

TRUST BOARD MEETING - 18 DECEMBER 2008

Title of the Paper:	Releasing Time To Care
Agenda item:	196/08
Author:	Gary Etheridge, Director of Nursing & Patient Services
Trust Objective:	Strategic Objective 2 - Improved rating with Annual Health Check (SFBH Core Standards C1, C4d, C13a, C15b & C20b)
Key Issues:	

Releasing Time to Care (designed by the NHS Institute for Innovation & Improvement), is a national quality improvement initiative, which offers a practical and common sense approach, which empowers ward teams to redesign their own processes and enables them to deliver better care.

Purpose:

This report informs the Trust Board on how the Releasing Time to Care initiative will be implemented across the organisation during a two-year period.

Risk Implications for the Trust (including any clinical and financial consequences):	Mitigating Actions (Controls):
Delay in appointing Project Facilitator, thereby intiative does not commence as per timetable.	Interim internal appointment to facilitate showcase wards roll out

Level of Assurance that can be given to the Trust Board from the report

Sufficient

Links to Key Line of Enquiry (KLOE 1 - 5)

N/A

Recommendation to the Trust Board:

Trust Board members are asked to note the contents of the report.



Agenda Item: 196/08

Public Board Meeting: 18th December 2008

Productive Ward - Releasing Time to Care

Presented by: Gary Etheridge Director of Nursing & Patient Services

1. Purpose

This report informs the Trust Board on how the Releasing Time to Care (Productive Ward) initiative will be rolled out across the organisation during a two-year period.

2. Background

Releasing Time to Care is a national quality improvement initiative, developed by the NHS Institute for Innovation and Improvement. The initiative is about applying known best practice improvement techniques from industry, and within the NHS it focuses on systems, processes and tasks within Hospital Wards, thereby releasing more time to care

Releasing Time to Care has proved to have a direct positive impact on patient safety, patient experience and overall ward efficiency, and offers a robust and structured framework whereby data collection and analysis support effective decision-making and evidence tangible outcomes.

Achievements noted across Hospitals/wards, which have already implemented the programme include:

- Direct Care time moved from 25% to 46% (reducing time spent on activities such as paperwork and searching for equipment)
- Observation frequency and reliability increased by 20%
- Medicine rounds reduced by 63%
- Handover time reduced by a third and improved quality
- Reduction interruptions from 114 to 64 per shift per Nurse
- Expenditure reduced on unnecessary meal requests
- Encouraged a core philosophy of continuous improvement

3. Implementation at West Hertfordshire Hospitals NHS Trust

It is proposed that the Releasing Time to Care initiative will be rolled out in all wards, over a 2-year period.

The East of England StHA funding of £197,000, in addition to the NHS Institute for Innovation and Improvement funding of £25,000 accelerated implementation package, will resource a Project Lead, temporary staffing costs to cover essential planning and implementation time and non pay resources.

The focus of the initiative will be on the patient experience: safety, practice and quality. The underpinning philosophy is standardisation, consistency and the empowerment of front line staff, and will look at the ward setting and the processes of care within the environment, e.g. the basics of dignified care, medicines management, ward rounds and meal times.

The table below identifies the recommended time commitment by key Trust staff, and it is anticipated this will increase as multiple wards are involved.

Team	Role	Time Commitment
Steering Committee	Chief Executive	1 Hr/Month
	Director of Nursing	2 Hrs/Month
	Director of Delivery	1 Hr/Month
	Medical Director	1 Hr/Month
	Finance Director	1 Hr/Month
Ward Team	Senior Sister	50% Total Time
	Matron	20% Total Time
Support Team	Information Analyst	1 Day/Month
	Finance Analyst	½ day /Month
Project Team	Project Leader	50% Total Time
	Project Improvement Facilitator	100% Total Time

The planning and consultation phase commenced in September 2008 and two showcase wards have now been selected: De la Mare ward an elective surgery unit and Katherine ward a postnatal unit to implement the Releasing Time to Care programme.

A staged implementation process will commence on the appointment/commencement of a Project Facilitator.

4. Success Measures

The Releasing Time to Care initiative offers a systematic way of delivering safe, high quality care across the organisation. It is predicted that a focus on processes and systems will drive efficiency thus releasing time to care.

The following success measures will be key in determining the impact of implementing the Releasing Time to Care initiative:

- Improved patient observations recognising the deteriorating patient
- Increased time spent on direct patient care
- Increased patient satisfaction
- Reduction in slips trips and falls
- Reduction in health care acquired infection
- Reduction in acquired pressure ulcers
- Reduction in length of stay
- Reduction in unplanned absence rate
- Increase in staff retention rate

5. Conclusion

Empowering staff to drive forward improvements in the health service on the front line is the cornerstone of the Lord Darzi's ongoing review in the NHS. Releasing Time to Care demonstrates the benefits of this approach to health reform: clinically driven and locally led.

The implementation programme will be driven by the Chief Executive and Director of Nursing, coordinated by a dedicated team and crucially, owned at local level by the multi professional team who are at the core of patient focused healthcare delivery.

6. Recommendation

Trust Board members are asked to note the contents of this report.

Gary Etheridge Director of Nursing & Patient Services

December 2008

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