

ImproveWell.

Community Forum Webinar | Transforming Maternity Services | October 2022

Ben Russell (00:02)

Thank you everyone for joining. so yeah, everyone welcome to the ImproveWell Community Forum webinar, and the focus today is on transforming maternity Services engaging the workforce to improve quality, safety and care. I'm your host. So, I'll be setting the scene and then handing over to a much more interesting guest speakers and I'll introduce myself first. So, I'm Ben and I'm the Head of Customer Success at ImproveWell. You'll hear a little bit more about me and ImproveWell later on and but for now, I'd like to just quickly run through today's agenda and format. Next slide, please.

So as mentioned, we'll start with me setting the scene around why we're here today and taking a little bit of time to talk about ImproveWell and the trends we've seen working with an array of different maternity services across the UK. We'll then hand over to our first guest speaker. Zoe Nelson, who's the Programme Manager of the Maternity Transformation programme for NHS England and NHS Improvement. After that, we'll hear from Claire Eagleton who's the Deputy Head of Midwifery at Shrewsbury and Telford NHS Trust. We'll hear a little bit more about Zoe and Claire shortly.

As mentioned at the beginning, after the talks There'll be a short Q&A. So, during the talks, please submit your questions into the Q&A section, which I believe is the bottom of your screens. And so, if anything any questions or talking points spring to mind submit them there and then we'll get through as many as we can at the end. So yeah, as mentioned first, I'd like to set the scene of why we're here so next slide, please.

Great. So, over the last decade maternity services have come under intense scrutiny from the Ockenden report, Morecambe bay investigation, better bursts and various others. So the NHS Maternity Transformation programme was established to deliver the vision for safer and more personalised care across England and deliver the national ambition to half the rates of stillbirth neonatal mortality, maternal mortality and brain injuries by 2025 and there has been progress and fewer trusts are now rated as inadequate or require Improvement as you can see from figure one and there has been improved continuity of care even in the face of the pandemic and all the challenges at that brought, as shown in figure 2 and figure three shows that over the last decade there has been a consistent gradual reduction of inter mortality stillbirth and neonatal mortality rates. Next slide.

But there are obviously still challenges. So, for example, if you take a look at figure 4 this shows the decline in a mother's experience of postnatal care directly caused by the pandemic and figure five shows the discrepancy maternal deaths of BME compared to white ethnic groups where the risk ratio for a black mother is over four times higher than that of a white mother. But one of the biggest elephants in the room and I guess you know do the reason we're here today and one that has witnessed a consistent downward trend is the experience of the maternity workforce. So, if you take a look at Figure 6 this shows data from the work health and emotional lives of midwives' study back in 2019, and it paints. Yeah. It paints a pretty bleak picture from midwives with 60% facing work-related burnouts and over 66% having thought about leaving in the past six months and that, you know, not to mention those suffering anxiety stress and depression at rates much higher than the national norm. Next slide please.

But there is a constant here as you can as you can see from this guy here and that, you know, maternity service is very much despite all of that, a workforce that cares and next slide. And the you know, the consequences of workforce burnout are no secret. Figure seven shows the negative impact that burnt out workforce can have on patient care, personal health and the healthcare system as a whole. Next slide.

And the case for workforce engagement is well documented and you know, we know that giving staff a voice and the agency to improve and making changes to their working environment works and can improve things, as can be seen here with the quotes from many of the studies that were mentioned at the beginning. Next slide.

And there was a recent study funded by The Health Foundation and This Institute of the aim to characterise the features of safety within maternity units developed the "for us" framework. So, this is basically an evidence-based framework that aims to support staff working in maternity units to reflect on what good looks like in a safe maternity unit and also to identify and agree on priorities for improvement celebrate achievements or to make a case for you know, increasing investment and to achieve safety. Of the seven features if you can see here, so I guess the two that are most pertinent for today. Number one focuses on commitment to safety Improvement at all levels with the whole workforce involved and number three focuses on constant reinforcing of safe ethical and respectful behaviours. Next slide.

And the stats back it up. So again, you know, evidence here the high engagement organization show decrease patient incidents and absenteeism as well as increase productivity as well. Next slide.

And this is where ImproveWell comes in. So hopefully most of you know of or have heard of or have used ImproveWell in some capacity and for those that haven't I guess the best explanation is that ImproveWell is a real-time frontline feedback solution for improvement in Health and Care. Helping organisations to improve staff experience and the quality of patient care. Boosting morale and empowering the front line to drive change. So, 24/7 everyone can suggest ideas for improvement share how they're workday is going complete poll surveys and you know, it enables leads to capture real-time feedback track sentiment, prioritise improvement efforts, measure change, published reports – so everyone that the organisation has a voice and an impact in improving Health and Care. Next slide.

