



**Safer
Salford**

April 2016 to March 2017

Interim Progress Report

Summary report to Programme Board with
recommendations from first year of delivery

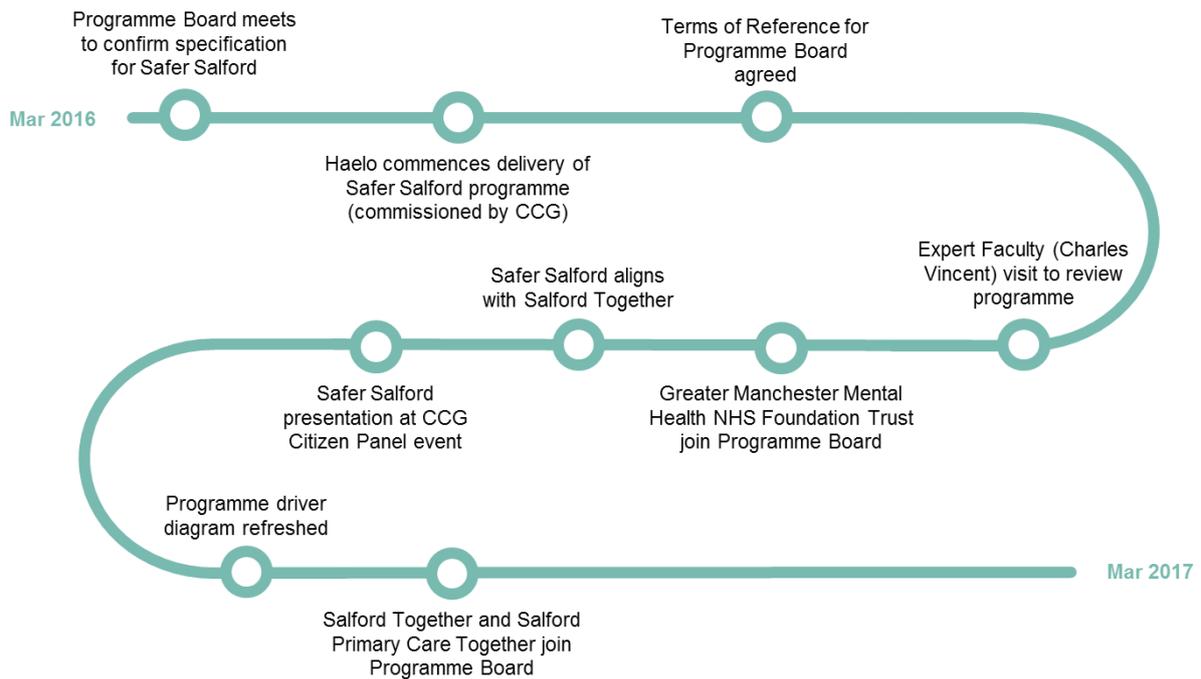
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The story so far...

Delivery of the Safer Salford programme began in April 2016, supported by a Programme Board bringing together representatives from across health and social care in Salford.

During the first year of the programme, the focus of individual workstreams has developed with delivery supported by a dedicated team in Haelo. External expertise has been drawn on to steer and advise on programme delivery with faculty supporting delivery of the Safer Handover (Dr Neil Houston), Safer Leadership (Carl Macrae) and overall programme development (Professor Charles Vincent).



A challenge throughout this first year has been embedding clinical input and patient representation within delivery structures to support the programme. Clinical oversight is currently provided by a CCG lead GP and within individual programmes, for example the clinical expert task-finish groups in Safer Intelligence. Input is also sought from the Clinical Standards Board at key milestones in the development of the programme. Programme Board has agreed not to include a patient representative at that level, but directed that individual programmes should seek to represent this perspective. Feedback on Safer Salford has been received via the CCG’s citizen panel in November 2016.

This document presents a summary of the achievements of each workstream to date, plus an overview of potential barriers to delivery.

Programme board

During the past year, this group has become well established, albeit with an evolving membership to bring together partners from across Salford health and social care, chaired by the Clinical Commissioning Group (CCG). The Programme Board meets on a six-weekly basis to review progress, consider how this programme interacts with wider initiatives, share learning and provide decisions on the development of Safer Salford initiatives. Each workstream is assigned an 'executive sponsor' from the Programme Board to provide additional support and leadership.

