

## SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

### Report to the Trust Board – 1<sup>st</sup> August 2019

#### Unity Criteria and Performance

## 1. Introduction

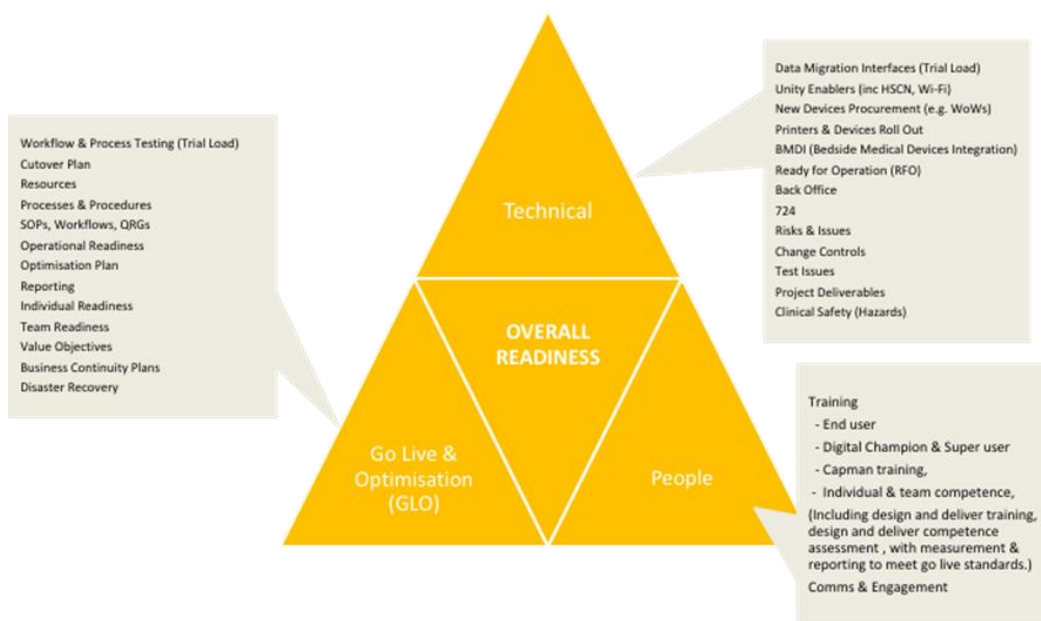
1.1 Readiness criteria is now being tracked under 3 categories:

- Trust level – linked to IT, people and operational readiness
- Directorate / Departmental level (Readiness Tracker) – linked to engagement and communications, system access, digital champions and super users, end user training, IT equipment, how we will work, business as usual and go live planning.
- Individual / Team competency level – based on role specific competencies and team based competencies.

1.2 The report provides an update on the reporting capability of the above and schedule to track the full suite of readiness criteria to be met by early September.

## 2. Trust level Readiness Criteria

2.1 There are 52 Trust level criteria with 38 associated items of evidence being tracked for completion. Each criteria has an accountable executive owner, an accountable owner and a responsible owner.



RAG assessment as at 11.07.19



- 2.2 A proposed Unity Criteria & Evidence Approval Milestones Plan has been prepared by the Unity Programme and was presented to Unity Executive for approval week commencing 15th July. See section 2.6.
- 2.3 This schedule of criteria and evidence is being reviewed weekly within the Programme, reported as completed weekly to the Unity Executive and formerly reported on a monthly basis to the Digital Committee.
- 2.4 Each item of evidence is being tracked against the following definitions:
  - Red = Evidence is not on track; significant risks or issues identified with no mitigating actions
  - Amber = Evidence is behind track, but manageable; risks or issues with mitigating actions
  - Green = Evidence is on track with key risks accepted or with mitigating actions and issues being managed
  - Blue = Complete and signed off as determined by the Unity Executive governance process.
- 2.5 As at 17<sup>th</sup> July, 46% of evidence is at Green status and on track. It is anticipated with planned programme activities the amber rated criteria will convert to green over the next fortnight.