So, Zoe and Claire will be talking a little bit more in depth about their experiences with ImproveWell and improvement and transformation general, but I did just want to touch on for a moment the trends that we've seen as an organisation at ImproveWell over the last few years from partnering with 10 maternity organisations across 15 different sites. So, it's not really surprising that you know, the improvement ideas captured and implemented via ImproveWell across all these organisations tie thematically to kind of everything and that we've discussed so far. So, 90% of ideas submitted by staff could impact on staff wellbeing and/or staff engagement. And a further 65% are also related to patient safety and experience, highlighting a community that cares, not just for their patients but also for their peers and you can see at the bottom there, the top five improvement themes we saw across all these over 500 ideas were communication engagement, patient safety, staff wellbeing, reducing delays and people and culture. So, all very people focused themes which is kind of the I guess the pattern that was spotting here. So that's probably time for me to stop rambling and to introduce our first speaker.

So, our first speaker has mentioned is Zoe. Zoe, just to reiterate, is the Programme Manager for Maternity Transformation Programme for NHS England and NHS Improvement. ImproveWell's journey began when Zoe spearheaded the rollout of ImproveWell at Royal Cornwall Hospitals NHS Trust and we've, you know, had the pleasure of continuing to collaborate with Zoe ever since and kind of keep track of the great work that she's doing in the improvement space. So yeah, with no further ado. I'll hand over to Zoe.

Zoe Nelson (08:49)

Thanks, Ben. So as Ben said, I'm now a Programme Manager with the maternity transformation programme within the safety team, but I've been there for a week and a half. So, the work that I did with ImproveWell was when I was a Delivery Suite Coordinator at the Royal Cornwall Hospital and then went on to be a matron, so I think that demonstrates that leadership and

Quality Improvement can happen by, and everybody involved in maternity services and indeed the NHS. If you can go to my first slide, please.

So, it's very pictorial my presentation, pictures say a thousand words, I think. But so why did we start using ImproveWell? Well, we had two section 29 A's served to Royal Cornwall hospital, it was we had a really poor cultural survey and we saw some really dark times. And so, every member of staff that came into work were right for it. They wanted to improve things and we felt that we could do much better than what we were being empowered to do and a change in leadership and changing executive team actually supported the empowerment of our change process and the great Pete Gray was my partner in crime down there at the time, he found ImproveWell and he presented it to the executive team and they took it on with open arms and I was asked to pilot and ImproveWell in maternity for a 12-week pilot, which is what we did. And the Royal Cornwall, we've got about 350 staff members in maternity, and we have about 4,300 births a year and we're the only Hospital in Cornwall. So, it's not like we could close, so we needed to start our improvement journey and what an exciting improvement journey it was.

So, we did improve our CQC ratings, and as you can see from that it was attributable to the feeling of the momentum and the excitement of the people on the shop floor that are actually having their voice heard, probably the first time in about 10 years. So, it was a real buzz of excitement and real tangible improvements were being seen. So that was within a very short amount of time of ImproveWell coming on board. ImproveWell represents everything that I would that is of my core values with workforce, development, empowerment and continuous quality improvement. And ImproveWell, give us that that platform and probably in a really innovative way of ensuring the ward to board voice and that it gives the real-time feedback to the staff members that their voice is being heard - next slide.

Thank you. So, what do we do? Well, our strategy was one of ensuring that we had the right people on board. So, we had our Champions which we likened to our Tiggers which were jumping around full of excitement all the time about this new this new platform. And I think it was key that we had that shared vision that we all wanted to act now rather than give up because we knew our pregnant population deserved more, and so did our workforce. So, we got determined and we were going to improve things and ImproveWell gave us the vehicle to do that. We raised our profile with Twitter and we did some road shows, we did a launch video, we went round putting stickers and stars on things that were visible improvements and gave staff certificates for when they submitted their ideas, and we responded to the staff with their ideas so they knew they would have been listened to, I probably slept about six hours, so it was within six hours, they would get a response. So, it was very quick. So even supporting the night shift

workers, you know going home on the bus when you're reflecting, some people had it on their mobile phone so they could instantly put their idea in rather than you losing those really beneficial ideas. We ensured that we have some quick wins, so one, for example, one of the quick wins, about 12 people submitted the idea of being really frustrated that all our clocks weren't all coordinated and all right. So, when you would go from one room to an emergency in theatre, the times were out and actually it did feature in one of our clinic, you know, serious incidents.

So, we managed to get our digital clocks throughout the whole unit and that was brilliant for the staff to see that that was actually something that they've been asking for ages and yet they didn't feel their voice was being heard and then ImproveWell was the vehicle for that. We launched our "caring for you" campaign because there was a lot of themes coming through about caring for our staff. And so, we now have the workplace and strategy in place for health and well-being, which was great and there was a real sense of comrade ship around that. We, because of raising our profile, we managed to have some high-profile visitors with the RCM and the Princess Royal and as Ben mentioned, we won an award with Maternity Innovation and transformation in the Expo. There's Lara and I there receiving the award which is really exciting, and we did some profiling in patient safety conferences at national patient safety conferences and maternity festivals. We've got some videos on YouTube celebrating our successes and the staff in it. So, the staff were key to the features all the time. It was really important to ensure that their faces, their ideas, were owned by them and they got the credit for that. And a Million Dreams will always be a very sentimental song for me because it was, we had a million dreams and we were going to make and make it all happen, so it's really exciting. Next slide, please.