Partner engagement

Salford Clinical Commissioning Group (CCG)

Board level support from the CCG is consistently good, with the CCG as commissioner of the programme acting as a strong driving force behind the development and delivery of the programme.

CCG representatives have been involved in delivery of a number of workstreams, for example provision of resources of Neighbourhood and Clinical Lead GPs, Medicines Optimisation Lead and operational support for Safer Culture.

Salford Royal NHS Foundation Trust (SRFT)

Buy-in and support for Safer Salford objectives is high at a senior level, however SRFT has found it challenging to commit continuous resource at executive level and engagement has been reactive rather than proactive. Where resource is available input from SRFT colleagues has added significant value. At a project / workstream level engagement from SRFT is good, for example, representation on the Care Homes Operational Group and participation in clinical expert groups.

We recommend that SRFT identifies a single senior executive leader to take ownership of the programme and feedback progress internally – at present representation is spread across a number of individuals.

Salford City Council (SCC)

Representation and engagement at programme board has been consistent throughout the year, with an active involvement in development of the programme. A challenge remains to ensure that the Safer Salford portfolio remains relevant and supports the social care setting.

SCC has inputted at an operational level, for example, providing data and supporting the development of Safer Intelligence, and advising on the development of communications projects.

Greater Manchester Mental Health NHS Foundation Trust (GMMH)

Engagement and attendance at senior level has proved challenging for GMMH, partly due to a recent change in organisation structure and the fact that Safer Salford is only relevant to part of the organisation's geographical remit. As a result, resources available to participate in and support the programme have been limited, for example, GMMH is under-represented in the Safer Leadership programme in comparison with other partners.

We recommend that further work is undertaken at an executive level to understand how Safer Salford fits within GMMH's delivery portfolio, in particular whether GMMH takes an "organisation-wide" approach to implementing initiatives developed primarily in Salford.

Salford Primary Care Together (SPCT)

Involvement at Programme Board was secured in January 2017 with senior representation. Engagement has been strong both at Board level and in supporting the development of individual workstreams.

We recommend that we continue to build an effective working relationship as the form and function of SPCT develops.

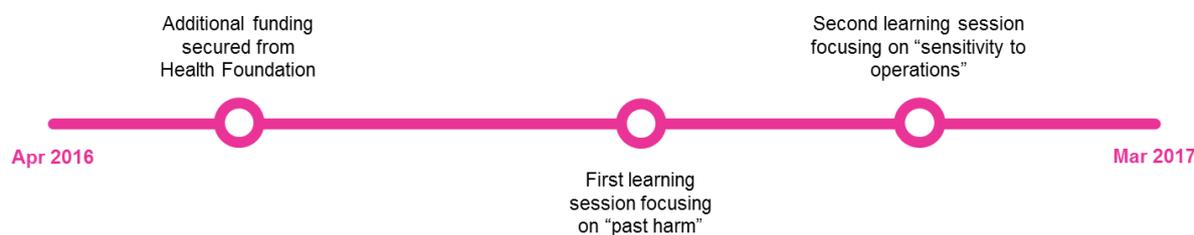
Salford Together

Since the creation of Safer Salford, the integrated care organisation, Salford Together has established its remit. The Safer Salford programme now sits within Domain 4: "Quality and Safety" of the Salford Together portfolio. There is some senior representation from Salford Together within Safer Salford (primarily Safer Leadership).

We recommend that throughout Yr 2, Safer Salford focuses attention on integrating with the Salford Together portfolio, for example, aligning Intelligence priorities, and building on relationships established within Safer Leadership. Salford Together should be consistently represented at Safer Salford programme board and vice versa.

Delivery

Safer Leadership



Aim

Building on the successful Making Safety Visible programme, our aim is to inspire leaders across Salford to think and act differently to bring about city wide change.

Progress

A leadership development programme has been established with 33 participants nominated by Programme Board including all partners of Safer Salford.

The first learning session on 27 October focused on the principles of the Measuring and Monitoring of Safety (MMS) Framework, moving from looking at just “past” harm data to understanding the balance between lagging and leading indicators of harm and the value of using reliability measures to support this analysis.

