



Annual Review 2022-2023

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Our year



I am pleased to present The Improvement Unit's Annual Review for 2022– 23. It's been a great year for The Improvement Unit (IU) – our busiest ever.

Following on from the highly successful programme management support provided to the five London Integrated Care Systems (ICSs) last year, the IU were approached by the NHSE London Prevention Lead to support the development of a Pan-London Population Health Management data dashboard with insightful visuals. The aim was to ignite focused discussion, where variation was impacting on key health inequalities priorities, for development of improved pathways and services.

The Improvement Unit, Business Intelligence (BI) and the Health Economic Unit (HEU) met to discuss further and to share examples of how we could help them use their data in visual ways to support their health inequalities focus.

This is the third year the IU has been involved in supporting the delivery of outputs from the Ockenden Review. We have been working with the NHS England Maternity and Neonatal team to establish the Independent Senior Advocates pilot programme, which is now entering a phase of training and pilot evaluation. We will continue to support this programme, incorporating learning from the pilot evaluation into the development and planning of a national roll-out over the next 12 months. It is great to have been involved in such an important and impactful programme of work – challenging at times, but also highly rewarding.

I would like to take this opportunity to thank all members of the team and colleagues we have partnered with at other CSU departments, for their dedication, hard work, and commitment to patient-centred improvement within the NHS. I would also like to thank our partners and clients for commissioning and re-commissioning our support - it has been a pleasure to work with you.

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Ratna Taylor

Director of Transformation and The Improvement Unit

A selection of our focus areas:

- 1. London Health Dashboard:

 IU's data dashboard for NHSE

 London promotes health equality
 and improved service development.
- 2. Ockenden Maternity Initiative:
 IU supports the Ockenden
 Review's recommendations with
 NHS, advancing patient-focused
 healthcare through the Senior
 Advocates programme.
- 3. Sickle Cell Initiative:

 IU collaborates with SCW CSU
 to address health disparities in
 Sickle Cell treatment, prioritising
 individual and regional needs.







Our impact

Worked alongside

Integrated Care Systems

Of the NHS, for the NHS



Impacted on

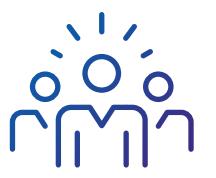
systems
working with
National
Programmes

56m patients' care indirectly improved by our support



50+

projects or programmes of work in 2022/23



highly skilled NHS professionals

Delivering innovative and tailored consultancy and project support across the NHS









Our customers

During 2022/23 we worked alongside a wide range of NHS organisations.

This ranged from working at a national level with NHSE and Health Education England to regional or system level supporting the newly developed ICSs and NHSE/I regional teams. At a local level we impacted on primary care delivery across the NHS Midlands and Lancashire Commissioning Support Unit geography and delivered work alongside individual organisations.

NHS Provider Trusts

- 1. Black Country Healthcare **NHS Foundation Trust**
- 2. Blackpool Teaching Hospitals NHS Foundation Trust
- 3. North Staffordshire Combined Healthcare NHS Trust

Integrated Care Boards/ Integrated Care Systems

- 4. Black Country
- 5. Birmingham and Solihull
- **6.** Cheshire and Mersey
- 7. London
- **8.** Shropshire
- 9. Staffordshire and Stoke-on-Trent

NHSE Regional Team - North West

- · Mental Health, Learning Disabilities and Autism
- Planning and Assurance
- Health and Justice
- People Team