So, the evaluation of it, we were lucky enough that South West AHSN supported us with an independent evaluation and this was through interviews of staff as well as quantitative data, and it showed that staff felt empowered and with a sense of motivation and achievement, it showed that staff felt they could own their ideas and implement them. Staff saw change happen quickly and we're recognised for it, and it made an impact on efficiency and cost savings and patient experience, as well as the staff experience. We managed to redecorate and renovate our unit and that made such a difference to people walking into work. There was a sense of pride and achievement. It was really lovely. We did our own surveys and people found the ImproveWell platform really easy to use and with the 74% of submitting an improvement idea and actually people, several people, well more than several, were submitting more than one idea. And so, it really did gain momentum, and that was from all disciplines as well. And 100% saw an improvement. So that's how powerful ImproveWell was, because of ImproveWell, 100% of our staff surveyed saw an improvement and this was validated with our trust survey where

we saw an improvement in people feeling listened to and that managers were acting on feedback, which was great and over two years. We did have quite a few ideas come in the first 12 weeks, but it didn't lose its momentum over the two years. We had a total of 111 ideas, and we developed a system of being able to communicate those as well, and probably around the 350 of staff we've got. 304 users were active on ImproveWell, which was great acclimation. Next slide, please.

So, it wasn't all plain sailing and there were things that I would have done very differently, had I had the knowledge at the time which is why I quite like talking about it now. And so, the first thing that I would have done differently, would be to ensure robust quality improvement methodology. So, I think, although I thought that we had all the relevant stakeholders in the room, so to speak, and I think that I had champions in each of the disciplines. I didn't I didn't necessarily close that loop and ensure that they did feel very involved. So, there were some issues with our consultant body not feeling involved and also the feeling that maybe they were already empowered to submit their ideas. So, I think there should have been some further stakeholder meetings to start with, and that would have been really useful also aligning that with our evaluation. What would have made it more sustainable if everybody had some and engagement with how it was going to be evaluated and there was that agreement in in the first place. And then that would have then had better lessons of spread it out across the trust. Unfortunately, something I didn't realise and I will readily admit is that, ImproveWell became about me and it should never have been. So actually, what I was doing was it disempowering our ward managers and our team leaders and that's probably why it might not have spread across the trust, because we didn't have a process in place. So, I tried to put in the governance structure, which is the second big thing that I probably learned about, was our governance structure, and how and things would feed up and so therefore it would be really valued. And instead of ImproveWell being about me, it would have been about taking the ideas to the ward managers and the team leaders for them to own those ideas and respond their staff and have the discussions in their team meetings.

So, we developed this structure where it would have gone up from to the trust board and but really having some really good discussions in the team meetings, in the ward-based meetings, and there would be the, you know, the quick wins could be at the ward-based meetings. And then if there was something more requiring a quality improvement process, like for example, our Pelvic Health Service, so somebody submitted the idea of a Pelvic Health Service and follow up for pelvic health, and actually we were able to support a quality improvement process, which has led us to be an early implementer for the Pelvic Health Service. So, it was really, really good example of how it would work and then you would explain and present your ideas if it requires

some kind of funding to what we call our 'maternity Improvement board', which is where the senior leadership sat and then that would then be taken to the Care Group. Equally feeding back to our maternity forum, which is where all our clinicians would be in the discussions as well.

And so that was just about working until covid hit, which had been a problem. But unfortunately, I don't think, I think we, especially as a matron at the time, my attention was taken elsewhere and that then led me to think about the people on the shop floor and the team leaders and the ward managers needing to own it more than me. So that was a bit of a learning curve, but unfortunately our trust didn't continue after the three years contract and that's probably one of my biggest disappointments because I feel like I let ImproveWell down, where that was concerned, because of what I'd learned along on the journey and I've put the Ivory Tower there because what the system that they've got in place now and I've not been able to capture any evaluation. Then I've not been given that, is that it sits with the QI Hub, which is great. We've got a quality improvement hub. So, there's lots of quality improvement work being done that's really good and the trust have got a very good focus on quality improvement, but what I'm not convinced of is that it's actually, we can measure how much of the staff engagement we have in maternity or in any discipline. And whether the staff actually feel that they are being heard. So, if they submit an idea to the quality improvement hub, how is it then progressed? So that I think ImproveWell makes it more tangible, it makes it feel like you're being listened to in real-time and by one of somebody you know, and I think that's really beneficial. Next slide, please.

