

The Quality Team have been supporting the 3 Corporate Improvement Priorities, whilst maintaining some of the work from the previous priorities in Unscheduled Care and Home Care Modernisation.

The Frailty Board has identified 5 key priorities; deconditioning, delirium, Frailty at the Front Door, education and community. The Quality Team are supporting three of the current work streams.

Delirium: Designing the data collection for the delirium pilot with the team.

The flowchart illustrates the virtual care pathway for AD/SA patients, starting with a decision on whether to admit a patient. If admitted, the patient is assigned to a consultant (GP or NP) and a specialist nurse (SpN) for a 4-day virtual care period. The consultant checks the patient's Rockwood score and, if necessary, arranges for a home visit or transfer to a local hospital. The SpN provides support and advice, and the consultant checks the patient's progress and updates the care plan. The patient is then discharged from the hospital and seen at the consultant's clinic if required. The flowchart also includes a section for the virtual care process, which involves the consultant checking the patient's Rockwood score, the SpN providing support and advice, and the consultant checking the patient's progress and updates the care plan. The flowchart also includes a section for the virtual care process, which involves the consultant checking the patient's Rockwood score, the SpN providing support and advice, and the consultant checking the patient's progress and updates the care plan.

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graph TD
    Start([Decision made in AD/SA to admit patient]) --> ListPatients[List of patients presented <24 hours prior to appointment by ANP/SpN a.m.]
    ListPatients --> RemovePatients[Remove from list those patients below 75 years leaving those >75 yrs]
    RemovePatients --> ReviewPatients[Review patients on encompass - remove patients with Rockwood score <8 (not frail) leaving those with score >8 (involved frail)]
    ReviewPatients --> LocationCheck[Location checked - If patient in Downpatrick area or Lillibridge - suggest transfer to local hospital]
    LocationCheck --> Deprivation[Deprivation of liberty check]
    Deprivation --> HasPost[Has post taken and been done?]
    HasPost -- No --> IfNotTaken[If hasn't taken place, go back in p.m. to check to see if referral has been made to frailty team]
    HasPost -- Yes --> IfTaken[If has taken place, check to see if referral has been made to frailty team]
    IfNotTaken --> Roughly20[Roughly 20 people per day identified meeting criteria of >75yrs & Rockwood score >8. ANPs can see patients independently. Consultant & SpN see some patients. Consultant has capacity to see 5 p.m. virtually. ANP can see 2-4 p.m. each face to face. Therefore 12-12 p.m. can be seen. 10-20 p.m. not possible]
    IfTaken --> Roughly20
    Roughly20 --> ListGPs[List GPs on WHB dashboard]
    ListGPs --> Referrals[2 sections  
- Referrals from ED  
- List of those to be seen]
    Referrals --> StartReferrals[Start with referrals from ED usually from consultants on ward rounds. These patients will see virtually and face to face (average 2-4 per day, min 5)]
    StartReferrals --> Discharge[Send Patient HMC numbers requiring SDO to Mental Capacity Team for assessment]
    Discharge --> Virtuality[Virtually]
    Discharge --> FaceToFace[Face to Face]
    Virtuality --> ConsultantWork[Consultant works through encompass and GCR checking for ambulance report details]
    ConsultantWork --> ConsultantCheck[Consultant checks GCR documentation back 30 weeks (inpatient letters, outpatient letters, GP referrals, GP encompass)]
    ConsultantCheck --> ConsultantCheck2[Consultant checks ED admission notes and post take round notes]
    ConsultantCheck2 --> ConsultantCheck3[Consultant checks ED admission notes and post take round notes]
    ConsultantCheck3 --> ConsultantCheck4[Consultant checks ED admission notes and post take round notes]
    ConsultantCheck4 --> ConsultantCheck5[Consultant checks ED admission notes and post take round notes]
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Hospital at Home is also a Trust Priority and the Quality Team are supporting the service model development, benefits and evaluation work. They have also ecosystem mapped the Frailty services in Downe and Lisburn to support the expansion of Hospital at Home for the April pilot phase. To support this work the AD in Quality Improvement and Innovation has taken on a Public Health Registrar training placement to support the evaluation of the programme. They have also applied to QUB for an MSc Data analyst to support evaluation in the summer months. They are exploring possible partnerships for longer term in-depth evaluation of the H@H work as there is a deficit of current published impact evaluation of models internationally.