NHSE Regional Team - Midlands

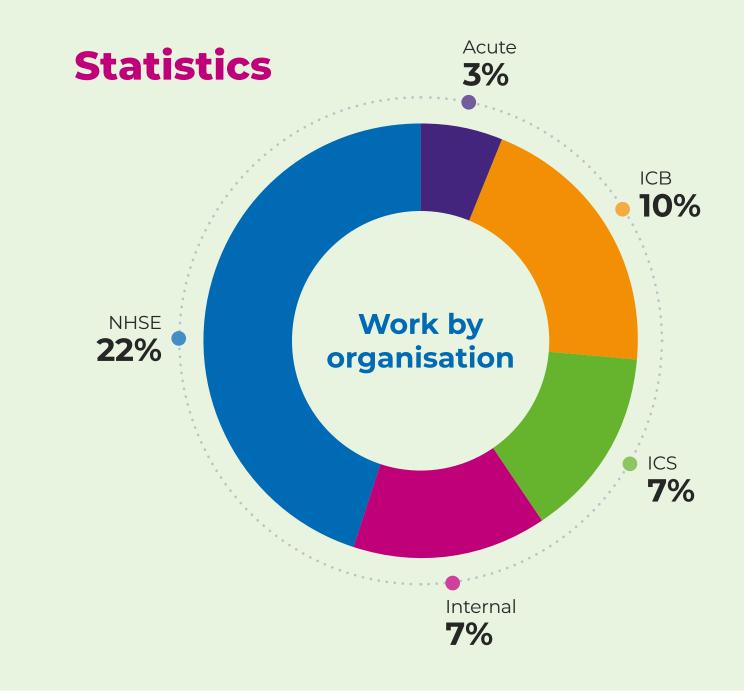
- Midlands Region Training Collaborative
- · Palliative End of Life Care Advice & Guidance

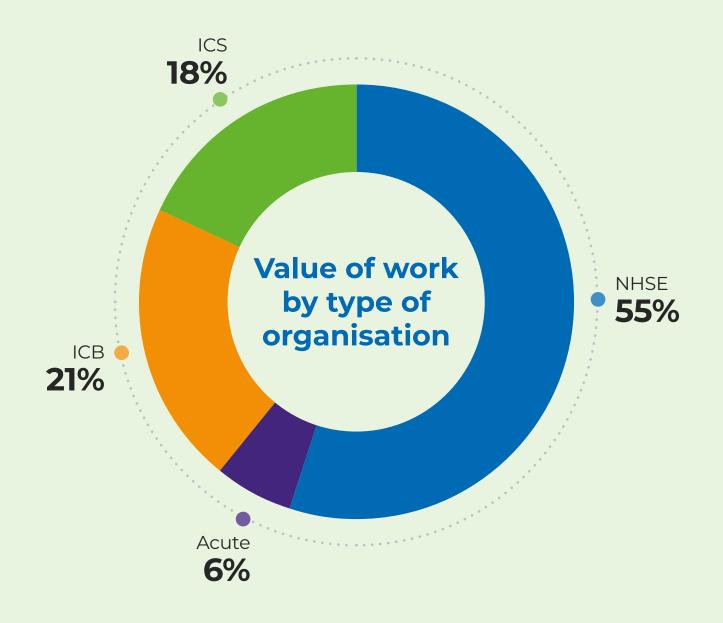
















Our offer













System Improvement

- Work closely with system partners to deliver improvements across healthcare systems
- Redesign and strengthen system delivery to meet priorities, challenges and improve outcomes
- **Support reductions in process** variations to harmonise across organisations

Case study: NHSE North West Learning **Disability and Autism Pilots**

Project/aims:

The Improvement Unit worked alongside NHSE North West Region to deliver a two-year programme of work. The aim was to improve access and uptake of screening and immunisation programmes for people with learning disabilities and/or autism across Cheshire and Merseyside and Lancashire and South Cumbria, specifically the Breast and Cervical Screening programmes.

What we did:

- · End-to-end review of current screening and vaccination programmes
- · Designed & facilitated workshops to identify potential improvement areas
- · Implemented patient and staff coproduced pilots
- An investigation into the accuracy of Learning Disability data and coding within PCNs.

- · The pilots provided the system with a range of options to directly impact on some of the key barriers and issues preventing patients with a learning disability from accessing screening services
- · The project identified a lack of knowledge of the screening process with the staff of the supported living providers and development of improved communications
- · The pilots provided vital learning about Learning Disability Data and an improved process for Preappointment calls and triage
- · The work promoted the use of national guidance related to patients with a learning disability and widening the focus and understanding of learning disability needs within the North West system.









Project & Programme Management

- · Design and co-develop strategic national, system & local objectives
- Support organisation development through change & transition

Case study: Cheshire & Merseyside ICB **Clinical Policy Harmonisation**

Project/aims:

Support the Cheshire & Merseyside ICB to harmonise their clinical commissioning policies from across nine CCGs to the single statutory body.

