

Council of Governors - Cover Sheet

Subject:	15 Steps Challenge Update.		Date:	12 th November 2024		
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Purpose						
This report provides a summary of the visits undertaken as part of the 15 Steps Challenge from July to September 2024.			Approval			
			Assurance			
			Update	x		
			Consider			
Strategic Objectives						
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	
x			x			
Principal Risk						
PR1	Significant deterioration in standards of safety and care					
PR2	Demand that overwhelms capacity					
PR3	Critical shortage of workforce capacity and capability					
PR4	Insufficient financial resources available to support the delivery of services					
PR5	Inability to initiate and implement evidence-based Improvement and innovation					x
PR6	Working more closely with local health and care partners does not fully deliver the required benefits					
PR7	Major disruptive incident					
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change					
Committees/groups where this item has been presented before						
Acronyms						
Executive Summary						
<p>The purpose of this paper is to update the Council of Governors on the 15 Steps Challenge visits, that have taken place from July to September 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 explores different healthcare settings through the eyes of patients and relatives, also providing the opportunity to align patient and staff experiences, and to promote a positive experience for all, encouraging staff to understand and initiate local service improvement.</p> <p>During the reporting period from July to September 2024, there were a total of 24 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 July and September 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 24 visits completed, seeing reports completed and returned. This identifies a slight decrease from the previous quarter, that highlighted 26 visits were completed, visit areas were as follows:

July	August	September
Newark Theatres, (Theatre 3)	Ward 53	Pre-Operative Assessment Newark
Welcome Treatment Centre	Cardiac Catheter Suite	On-call Bedrooms Newark
Emergency Department	Ward 22	SSU
Ward 11	Little Millers	Canteen
Sherwood Birthing Unit	Ward 33/SSDEC	Ward 14
Ward 51	Clinic 8	Lindhurst
	Faith Centre	Day Case, Surgical
	Ward 14b	
	Maternity Ward	
Total 6	Total 9	Total 7

It should be acknowledged that due to the board meeting in September surpassing its usual scheduled time, the visits had to be re-scheduled.

When analysing the qualitative data, themes, and trends can be seen throughout all visits and are positive, it is evident that the Trust CARE Values and behaviours are reflected throughout the areas visited and staff show a sense of pride, leadership and engagement when interacting with the 15 Steps teams and the patients they are caring for. Below are some examples of the feedback received.

Welcoming:

All of the teams were welcoming, and engagement was noted to be positive. Staff were keen to talk to the teams about their areas and current works being undertaken.

All staff were noted to interact well with patients and each other.

It was noted that Pre-Operative Assessment is very small, and we discussed potential of expanding with more surgery at Newark. Staff were very welcoming and friendly and professional with patients.

Caring and Involving:

High standards of patient information were available in all areas that were visited.

Staff had a sense of pride when talking about the new SSDEC and the benefits they have seen so far, there seemed to be clear processes.

The nursery was clearly an educational environment and they had different rooms for children of different ages which were clearly marked out.

One area was noted to have a brilliant, homely family room and dining room for patients and families to gather, encourage social eating and socialising with others. The patients were very happy with the care they were receiving.

In one particular area it was noted that all the patients we spoke to knew what was happening, with the exception of one patient in the waiting area who had been waiting for over 2 hours for his treatment to commence due to lack of space/ over running treatments.

In the Welcome Treatment Centre patients commented that the environment would be improved if there could be a TV in the main area and/ or in the waiting area. Some patients also commented that the option of having a family member with them would have been welcomed.

One patient we spoke to was receiving her first oncological treatment at SFH after having to receive all her previous ones at NUH due to capacity at SFH. She told the team she was delighted to finally be receiving her treatment close to home (1 mile away) and how it was such a better experience for her.

Safe:

The environments were noted to be clean and tidy with up to date and relevant information displayed.

There was noted compliance with all IPC guidance.

The team who visited the Newark Theatres described a "Beautiful new theatre, looks fresh and clinical, New theatre, looks professional, well organised and clinical" The department sister articulated well the work around standardisation and discussions with a transformation workstream.

Well-organised and calm:

Departments and wards visited felt calm and organised.

Staff were observed to be interacting well with patients and each other, with teamworking evident.

There were many informative display boards described from visiting teams and they were described as eye catching and up to date.

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 and in accordance with the 15 Steps process, with assurance given that where required communication would be shared with the wider team, to prevent similar occurrences.

Several issues were resolved shortly following the visits, and currently, any outstanding that weren't confirmed as complete, including during the previous quarter, are identified below seeing some actions as ongoing.

Status	Action	Assigned to	Discussed during visit	Due date	Notes
Restaurant	Issues with food being limited. Issues with how busy the restaurant was.	Medirest	x	Ongoing	Ongoing work, around provisions is currently being undertaken. Looking at alternatives.
Ward 52	One recline chair is damaged, and already out for repair. Contacting charitable funds.	Ward Leader	✓	Ongoing September 2024 Update required	Need to obtain the serial numbers and send them with what cushions need recovering.
Ward 43	One wall to be painted.	Department Leader	✓	Update required.	Due to be painted during life cycle in October, ward leader will ask for this to be done sooner if possible.
Ward 51	TV Access.	CEO	✓	Update required	To look at access of TVs for patients.
Welcome Treatment Centre	Lack of space to meet capacity and for patients to have family member/ carer with them.	Cancer Service	✓	Ongoing	Raised at cancer steering group and cancer leadership team. Discussed with Matron.
Little Millers	Wi-Fi was an issue at times.	People Directorate	✓	Ongoing	People Directorate to discuss with NHIS.
Clinic 8	The signage was inconsistent on rooms.	Outpatient Department Lead	✓	Ongoing	Feedback to OPD.
Pre-operative Assessment Unit Newark	Not well signed from the main entrance.	Corporate Head of Nursing	✓	6mth March 2025	Discus with the division, but in general all signs need reviewing.
On-call bedrooms Newark	Poor condition and have had work completed, the radiator moved, and the walls need redecorating.	Corporate Head of Nursing	✓	Ongoing	To raise again with Skanska. Once the rooms have been re-decorated there is new furniture, fridges, kettles, and refreshments to go into the rooms.

Ward 22	EOL room however opposite entrance to ward making it noisy and limiting privacy.		✓	Ongoing	To ensure concerns regarding appropriateness of room 2 as an EOL room is raised and considered.
	Staff not routinely offered support post difficult events (aggression, loss of patients, emergency situation.	People Directorate Leads		Completed	Email sent from visiting team post visit.

Patient and team feedback:

When triangulating this with the Friends and Family Test feedback and compliments you can see below some of the positive words used to describe the Trust, staff, and the care received, by patients, families, and the visiting teams.



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 and if any issues were identified it allowed them to act on this, improving as required, and sharing of 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 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-centered compassionate care, pride and positivity, and a strong sense of CARE values being demonstrated across the organisation.

Next Steps:

Moving forward visits are planned through November 2024 to April 2025, 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.