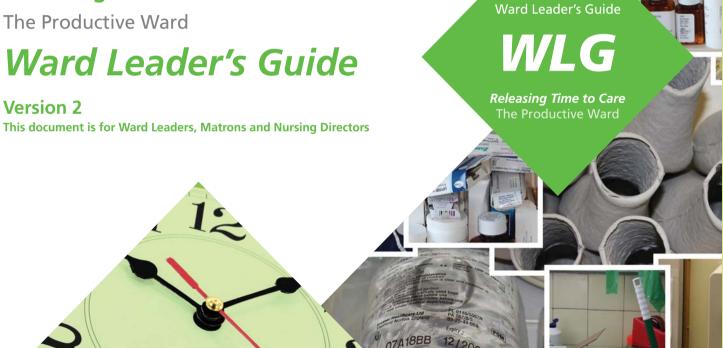


# Releasing Time to Care

**Version 2** 



## © Copyright NHS Institute for Innovation and Improvement 2008

Releasing Time to Care: The Productive Ward
- Ward Leader's Guide is published by the
NHS Institute for Innovation and
Improvement, Coventry House, University of
Warwick Campus, Coventry, CV4 7AL

This publication may be reproduced and circulated by and between NHS England staff, related networks and officially contracted third parties only, this includes transmission in any form or by any means, including photocopying, microfilming, and recording.

This publication is copyright under the Copyright, Designs and Patents Act 1988, All rights reserved. Outside of NHS England staff, related networks and officially contracted third parties, no part of this publication may be reproduced or transmitted in any form or by any means, including photocopying, microfilming, and recording, without the written permission of the copyright holder, application for which should be in writing and addressed to the Marketing Department (and marked 're: permissions'). Such written permission must always be obtained before any part of this publication is stored in a retrieval system of any nature, or electronically.

ISBN: 978-1-906535-20-9

### **DH INFORMATION READER BOX**

Policy Estates
HR/Workforce Commissioning
Management IM & T
Planning / Finance
Clinical Social Care / Partnership Working

**Document** Best Practice Guidance

ROCR Ref: Gateway Ref: 9358

Title Releasing Time to Care: The Productive Ward - Ward Leader's Guide

Author NHS Institute for Innovation and Improvement

Publication Date 25 January 2008

Target Audience Directors of Nursing and Nursing Staff

**Circulation List Directors of Nursing and Nursing Staff** 

**Description** This guide summarises the Productive Ward Modules and gives ward leaders guidance on the implementation of Productive Ward, and how it can be managed by leaders in terms of their teams and the impact across the whole hospital, to ensure that the Productive Ward is both supported and sustained by staff.

Cross Ref Part of Productive Ward series - an additional 14 volumes

Superseded Docs N/A

Action Required N/A

Timing N/A

Contact Details Service Transformation Team, NHS Institute for Innovation and Improvement, Coventry House, University of Warwick Campus, Coventry CV4 7AL 0800 555 550

For Recipient's Use

## **Contents**

Page	Contents
08	Productive Ward Modules
16	You
30	Ward Start-Up
52	Sustain
64	Keep Moving - Spread

At the back of this booklet is a short 10 minute introductory DVD entitled 'Releasing Time to Care' which you should view before reading this Guide.



# So you are doing the Productive Ward

The demands on our ward teams and the pace of care have changed dramatically over the past decade.

One thing that has not changed is our aspiration to deliver the very highest standards of care, safety and dignity for our patients.

We all too often rely on the hard work and vigilance of our teams to achieve and maintain these standards. We all know that wards are very complicated. Many different professions and large numbers of staff, on different shifts, create demands on leaders. This is in addition to the high standards we set ourselves and the rising expectations of the public.

Ward leadership is extremely challenging - requiring knowledge not just about what standards to

deliver, but crucially how to deliver these standards reliably.

We believe that successful wardbased care does not just evolve. For the very highest standards of care, safety, dignity and for empowered teams, ward based teams need to design the way they organise and deliver care.

The Productive Ward will enable you to work with your team to transform your ward to a place of increased calm and more dignified care. The experts in ward processes are your ward staff themselves. You will harness this expert knowledge to radically improve your ward processes.

Your team will remove waste activities from processes and re-invest that saved time into

making care more reliable and safe. Releasing time to care.

After all, patients who receive the right care, safely and reliably, every time get well sooner - something we all aspire to.

# Messages from Ward Leaders who have implemented the Productive Ward:

Dear Sister,

I am sure that you are contemplating how on earth you are going to manage working through the Productive Ward programme when the ward is already so busy and there is no time to spare. It is precisely for that reason that you need to do this. Having worked and lived with this process now for a considerable time I can tell you that it is really worth committing to. The benefits you will see will make your job and the job of your staff much more satisfying and you will find that your working environment will be a much nicer and safer place to be for you, your staff and your patients.

To start with I feel I should warn you that this is not an easy task, there will be times when the momentum may slip a little and you are needed to 'rally your troops' especially as initially there will be an increase in the workload before you start to see the benefits. You will need to be a like a beach ball, bright and bouncy even when you don't

feel like it. You may feel that you are becoming swamped with the work that needs to be done.

My advice to you is to take a step back and oversee things by letting some of your staff lead on projects; you can still retain overall control as you will need to approve any changes. That way you will be developing your staff and enabling them to become skilled in improvement techniques and it is wonderful to see the sense of pride they have in what they have achieved and has the added benefit of helping them to meet some of their KSF requirements.

Do not confine your creativity but look past any constraints that you feel may be there, if you don't ask you will never get. You may not get exactly what you want but what you do get will be better than nothing at all.

I cannot emphasise enough that you need to communicate what is

happening to all your staff constantly, it helps to keep them engaged (even the sceptics!), and this will help you when you implement the changes as all your staff will know what is happening and what they need to do.

Another tip is to be creative and find a way of being able to celebrate the good work that you and your team will be doing, this helps to motivate but also enables staff to feel they are achieving and are valued, and everyone likes to feel they are important in some way.

Finally I would just like to tell you that even the smallest, simplest and what may appear to be less significant idea can sometimes create big benefits so you and your team should consider all ideas that are put forward.

I wish you the very best,

Ward Leader, Productive Ward Test Site

# Messages from Ward Leaders who have implemented the Productive Ward:

Dear Colleague,

Welcome to the growing ranks of ward managers who have introduced PW to their wards. You will not regret this. It will do everything it says it does: increase the time nurses spend giving direct patient care, improve safety and reliability and so on. You will have a lot to do in the next few months but in the end your job will be more satisfying and you will have learnt new ways of working.