So, lastly as I say I didn't want to end on a negative note that because our CHT haven't continued with ImproveWell, because I hope that I've demonstrated how beneficial ImproveWell has been and it's the people that build your business not, you know, you can't build a business without the people in it. And I think it's their voices that really need to be heard and a vehicle to do that is really important. And they need the tangible evidence that their ideas are being heard and are being implemented. There's a wealth of knowledge and a wealth of experience the people on the shop floor know what improvements needed and that's what we need to tap into in order to ensure safety, ensure quality of service and without the staff, we're nothing and ImproveWell was doing some really exciting things with service user engagement and as well, which and I feel like we've missed out on, but ImproveWell will always be a big part of my life and I'll always be looking out for opportunities to use it in the future. I have put a link into our celebratory video, but it's not to watch now, it's just if anybody was interested in it because just makes me proud and it makes me feel like it's the staff at the centre of everything we've done which, is the most important thing to me. Thank you.

Ben Russell (24:09)

Thank you so much Zoe for taking us through that, lots to be learned from your experience and it's amazing to hear about all of the learnings that you took away as well because that helped us grow as a business also, so really, really great. And so, I'll let you get your breath as I'm sure there'll probably be some questions at the end. But yeah, now we'll move on to our next speaker. So as mentioned, Claire is the Deputy Head of Midwifery at Shrewsbury and Telford NHS trust. So, I had the pleasure of meeting Claire and the majority of the maternity staff up in Shrewsbury and Telford early this year, when they launched the ImproveWell platform in February, I believe it was. And what they've managed to achieve in, you know, since then is incredible and huge amount of improvement ideas of coming to the platform from frontline staff and that's you know, that's just step one, the step after that is Claire and the other members of her team helping to implement those ideas, and drive change and everyone at Shrewsbury and Telford has done an incredible job at keeping momentum up and keeping all staff informed about the changes that are made of the back off their feedback as well. And so yeah with that, I will hand over to Claire.

Claire Eagleton (25:29)

Thanks Ben. As Ben said, my name's Claire Eagleton, I'm the Deputy Director of Midwifery at SaTH for quality and safety. And what I think I'll do is if I just talk, I think Zoe's given a really good overview of what they learned from Cornwall and that was actually really important for us. We were very lucky to be linked in with Zoe early on when we were thinking about using ImproveWell and her knowledge and expertise and, kind of, experience of using ImproveWell really did and inform the way that we chose to roll it out. First slide, please.

So obviously as most people know, we've had a lot of scrutiny and here at Shrewsbury and Telford for quite some time. So, on the back of that, we have a very well established now maternity transformation programme. There are six work streams within that transformation programme and one of those is the people and culture workstream. So, at the time when we were considering how we could improve culture, which included making sure that our staff about valued and that their voices were heard, and they were engaged with the improvement journey. We were considering how best to do that and let's say we were made aware of the ImproveWell platform, our IMTP did some research found out about ImproveWell and then obviously linked us in with the team who then, linked us in with Zoe. At the time I was one of the co-leads for that workstream, so it was really really helpful. Zoe gave us a presentation; she explained the journey that they've been on and it really sounded something so positive that we wanted to adopt. Next slide please.

So, if I go through, kind of, what our rationale was, so we've been using ImproveWell since February. What we were trying to improve, as I've said, was a lack of staff engagement and certainly what we had, was our staff had lost faith, I suppose, that their improvement ideas would be implemented. So, over the years without, you know, anybody having that dedicated time or having that workstream, people have given that improvement ideas and they've been recognised as positive, but then they've never quite got to the implementation stage or part of it was done, and so, or and staff didn't receive the recognition that actually it was their idea etc. So, what we really wanted to do, was to engage all staff groups within maternity. We're a very rural county and we have one consultant unit based in Telford, where the majority of our staff work, but then we also have some community hubs across the county and historically staff working those areas have felt quite disengaged and quite separate from the consultant unit and that we were very aware of, both via the Ockenden report and both from our staff surveys and from staff feedback etc. So, it was really really important that we wanted to create one team essentially, that was a real important goal for us where all of our teams felt as valued and every member of the maternity team, so not just midwives, doctors, but also our admin staff, our WSAs, our support staff all felt they were part of one team. So, we wanted to provide a platform for their voices to be heard and it was really really important to us as well to recognise and reward quality improvement ideas. So, what we wanted to do was to ensure that we valued those staff who gave those ideas and that they actually got the recognition for those improvements and they didn't come that it was from management. And we also really wanted to empower our staff. So, we wanted them to feel that they had the option of speaking up they have the option and didn't matter who they were of offering an improvement idea and that all of those would be valued and treated equally. So, as I've said, we chose ImproveWell because we were so impressed with how it had worked in Royal Cornwall, Zoe gave a really very inspirational discussion with us and we all came away thinking absolutely this is what we want to go with and obviously the team as well explained to other features and we really felt that it was something, again with us being quite a rural county, it was something that would mean that we could offer the same option to all of our teams, no matter where they worked and we felt that the features that it contained were exactly what we were looking for. Next slide please.

