uclh future

UCLP Quality Forum
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UCLH Foundation Trust
WE THINK OF OURSELVES AS HIGH PERFORMING NHS TRUST

WE ASPIRE TO BEING WORLD CLASS
Clinical quality, safety and outcomes
Patient and staff experience
Research and education excellence
Hospital productivity and operations
Hospital brand, network and scale
System leadership & population impact

6 dimensions of world class performance
TOP CLINICAL OUTCOMES

UCH SAFEST HOSPITAL IN THE NHS, NHS ENGLAND 2014

JUST 6 ½ OUT OF 10 PATIENT EXPERIENCE

WE WASTE 1/3 OF OUR TIME ON BROKEN PROCESSES
Our patients are telling us we can do better

Lesley’s story

MY SURGERY WAS CANCELLED 3 TIMES
LAST TIME I WAITED 10 HOURS, WITHOUT EATING, BEFORE BEING SENT HOME

Sheila’s story

MY NOTES WERE WRONG AND DIDN’T MATCH, BUT I HAD GIVEN THE RIGHT INFORMATION
NO ONE COULD TELL ME WHAT PROCEDURE I WAS GOING TO HAVE. I’D GIVE YOU 6 ½ OUT OF 10
Step 1.
Fix what’s broken
Successful organisations manage performance and health with equal rigor to change and evolve.

**Performance**

What an organisation delivers to stakeholders in financial and operational terms

**Health**

The ability of an organisation to align, execute, and renew to sustain exceptional performance over time
Create more time to care

Patients
• As little time as possible spent in hospital
• High quality of care when with us
• More time to live a healthy and happy life
• Less time feeling unwell and awaiting treatment

Better Outcomes

Time Regained

Money Saved

Better Experience

Staff
• Regaining the ‘Lost Third’
• Less time wasted on working around broken processes
• More time to care for patients
• Less money wasted on inefficient processes
• Money released to provide more care for more people

How we spend our time is a key lever for change
Our transformation journey by focus – 3 horizons

Focus is…
Operational Efficiency

Doing things right

Focus is…
Operational Excellence

Doing things better

Focus is…
System Leadership

Doing things different

• Organising for delivery
• 2016/17 targets and quick wins
• Focus on building change leadership capability

2017

• Manage patient flow and capacity in real-time
• Integrated pathways
• Scaled enterprise wise improvements

2018/19

• Enable enterprise wide co-ordination and paperless working with technology innovation

2020
What we will start to see in 2015
...to transform our patient & staff experience

Care Delivery system
How we deliver care

- Clinical transformation
  - New urgent care & planned pathways
  - Programmes of care
- Ward transformation
  - Best practice everywhere
  - QI support & great metrics
- Operational transformation
  - Care coordination centre
  - Access centre

UCLH Institute
Learning through improvement

- Launch of the UCLH Institute
  - Change training
  - Leadership development
  - QI support & training
  - Hub for QI
  - New introduction to UCLH

Preparing ourselves
- Develop our transformation governance
- Organisation-wide engagement
- Changing the nature of conversations at UCLH
- Preparedness to deliver and manage change
Building excellence by embedding continuous improvement in efficiency, outcomes and experience for patients and staff
Jonathan
We cancel between 40 -50 patients on the day of admission every month across the Trust.

It is estimated that between 15% - 25% of inpatients are “waiting” for care.

We will reduce delayed transfers of care (FY 14/15) by 50% - saving of 2553 bed days per year.
Objective

• To support the delivery of world-class inpatient care at UCLH through coordination of patient flow, demand and capacity plans, real time information and internal professional standards

Approach

• Information – real time bed state and predicted capacity
• Coordination – matching short-term capacity and demand
• Standards – discharge processes “Home for Lunch”

Benefits

• Reduction of delays to care
• No short notice cancellations
• Shorter hospital stays
• Most appropriate ward/MDT
• Consistent higher standard of care, reduced variation
• More patients receive care at UCLH
Benefits to patient care in elective and emergency admitted pathways

Average number of delays on Monday have dropped by 65% from 11 to 4
In 15/16 reducing hospital generated OP cancellations (FY 14/15) – from 14.7% (236,000) to 7.0% (165,000)

This will create 70,000 OP appointments capacity per year

Avoiding “wasted” 142,000 OP letters sent per year
Length of stay reduction (elective)
4.7 days (now) to 3.0 in 2019/20
3.9 days in 2015/16

15/16 - Day case rate increase from 76% to 86% (top peer)

15/16 - Day of surgery admission 64% to 83% (top peer)
Events involving 140 staff on uclh future & lost third

16 divisional roadshows reaching 320+ staff to date

Events for leadership community reaching 120+ leaders

3,569 video views

What would you do with your Lost Third?

1,158

Lost Third Selfies

1,293

Sheila’s Story

1,118
University College London Hospitals

Changes to UCLH by end 2016

What good looks like across the 3 horizons

Operations
- EHRS launches
- New coordination centre
- New clinic letters solution
- Combined Trust-Wide Coordination Centre and Access & Booking Centre
- All wards completed exemplar programme
- All patient pathways redesigned
- Different ways of working driven by ENHS data
- All new patient admin processes embedded

Patients
- Shorter stays
- Fewer appointments cancelled
- Patient portal
- More clinician time
- Book appointments online
- Video clinics at home
- Even shorter stays
- No elective operations cancelled
- Waiting for care time reduced by 75%

Staff
- Spend more time with patients
- Mobile IT systems
- Less frustrating processes
- Clear standards and understanding of what is expected
- Freedom to make change
- All staff received improvement training
Discussion