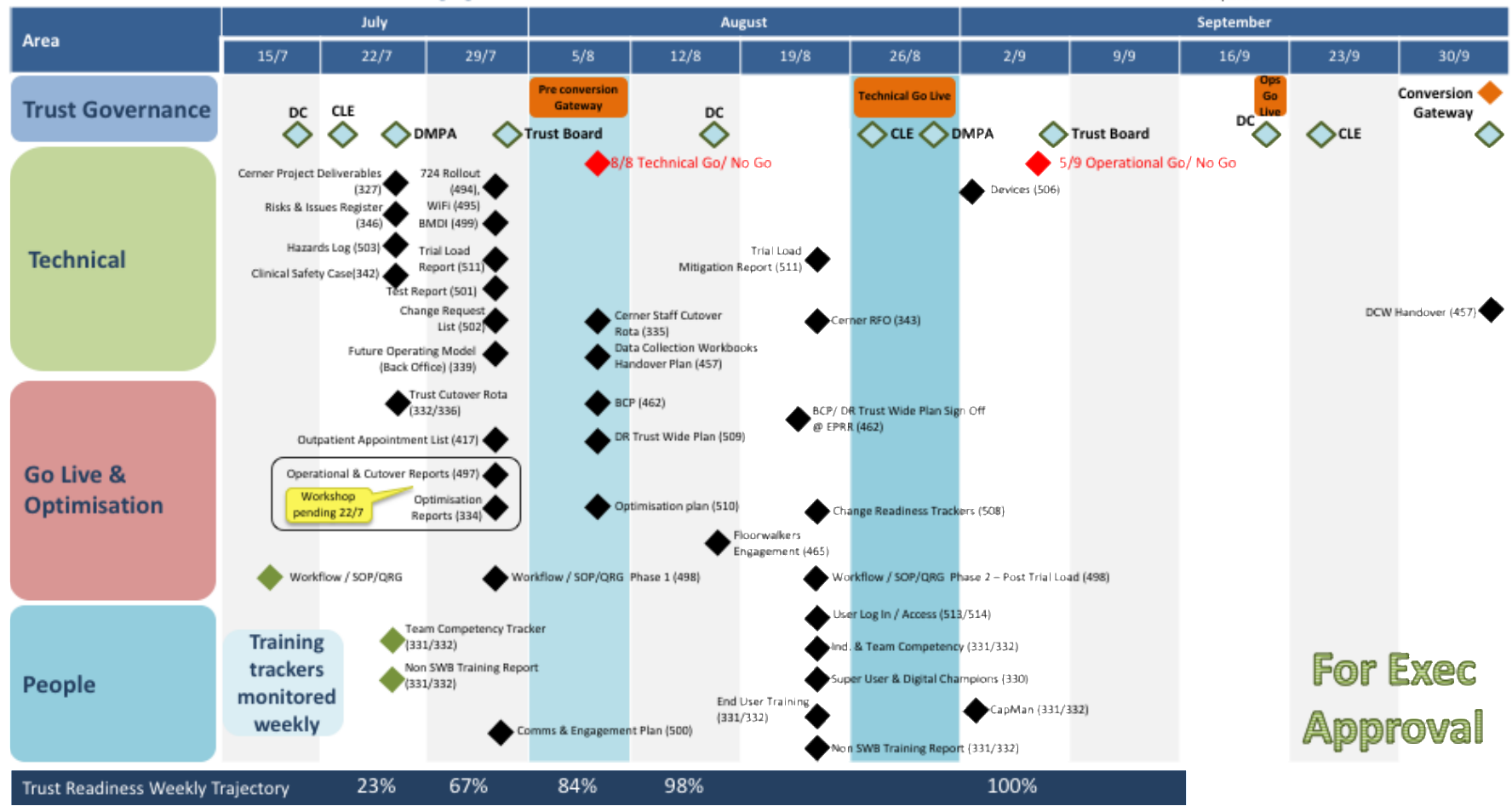
**Pre-conversion Gateway - Trust Criteria Evidence readiness summary**