So, if I go through a little bit, in terms of practicalities, because I think this was so so important for us, based again from what Zoe had given us and also from the team about how we should plan the roll out. So, for our teams, as I'm sure you can appreciate we've been through a period of a lot of change so, there's improvements happening all the time. There's new initiatives happening all the time. What we didn't want to do was not kind of prepare staff that this was coming, not offer explanations. What we wanted to be sure was all teams need exactly what this was. It wasn't just another thing. It was something that was actually for their benefit, would

be worthwhile that, you know, it was worth engaging with and that was actually going to make a difference. So, it was really really important as part of that process and that we planned it. So, we created a cut-over document, which essentially was a 12 week countdown to launch and as you can see here, some of the things that we did was a really robust kind of communication strategy. So, we are lucky here in terms of the fact that currently we have a very well-resourced maternity transformation programme. So within workstream 2, we had at the time, for example myself, we had members of the MTP (so project support). We also had people from HR. So, we had a very wide team, we had people from comms, so we had the resource and also the time to be able to give ImproveWell launch what it needed. So we produced an internal video and that featured members of our team being filmed explaining why they were excited about ImproveWell and what the benefits of it were, we produced posters. We also identified again, as Zoe has said, she made us aware how important it was to have champions. So and we identified champions from every area. Again, as I said, we're quite rural and we've got several different departments. So we identified what those groups were so, we were very clear and we also identified a lead for each of those areas, so that when the ideas eventually were going to be submitted, we have more than one person who was going to be dealing with those. So essentially we had 13 groups and then we had 13 primary leads who then all had a deputy lead as well to cover annual leave, sickness etc. We produced some certificates that we were going to give out for actioned ideas. And then, we also went with a little bit of bribery - so we proposed to have Amazon vouchers for ideas submitted and also for people who downloaded the app. And then it was also really really important to us, as I said before, to ensure that all teams felt engaged that we planned an ImproveWell tour we called it. So essentially we went with the team from ImproveWell and some staff members and we went to all of our sites and with some freebies and cake etc. Just again, to ensure that everybody felt that they were included and had the same information about ImproveWell. Next slide please.

So we planned again, because having ImproveWell was part of our workstream 2 of the maternity transformation programme. We needed to have some tangible outcomes to be able to evaluate whether ImproveWell was having an impact that we wanted it to do. So we created within ImproveWell, in the survey option, to have five questions that we would have ask on a quarterly basis. So those questions included, whether you would recommend SaTH as a place to work, a place where you would recommend a family member to have a baby, whether you felt that your improvement ideas were welcomed and heard, whether you felt they were implemented etc. We also set some targets for the number of downloads we wanted, so we purchased 500 licenses which would enable, as I said, all members of the maternity team. So that included everybody, admin staff as well as qualified and qualified staff to have the option of using the app, and then we also aimed to have an ImproveWell idea, quality improvement idea,

from each of the groups within a certain time period and certain number of downloads by a certain point, and then just again, we just wanted to feel that staff just fire feedback were telling us that they felt that it was positive. So as I said, we've been using ImproveWell since February. So our first quarterly survey results, actually really quite positive anyway, and our second course of survey results actually demonstrated and marked improvement in people feeling that they strongly agreed, that their voice was heard and that they were able to submit ImproveWell ideas and that they would actually be implemented. We've had really excellent download rates from all staff groups, including as I say, from consultants to admin members of the team. We've had a huge number of quality improvement ideas implemented. At this moment in time, we've had over 20 that have actually been fully implemented and recognition certificates have been given. We've got a large number more than that, they're in the process of being implemented and we've had really positive staff engagements. So what we set up, was a weekly ImproveWell meeting and again what we really wanted to ensure was that the momentum was maintained that when people submitted their ideas, they were acknowledged, first of all, and then they were told whether that idea was being taken forward or not. And then if it was something that was a quick win, because some things were, for example one of the quick wins was ensuring that we gave a electronic BP machine to one of the outlying areas that was broken that was really straightforward to do, obviously. So that was that was done within a few days. Other things took a little bit more time to do, because they either needed some investments or they needed some, it was just going to take a little bit more time. So in those cases, we just ensured that the staff were updated regularly and these weekly meetings gave us the opportunity to go through all of the ideas. So it was the group leads attended with myself and the projects lead for workstream 2. And we literally went through each of the ideas and we asked for a progress update, in terms of whether that had been taken forward and where we were up to with implementing that because, it was really really important for us. Because of the journey our staff have been on, to know that actually that they are being heard and that the idea is that they are submitting there is an end result, it's not just something that's going to be kind of a, has happened previously with quality improvement initiatives that it's something that is going to happen and then after a few weeks it disappears again, so we have this weekly meeting and it enabled us then to really keep an eye and an idea of where we were up to and then also, we could then recognise those ideas have been implemented and make a plan for how we were going to award the staff recognition certificate. Next slide please.

