

## **Working with SHAs - NHS North West: additional learning**

Some practical learning that has emerged includes:

- All teams experienced challenges to team engagement and maintaining momentum. Although a difficult challenge, working with teams to overcome it can ultimately make project teams and those participating in the collaborative stronger and more engaged.
- Clinical leadership played a key role in the project and recruiting an effective senior clinical leader to the collaborative teams proved essential to achieving success. One of the teams acknowledged that their collaborative only really started to make progress when the senior clinical leaders developed insight into the opportunities offered to their trusts.
- Learning sessions provided clinical leaders with the help they needed to develop their safety insight and steer their team's strategy for recruiting new team members. Site visits and face-to-face contact have also been useful in developing and nurturing the teams.
- Teams say they would have benefited from a team member role description, including appropriate skills, knowledge and time required for the programme. This would have positively impacted the pace, ability to understand the teaching and their confidence.
- The safety nodes that had well defined and clear support from senior leaders were able to develop quicker. As did those with strategic alignment to other initiatives and projects in organisations. Consideration of scale up and spread of improvement work at the beginning played a key role later in the project.
- There was significant improvement with the pressure ulcers, both early on and in the assessment of pressure ulcer risk assessments within six hours of admission. However, the key learning has been to ensure the measures set are realistic and manageable in terms of the burden of data collection and analysis to be able to evidence improvement.
- A key element to the Walton Centre's success was the strength of clinical and medical engagement. The programme created the opportunities that allowed consultants who previously worked in organisational silos to form a professional network and a peer-to-peer learning exchange.
- Improvement work takes time, enthusiasm and skills. It is imperative to get the right people in the room. Ringfencing time and the supporting resource is difficult with many doing the work in addition to their regular role. Some team members found it challenging to define roles within their safety node teams and often relied heavily on one team member. This needs to be a high priority consideration as it impacted on the ability and pace that the safety nodes and partner organisations moved forward.

***Identify Innovate Demonstrate Encourage***