Some improvements will happen quickly and some will take longer. At the beginning it is important that you understand what is expected of you and what you can expect from your managers, project leader and clinical facilitator- you are not alone in doing this. So ask questions and expect answers.

Be prepared for your nurses to change the way they think and to start solving problems themselves. You may have to find a way to 'let go' if you, like me, are used to making the decisions and being in control. If you do, your job will get easier.

Follow the modules closely- don't take shortcuts! They have been developed and tested at length and all the steps are necessary if you are going to make lasting changes.

Don't get disheartened when things don't happen fast enough- some parts of the NHS take longer to change than your ward!

Sustaining change is the hardest partyou probably already know this from the amount of times you think you have solved a problem in the past only to have the same thing happen again. Audits and review seem boring and time consuming but it is a system that works- do them as the modules advise.

Good Luck!

Ward Leader, Productive Ward Test Site

### **Overview**

The Productive Ward is focused on the 'ward'...why?

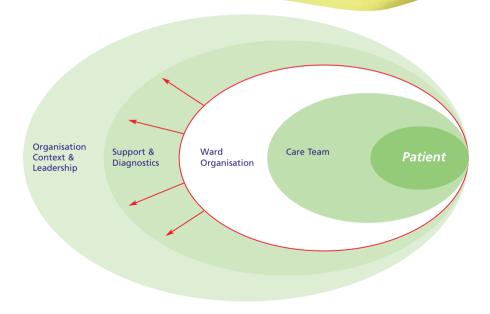
.....because the 'ward' is the core unit at the centre of care giving to the patient.

It is at this level that decisions are made that impact on the quality of care that the patient receives.

The experience so far with the Productive Ward is that you will need to influence not only the staff on your ward, but also other departments in the hospital that are involved in delivering care.

The diagram below demonstrates this relationship.

Be prepared...
implementing the
Productive Ward will
make your ward very
visible both inside and
outside your hospital



# What is the learning so far?

Feedback from those wards who have already introduced the Productive Ward has been extremely positive.

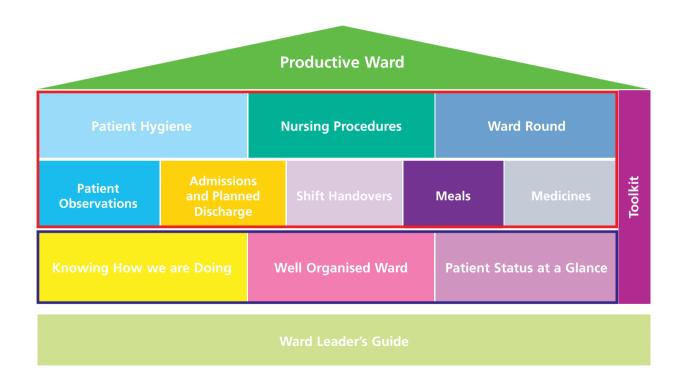
A number of wards have commented on 'the Sunday feeling...' where everyday now feels like a Sunday instead of the stress and disorganisation that had been their previous experience. This comment was made by the Trust Board Chair of one organisation as he toured the ward.

Another benefit that you will experience is the empowerment of your staff at all levels. You may be

surprised to see changes in staff whom you really thought would not be able to change.

Making time to get back to the basics of care is what the Productive Ward is all about and with your leadership your ward staff will value this opportunity.

## 13 modules create a Productive Ward



## Aim of the Modules:

The modules are designed to provide you with a no nonsense structure for implementing the Productive Ward

Start with this Ward Leader's Guide and then, with the ward team, begin to implement the foundation modules (highlighted in **BLUE**). These provide both a solid foundation for the more challenging 'process' modules (highlighted in **RED**) and a grounding in basic improvement principles.

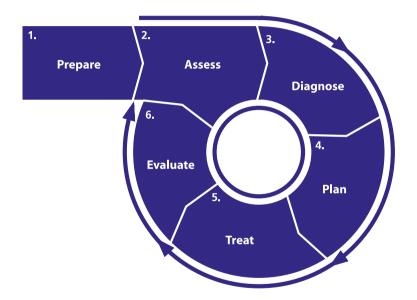
The modules are designed to be used by a facilitator leading a team.

You should aim for this to be you. It is your ward and your staff. If you don't feel up to leading through the first few modules, let your project team know. Ask them for someone to facilitate the first few modules so that you can learn the facilitation skills from them.



## General structure of each module:

Each module follows the basic stages illustrated here:



### **Healthcheck Baseline**

Each module contains a baseline section where the robustness of the wards processes, in relation to the specific module areas, are tested before and after the module's implementation.

### **Module Summaries**

#### Ward Leader's Guide

Key principles of the Productive Ward, getting started, leading your team, sustaining gains.

### **Knowing How we are Doing**

Developing ward based measures to help your team make informed decisions.

### **Well Organised Ward**

Making ward areas work for your team instead of hindering them in the delivery of care.

#### **Patient Status at a Glance**

Your team develops visual patient information that improves communication, patient experience and patient flow.

### Meals

Reduce the time your team spend physically delivering meals and allow more time for the team to assist with feeding and ensuring proactive nutritional assessment for your patients.

### **Medicines**

Your team ensures medicine rounds do not clash with other ward processes. Interruptions are reduced and your team ensures everything is ready.

### **Admissions and Planned Discharge**

Your team ensures quick, standardised and prompt admissions process that immediately plans for the patient's discharge.

### **Shift Handovers**

Reducing the time your team spends on handovers, while making the information handed over more appropriate, easier to remember and easier to understand.

## **Module Summaries**

### **Patient Observations**

Increasing the standard of patient observations carried out by your team. Ensuring they are accurate and that appropriate action is taken with the results.

### **Patient Hygiene**

Your team improves the supporting processes for patient hygiene focussed procedures so they are consistent, maintain a high standard, offer a better patient experience and achieve the standards your trust aspires to.

### **Nursing Procedures**

Your team improves the supporting processes for nursing procedures so they are consistent, a better patient experience and achieve the standards your trust aspires to.

#### **Ward Round**

Your team works with their consultants' team members to ensure clarity of outcome and clear planning from their ward rounds while making the ward round quicker and more consistent.

### **Toolkit**

A step by step guide to all of the Productive Ward tools. For you and your team to use in conjunction with the modules.