Status as at: 11/07	No of criteria	Red	Amber	Green	Blue (complete)	Total	% Readiness on track	% Approved
Technical	25	0	11	14	0	25	56%	0%
GLO	22	0	14	8	0	22	36%	0%
People	5	0	3	2	0	5	40%	0%
<b>Total</b>	<b>52</b>	<b>0</b>	<b>28</b>	<b>24</b>	<b>0</b>	<b>52</b>	<b>46%</b>	<b>0%</b>

2.6 Unity Criteria & Evidence Approval Milestones Plan

### Criteria & Evidence Approval Milestones Plan

Key  Review tracker avail – weekly Exec Reviews as required  Criteria Final Sign Off



For Exec Approval

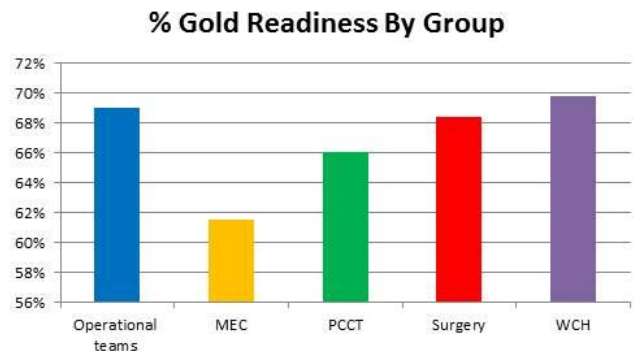
### 3. Directorate / Departmental level (Readiness Trackers)

3.1 Directorate and departmental readiness is measured against an agreed level of criteria all of which have definitions to standardise success measures . The success criteria for gold and silver departments or teams are differentiated:

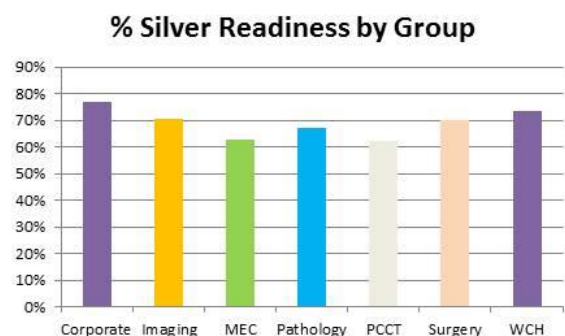
- Gold – 95% readiness
- Silver – 80% readiness

3.2 The current departmental readiness assessments as of 11<sup>th</sup> July are baselined as detailed below:

Gold Readiness Report By Group Need to attain 95% readiness score	
Operational teams	69%
MEC	62%
PCCT	66%
Surgery	68%
WCH	70%
<b>Total</b>	<b>67%</b>



Silver Readiness Report By Group Need to attain 80% readiness score	
Group	Readiness %
Corporate	77%
Imaging	70%
MEC	63%
Pathology	67%
PCCT	62%
Surgery	70%
WCH	74%
<b>Total</b>	<b>68%</b>



3.3 The key areas to be progressed over the next month to remain on trajectory to meet team readiness criteria by end of August are:

- Common themes for Directorates over the next 6 weeks include;
  - alignment and validation of workflows, SOP and QRGs for publishing to groups,

- Wi-Fi accessibility,
- BMDI,
- BCP process, and
- Digital champion & super user training.

Should these be resolved, Gold service readiness will increase to 75%, Silver service readiness will increase to 76%.