Learning session two on 19 January provided delegates the opportunity to go out into the field and observe what ‘sensitivity to operations’ looks like in an unfamiliar sector via a series of visits. Following this, Prof. Charles Vincent, author of the MMS framework, explained what good sensitivity to operations looks like in theory before teams presented back on their site visits.

The day was closed with a Safer Leadership film featuring a call to action from Anthony Hassall, Chief Accountable Officer at Salford CCG: “Don’t wait for permission, just get on and do it!”

For more information visit: safersalford.org/programme/safer-leadership/

Safer Culture



Aim

To develop and roll out a tested tool to enable primary care units (GP practices) to understand and improve their safety culture.

Progress

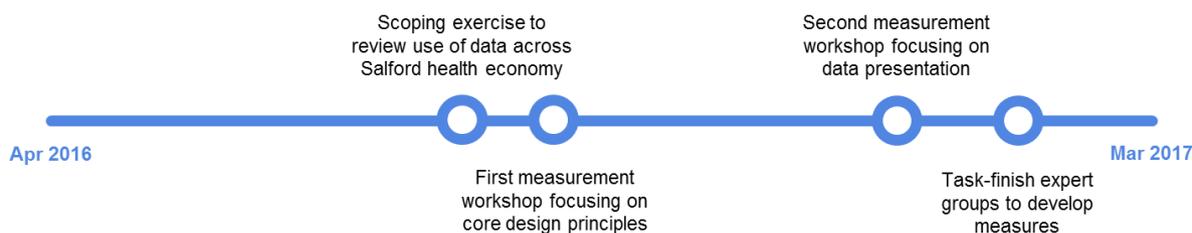
A number of safety climate assessment tools have been piloted among a cohort of GP practices in Salford who had a pre-existing relationship with Haelo. The pilot explored the logistics of each method, highlighting the barriers and incentives to participation as well as levels of engagement and the quality of resulting conversations and learning.

Although arranging time with the practices to deliver feedback to staff was challenging, it provided an opportunity to take Safer Salford out into the field and engage with frontline workers.

An evaluation report has been prepared to recommend options to the Safer Salford Programme Board for enabling safety culture measurement across all 46 of Salford's GP practices.

For more information visit: safersalford.org/programme/safer-culture/

Safer Intelligence



Aim

Our aim is to build a measurement system to answer the question “how safe is health and social care in Salford?” We will collect and display data which will lift a lid on how safe patients in Salford will be today, tomorrow and in the future.

Progress

A scoping exercise was undertaken from July to August 2016 to understand the ways that safety data is collected and used across the Salford health and care economy. This revealed that all sectors were fairly robust in their use of ‘past harm’ data but attention to present and leading indicators was less consistent across the system. A key learning point from this exercise is that there is significant room for improvement in how learning from safety data is shared and integrated across different sectors of the health and care economy.

A working group was derived from Programme Board and came together in September 2016 and January 2017 to develop a set of design principles for the development of a Safer Salford data dashboard. It was agreed that the Safer Salford dashboard would have a strategic focus that would speak to the leaders of Salford’s integrated care system. The dashboard will hold a lens up to 3 headline topics - mortality, falls and medication safety – applying past, present and future harm thinking. Following the development workshops, clinical and data experts from each partner organisation have been brought on board to help define measures for the dashboard.

Given that this is an unprecedented and ambitious piece of work, it is not surprising that it has been challenging, particularly in identifying indicators that will not only answer the right questions but also resonate across different settings. As a result, our first draft dashboard will be ready slightly later than we had initially planned.

For more information visit: safersalford.org/programme/safer-intelligence/

Safer Handover



Aim

To define priority areas and produce an evidence-based change package to improve safety of handovers

Progress

In order to gain a clearer understanding of the causes of problems in handovers between primary and secondary care, Haelo have led a “discovery phase” with clinicians, including 1:1 interviews, a focus group, a clinician survey and review of:

- GP correspondence to SRFT colleagues referencing problems with handover documents
- Audit of clinic and discharge letters (run by the CCG at on GP practice)
- Review of DATIX reports relating to medicines

The survey captured views from over 100 clinicians (26 GPs and 84 Consultants) across Salford and identified a number of priority change ideas.

Two key themes - improving communication and clarity of roles - will be tested in a Rapid Improvement Event in May 2017, looking specifically at standardising the referral and discharge process, in relation to the quality of information communicated. The planned event will bring together a staff from both primary and secondary care, including frontline professionals to technical and managerial roles to use LEAN methodology to develop ‘future state’ processes to be tested out across Salford following the event.