What we did:

- Project management of Phase 1 of the harmonisation process as part of a multi-service team
- · Timeline development and review to enable the regular sharing of progress and adapting as required
- Activity coordination and proactively supporting the resolution of any challenges
- · Steering Group support to oversee the harmonisation.

- · 49 harmonised clinical commissioning policies ratified for launch
- Preparations made for Phase 2 harmonisation for the remaining 62 policies
- · Patients across the ICB have more consistent policy approaches across the area, which are aligned to evidence based information.









Improve Performance, Quality & Efficiency

- Benchmarking, seeking best practice, and shared learning to improve performance
- Analyse key information to understand and resolve root causes
- Collaborating with system partners and learning together to identify interventions

Case study: Black Country ICS – Palliative End of Life Care

Project/ aims:

The Improvement Unit were commissioned to work with the Black Country ICB to support the development of the Palliative End of Life Care (PEOLC) Programme.

What we did:

- After scoping stakeholders across the system, an ICB Palliative and End of Life Care Oversight Group was formed
- The four Places; Dudley, Sandwell, Walsall, and Wolverhampton undertook an exercise to complete the PEoLC Six Ambitions Self-Assessment Tool
- Once analysed the Strategy
 Working Group were able to view
 the maturity of places and identify
 areas of improvement.

- The outcome of the support was a collaborative co-produced ICB PEOLC strategy document for effective forward planning
- The Self-Assessment toolkit review highlighted the equity of services for PEOLC patients across the Black Country against the National Ambitions
- Identification of opportunities for improvement
- Benchmark of existing provisions against best practice nationally to drive the improvement work that will bring equitable, high-quality care across the system for patients.









Implement New Ways of Working

- Streamline pathways and clinical processes
- Undertake patient flow planning and modelling
- Evaluate the impact of improvements and changes to understand the benefits (including quality and finances)

Case study: NHSE Primary Care Complaints

Project/aims:

Support NHS England and a national multi-agency Task and Finish Group to co-develop recommendations for the future primary care complaints delivery model.

What we did:

- Facilitation of the involvement of key stakeholders during a series of meetings and workshops
- Production of a feasibility study on establishing a national complaint learning solution
- Developed an options analysis and identification of a recommended model for further consideration and implementation.

- Future recommended model for primary care complaints nationally was co-developed
- Effective implementation was enabled through exploration of key mobilisation factors
- Recommendations from this work informed the next steps implemented for primary care complaints.









Strengthen System Partnerships & Collaboration

- Support mergers and formation of new organisations to understand shared values, form priorities
- Provide a structured approach to reducing variation amongst system partners to enhance quality.

Case study: London Clinical Networks – CHC Fastrack

Project/aims:

The Improvement Unit were deployed to assist the London Clinical Networks with reviewing and reproducing the existing Continuing Healthcare Fast Track care plans to ensure that there will be less variation in the outcomes in London through agreeing and implementing a standardised pan London Fast Track care plan to be used alongside the national mandated Fast Track referral tool.

What we did:

- A task and finish group was created to collaboratively create a CHC Fast Track Care Plan that could be utilised effectively within the London system
- All CHC Fast Track care plans were collated, and a review was undertaken to ascertain what the similarities and differences were for each of the plans
- Data highlighted areas of concern and informed improvements required to increase the number of care packages approved within the 48hr standard
- · Standardisation of the CHC FT care plan.

- A single collaboratively produced CHC Fast Track Care Plan adopted by all London ICSs
- Increase in the number of patients who have their care packages agreed and commissioned within 48 hours from receipt of the completed Fast Track Pathway tool
- Improved patient experience through the effectiveness of the pan-London approach evidenced through improved consistency and timeliness of approvals.









Strategy Design & Delivery

- Design and co-develop strategic national, system and local objectives
- **Support organisation** development through change and transition

Case study: Shropshire Telford and Wrekin ICB

Project/aims:

The Improvement Unit were commissioned by Shropshire Telford and Wrekin ICB to steer the organisation through the journey from Clinical Commissioning Group (CCG) to successful legal establishment as an Integrated Care Board (ICB).