# Preparation for the modules

You will need to lead your team in the implementation of the modules. This is important as you need to be confident in your approach and instil this confidence in your team. Think about the following:

- ensure you know and understand the contents of the modules. If you are unsure, speak with your project leader
- think through the questions that your team may raise with you so you are ready with some answers
- work through the modules with the project team a week before you do the work on the ward
- be prepared for the session with the ward team – i.e. put up the learning objectives before the session









STANSON TO THE LEGAL TABLETS

# You



# What skills will you need to lead this work?

As the ward leader you are already a highly skilled professional.

However, the Productive Ward may require you to use skills that you have not used for a long time or have not had to use before. The types of skills you will need are:

- facilitation skills, both with staff within your own professional group and with other departments
- experience of training groups of staff

- previous involvement in change management projects, ability to deal with difficult situations
- excellent communication skills
- leading your staff it can be an uncertain time for your staff at first



## The Productive Ward commitment

This is an exciting opportunity to focus back on the basic standards of nursing care and improve the quality of care for your patients. In order to achieve this, you will need to do the following:

- understand the fundamental principles of the Productive Ward.
   If you are unclear, then speak the Project Leader
- be clear about the benefits that the Productive Ward can bring to your ward
- recognise that you will be required to find the time to support implementation in addition to your current role. You may need to discuss this with your manager and the Project Leader

 recognise that there will be times when you need to utilise all your skills as a manager to overcome issues and move the implementation on

It is advisable to go and see a 'showcase ward' either in your own hospital or if you are the showcase, in a hospital near to you that has begun to implement the Productive Ward. They will be happy to show you the results they have achieved and talk through what is involved.



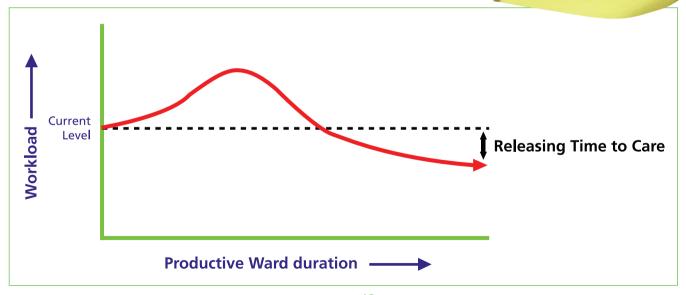
# The Productive Ward is not easy...

The Productive Ward relies on you as the leader, and your immediate leadership team above, to support your ward team in implementing new ways of working.

This will be over and above your day job. Things will get harder before they get easier.

The diagram below illustrates this:

It might not be easy, but it is worth every minute of time spent on it.



Meet with your matron and General Manager after you have read this Guide. Have an open discussion about the likely pressure the Productive Ward will initially bring. Decide with them what you can do about the pressure together. In addition, the Productive Ward will help to resolve issues as new processes are created together. Your team will feel increasingly involved in your ward's future.

Time put in by your matron and General Manager to shield you from some of your daily duties will help you get the project off the ground quicker.

The Productive Ward could bring to the surface any unresolved issues, disputes or frustrations within your team. Try to foresee these and resolve them, if possible, before you start.

## Senior nurse or nurse leader?

As well as being an expert in the clinical standards of ward care, you will increasingly become an expert in leading your team to reach and maintain these standards.

Members of your team may sometimes find the changes introduced an uncomfortable experience. You will need to support them.

In addition to upholding nursing standards, you will need to uphold new processes developed while doing the modules. You will need to be visible and open to the Productive Ward's collaborative techniques. Your role will be to ensure your team has the opportunity to create new ways of working. If your team has full involvement, the pride in your ward will increase.

The demands on acute wards have become more intensive. Ward staff need to be developed to continue to meet these demands.

As the service has evolved, ward leadership must also evolve.

As a Productive Ward leader you will further develop some of the following skills:

- viewing leadership as being just as important as nursing standards
- coaching and facilitation of your team
- working to sustain teamdeveloped standards
- developing ward processes in collaboration with your team
- making decisions using wardbased information

These new processes are the very things that will allow you to achieve the new levels of clinical and nursing standards you aspire to.

# Sustaining new ways of working with your ward's newly designed processes

Sometimes it may feel like some members of your team misunderstand your efforts to improve standards of care and see it as you personally taking issue with them.

Sometimes a member of your team may not see why you are asking them to do things in certain ways.

# With the Productive Ward you will avoid this.

Your ward's new standards will be developed, agreed and implemented with your team. By using the Productive Ward's methods to develop the standards on your ward, you will be creating

a strong foundation to maintain ward standards. This removes the possibility of your staff feeling 'put upon'.

# Collaborative – not taking responsibility?

Some people think that collaborative techniques mean that no one is responsible. This is not the case. Under this approach you and your staff have personal responsibility for your own actions. You and your team have a personal responsibility to maintain and develop the standards you have created together.

### Your Role – as a Leader

As the senior nurse on your ward, you are a 'nurse leader' and you will be required to lead your ward team in implementing the changes required within the Productive Ward.

e aff at

One of the key benefits of the Productive Ward is the empowerment of the ward staff at all levels to recognise what needs to be changed and change it. It is vital, that as their leader you;

**Do** - work with your team and involve them in decision making

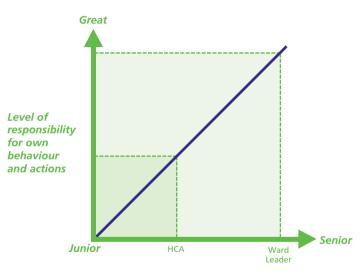
**Don't** – make decisions in isolation and expect the team to just implement them

Involving your team from the start will help them feel 'in the driving seat' and will help overcome any feeling of being 'put upon' or forced in to making changes.



## Your Role – as a Role Model

You need to lead from the front and make sure that you are demonstrating the types of behaviours and practices indicated within the Productive Ward.



Level in organisation

# The cynics and the sceptics

Members of your team will react in different ways when you start the Productive Ward. As the ward leader you need to make clear your expectations of your team.

Make clear that being sceptical about the Productive Ward is ok, but being cynical is not.

It is fine for a team member to be sceptical as long as they give it a go.

Sceptic – a person inclined to question or doubt accepted opinions

**Cynic** – a person who has little faith in the integrity or sincerity of others

Source - Oxford Compact English Dictionary

Using the Productive Ward to bring people on board, and using ward based information, will create a better environment for everyone. You will influence the sceptics and silence the cynics!



# Your Role – in setting the standards

## The fundamental principle of The Productive Ward:

To deliver consistent, reliable, safe care to patients.