For more information visit: safersalford.org/programme/safer-handover/

Safer Care Homes



Aim

To deliver a large scale safety collaborative for between 8 and 12 care homes across Salford to facilitate improvement in patient safety in care homes.

Progress

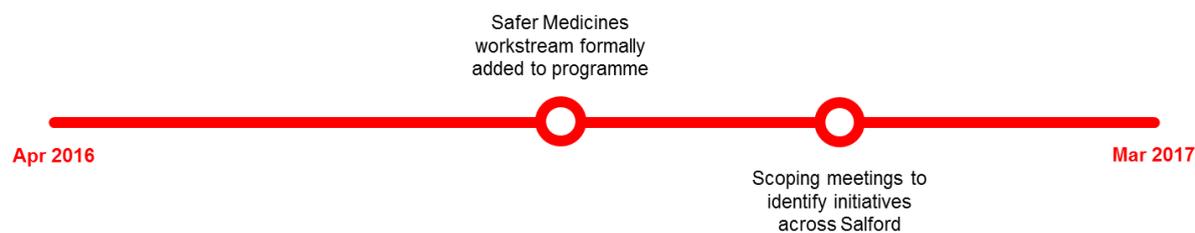
The Safer Care Homes Breakthrough Series (BTS) Collaborative launched on 17th November 2016 with 12 care homes signed up in principle to participate. It was anticipated that engaging with care homes would be a challenge, therefore significant resource was invested in the pre-work phase, for example forming an expert panel.

A driver diagram for the programme identifies key areas of focus to achieve a clear and ambitious aim: *'To improve safety for Salford residents by increasing the number of days of harm-free care per month by 75% by January 2018'*. While acknowledging that 'harm-free' is a broad concept, the programme recognises that not every issue can be tackled at once, thus for the purpose of the collaborative, 'harm-free' is measured by medication safety, falls and pressure ulcers.

By the time of the first learning session on 31st January 2017, 4 of the original homes were unable to continue but we were able to bring one more on board, taking our number of participating homes to 9. This speaks to the reality that many care homes, whilst keen to improve, face numerous pressures with limited resources and this has also been reflected in the levels of engagement from participating care homes. Participants left learning session 1 enthused and invigorated with plenty of ideas for small tests of change. Maintaining enthusiasm in the face of daily pressures and ensuring that participating homes are able to deliver their changes will undoubtedly be a challenge. To this end, Programme Board agreed in February to commit financial support for backfill in participating homes.

For more information visit: safersalford.org/programme/safer-care-homes/

Safer Medicines



Aim

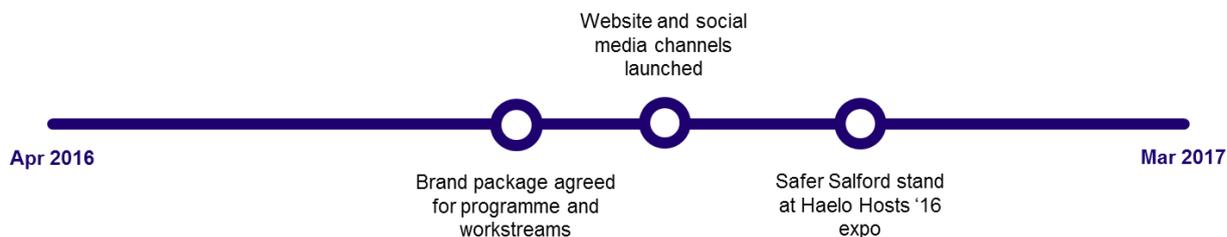
To identify successful medicines safety improvements for scale up across Salford.

Progress

Work commenced on the Safer Medicines workstream in December 2016. 21 different local innovation and improvement projects around medicines have been identified. We are currently in the process of evaluating these and a report will be produced in May 2017 giving recommendations for scale-up of a number of these initiatives.

For more information visit: safersalford.org/programme/safer-medicines/

Communications



Aim

To support delivery and scale up of successful interventions and raise awareness of Safer Salford principles (based on the Measurement and Monitoring of Safety Framework) within Salford Together.

