The new driving force for improvement across the NHS in England:

How NHS IQ intends to support excellence in Elective Care

Julian Hartley
Managing Director
Significant improvements in elective care waiting times
ER is aligned to NHS Outcomes Framework
7 day services are key to its success
ER is “big cog” in a whole pathway

“Enhanced Recovery is a solid platform to build upon, ER is a strong concept and we have the opportunity to widen this further along the care pathway and continue to generate evidence of its impact”

Professor Keith Willet
ER can have a significant impact

Falling length of stay
70,000 fewer bed days
No increase in readmissions

Increasing compliance with Individual components

Reductions in complications

LOD: Hip, Knee, Hysterectomy, Prostatectomy
(Quarterly HES data)

% Compliance with ER Components: May-July 2012
(All specialties, except where indicated. Source: ER National Toolkit: Sample size 3,972)

Pre-op
- Patient Assessed for Surgery
- Patient Explanation ERP
- Therapy Education Given (MSK)
- Stoma Education Given (Col)
- Oral Bowel Prep Avoided (Col)
- Patient Admitted on Day of Surgery
- Carbohydrates Given
- Avoidance of Sedatives
- Antibiotics Prior
- Epidural or Regional Analgesia
- Individual Fluid Therapy
- Hypothermia Prevention
- Avoid Abdominal Drains (Col)
- NG Tube Removed
- Avoid Crystalloid Overload
- Avoid Systemic Opiates
- Post-Op Nutrition
- Nausea and Vomiting Control
- Early Mobilisation

Post-op

Intra-op

ER can have a significant impact

Falling length of stay
70,000 fewer bed days
No increase in readmissions

Increasing compliance with Individual components

Reductions in complications
Day case or one night stay breast surgical model

- Significant variation across the country in length of stay and clinical practice for people undergoing major breast cancer surgery (excluding reconstruction)
- Work with acute trusts and clinical spread networks streamlined the breast pathway, changed clinical practice and reduced unnecessary length of stay by 50% with no increase in readmission rates
- 92% of people reported being actively involved in decisions about their care.
Key issues for the next stage of improvement

- NHS England’s ‘Everyone Counts: Planning for Patients 2013/14’
- How can we utilise the learning from the last decade to create broader, faster change?
- What are our priority areas of focus that will best enable us to improve the health and healthcare of our nation?
- How should we organise our key resources for improvement?
Introducing NHS Improving Quality (NHS IQ)

• Improving health outcomes across England by providing improvement and change expertise
• Set up from 1 April 2013 and hosted by NHS England
• Working to provide improvement and change expertise to support improved health outcomes
• Creating for the first time in the history of the NHS one improvement organisation that is in alignment with its needs and challenges
• Bringing together and building on the wealth of knowledge, expertise and experience of all that has gone before:
  – National Cancer Action Team, National End of Life Care Programme, NHS Diabetes and Kidney Care, NHS Improvement, NHS Institute for Innovation and Improvement.
  – Hosts NHS Interim Management and Support, Improving Access to Psychological Services (adult and children and young people).
Our vision

We will demonstrate value and strength by:

• Delivering real benefits for people using NHS services
• Being the leader of improvement in England and the ‘go to’ organisation
• Being a catalyst for change and a partner to drive transformation in the NHS, creating innovative and new knowledge of how to achieve transformational change
• Acting as a focal point for the system - creating impact through connectivity and support
• Being a source of expertise for healthcare around the world.
Improvement programmes

Delivering improvement programmes focused on the five domains of the NHS Outcomes Framework (Director: Dr Janet Williamson):

1. Preventing people from dying prematurely (Head: Hilary Walker)
2. Enhancing quality of life for people with long term conditions (Head: Claire Henry)
3. Helping people to recover from episodes of ill health or following injury (Head: Ann Driver)
4. Ensuring that people have a positive experience of care (Head: Jane Whittome)
5. Treating and caring for people in a safe environment and protecting them from avoidable harm (Head: Julie Harries).
## Improvement programmes

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<tr>
<td>NHS Health Check available to all adults in England</td>
<td>Evidence based tools</td>
<td>Primary care, diagnosis, enhanced recovery, 7 days</td>
<td>Experience of care central to commissioning &amp; delivery</td>
<td>Developing an improvement system for safety across the NHS</td>
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<td>Improved public awareness &amp; early diagnosis</td>
<td>7 day integrated care pathways for frail elderly, end of life, dementia, mental health</td>
<td>Rural and remote services review</td>
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<td>GP engagement in the big killers: cancer, heart, stroke, liver, resp</td>
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<td>Children and young people’s transition to adult services</td>
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## Capacity and capability programmes

Building improvement capacity and capability across the whole system  
(Director: Prof Moira Livingston)

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<td>Transformational capability building within Clinical Commissioning Groups</td>
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<td>Capability building for primary healthcare providers</td>
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<td>Whole system transformational capability building</td>
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How we work

• A core team and a range of delivery partners
• Developing partnerships across sectors and working to support the whole NHS
• Understand what our stakeholders need and want
• Ensure work is solutions focused through creative thinking and keeping an eye to the future
• Deliver through the NHS Change Model
• Be open, agile, entrepreneurial, transparent and deliver at scale and pace while remaining grounded to the needs of the NHS in England
• Support a two way knowledge system
Delivery Team

A delivery partner to implement improvements, made up of staff from legacy organisations (Transition Director: Lynne Winstanley):

1. Preventing premature deaths (Delivery Lead: Nicola Strother Smith)
2. Long term conditions (Delivery Lead: Bev Matthews)
3. Acute care (Delivery Lead: Tim Cooper)
4. Experience of care (Delivery Lead: Sheelagh Machin)
5. Safety (Delivery Lead: Paul Unsworth)
6. Capacity and capability: primary care (Delivery Lead: Charlie Keeney)
7. Capacity and capability: NHS England (Delivery Lead: Julia Taylor)
NHS Change Model

Everything we know about delivering change in the NHS, all in one place.

www.changemodel.nhs.uk
What success will look like

- Improved experience and outcomes of care
- Improvements spread and sustained as normal practice
- Established methodologies to deliver change and implement, measure and evaluate improvements
- Evidence base showing successful improvements and interventions which have changed services and practice
- Greater integration, with engagement across services
- Commitment across the whole system to service improvement
- Evidence of return on investment and achievement of major change at minimal cost
Improving health outcomes across England by providing improvement and change expertise.