#### How is this done?

By the development of quick, applicable standards, that reflect reality, that are flexible and can be adapted and further developed.

#### What will the standards deliver?

- standardised working practices
- consistency of approach
- visible high quality care
- the opportunity to increase the skills of ward staff
- the ability for staff to deliver care whichever ward they are working on

You and your team will have a personal responsibility to maintain and develop the standards you have created together. You need to ensure that your staff - at all Bands - to understand this.

This is particularly important for your Band 5 and 6 staff. Whilst it is right that they are able to challenge and ask questions, they also need to recognise it is important that they show a united approach when discussing issues with other ward staff.

Make sure they understand they can come to you or the Project Leader at any time if they have issues to discuss but must not undermine the Productive Ward in front of junior staff.



### Ward based information

By applying the Productive Ward you will develop a series of measures on your ward. This will help you and your team to understand the quality and efficiency of care on your ward.

Ward based information will replace opinions. This will make getting agreement easier, helping to get the right decision every time.

Collecting the information means you can demonstrate you and your team's hard work to the rest of the trust. Measuring success will help turn your sceptics into believers and leaders of improvement!

In the NHS we often bounce from one problem to another. Sometimes we bounce so quickly that we often don't know why a problem went away. Or why we happen to be having fewer complaints than last month. This means that the problems and complaints often come back.

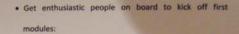
You will learn how to understand your ward's performance in detail. This will tell you exactly what your ward is capable of and when its performance is being influenced by outside factors.

# Survival Guide from ward leader implementing the Productive Ward

### Staff Involvement - the Ward Manager's Survival Guide

- Introduce Productive Ward good ward briefing on Institute's website
- Make sure you read as much material as possible to be
   well prepared and confident to answer questions –
   "what's the point?" being the most frequent!
- Go and see a ward already doing the project talk to
   Ward Manager; they'll be happy to share their experiences
- Play 5S game make it fun; bring chocolate @
- Get staff involved in writing Vision Statement be prepared for strange ideas!!
- Introduce Safety Crosses and make sure people know
   what to do with the safety crosses and make sure people know

## Survival Guide Continued



- o KHWAD someone interested in IT/graphs
- o WOW someone who is organised
- PSAAG someone creative who can get people to contribute ideas
- · Build time into rota to free up staff
- Introduce idea of process modules early on get staff to volunteer for area of interest – meals, medicines, hygiene, handover, observations, discharge
- Be prepared for it to take over your life! Your staff and your family will hate you!
- Keep focused your new mantra will be "it'll be worth it!"
- Remember you are not alone. There are plenty of people out there to support you – just ask.



# Ward Start-up



## Who is the Team?

Who should be in it?	Modules involved in	Role
• ward leader (head)	<ul><li> all</li><li> foundation modules in particular</li></ul>	<ul> <li>project lead for ward</li> <li>monitor progress against plan</li> <li>lead identification of issues and problem solving</li> <li>liaise with the change leader to extract maximum value</li> </ul>
the entire ward team!  • all staff 'types' will need to be involved including nurses, junior doctors, ward clerk, HCA's, porters, physiotherapists etc	all – though not everyone in every module	<ul> <li>participate in issue identification and problem solving</li> <li>assist in data collection at the ward level</li> <li>analyse collected data</li> <li>brainstorm to agree improvements in process</li> <li>test process improvements</li> <li>implement modified improvements</li> </ul>

Remember...you need to ensure everybody is included and you have delegated responsibility for developing aspects of the Productive Ward to team members. The whole team is responsible for the project's success.

# Support from your organisation

Your ward team needs the support of the management structure around you. Having the support and agreement of your management team is vital to the success of the Productive Ward.

The diagrams on the next two pages show how everybody will need to work together.



Steering Group	Project Implementation Team	Ward Teams
<ul> <li>CEO</li> <li>executive leader</li> <li>project leader</li> <li>project improvement facilitator</li> <li>medical director</li> <li>finance and systems director</li> <li>general managers</li> <li>nursing managers</li> </ul>	<ul> <li>executive leader</li> <li>project leader</li> <li>project improvement facilitator</li> </ul>	<ul> <li>ward leader</li> <li>matron</li> <li>representation of all staff e.g. nurses, junior doctors, ward clerks, HCAs, porters, physiotherapists etc.</li> </ul>
	Commitment to Productive Ward	l en
<ul> <li>meet monthly to review progress, offer direction and prioritise wards for roll out</li> <li>communicate actively on weekly basis</li> <li>participate in audits</li> <li>visit wards frequently</li> </ul>		<ul> <li>understand the requirement of the Productive Ward</li> <li>be committed to implementation</li> <li>be committed to looking for solutions to problems</li> <li>celebrate success</li> </ul>

### **Support Teams**

- information analyst
- finance team analyst
- supplies
- pharmacy
- housekeeping

### **Commitment to Productive Ward**

To support implementation of Productive Ward which includes providing data and information as required.

To understand that the implementation of the Productive Ward will impact on their department and they will be required to work collaboratively to ensure that systems are working efficiently.

## Time investment

Your investment in the Productive Ward will be considerable.

You will initially need to invest extra funding for bank staff to get the Productive Ward off the ground.

Other than the improvement support detailed in the Executive Leader's Guide, the Productive Ward does not take people out of their roles for long periods of time.

The periods where you will need extra cover are when you are having group discussions. This could be, for example, when watching

and mapping a process. These periods take around 1 to 1.5 hours. They can often be covered by staff from other wards, or your matron, if planned in advance.

Once you have completed your first process design, and your team can see the benefits, you will find your team members more willing to stretch to cover for each other, so colleagues can get involved in a mapping session.

Time invested now will benefit you in the long-run as you start to see the Positive results of the Productive Ward.

# Implementation Schedule

This diagram shows the first four months of implementation. It is

important you work through each of these phases.

	Facilities and equipment	Your vision	1st Meeting	Ward Baseline	Foundation Modules	Key Ward Processes
	2 weeks	1 week	2 wee	eks	3 months	own pace
Description:	ensure unhindered start	making your ambitions for your ward clear and easy to understand	set the tone for the Productive Ward     define direction	find out where you are starting from	create a stable, calm and efficient foundation from which to improve your key ward processes	re-design key ward processes     increase quality, reduce waste time
Pre-requisite:	<ul> <li>defined team space with generous clear wall space</li> <li>camcorder</li> <li>television</li> <li>white boards</li> </ul>	vision statement up in ward office or nursing station     vision discussed openly with all team members inc Matron and General Manager	to be continued every week     to be held around the measures board in the team area     start to finish on time	10 point     Productive Ward     health check     generate your     ward's direct     care time values	MODULES:  • Knowing How we are Doing  • Well Organised Ward  • Patient Status at a Glance	ensure new ward processes are designed in a collaborative fashion

# Facilities and equipment

You will save valuable time by ensuring the following is identified or available before you start:



#### **Facilities:**

- a) Select an area on your ward for the Knowing How we are Doing measures board. This will also be where you hold your team meetings.
- b) A second area needs to be found to watch process videos back and to map them. You will need spare space in order to display your findings.