Progress

In the first year the foundations for communicating key Safer Salford messages have been laid, with the establishment of branding, social media channels and a dedicated website at www.safersalford.org. Online presence is targeted at health and social care professionals across Salford, with the purpose of raising awareness of the principles of the programme and learning outcomes to be included in the “roadmap”.

A communications plan has been developed and is in the process of being agreed with Salford Together as part of legacy planning for all content and learning. The plan includes an outline for how learning from each of the workstreams will be disseminated.

For more information visit: safersalford.org/ and twitter.com/safersalford

Next steps

Key challenges and opportunities

Continued support and engagement from all partners will be critical to the success and sustainability of initiatives developed through Safer Salford. We have highlighted below three key areas where we believe strong leadership from Programme Board will add the most value.

Salford Together

The inclusion of Safer Salford within domain 4 “quality and safety” presents a valuable opportunity to disseminate learning and embed the core principles of the programme within Salford’s integrated care organisation. This carries risks related to the demands and structures of Salford Together. Integration with Salford Together will be integral to the sustainability of the roadmap developed during this phase of the programme.

Safer Leadership

Engagement from participants in the programme has been a challenge. Participants will require support from Programme Board representatives to realise changes as a result of the programme – senior executive representatives are scheduled to attend the Summit which should be viewed as an opportunity to consolidate learning across workstreams and develop the roadmap.

Safer Intelligence

Work is both innovative and ambitious but this means there is no defined way to create a health economy-wide safety dashboard and the concept of assigning equal attention to both leading and lagging indicators will be novel to many. There is a real opportunity to use this work as a catalyst for the development of smarter measurement systems across an integrated health and social care system, however expectations must be managed to enable on-schedule delivery.

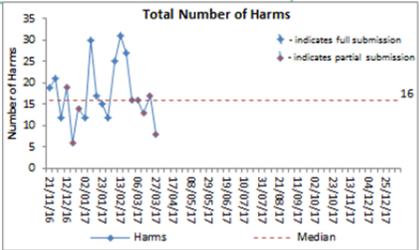
Work programme (April 2017 – March 2018)

It is expected that emphasis will shift from development and delivery to capturing and sharing learning from programmes in the second year of this programme, with the aim of identifying successful initiatives for scale up and spread beyond the lifetime of this current contract. The summary below outlines some key milestones in the forthcoming year:

- Conclusion of the Safer Leadership “learning sessions”. Participants will be challenged to implement learning in their work settings, with coaching support provided by Haelo in advance of a Summit with executive leaders in October 2017.
- Having piloted a number of safety climate tools for primary care, we will begin to plan delivery of an agreed methodology of safety culture assessment for primary care in Salford.
- Development and integration of Safer Intelligence measures to answer the (revised) question “is health and care in Salford getting safer?”
- Delivery of the Safer Handover Rapid Improvement Event on 9th to 11th May 2017, with participants representing primary and secondary care. It is expected that this will create changes to be tested and evaluated following this event.
- With two learning sessions and a summit event yet to come, the focus for Safer Care homes will be to boost and maintain engagement from participating care homes. The agreed financial incentives will support care homes testing changes.
- Safer Medicines final report due May 2017.
- Increased communications activity to support scale up and spread of learning from across the programme, linked to the Salford Together communications strategy.