People Improvement Priority

The People Priority is being jointly led by the AD in Organisational Development and is focusing on creating a Just and Open Learning Culture by supporting staff in many ways.

The work began with a scoping exercise of all the activity across the Trust that Team provide to support staff. The activity across the organisation is extensive and it is planned to understand the energy and impact of the work through the priority lens. To access the map use the link.

https://www.canva.com/design/DAGZc5Xryh4/GEs7Pi0lo7GCWq9GfLBTeA/view?utm_content=DAGZc5Xryh4&utm_campaign=designshare&utm_medium=link2&utm_source=uniquelinks&utlId=hf017cf0ed0

What Matters To Staff

The AD of OD and Quality have partnered with the Royal Free Hospital Trust London to pilot the adoption of their internationally recognised What Matters to Staff Programme. This is a tested initiative that supports teams to connect to what matters and create joint solutions. There are currently 2 teams undergoing the pilot and the learning from these teams will prompt the next stage of the adoption.



Change Agents Network

To build an innovation network supporting creative and agile decision making in the Trust. To assess the organisational capacity for driving change within SEHSCT, it was crucial to determine the number of individuals involved in quality improvement, governance, audit, service improvement, data analytics, digital innovation, and personal and public involvement. The Quality Team conducted a mapping exercise in which all Assistant Directors were asked to identify relevant roles within their respective sub-directorates. They were tasked with providing details of these roles and the contact information of the individuals holding them. This mapping process identified a total of 193 individuals. The results highlighted a broad range of roles across directorates, with numbers ranging from 29 to 9 per directorate.



The Quality Team has been working alongside the Assistant Director for OD to survey and co-design a supportive network for those identified with change roles across the Trust.

encompass Improvement Priority

This priority has involved understanding the needs of the staff across the Organisation by conducting the longitudinal staff implementation survey. The survey has been used by the encompass digital leads to focus on areas of concern and champion teams adopting good practice. The learning has been shared across the Region to support the encompass roll out with clearly articulated transferable learning for the various stages of the encompass programme.

The implementation survey and the Trust learning has been showcased nationally by the Q Community site visit and the Health Improvement Europe Alliance conference hosted in QIIC in 2024.

The Director and AD for Quality are exploring the value of developing a Care Operating System to leverage encompass across the organisation.

Innovation

Cardiology and Palliative Care Remote Monitoring Pilot

The innovation collaboration with BT, Feebris, Momentum Zero One and Queens continues with our cardiology and palliative team in Lagan Valley Hospital to pilot remote monitoring to patients to support clinical decision making with the aim of early detection of deterioration and reduction in hospital admissions. Forty patients are now part of the pilot and an in-depth evaluation is being undertaken of the accessibility and acceptability of the programme to patients and staff and the clinical outcomes.

Delphi Study

The Quality Team are undertaking a Delphi Study to define what innovation means in SEHSCT to support creating an innovation framework with associated pathways that will enable teams to be supported in their innovation efforts. This commenced in March and will undergo three rounds of analysis.

Innovation Partnerships

The Quality Team have been connecting across sectors and exploring potential partnerships with the Data Institute, MOIC, HIRANI and Queens University.

The Quality Academy

Extensive activity has been going on with multiple programmes in motion.

Quality 4 You completed in December with 38 graduates

Quality 4 Teams completed in December with 6 Teams

Quality Fundamentals completed in November with 12 graduates

The Regional Quality Improvement for Social Workers, Nursing and Midwives completed in January with 55 graduates.

The Quality Fellowship is ongoing with 12 Fellows from across the Trust and including Fellows from the NIMDTA Adept Programme and Public Health Agency.

The AD and the Quality Improvement Lead have been teaching a Module on the MSc in Business Improvement at UU.