#### **Equipment:**

- stop watch
- A3 clip board
- pedometer
- big role of wide paper (>1m wide)
- flip charts
- 'post-it' notes
- magnetic tape
- insulation tape
- red 'spot' stickers
- flip chart markers
- permanent markers
- 3 large white boards
- spare tapes for camcorder
- box to keep it all in
- access to DVD player
- access to computer with active CD drive
- access to television



#### Access to:

- A3 laminator
- A3 printer
- colour printer
- photo-copier
- camcorder (DV tape camcorder ideal)

### **Your Vision**

#### What is a 'Ward Vision'?

A compelling statement that tells everyone what your ambition for your ward is.

#### Why spend time creating one?

- it sets the bar for what you would like to achieve
- it provides a context to set your improvement activities against i.e. 'we're doing x because it will help us achieve y taking us closer to z'
- an exciting ward vision can galvanise your team towards reaching it
- it helps those outside the ward to understand your aspirations and provide support or even join in!

#### Where to begin?

- talk to your team, convince them of the benefits in creating a vision
- encourage them to give some thought to what they want for the ward
- see Toolkit Tool No.1 (Your Vision)



#### How to create your own

Developing your own ward vision is very much a creative process. The steps detailed below are intended to provide a loose structure to help you move forward.

- arrange 5-10 mins to spend with the ward team (try to find a quiet place where you are unlikely to be disturbed)
- try to visualise the perfect ward:
  - what would it look like?
  - o how would it feel to work in?
  - what would patients say about it?
  - how would clinicians and managers describe your ward?

- ask yourselves these questions and jot down all your thoughts on post-it notes. Attach these to a poster or wall – they may inspire other ideas from your team members
- try to describe your perfect ward in terms of Quality, Safety, Efficiency and Cost
- decide what are the most important elements to you as a team from what you have created so far
- draw some of these together to form a sentence or statement that best sums up these ideas – keep it descriptive and try to use dynamic terms

# What to do once you've created your own vision

- display it in a prominent place in your ward e.g. on your measures board, at the entrance to your ward, at your nursing station etc
- use it to help you choose what to improve first when you're unsure of your priorities
- work hard to make it happen!

Keep it simple! No essays, no jargon and no buzz words!
Keep it real



#### **Clinical Quality**

- · basic nursing care carried out to high standard
- excellence in care supported by evidence-based best practice

#### **Teaching and Research**

- ongoing needs-led programme for all staff to ensure standards are maintained
- all staff have development plan
- multiprofessional approach to sharing knowledge and skills

#### **Patient Experience**

- clean and tidy environment
- well-presented, professional staff
- provide streamlined service from pre-operative clinic to discharge
- written information available to ensure patients and carers are informed and empowered to make best decisions
- patient feedback is acted upon

#### **Organisational Efficiency**

- less time on paperwork more time on patient care
- effective team working all staff aware of their role in the team
- reduce and maintain Length of Stay, pressure sores, infection rates



The meeting should not be an excuse for a general chat. Uphold start and finish times and drive for punctuality.

The team meeting will develop into your ward's key communications tool. It will help make sure everyone is aware of the ward's new processes as they develop – helping you uphold them.

Pemember - keep
this and all your
meetings structures
and focused

Your first team meeting is very important. The following table illustrates some of the questions that will be asked and you need to be prepared for:

How will we do this?	<ul> <li>how can we do ourselves justice – do we have the leadership time?</li> <li>who will be in charge – and on the project team?</li> <li>how will we get the ward team involved?</li> </ul>
How much time will it	first modules in 6 months but will continue into the future
take?	<ul> <li>when should we start – is there a 'right' time?</li> <li>does this program clash with any others on the ward?</li> </ul>
What support do we need?	<ul> <li>does everyone here have the time required for this effort?</li> <li>what is the 'self assessment' telling us?</li> <li>can we do this without external support?</li> <li>is this available within the trust?</li> <li>what do we have to do to adjust existing ward resources so the ward work does not suffer?</li> </ul>

### Ward baseline

10 Point Productive Ward Healthcheck

You should develop a baseline understanding of how your ward's existing processes reflect the Productive Ward vision.

This will give you a view on where you are starting out from and what rigorous processes you will need to develop for a Productive Ward.

To do this use the 10 Point
Productive Ward Healthcheck tool
available at:

www.institute.nhs.uk/productiveward

You need to set up a user account on the NHS Institute website and log in to access the Healthcheck tool. You need to ensure one account is set up per ward you are implementing the Productive Ward with.

The tool will give a Healthcheck score which will give you a tangible starting baseline to complement your measures. You should re-visit it monthly to help track improvement. Do this along with your measures developed in the following Measuring Success section on p57.

### Ward baseline - Direct Care Time

One of the key themes of the Productive Ward is the amount of time ward staff have to care for their patients. This is called direct care time.

You should create a baseline assessment of how much time your staff have available to care before you start the modules.

Direct care time is assessed using the easy to use Activity Follow tool. This can be found in the Toolkit module. The Activity Follow Tool provides a detailed one hour snapshot of, for example, a nurse's day. It can be repeated to create a longer snapshot. The Toolkit contains guidance on the duration, timing and intervals for this baseline assessment of direct care time.

You will need to repeat this snapshot (on the same day and time) as the project matures. This will help you track how much time you are releasing to care.

### **Foundation Modules**

It is tempting to rush into implementing the Productive Ward. Its structure and ease of implementation make it inviting and seemingly simple to get started.

 starting with Knowing How we are Doing, you should take your time and ensure you complete all three foundation modules

 this will give you a calm, informed foundation to build your key ward processes on

Knowing How we are Doing (ward-based information)

Well Organised Ward (5S and environment)

Glance (visibility)

# Key ward processes - what you do next

Once you have completed the foundation modules, you move onto the key ward processes.

These phase 1 modules have no defined order\*. The order in which they are implemented should be decided by you and your ward.

