Salford Royal’s Journey

David Dalton
Chief Executive
Changing the Culture

The patient must be at the centre of all that we do

A top-down performance system will not produce the change in culture that is necessary

Every Board should start by recognising that:

every system is perfectly designed to deliver what it delivers
Boards Must Have Clear Goals

- Reduce Mortality
- Reduce Avoidable Harm
- Evidence Based Care
- Improve Patient Experience
- Improve Productivity
- Safely Reduce Costs

Delivering Improvement

- What?
- How Much?
- By When?
Pursuing a High Reliability Culture

1. Leadership Visibility

2. Reluctance to Simplify + measurement

3. Deference to Expertise

4. Accountability
   - Reward
   - Address bad behaviours

5. Deep Staff Engagement
   Share the Learning

6. Teamwork
Highly Visible – breaking down barriers

Currency of leadership is what leaders pay attention to

Situational Awareness – to know how people and systems operate on the shop floor

If you dig a few levels down in your organisation – what % of time do leaders spend on safety vs. operational pressures?

Leaders need supporting at all levels – particularly middle tier

Accountability yes – Hierarchy No

Listen – especially to the voices of patients and their loved ones

Must be authentic – humility in place of arrogance
• **Time Sequence** – are you improving over time

• **Signals indicate special cause, including:**
  – 1 point outside the +/-3 sigma line
  – 6 consecutive rising or falling points
Transparency & Openness

Staffing Board

Today's Date:
19.11.13

The Nurse in Charge today is:
Jacqui

The number of patients on the ward today is:
21 + 10 outliers

Infection Control
It has been
8386 days since a patient last had an MRSA blood stream infection.

It has been
915 days since a patient last acquired Clostridium Difficile on the ward.

Ward Visiting Times
We invite you to visit between the hours of
8.30 am and 2.10 pm in the afternoon, and
2.10 pm and 8.00 pm in the evening.

However, if this is not convenient please see a member of staff so we can make alternative arrangements.

0161 2064520

Protected Meal Times
To allow us to provide our patients with an enjoyable meal time and good nutrition please allow us to protect our meal times.

We ask that you do not visit the ward between
1200 and 1330
1730 and 1830
unless you are helping assist the patient with their meal.

Falls
It has been
24 days since a patient has fallen on the ward.

Pressure Ulcers
It has been
9376 days since a patient has acquired a pressure ulcer.

Nursing Assessment and Accreditation System
The Nursing Assessment and Accreditation System (NAAS) is an assessment based on 13 standards reviewing the environment, care and leadership of the ward.

All wards are assessed and gain either a red, amber, green or blue rating.

All members of staff on the ward have played a part in ensuring the ward consistently achieves high standards of care.

The ward's current status is:

Patient Feedback
Variation: We go looking for it

Nursing Assessment and Accreditation System (NAAS)

13 standards:
- Person Centred Care
- Safeguarding Patients
- Patient Safety
- Infection Control
- End of Life Care
- Medicines Management
- Pressure Ulcers

- Elimination
- Communication
- Nutrition and Hydration
- Environmental Safety
- Pain Management
- Organisation / Management

- CQC Essential Standards
- Essence of Care
- Energise for Excellence

Safe, Clean and Personal Every time Accreditation

Ward Manager → Earned Autonomy → Ward Matron

SCAPE Ward Status

SCAPE Ward and Community Status

<table>
<thead>
<tr>
<th></th>
<th>January 2010</th>
<th>November 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCAPE Wards &amp; Areas</td>
<td>0 + 0</td>
<td>29 + 0</td>
</tr>
<tr>
<td>Green Wards &amp; Areas</td>
<td>32 + 0</td>
<td>15 + 34</td>
</tr>
<tr>
<td>Amber Wards &amp; Areas</td>
<td>15 + 0</td>
<td>2 + 2</td>
</tr>
<tr>
<td>Red Wards &amp; Areas</td>
<td>1 + 0</td>
<td>0 + 0</td>
</tr>
</tbody>
</table>
Building workforce capability

- Improvement Directorate
- IHI Fellows (2)
- Lean practitioners (15)
- IHI Improvement coaches (10)
- LIPS – participation in 4 programmes
- Clinical Leaders Programme (48)
- Nursing Leadership Programme (180)
- IHI Expert Patient Safety Training (4)
- Collab Learning Participation (2840)
- Clinical Quality Academy (60)
- Values Champions and staff groups (540)
"nothing strengthens authority so much as silence"

-Leonardo da Vinci
It is a common theme in serious incidents that the patient and/or family knew something was wrong – told staff – and weren’t listened to.
What matters most to patients at SRFT...