So with our staff recognition certificates, part of that was also about ensuring that we publicise that, so via Twitter, we'd do lots of things via Twitter, with photographs of people receiving their certificate. We have huddles everyday. So we were sharing it via the huddles. We have a number of different forums and ImproveWell who have a sort of a free meeting and a drop in session

where everyone's welcome to come via teams once a fortnight and we would give an update on where we were up to with the ideas. We'd also celebrate people who had submitted an idea recently and share what that idea was. So it's been really very very successful are you know, we've got some people who have submitted tens of ideas and we've had ideas from all areas. So it hasn't just been within the consultant unit, which is potentially, let's say that was really important to us that it involved the whole team. So we've had lots and lots of ideas from our smaller outlying units as well. And again the ideas have been you know, really amazing. We've had, it's been a complete variation of really large ideas. So one of our really large ideas that we're progressing is how we schedule on Monday to be training. So for those of you who work with the maternity or realised how much mandatory training we all have to do and previously they've been days throughout the year. So the idea was that we have a week of training and so that's something that's actually being progressed at this moment. Obviously, that's something that's quite a big piece of work, and then we've had much smaller ideas I've said, in terms of printer wasn't working wasn't printing blood labels properly, they were always wonky. So that was a really straightforward thing to fix. New keyboards within an area because the letters have started to rub off, moving a printer out of an office space into a different space because people couldn't use the printer when handover what's happening etc. So we've had a huge range of ideas. They've come from all different sorts of people and I think in terms of sharing our journey and what we would advise other people is that the planning of launching is really really important. I don't think it would have been successful if we haven't done this really robust planning. So I think it was certainly for our teams, that may be different for others. They really needed to understand what ImproveWell was, what the benefits were and practically how it would impact on them prior to this launching, to really understand and engage with it. I think it really has been so important working with Zoe working and with the team at ImproveWell, because that really helped to inform our journey based on what they've learned previously from working with other maternity providers. Certainly for us, it was definitely a benefit having staff incentives. So we've had coffee vouchers, as I said at the beginning, we had Amazon vouchers and we had like a raffle for each month for people who submit an idea, they went into the raffle. And again, we did photographs, put that on Twitter etc. So that again, just get staff talking in terms of how did you get that and that made people who haven't, not everyone read their emails do they etc. So just again, being in the clinic areas and people seeing staff receiving certificates and vouchers etc. just created conversation and made people interested. It's so important to identify champions. They're the people in the area saying to their colleagues, why don't you put that on, you know, the ImproveWell platform, that's a great idea and then you know selling that it does make a difference your voice will be heard. We've really found them absolutely vital to the success of our launch. Again, staff recognition. So, Zoe alluded to it, but it's really really important that we recognise that it's the staff member who's had that great idea and the impact

that it's had so, I mean, our certificate it's just a piece of paper you would suggest but it has the staff absolutely value getting them and again kind of, you know, that the presentation of them and the photograph opportunity and the sharing that with their colleagues. It just again, it's just something to make staff feel valued and recognise that you know, their ideas are really worthwhile and having a huge impact on our service users and on, you know, on their teams. The other thing is about keeping momentum. So, I think that's so important. I think you have to keep the momentum going and what it can't become is another one of those, sort of, you know, ideas or trends that happens for a few weeks and then disappears again, you have to keep the momentum going and you have to have ideas implemented if they're going to be taken forward in a timely way and staff kept informed of the progress of them. And then I think publicity, that's been key for us as well. And again in terms of just keeping the profile of ImproveWell up within the teams and acknowledging the impact that it's having, has definitely had an impact for us. Next slide, please.

So what are we doing moving forward? So again, in terms of, I've changed job role since we launched ImproveWell, so I'm no longer co-lead for that workstream of the transformation program anymore. So, we have had a little a little lull while we reorganise who the new lead is going to be and so although it's still continuing, we haven't we haven't quite had as much momentum behind it for a couple of months as we would like. So we're planning a kind of a re-launch just in terms of similar things that we did at the start in February just to relaunch it with who is, now, the new leads. We've had some other changes of staff in terms of ward managers etc. So we're just doing a bit of a re-launch and that's what we've got. So I say, we've got a new service lead identified with the deputy and then we will make sure we reinvigorate that the weekly leads meeting and then we feed the ideas, as I've said, through a number of different forums, but what we're going to have as a specific ImproveWell newsletter that the lead will produce, that will just really highlight and it'll feed into we now have a Facebook page which never had before. So that ImproveWell newsletter will also feed into the other communication channels we have. Just specifically highlighting on the impact that ImproveWell's having, I would hundred percent say that I would recommend ImproveWell for any maternity service looking to improve staff engagement, I think because it's digital, we've also found that, you know, people engage with the 'how was your day' feature on there and that's really helpful for us to look at and understand what is the reasons. If for example, they say they have a bad day, they have the opportunity to put some words in, and that gives us some information about what it is that's made them feel they have a bad day. Is it to do with the level of acuity? Is it to do with communication? etc. And then also the same for if they feel they've had a good day. The words that they can put in again just helps us to acknowledge what it is that makes staff feel that this is a good place to work and that the improvements we're putting in place are working. So, I'd be

happy to take some more questions at the end when we go to the question and answer but certainly for us, it's had a very positive impact. Our trust, I've given a number of talks about ImproveWell to different departments. So, certainly for us the board is very committed and it's definitely looking to roll out ImproveWell within other areas of the trust because of the positive improvements we've seen and been able to demonstrate within our maternity services. And I think that's the end. Thank you very much.