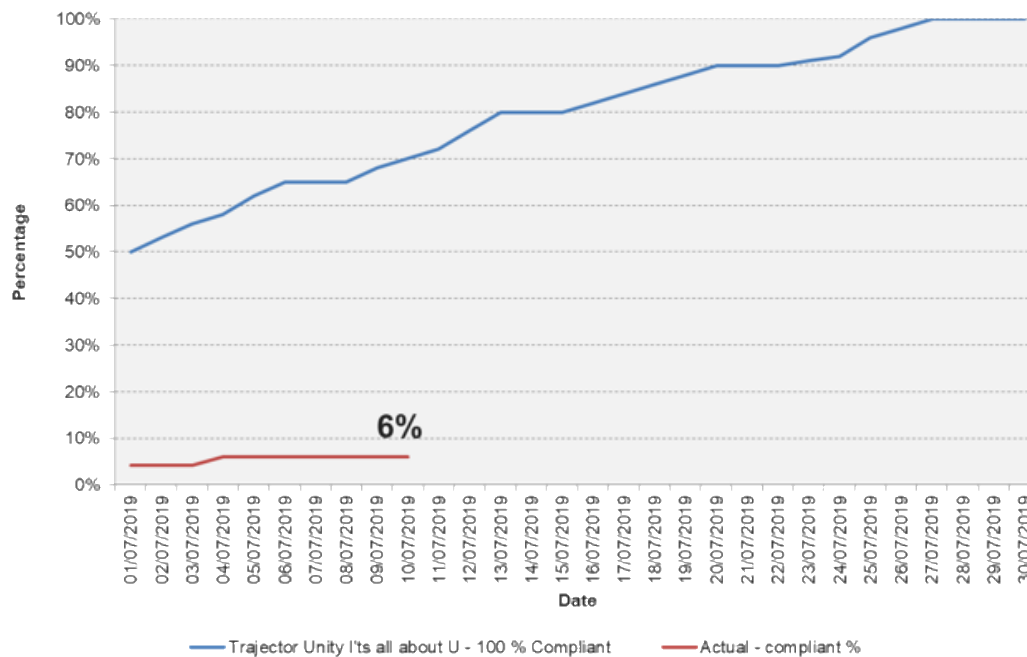
- Themes of remaining areas that need focus in parallel include:
  - Role Based access validation,
  - cutover rota rostering (Digital Champions and Superusers),
  - Communications & Engagement including:
    - Bank and agency processes communication,
    - IT and Unity fault reporting at Go Live and beyond
  - Individual & team competency completion.

All the above activities will be completed by the end of August with the exception of devices which concludes the wc 2/9/19.

#### **4. Individual and team competency**

- 4.1 Individual competencies ('It's all about U') reporting functionality is now in place and is being monitored and reported by individual and department at Unity Executive (weekly), Go Live and Optimisation Committee (GLO) (Fortnightly) and for all members of staff to view via Connect.
- 4.2 As at 17<sup>th</sup> July, 1765 staff members (56% of staff) had completed the initial self-assessment but only 217 staff members (7% of staff) had their Unity individual competencies approved and fully verified by their line manager.

## Unity It's all about U 100% competent



4.3 Team competencies have been signed off and were presented to Digital Committee in June and were the subject of QIHD on 9<sup>th</sup> July. These are:

- Board Round
- Ward Round
- Handover
- Emergency Medical Response Team (EMRT)
- Outpatients Patients Department
- Deceased
- Safeguarding
- Business Continuity Plan
- Consent
- Shift to shift handover.

4.4 Team competencies will require trust staff to practice scenarios within multi-disciplinary teams, to ensure that individuals and teams retain familiarity and increase confidence with Unity and start to work together as teams using the new EPR.

4.5 A Trust-wide competence assessment will take place in August following individual competence achievement during July and also aligning with team readiness for a September Go Live. This will be reported in a similar way to the individual competency tracking and also include insitu independent assessment and site visits.

4.6 The baseline for team competency remains at zero and the competency measure pre Go live is for Gold teams and staff groups (junior doctors, pharmacist and porters) will need to 95% competence and silver teams 80% competence.

**5. Summary / Conclusions**

5.1 The readiness criteria baseline, active reporting and Go live position are summarized below:

<b>Readiness Criteria</b>	<b>Reporting capability</b>	<b>Baseline (June)</b>	<b>July</b>	<b>Go Live measure</b>
Trust level	Yes		46% Readiness	100% Readiness 100% Approved
Directorate / Departmental level	Yes	Gold 58% Silver 48%	Gold 67% Silver 68%	Gold 95% Silver 80%
Team competency	Yes	-	-	Gold 95% Silver 80%
Individual competency	Yes	-	56%	Gold 95% Silver 80%

Toby Lewis  
Chief Executive

Senior Responsible Officer - Digital