The grid on the next page is designed to help your team decide on which module to start after completing the foundation modules.

<sup>\*</sup>In our experience it is useful to consider the Shift Handover module as a good module to start in Phase 1. This is because a Shift Handover sets the tone and direction for the whole shift.

# How to choose the sequence - ask what needs to change the most, and what's easiest to change?

#### Need for change

- is there a risk to patient safety?
- does it 'cost' a lot (time spent by ward staff)?
- does it cause frustration to your staff and patients?

High	Change after proving that it can be good	Needs change, can change: Use this as proof of concept
Low	This way is the best way for now	Don't fix what's not broken
	Low	High

#### Ease of change

- is it within your ward's control?
- does it require clinical input?
- does it require a change in policy?

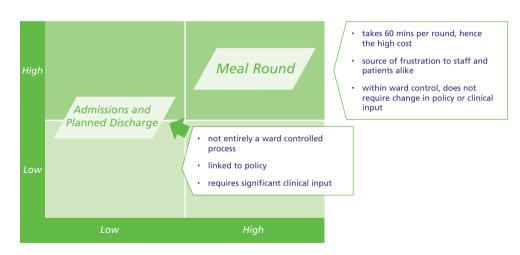


## Choosing your sequence continued:

### Let's look at how we choose between two modules...

#### Need for change

- is there a risk to patient safety?
- does it 'cost' a lot (time spent by ward staff)?
- does it cause frustration to your staff and patients?



#### Ease of change

- is it within your ward's control?
- does it require clinical input?
- · does it require a change in policy?

### Communications Plan

This is a vital part of your role, not only on your ward but also within the hospital as a whole. You must ensure that everybody on your ward knows what is happening and why. Ensure your staff all have copies of the staff guide which will introduce the concept and underpinning principles of the Productive Ward.

Don't assume people know...tell them!!

Please do not forget to let the patients and their relatives also know what is happening. Think how you will do this. Make sure you have copies of the Productive Ward patient information leaflet,

but remember, your personal contact and explanation is very important.

Remember the golden rule of communication, if you think you have told somebody, tell them again. This guarantees you will not overlook anybody.



# Communications plan

### What should it look like?

It helps to put together a quick communications plan. It will be a good prompt for when the Productive Ward kicks off.

### Internal (within trust)

# Say what? • our ward has been chosen as the showcase because...

- our team has been selected based on...
- for the team, this means:
  - o time commitment
  - benefits (long term)
  - o issues (short term)
- for those not explicitly on the team how can you contribute...
- the last time we did this, we succeeded! success meant...
- we also learnt a few things our key learning was...

#### To whom?

all ward staff

#### When?

- the message has to be delivered at the time of 'launching' the project in the ward, in an 'all staff meeting'
- even more crucial is consistency of messages in regular team meetings – it is imperative that all changes are communicated as they happen, to everyone on the ward!

# External (outside trust)

- the last time we did this, we succeeded! success meant...
- we also learnt a few things our key learning was...
- we will need your help for...
- this will also benefit you because...
- what we can do for you...

- finance department
- information department
- estates
- catering
- all other relevant stakeholders

- part of the 'launch' at the 'all staff meeting'
- alternatively have specific meeting for external stakeholders
- you should plan for one communications workshop before launching the 'showcase' ward with all internal and external stakeholders invited
- your communications should continue with consistent messages using regular routes (scheduled internal and external messages)
- it is important to work with your trust communication lead, who will help and advise with regards to messages, communication changes and working with the media

## Interaction with support services

Remember, the Productive Ward will have an impact throughout your hospital, in particular in the departments that supply you with services which enable you to deliver care.

#### For example:

- premises/environmental issues
- meal rounds and housekeeping
- financial accounting
- medicines management/pharmacy
- supplies
- patient transport

Depending on the module you are implementing, you may need to communicate with these departments and involve them in the project. How you communicate is very important. The following will help you:

- understand that other departments are as busy as you are and may not be able to respond to you immediately.
   Please be understanding
- support departments face many of the same issues you face running your ward – they too cannot change things overnight

- if you adopt an understanding approach, you will find them more willing to help
- agree acceptable time frames when action is required and make sure this is recorded
- if you really find another department is blocking progress, despite your best efforts, escalate the problem to your manager

**Remember...**it is important that at all times you are professional in your approach.

# Importance of good relationships and understanding, from the whole team, with support services

### A case study from a test site:

The ward decided to implement the Meals module after looking at where their time was being spent on using the Activity Follow Totaliser. The Meal Round had also been a source of frustration for staff for a number of years.

During the implementation the ward team spent time building up relationships with the catering staff. Ward staff visited the kitchens to see how the high number of meals were prepared and shared experiences with the kitchen staff. The catering team visited the ward to take part in the implementation and see how the meal round worked.

The result was the catering team agreed to change their whole

system so that they could provide the changes the ward team had come up with while doing the Meals module. These changes were over and above the caterer's contractual requirements and done free of charge.

The changes involved new roles and responsibilities for catering staff and trial systems being used in conjunction with existing systems for other wards.

During the early stages of implementation there were small errors, away from the agreed standard, from both ward staff and catering staff. These were slowly resolved and the new working relationship strengthened.

Unfortunately, a little later on, during a weekend, one of ward staff took issue with another small error and acted in an inappropriate way towards the catering staff. This resulted in staff in catering department refusing to continue with trial when they felt they were not appreciated.

All of the good work had been undone in an instant. It took a long time to re-build the trust and get back the old working relationship and put the ward's meal round implementation back a long way.

# Sustain



### Ward Visits

You will find that others from both within and outside your hospital want to visit your ward to see for themselves what you are doing and the changes you and your team have made. Your role in showing them round is vital for their learning but also in making people understand your hard work.

Also, it is seen as very important to the sustaining of the Productive Ward that the senior managers within the hospital are seen on your ward and encouraging the staff See pages 101, 102 and 103 within the Toolkit for the example of the visit pyramid – a visual system to ensure all levels of the trust understand what you are doing and how they can support you.



#### VISIT GUIDELINES RED

#### EXECUTIVE TEAM OR EQUIVALENT

#### BEFORE

#### Communicate to the ward leader before hand:

- intentions
- · timing / duration
- availability of ward leader or deputy

#### Current status of the Productive Ward:

· talk to the project team

#### ON THE WARD

#### People first, ward second:

#### engage staff in casual conversation, ask general questions about the ward and project status

 ask the Ward Leader / deputy about the Productive Ward and explore the support the ward leader has been given

#### Talk to a patient:

- engage patient in casual conversation
- . ask patient about their experience on the ward and the hospital generall
- ask the patient about:
  - o what have we done well?
  - o what have we done less well?
  - what should we continue to do?
  - what should we stop doing today
  - what is next during their stay (diagnostics test lined up?, treatment lined up?, next OT visit etc)?
     their plans to go home (planned discharge date etc if appropriate)?