Ben Russell (44:41)

Amazing. Thanks Claire. Yeah, it's been it's been great to have seen the success of the launch since we launched in Feb and I think I'll be coming up next month anyway, to help out with the relaunch, you know, to meet some of the stuff again and to meet and some of the staff that I haven't met already, so really excited for that.

So I think, we should have some questions and that have been coming in throughout the duration of the talks.

Claudia Orrell (45:12)

Okie dokie, I've got one in here. So this one, I think probably, should we give this to Claire? I've got someone asking: how do you make time for an initiative like this?

Claire Eagleton (45:26)

Yea, I mean as I said, we have been lucky because we have had some dedicated time as part of maternity transformation programme. For the clinicians, so for the group leads, there is a bit of commitment that you do need to have, you need to allocate some time to this. So we have the hour weekly meeting, which we which we recommend that the group leads or the centre deputy if they're unable to. And then in terms of other time commitment, I suppose it's just about sharing the load within the team. So it's not just for one person to be doing and I think that's what we really learned from Zoe's journey, is that, you know, for example, we've got 13 groups 13 leads, all with deputies. So, although there is a time commitment, it's worth it for a start, because the improvements that you make in what we found both practically for our staff and also for our service users, have a really positive impact so, it's a good use of time. And then, I think just by spreading the load between, rather than just have one person you're able then, it's not a huge impact on everyone's time commitment. So, I would say that's the most important thing is, yeah don't try and do it for one or two people, try and spread the load between, you know, between all of your teams.

Claudia Orrell (46:40)

Thanks Claire. Zoe, I've got a question for you here. It says love the presentation amazing to see how much was achieved. Was there anything specific you did to keep people interested after the initial 12 weeks to keep using it for three years?

Zoe Nelson (46:56)

Well, embedding it into our governance processes, with starting to do that. That was really helpful. I think and I think when you go through a bit of a journey like that, and I don't believe you've got staff anywhere that don't want to do their best and come into work and do their best and be empowered to do their best. So, I think every trust would have those people that want to keep the momentum up, that want their voices to be heard. And so, I think talking about it, valuing it, seeing the continual improvements, seeing the benefits to the service user, seeing the benefits to the workforce, raising our profile - it made an impact a positive impact on our recruitment. So obviously, staffing-wise, people appreciated the fact that we'd raised our profile, and it was a good place to come and work, and therefore that impacted on how the shop floor staff were feeling supported. And so, it has a knock-on effect to raise your profile of the trust. We published articles and did some work with the RCM. And so, it was really beneficial in keeping the momentum up but actually embedding it into your everyday of what you were supposed to be doing but ImproveWell was the vehicle to give us the ability to travel the way we wanted to travel.

Claudia Orrell (48:20)

Thanks Zoe. Questions are coming thick and fast now. So, Claire, question for you here, brilliant to hear the success you've had, what has this success been shared with the wider trust and how has this been received? I know you obviously touched on that a little bit at the end there Claire, but maybe you could elaborate a bit.

Claire Eagleton (48:36)

Yeah, of course. So, we have, as part of our governance process with our maternity transformation programme, we have a monthly meeting that's chaired by our executives and also has a number of our system partners present. So, we give workstream updates to that meeting and so they've been very well versed on how well and ImproveWell is going and, like I said, based on that that has triggered the interest of using ImproveWell throughout the rest of the trust. So, I've given talks, certainly within our emergency department, and other departments within the trust, who just want to hear a little bit more about it. So certainly, our trust board are absolutely well aware of the improvements that we've seen by using that by using the app. As I

said, that spread then out to other departments within the trust, who were also very interested in using it based on our success.

Claudia Orrell (49:26)

Brilliant, thank you. Ben, so you're not left out, I'm going to give this one to you. Someone's saying fab presentations, thank you. Do staff generally have the app on their personal phones? And is there any resistance to this? Actually, you might want to ask Claire and Zoe to chip in but if you press start.