What we did:

- · Supported the organisation in the coproduction of the interim Integrated Care Strategy and the Five Year Joint forward Plan
- · A checklist and ICB establishment timeline were set nationally by NHS England and used as a road map during transition.
- · Assurance on the maturity of the ICS was provided through a Readiness to Operate statement, reviewed at agree dates throughout the programme
- · Co-ordinated the delivery of milestones and deliverables across the programme workstreams
- · Facilitated a thorough Due Diligence exercise that assured that all necessary functions were transferred from CCG to ICS.

- Effective transition of CCG functions to the ICB
- Establishment of an ICB which meets all its statutory obligations
- Formation of the interim Integrated Care Strategy as a roadmap to plan and join up services
- · The Joint Forward Plan which outlines how the Shropshire, Telford & Wrekin (STW) Integrated Care System (ICS) will work together to deliver the jointly agreed priorities over the next five years.







MLCSU Partners

As a core part of NHS Midlands and Lancashire CSU, we blend the capabilities and capacity of over 2,000 experts from across business support, transformational and clinical disciplines.

MLCSU's size and scale bring unparalleled resilience and flexibility. Where needed, we bring in expertise from across our diverse support teams:



Operational support

Scalable, flexible 'enabling' functions mobilised rapidly

- · Finance & Planning
- · HR
- · Equality, Diversity and Inclusion
- · Contracts and Provider Management
- · Patient Engagement, Communication and Marketing
- · Health & Safety
- Estates
- Business Continuity
- · 'Net Zero'
- · Non-Clinical Procurement
- · Governance and Risk Management
- · Fol and Complaints



Advisory & Consultancy

Technology & Digital: efficient & innovative

- ICT services
- · GP IT
- Cyber Security
- Infrastructure
- · Data Governance
- · Digital Apps & Al

Clinical Support: improving patient care

- GP payments
- Procurement
- · CHC and PHB
- Medicines Management

- IFR
- · Clinical Quality & Governance
- System Capacity Management

Data & Insight: informed decision making

- · Business Intelligence · Data management
- Data processing



End-to-end Transformation

A range of solutions that increase efficiency and help systems to perform

- Service and Clinical Pathway Redesign
- System Integration
- · Population Health Management
- · Organisational Development & Change
- · Workforce Planning, Resilient & Sustainability
- · Public Health & Behaviour Change
- · Digital and Technology Transformation



Supply chain

Access to industry-leading supply chain expertise through all four CSUs







Equality, diversity & inclusion

The Improvement Unit has made equality, diversity and inclusion a key priority throughout all our work. One of our core team objectives is:

'To embrace equality, diversity and inclusion in all areas of The Improvement Unit's work, with each member of the team having sound knowledge and understanding of best practice.'

When working across such a diverse range of projects we believe it is vital not only to embrace the principles of Equality Diversity and Inclusion but also to champion it with our clients. To ensure we had the required level of knowledge all our staff this year have undergone Unconscious Bias training, HEAT Impact Assessment training and further team developments are planned.

In order to improve our cultural intelligence and ensure that our improvement and programme work continues to be inclusive, our EDI champion, together with team members, has created a programme of awareness sessions to celebrate the religious, ethnic and multi-cultural diversity within the team.

To further support our staff our Ethnic Diversity and Inclusion staff networks continue to go from strength to strength. Priorities for the network have been agreed and a communications and engagement plan to increase awareness of and participation in the network is being developed.

A focus on equality, diversity and inclusion will remain a priority for The Improvement Unit in 2023/24.





The year ahead 2023-2024

2025

As the NHS landscape dynamically shifts, the Improvement Unit stands ready to amplify transformative impacts in priority areas.

- NHS Delivery & Continuous Improvement Review (April 2023):
 Celebrating the value of continuous improvement, the Improvement Unit marshals its expertise, bolstering NHSE and local system advancements for 2023/24.
- Programme Management Excellence:
 The Improvement Unit's dedicated team laser-focuses on national imperatives, from maternity services to elective recovery and urgent care.
- Equality at the Core:
 Prioritising Equality, Diversity, and Inclusion, the Improvement Unit integrates inequality considerations throughout its 2023/24 initiatives.





Contact us

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