#### Visit the ward performance board:

- is it up to date?
- . ask a member of staff to talk you through the performance board and recent performance
- · discuss the link between the measures and the trust's strategy

#### Conduct an audit:

. conduct the appropriate RED audit as per the ward's audit plan

#### Communicate:

- . your view on the ward's improvements efforts
  - your vision for patient care
- · trusts priorities for the coming year
- · trust priorities for nursing
- trust priorities for marshing

#### Sign the visit pyramid:

· record your visit to the ward to illustrate your, and the trust's, commitment to the ward

#### Wrap up the visit with the ward leader or deputy:

- give and ask for feedback
- agree on a max of 2 priority next steps (1 yours / 1 theirs)

#### AFTER

#### Reflect on the visit:

- what was going well?
- · what needs support / direction?
- what would the ward team think was important to me?

#### Follow up with the ward leader and the project team:

- · what you were impressed by?
- · actions for the trust
- · actions highlighted by the audit

#### Releasing Time to Care: The Productive Ward

Copyright NHS Institute for Innovation and Improvement 2008

Note: To print in full background colour, select 'background' print in 'options' section of 'print' menu

Combined with the visit pyramid are visit guideline sheets for different visitors for the trust. Familiarise yourself with these sheets so that you know the type of things the visitor will want to do. Get your senior team to do the same.

The standards you create are also very useful to show visitors. This will provide a structure to talk your visitor through your ward's improvements.



Knowing your process baseline and then continually monitoring against this baseline is vital if change is to be sustained.

To help you with this, each module has a 10 point checklist based on the improvement measures within the module.

The example to follow is from the Patient Status at a Glance Module. The descriptions are of characteristics of good patient status visual management. As can be seen from the Status 1 column, the first time the ward team assessed their patient information systems against these criteria the result was mostly red. However, after eight weeks of implementing the PSAG module, in the status 4 column, the result was all green.

Kev:

Status 1: Before module is implemented
Status 2: After 2 weeks of implementation
Status 3: After 4 weeks of

**Status 3:** After 4 weeks of implementation

**Status 4:** After 8 weeks of implementation

You can see the changes you are making and also see the continual improvement

10 Point Check List Patient Status at a Glance	Status 1	Status 2	Status 3	Status 4
The patient board is in a location central to staff.				
The patient board is used in shift handovers and discharge management.				
Information on the bed boards feeds easily into the patient board.				
Bed boards have information helpful to the patient (e.g. consultant name, EDD).				
Patient confidentiality issues have been considered.				
Staff understand where information on the board is coming from.				
The frequency of updates and the person responsible is agreed.				
The board is always up-to-date.				
Staff can quickly understand patient status by reviewing the board.				
Regular and random audits are conducted on how complete and up-to-date the board is and whether it is being used for its designated purpose.				
Staff spend less time searching for information.				

### Measurement:

It is important to make clear that measurement is not about competition between wards. It is about allowing you and your ward to understand where you are now, where you can get to and to enable your ward team to make informed decisions to get there. All wards start at different points.



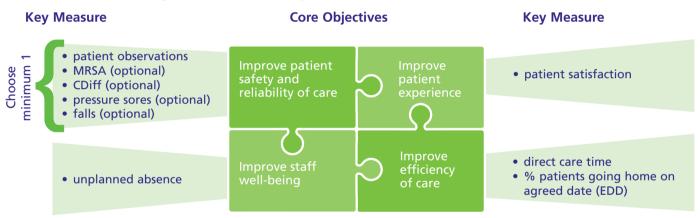
# Measuring Success – Collecting the facts:

What?	<ul> <li>all the key project measures</li> <li>for a lot of these measures data may not be readily available – use whatever is already available, but do resolve in a way that solves the data source permanently</li> </ul>
When, and how often?	<ul> <li>once before the project begins</li> <li>to be updated at regular intervals, depending on the measure</li> </ul>
What period?	monthly for the past year leading to the present
What level?	<ul> <li>at the ward level</li> <li>the trust will be asked to collate all of this data for you!</li> <li>make sure you speak with the information department / patient systems department to get whatever data is being captured</li> </ul>

Facts are the only way to prove the ward is doing well.

# The Productive Ward will help improve 4 key dimensions of care you provide

Performance is tracked against the four basic objectives:



This provides you and your ward team with a balanced set of measures

Our learning so far is that it can be difficult to obtain this baseline data. Your responsibility is to support the Project Leader and influence throughout the organisation to ensure that as much data as possible is made available. If you are unable to obtain the exact measure suggested, you can make the decision to use the closest existing data.

Detail on these measures is available in the Knowing How we are Doing module.

# Audits that drive towards consistently high standards

Audits should be simple, practical and continuous. Resist the temptation to develop complex processes to manage audits.

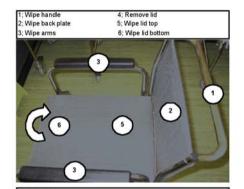
Forget your previous audit experience. Productive Ward audits are designed by your staff, based on the standards defined by your staff and predominantly carried out by your staff.

Even if the standard seems to be sustained, audits never stop. They are the glue that stick your improvements together.

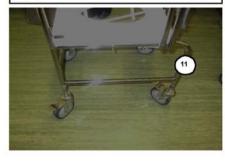
### **Example Standard**

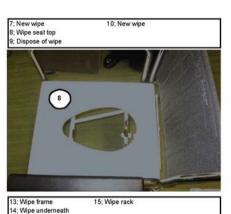
No.	Standard	
1	All items should be in their designated area.	
2	All commodes should be ready to go.	Standards agreed:
3	All the Combur7 test strips are within the expiry date.	18th October 2007
4	The 24 hour urine collection container is within expiry date.	
5	All items in these areas used and required.	Audit due: friday
6	There should be no missing stock.	each week
7	There is no dangerous or faulty equipment.	
8	The floor area is clean and clear from litter/clutter.	Responsibility:
9	etc	) Smith

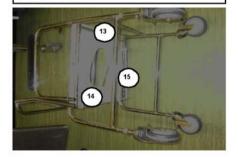
# **Example Commode Standard**











# Ongoing support for staff

Getting your staff ready to start the Productive Ward and then working with them during implementation is just the start for you as the ward leader.

