

## HealthAssure Case Study

The Royal Wolverhampton NHS Trust: using HealthAssure for one consistent source of data for the whole organisation, enabling improvement over compliance and releasing time to care.



The reporting and resulting administration pressure on healthcare is higher than ever; yet how is great governance, assurance and compliance expected to come out of multiple reports, systems, paper forms, formats, data that goes out of date very quickly; especially when different bodies regularly request the same information from the same groups? All of this is taking up precious time that could be spent caring and improving and so Royal Wolverhampton wanted to do things differently. The Compliance team saw the huge burden on staff, and realising the obvious inefficiencies they set about changing things. As seasoned users of the HealthAssure software and service, they saw the potential to use this to enable their vision, and worked with Allocate to produce the Metrics module of HealthAssure.

We spoke to Sue Hickman, Compliance Manager (Deputy Head of Governance & Legal Services) and Taj Athwal, Quality Assurance Lead at The Royal Wolverhampton NHS Trust.

### How do you currently report?

**How much resource, time and money does it take your trust to produce reports for governance, assurance and compliance?**

**Are you currently able to produce monthly live information that you can trust?**

**Could less of your clinical staff's time be spent on administration and more with patients?**

**Are you relying on subjective self-assessment with little ability to triangulate?**

**Can you reuse existing data for regulators, or is there duplication of effort on many levels?**

**Are you forever trying to figure out what the current status is from multiple paper reports?**

**Can you quickly get to exceptions to add value on fixing issues and improving?**

Allocate listened to what we were trying to achieve and now we are able to make best use of the information that we were already collecting; we wanted to 'slice and dice' this information as much as possible so the organisation was only using one data source – one version of the truth – counting it once but using it many times.

The Board like the new dashboards and metrics from HealthAssure as it gives them more flexibility, and with the information displayed in a highly visual way, they can see at a glance where the exceptions are rather than having to go through lots of different pieces of paper to bring it all together. They are now in a better position to actually review the data and make suggestions or get assurance. We report monthly, on the 11th of every month and everyone – ward to board – has access to live data, delivered to them in a meaningful way for their respective roles. From a Trust level it gives the Board assurance that there is ownership, and they understand that the detail is being reviewed and actioned within the accountability framework that we have.

For example with the nursing metrics, we know that the same, consistent, live metrics are taken to directorate meetings; we know that they are taken to the Matrons meetings with the sisters; we know that they are taken to the Heads of Nursing meetings, and because the Board are assured, it has enabled them to challenge better. Being able to see a trend or to see a declining position, it helps formulate the appropriate challenge and can also show themes in struggling departments, or problems looming in, for example, staffing risk management.

**"We had lots of information and data but we were intelligence poor"**

We wanted something that was flexible, because the assurance process that we had in place previous to HealthAssure Metrics was such that we had lots of information and data, but we were intelligence poor.

## The improved reporting flow drives data quality

With HealthAssure we could easily see an issue, for example one of the nursing metrics is measuring late observations and it was consistently not being met by the majority of wards; subsequently the Matrons and Heads of Nursing at Trust level agreed to a Trust wide initiative that is now returning good results. They are now using league tables where they monitor that metric, where the level of visibility and comparison helps them focus and feel encouraged to succeed. This approach has helped drive quality and enables us to share where it is working well on the ward, and try the same actions with another ward. That has definitely driven improvements.

The Metrics reporting raises the profile of what nurses are doing, as it is visible and taken notice of at all levels. The nurses are more motivated and have more time to fix issues and improve. Feedback from Heads of Nursing is that it also helps in terms of accountability that sits with Ward Managers, Matrons, and Sisters.

We also use the data to celebrate good practice and improvements, the bar charts on dashboards with trends information in HealthAssure, clearly show where we are in a good position. We have our own 'Risky Business' staff newsletter, and in the 'learning and sharing good practice' section we share the outputs of that information.

## Confidence assuring patients

The Metrics dashboards from HealthAssure are also displayed in ward areas, we show all metrics, in RAG status, we also include in these dashboards the outcome of our internal quality review visits, these are rated against the five CQC domains. At a quick glance a patient or carer can see how we are doing against a number of metrics i.e. infection prevention, how they are being managed, is it good is it bad, if I/family have a fall is it managed well? Nurses now feel if they get questioned by patients they can confidently say "yes it's a known issue, this is what is being done about it" and provide the action improvement plans; now they understand what's being measured and what is being done about it.

Also, the fact that we've been able to align our data and evidence with the CQC, NICE, or any other compliance we have to adhere to as an organisation, we are saving time by avoiding the duplication that is seemingly inherent in compliance. We have moved away from a self-assessment process for compliance and moved to presenting of 'data' in order to support clinical areas in making a judgement. If you have the right metrics aligned then compliance becomes business as usual.

Another benefit is saving time not only by avoiding duplication, but the time actually entering the information - staff can do everything they need in three clicks. A Matron told us:

**"As a result of HealthAssure the metrics that the Ward Sisters, Matrons and Heads of Nursing completed were revised, the original nursing metrics would have taken much longer in excess of 1 hour for all Ward Sisters, Matrons and Heads of Nursing. There are 36 Ward Sisters, 17 Matrons and 2 Heads of Nursing. Now the time is spent action planning on improving practice."**

This has really been where Allocate have listened to what our users would like to do; they are busy clinical staff, and now they can see their trends and data information in one view, which has led to really positive feedback from users.

The Customer Success team at Allocate have been integral to the success, and have supported the Compliance Team in implementing and rolling out the HealthAssure system. They have also been extremely responsive in terms of queries/ solutions and have supported in terms of meeting with the Trust senior members. Allocate are really helping us get the best from the system for our clinical staff at the organisation.

## "I think that has been a really positive and proactive partnership, we do see it as a partnership"

We're at the tip of the iceberg with the potential of metrics and we can't stress enough how we think that the benefits are going to be massive. We can focus on quality improvement rather than compliance. When we've had meetings with other Trusts the feedback is immense when they see it has massive visual impact – they've never thought to use a system in that way. Metrics demonstrates the breadth that you can do with HealthAssure. We have reviewed other systems; however the limitations were around licences costs, and the flexibility to align multiple areas of compliance/monitoring/reporting. Allocate have been really proactive in responding to the NHS changes and seeing the potential in the metrics engine.

Try it try it try it! It's worth the investment in both time and money to implement, as it can really support and drive quality, and help you to triangulate data without the expense of a business intelligence system"

### Benefits of HealthAssure Metrics software & service

- Information flow from ward to Board is clear/accountable
- Used as part of the data for establishing a judgement against CQC Core Services for the five domains
- Another level of assurance on national guidance: the lead may say Compliant but the metrics can show discrepancies
- Quickly identify risk with exception (amber and red) reports
- Ward are able to review and track performance/ quality and make necessary improvements
- Simplified process at ward level – one easy to use system, three clicks
- Re-use, not re-do! You can import data to HealthAssure
- All stakeholders can see their data (including trends) in one view
- Release time to care and improve
- Reports ideal for public facing trust reports so regulators and Non-Executive Directors can see journey of improvement
- Data can be displayed on wards to assure the public