Ben Russell (49:47)

Yeah, I mean obviously the platform can be used either by the mobile app or the web app, so you can access it via the website version. From my experience, we find the majority of frontline staff giving the feedback, are downloading the app and submitting feedback in that way. It gives them the opportunity to submit it, you know, whether they're on the go or you know during a quick break. We also have some organisations that will hold improvement huddles. So, you know, kind of, just a 10–15-minute chat where everyone will get their phone out and talking about ideas in real-time but also submitting them in real-time as well. But yeah, from our perspective that's a fairly popular method of staff giving feedback. And yeah, Zoe and Claire, I don't know if your experience has been any different.

Zoe Nelson (50:43)

Yeah. I think we had some staff that absolutely didn't want to use their personal phone for anything work related at all, but we had the icon as a shortcut on our desktop computers. So, they just used it in that way. So, it wasn't a problem but it gave them the choice and empowerment to submit ideas in whatever capacity. There was some reluctant sometimes that, you know, if you're going to submit an idea does that mean that you're going to be given the work to implement it and so we were very clear that we want your ideas, but that doesn't mean to say you're going to be given the work, if you want to do that, you'll be supported to do that. But if you don't, we still want to hear your ideas because they're just as valuable. So, I think that was really important to ensure that we got that message across because there's people that that would have really valuable ideas, but don't necessarily want to implement them and do the work that's required to implement them.

Claire Eagleton (51:32)

We certainly found, just to build on that, the vast majority of our staff have it on their personal phone, like Zoe said, there's a few people who don't like to have anything work related on their

own phone and they've got the option of using the desktop. But yeah, we do find the vast majority of very happy to have it on there on their personal mobiles.

Claudia Orrell (51:50)

Thank you. So, another interesting question here, so how does it spark conversation between staff and build relationships between staff?

Zoe Nelson (52:00)

So that's a really good question actually, so I think if I draw on our experience with the Pelvic Health Service, for example, so that was an idea submitted by a band 6 midwife, that she felt that there was no follow-up service for perinatal trauma and then that then sparked a conversation with our maternity voices partnership, who then did a service user survey on what our service was looking like, that then sparked conversation with our physiotherapists, and then by the time that we were being asked to submit an application to be an early implemented, we already had everything in place, just because of that submission of that ImproveWell idea and that's how it grew and that's just one example.

Claudia Orrell (52:47)

Brilliant. Thanks Zoe. Claire did you want to add anything there?

Claire Eagleton (52:53)

Yeah, it's just for us, as part of our weekly meetings, obviously, we're hearing about all of the ideas that have been submitted, so our team leads are aware of those but then just within our clinical areas and there's a little bit of competition in terms of the number of ideas within clinical areas that have been implemented what they are and so it has really sparked lots of conversations and I think again because it's been all different types of staff. So, we've had one of our, kind of, most active users is an admin member of staff. And so, and I think it just does spark conversation because we're in the clinical areas, we're giving out certificates and people are then interested to know, ooh what's that for, we do put up, again, as Zoe's done, if it's something that we could put up a, like an ImproveWell certificate and say this was an ImproveWell idea, we do that as well. So, and yeah, we found that it really has sparked conversation and people are really keen to know as well that they did something. And again, something so simple as keyboards, nobody had actually made people aware necessarily that they were causing a problem and that having those you know letters rubbed off was an issue, but then just having this vehicle and understanding that if you do it via ImproveWell, you know, definitely something will come of it just really maybe think 'oh okay, right? Okay, so that actually will be actions now' and that then feeding that back to their colleague say, 'no do it via

ImproveWell, don't moan about it, it submit it via ImproveWell, and then something definitely will, you know come out of it'. And then by just showing people that actually is a reality you get flooding with ideas then.

Zoe Nelson (54:30)

I think what's really useful as well, on the platform, is that you submit an idea, but you also say what your solution would be. So instead of the moans and groans, you actually generating a proactive workforce to be thinking for themselves. And I think that's really important, because they want to be empowered to think for themselves. They know that what the solutions are and then you're giving the respect to them that that will be put in place. Another idea for us, which was a really simple idea and I can't believe nobody thought of it before, was our grab boxes were being checked daily and just by adding a cable tie that wasn't cut, you could then take those checks once weekly, and that amount of time that saved and the fact that the staff were like, 'this is real pain in the backside to do', you know, 'nobody's used it today la di da di da', but it was a safety element that had to be done, but it saved the staff all that time. So, then they became weekly checks instead of twice daily checks.

Claudia Orrell (55:33)

That's brilliant. Thank you. Do you know I think that might be all the questions we have time for. I can see it's near two minutes to. So, I'm going to hand back to Ben now. Thank you everybody for the questions. Sorry. We didn't quite get to all of them.

Ben Russell (55:48)

Thanks Claudia. Perfect. Yeah. Well, I guess yeah, just want to say thank you everyone for joining. I hope it was a useful session. Thank you so much to Zoe and Claire for your talks, it's been really inspiring to hear about all the work that has happened and is still happening and to drive improvement within maternity services, and yeah, thank you again everyone. I think yeah, my contact details are there on the screen and a couple of those you can reach us. But yeah, Thanks again everyone for joining and enjoy your Fridays!