Appendix A – Programme data

	Deliverable and Status (on track / satisfactory / requires attention)	Performance Measure																																			
Leadership	Deliver an improvement collaborative for health and social care leaders to understand the MMS Framework in Salford SATISFACTORY	<p>% participation in sessions of all invited attendees</p> <table border="1"> <caption>% participation in sessions of all invited attendees</caption> <thead> <tr> <th>Session</th> <th>% attended</th> </tr> </thead> <tbody> <tr> <td>LS1</td> <td>68</td> </tr> <tr> <td>LS2</td> <td>65</td> </tr> <tr> <td>LS3</td> <td>63</td> </tr> <tr> <td>Summit</td> <td>62</td> </tr> </tbody> </table> <p>Content relevance (score out of 10)</p> <table border="1"> <caption>Content relevance (score out of 10)</caption> <thead> <tr> <th>Session</th> <th>Score</th> </tr> </thead> <tbody> <tr> <td>LS1</td> <td>7</td> </tr> <tr> <td>LS2</td> <td>7.5</td> </tr> <tr> <td>LS3</td> <td>7.8</td> </tr> <tr> <td>Summit</td> <td>8</td> </tr> </tbody> </table> <p>Content delivery (score out of 10)</p> <table border="1"> <caption>Content delivery (score out of 10)</caption> <thead> <tr> <th>Session</th> <th>Score</th> </tr> </thead> <tbody> <tr> <td>LS1</td> <td>6</td> </tr> <tr> <td>LS2</td> <td>6.5</td> </tr> <tr> <td>LS3</td> <td>7</td> </tr> <tr> <td>Summit</td> <td>8</td> </tr> </tbody> </table>	Session	% attended	LS1	68	LS2	65	LS3	63	Summit	62	Session	Score	LS1	7	LS2	7.5	LS3	7.8	Summit	8	Session	Score	LS1	6	LS2	6.5	LS3	7	Summit	8	<p>Confidence using the MMS Framework</p> <p>Understanding of future harm</p> <p>Understanding of present harm</p> <p>Understanding of past harm</p>				
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Culture	A tested tool to enable understanding of culture and identify actions required to improve ON TRACK	Completed surveys GPs 9 (of 10 approached)	Evaluation of pilot phase and recommendations Complete March 2017																																		
Intelligence	Build a measurement system to answer "how safe is Salford?" SATISFACTORY	<p>Run chart: number of attendees</p> <table border="1"> <caption>Run chart: number of attendees</caption> <thead> <tr> <th>Workshop</th> <th>Number of attendees</th> </tr> </thead> <tbody> <tr> <td>Workshop 1</td> <td>8</td> </tr> <tr> <td>Workshop 2</td> <td>9</td> </tr> <tr> <td>Workshop 3</td> <td>10</td> </tr> <tr> <td>Workshop 4</td> <td>11</td> </tr> </tbody> </table> <p>Number of attendees by organisation at workshop 2</p> <table border="1"> <caption>Number of attendees by organisation at workshop 2</caption> <thead> <tr> <th>Organisation</th> <th>No. attendees</th> </tr> </thead> <tbody> <tr> <td>Haefo</td> <td>4</td> </tr> <tr> <td>CCG / GP</td> <td>4</td> </tr> <tr> <td>SCC</td> <td>3</td> </tr> <tr> <td>SRF</td> <td>2</td> </tr> <tr> <td>GMMH</td> <td>2</td> </tr> </tbody> </table>	Workshop	Number of attendees	Workshop 1	8	Workshop 2	9	Workshop 3	10	Workshop 4	11	Organisation	No. attendees	Haefo	4	CCG / GP	4	SCC	3	SRF	2	GMMH	2	<table border="1"> <caption>Task Finish groups invited and attended</caption> <thead> <tr> <th>Group</th> <th>Invited</th> <th>Attended</th> </tr> </thead> <tbody> <tr> <td>Mortality group</td> <td>10</td> <td>6</td> </tr> <tr> <td>Falls group</td> <td>14</td> <td>6</td> </tr> <tr> <td>Medicines group</td> <td>6</td> <td>3</td> </tr> </tbody> </table>	Group	Invited	Attended	Mortality group	10	6	Falls group	14	6	Medicines group	6	3
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	Deliverable and Status (on track / satisfactory / requires attention)	Performance Measure		
Medicines	Sharing learning across Salford to improve safety ON TRACK	Progress update 21 initiatives identified across Salford 8 initiatives being collated into case study summaries		
Handover	Define priorities and deliver a rapid improvement programme focused on primary-secondary care ON TRACK	Survey responses Primary care = 24 Secondary care = 85	Attendance at RIE Currently registered: 26	Completion of agreed actions TBC
Care Homes	Produce an evidence-based change package (collaborative to improve safety in care homes) REQUIRES ATTENTION	<div style="display: flex; justify-content: space-around;"> <div data-bbox="770 852 1189 1102">  </div> <div data-bbox="1272 852 1637 1102">  </div> </div>		
Integration with Salford Together /Comms	Support delivery and scale up of successful interventions / raise awareness ON TRACK	Webpage Visits Jan 17 – 242 Feb 17 – 149 Mar 17 – 221	Website Visits - users Jan 17 – 87 Feb 17 – 53 Mar 17 – 65	Twitter interactions / engagements Jan 235/ Feb 61/Mar 37