Your staff will be growing in confidence and will be ready to challenge poor practice and look for solutions to their problems.

Throughout this time, you will need to ensure you have the time to continually support them.

Decisions will need to be made concerning how to re-invest the time that has been released from making processes on the ward more productive. For example, time saved by having a tidy and organised

sluice can be re-invested in carrying out thorough observation rounds or ensuring that all patients have their nutritional requirements met at meal times.

You will need to guide your staff as they make these decisions.





# Keep Moving - Spread



## New joiners

Eventually, your ward will have developed a clear, and standardised (documented) picture of 'how we do business'.

The new standards you have been developing are a real opportunity to create a comprehensive ward induction process for staff new to your ward.

Whether staff have come from within the hospital or are new to your hospital, you must ensure that they fully understand the principles of the Productive Ward and your ward's key process standards.

A simplified structure for Induction is shown (right). This is over and above your existing induction subject matter.

Area	Staff signature	Date
Staff Guide		
Patient Information Guide		
Tool kit		
<ul><li>3 Foundation Modules</li><li>Knowing How we are Doing</li><li>Well Organised Ward</li><li>Patient Status at a Glance</li></ul>		
Other modules as appropriate		
Meetings schedule		
Ward orientation e.g. • sluice • treatment room • measures board		

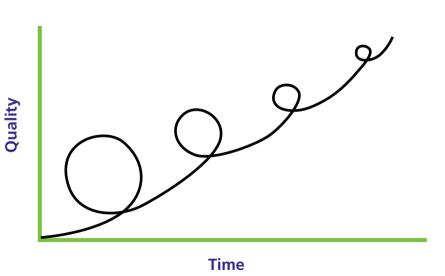
# Identifying ongoing improvements

The Productive Ward is not a one off initiative. You may well have done a three or four month period, but the process never ends.

A powerful way to maintain your ward's improvements is to keep improving. This is called continuous improvement.

In order to maintain a process of continuous improvement it is important that the cycles of improvement are ongoing, each time reaching a higher level of quality.

The diagram opposite shows how each Assess, Diagnose, Plan, Treat, Evaluate cycle is followed by another. Each time the cycle is completed, the quality increases!



65

# Identifying ongoing improvements

The decision to re-visit modules you have already implemented may happen because:

- you have completed all of the modules
- audits are showing signs that some improvements are not being sustained
- Activity Follow Totaliser shows large areas of lost time
- near miss or other incident

If you are re-visiting a module, start from the beginning and do not skip sections. You will find the quality of your team's improvements greater.

## **Building Productive Ward in to roles**

As ward leader, you face challenges of ensuring the staff working on your ward have the skills and competencies required to work on a 'Productive Ward'.

The Agenda for Change, Knowledge and Skills framework can also assist you as you work with the staff on the ward to increase their knowledge and competencies.

By improving skills your team will learn to work to a team defined standard. By using new practices you will systemise the Productive Ward. You will need to ensure that:

- all posts clearly reflect and describe the knowledge and skills required to implement and maintain the Productive Ward
- annual development reviews include an opportunity to discuss how staff have applied their knowledge and skills and also identify additional developmental needs
- personal development plans are agreed with each member of staff and agreement reached on how to address any additional development needs in relation to the Productive Ward
- learning and development opportunities are identified appropriate to staff requirements

# Learning from/with others

Our experience of the Productive Ward is that staff are enthusiastic to share their learning and learn from others who are also implementing the project.

This can be done in many ways, but as the ward leader, you are encouraged to look for learning opportunities for your staff.

You can do this by:

- visiting other wards in the hospital which are implementing the Productive Ward
- what standards have other wards implementing the Productive Ward created?
- visit other hospitals which have implemented the Productive Ward
- visiting other hospitals that are at the same point of implementation as you
- undertake audits on other wards in the hospital and have them audit your work

- work with your Strategic Health Authority and share your learning and experience with them
- use the Productive Ward website for shared learning – www.institute.nhs.uk/productive ward





## **Acknowledgements**

#### Thank you to all staff at:

Basingstoke and North Hampshire NHS Foundation Trust

**Barnsley Hospital NHS Foundation Trust** 

Royal Liverpool and Broadgreen University NHS Trust

Luton and Dunstable Hospital NHS Foundation Trust

Nottingham University Hospitals NHS Trust

Central Manchester and Manchester Children's University Hospitals NHS Trust

NHS Institute for Innovation and Improvement, and staff from our improvement partners, who have had an input into this document

#### This module has been developed by:

Nick Downham, Associate, NHS Institute for Innovation and Improvement

Lynn Callard, Lead, Productive Leader, NHS Institute for Innovation and Improvement

Kate Jones, Head of Safer Care programme, NHS Institute for Innovation and Improvement

Liz Thiebe, Head of Productive Series, NHS Institute for Innovation and Improvement

Dr Helen Bevan, Director of Service Transformation, NHS Institute for Innovation and Improvement

Sean Manning, Senior Associate, NHS Institute for Innovation and Improvement

Neil Westwood, Associate, NHS Institute for Innovation and Improvement

Cathy Adcock, Improvement Manager, Luton and Dunstable Hospital NHS Foundation Trust

Bruce Gray, Improvement Manager, Luton and Dunstable Hospital NHS Foundation Trust

Liz Ward, Case Manager, Barnsley Hospital NHS Foundation Trust

Lizzie Cunningham, Matron, Basingstoke and North Hampshire Hospitals Foundation NHS Trust

Cathie Blackwell, Sister, Royal Liverpool and Broadgreen Hospital NHS Trust

Please view the enclosed: Releasing Time to Care -A short 10 minute introductory DVD before reading this booklet.

Watch the DVD at least twice...

You will pick out new things each time you view it.

Your copy missing? Or would you like to request another copy?

Further copies of the DVD are available from Prolog Phase 3, Tel: 0870 0662071



Website: For more information and to register your interest please visit www.institute.nhs.uk/productiveward

Contact the Productive Ward team: productiveward@institute.nhs.uk

Further copies of this document can be obtained from:

Prolog Phase 3, Bureau Services, Sherwood Business Park, Annesley, Nottingham NG15 0UH Telephone: 08700662071 Email: institute@prolog.uk.com

**Quote: NHSIPWWardldrs** 

ISBN: 978-1-906535-20-9

Copyright © NHS Institute for Innovation and Improvement 2008 all rights reserved