- Family
- Pain relief
- Going home
- Manchester United matches
- Getting to have a coffee in the morning before being talked to by doctors
Where Are We Now? : Salford Royal Results

**Over 8 years we have achieved:**

<table>
<thead>
<tr>
<th>Year</th>
<th>Milestone</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>In the best nationally</td>
<td>10%</td>
</tr>
<tr>
<td>2009</td>
<td>we have continued to maintain our position for risk adjusted mortality</td>
<td>10%</td>
</tr>
<tr>
<td>2010</td>
<td>reduction in MRSA bloodstream infections</td>
<td>100%</td>
</tr>
<tr>
<td>2011</td>
<td>reduction in <em>clostridium difficile</em> infections</td>
<td>83%</td>
</tr>
<tr>
<td>2012</td>
<td>reduction in cardiac arrests</td>
<td>48%</td>
</tr>
<tr>
<td>2013</td>
<td>reduction in grade 2 pressure ulcers</td>
<td>79%</td>
</tr>
</tbody>
</table>

**2014-2015 achievements:**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>4th</td>
<td>consecutive year in the top 3 for overall staff engagement</td>
</tr>
<tr>
<td>Best</td>
<td>Acute Trust nationally for patient satisfaction (In-Patient Survey)</td>
</tr>
<tr>
<td>Vanguard</td>
<td>site to create an Integrated Care Organisation</td>
</tr>
<tr>
<td>Lead</td>
<td>provider for trauma services in Greater Manchester</td>
</tr>
<tr>
<td>Zero</td>
<td>avoidable MRSA bloodstream infection</td>
</tr>
<tr>
<td>97%</td>
<td>of district nursing patients and 97% of hospital patients receive harm free care (as measured by the safety thermometer)</td>
</tr>
<tr>
<td>96%</td>
<td>compliance with correct antibiotic prescribing procedures to help prevent <em>Clostridium difficile</em></td>
</tr>
<tr>
<td>46%</td>
<td>reduction in General Surgery surgical site infections</td>
</tr>
<tr>
<td>38%</td>
<td>reduction in Orthopaedic surgical site infections</td>
</tr>
<tr>
<td>95%</td>
<td>compliance with Salford Royal’s Dementia &amp; Delirium Care Bundle</td>
</tr>
<tr>
<td>1st</td>
<td>Trust in the North of England and second nationally to achieve CQC rating of Outstanding – the highest rating possible</td>
</tr>
</tbody>
</table>
What are we trying to achieve?

Success.

a high performance and values based culture,
in which autonomy is earned by Divisions,
in pursuit of the highest standards
of reliable, patient centred care
Having the best professionals in the world is no longer enough.
“When most doctors get up in the morning and look for a leader – they look in the mirror and see themselves”

“Working in teams does not come easily to physicians, who still often see themselves as heroic lone healers”

*We must reinforce our values and ensure that teamwork trumps autonomy.*
Teamwork Climate Across Michigan ICUs

The strongest predictor of clinical excellence: caregivers feel comfortable speaking up if they perceive a problem with patient care

Attribution: J. Bryan Sexton
Accountability – Extends to behaviour

Respectful
• To colleagues, through teamwork
• To patients and customers, putting their interests before their own
• To the organisation, observing policies and procedures

Accountable
• Have high standards of integrity and honesty
• Are open to change
• Use evidence of best practice

Focus on the needs of patients
• Contribute to ‘Safe, Clean, Personal’ care
• Provide care and services which are effective and reliable
• Provide services efficiently and without waste

Continuous improvement
• Motivated to find solutions to problems
• Have a ‘spirit of energy’
• Are resourceful and ‘can do’
• Are comfortable with change
Connecting the Individual to their contribution to the Annual Plan

<table>
<thead>
<tr>
<th>Department</th>
<th>Objectives</th>
<th>Strategies</th>
<th>Key Performance Indicators</th>
<th>Target Dates</th>
<th>Measurement &amp; Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finance</td>
<td>Increase revenue by 10%</td>
<td>Reduce overhead costs by 5%</td>
<td>Monthly</td>
<td>Year-end report</td>
<td>Quarterly financial audit</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Improve staff satisfaction</td>
<td>Reduce turnover rate</td>
<td>Quarterly</td>
<td>Annual survey</td>
<td>Employee feedback analysis</td>
</tr>
<tr>
<td>IT</td>
<td>Enhance system security</td>
<td>Upgrade firewall software</td>
<td>Every 6 months</td>
<td>Bi-annual review</td>
<td>Penetration testing</td>
</tr>
</tbody>
</table>

Aligning Goals, Objectives, Behaviours and Attitudes

Avoid a disconnected hierarchy
Contribution Framework

Performance

Exceeding

Category 1
- Exceed outcomes and behaviour

Category 2
- Satisfactory outcomes, exceed behaviour
- Exceed outcomes, satisfactory behaviour

Category 3
- Outcomes just met, exceed behaviour
- Outcomes must improve, satisfactory behaviour

Less than effective

What

Objectives stating required outcomes/deliverables

Satisfactory outcomes, behaviour must improve

Poor Performance — below required standard outcomes and behaviour. Employees are being managed under formal poor performance management procedures.
The Leadership Framework

Goals for change are crucial, but if leadership is not rooted in

Values
Mindset
Behaviours

then you will never deliver the goals you have set.
Leaders at all levels are crucial in creating the culture of care and compassion at Salford Royal. Today’s effective leaders demonstrate their leadership by:

**Clarity of Purpose**
- Aims & Values
- What, how much, when
- Assess & Measure

**Behaviours**
- Hear Patient voice & listen to Staff
- Visibility and Authenticity
  - Signal Generator
- Defer to expertise
- Assessment and Feedback
- Adopt a coaching approach

**Mindset**
- Seek High Reliability
- Deep staff engagement
- Openness & Transparency
- Teamwork trumps hierarchy