessary, all the team appeared to be happy at work.

**Well organised and calm:**

- A significant number of areas were described as organised and calm.
- One team identified how it was good to see staff names in the cubicles so you can clearly see who is working in each cubicle, this improves privacy and dignity.
- There was a group exercise in the gym, and whilst the team didn't interrupt it was evident that the staff and patients seemed to be enjoying the exercise.
- Occupational Health Services spoke about how they have recently moved location and although the team felt a little isolated from the main building, they felt it was a good thing due to the sensitive issues with staff they dealt with. Staff who had been referred felt less anxious in the new build as didn't have to attend the main hospital.

**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:

- A Medicine trolley that was noted to be extremely noisy with squeaky wheels. - actioned immediately rang through for repair whilst the team was still on the ward.

- A positivity Board – was empty, which the team joked about. The Ward Sister explained that it wasn't that the team wasn't positive but that the board is being changed.
- One area noted to have had 7 Falls in the last month – the team felt this was high. The Ward Sister discussed it is common for them to have 5-11 falls per month. No trends or themes are associated, and they do encourage patients to be independent and would not wish to be risk-averse and stifle that independence.
- Lots of talks around uniforms and women in menopause. Occupational Health does support the use of scrubs and their workload has increased due to the number of referrals; a discussion was held as to whether the new uniforms will be menopausal friendly.

Below is an indication of actions that require updates currently:

- Theatre storage at Newark was discussed, as this is a problem, and the waiting room on Fernwood is seen as a solution, the teams are currently working with the surgical division to establish alternative solutions.
- Fernwood Unit was looked at it will be the new place for the Community Midwives. And is currently under development, however, the vision was seen by the team, and with the three cubicles already prepared for service, work is ongoing.
- It was noted by some teams that corridors are being used for storage of equipment- and that this is an ongoing issue across the Trust, seen in many areas.
- An Occupational therapist felt that sensor mats for patient chairs may be useful, the staff member had used these previously at a different organisation and felt they were beneficial, and this is being looked at currently.
- A Receptionist spoke of frustration at not having a print label machine and having to use one from a different ward. This was the result of the incorrect print label machine having been ordered. It was escalated to the ward leader who was already aware of the issue and trying to resolve it.
- One wall was identified as in need of decoration and was due May 2024. It was discussed with the ward sister, and she informed me that the ward is due for life cycle paint in October however she will ask for one wall to be done earlier.
- Staff reported obtaining enough chairs to sit patients out of bed was challenging but also, the type of chair wasn't always appropriate- Staff had already raised the issue over chairs but felt frustrated at

the scrutiny that came back, although did understand the financial position. However, they felt this being resolved could improve patient care. Escalated to Medical matron of Mansfield Community Hospital.

- A Foyer – looked a little bland and uninviting although the area was clean and tidy it may benefit from some more inviting furnishings, and a 12-month deadline for work was given.
- A Bathroom was not utilised for its intended purpose and staff used it as a storage area. Bath, sink, etc remain connected to the water supply therefore staff have to flush the system as per the Trust policy. The ward would need to explore if the water can be disconnected safely to stop the need for flushing and avoid any water safety issues/ infection and to consider if the bathroom can be repurposed.
- The Nursery- Outside area improvement works are ongoing. The team was pleased to see work being undertaken to improve the outside space for children. This will be completed for the summer months meaning the children will be able to play outside.

#### **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 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 or sharing of positive findings.