The Emergency Department at Manchester Royal Infirmary is a large provider of urgent care services.

In the current year, demand for services has been unprecedented and has resulted in the volume of patients attending the department increasing by 10%.

The acuity and complexity of patients attending the department has also increased.

This challenging context means it is essential staff employed within this team feel, well led, supported and able to undertake their roles to continue to provide comprehensive and safe levels of care to patients.
In November 2014 turnover was high- 2.9% against a target of 1%

Sickness absence was also high averaged at 6.9% in November 2014.

The most recent staff survey results help to provide some understanding of staff perception and levels of engagement and performance in the team. The staff survey results issued to the Trust in April 2014 (surveyed October 2013)

- 72% of staff feel satisfied with the quality of work and patient care they are able to deliver
- 73% of staff work extra hours
- 46% have had a well-structured appraisal
- 33% report good communication between senior management and the staff
- 61% feel able to contribute to improvements

These indicators are all below the national and Trust average and are clearly likely to impact upon satisfaction levels and therefore team performance.
Questions we asked

• Is a greater clarity of roles and responsibilities for medical and nursing staff required?

• Why are Individual standards of performance not consistent and why are there areas of ‘poor’ performance?

• Changes in leadership – does the team feel supported and how can the leaders support the team best?

• Do staff have the skills they need to fulfil their roles?

• What does a perfect team look like – best practice?

• How can we include the feedback of all staff groups and all staff, to ensure a ‘bottom up’ approach is taken and ensure shop floor clinicians, across all professional groups, own and make the changes required?
Action to address

• Discussed with our Organisational Development and Training department – requested support to look at team working and leadership to improve staff performance and patient outcomes.

• We determined an inclusive comprehensive diagnostic piece of work was needed to further understand the strengths and potential development areas of the department.

• OD&T identified Aston Tools – Aston Team Performance Inventory and Aston Action Teams as tools to enable us to identify areas that were strengths that could be leveraged and areas that needed improvement. We could also review the perfect/best performance team - what that looks like using the Aston well researched definition
Aims and Objectives

• Based on the learning from these diagnostics we would develop a focused action plan to:

  – Enable the department to respond to high demand; volume and acuity of patients
  – Ensure clarity about roles and responsibilities of all staff in this context
  – Ensure consistent levels of high performance
  – Improve staff engagement and involvement to enable a reduction in sickness and turnover of staff
Developed from over 10 years of research evidence by Professor Michael West from Aston University, who has researched and led ground-breaking work linking staff satisfaction and engagements levels to patient outcomes and mortality rates.

The Aston Team Performance Inventory (ATPI) identifies and measures the key elements of effective team working at both team and organisational levels.

The most comprehensive tool available to predict team performance in organisations.

Helps identify where the teams’ strengths and weaknesses are and what activities to prioritise for further team development.

Compares the average of team members’ responses to those of a relevant comparison group.
The Benefits of Team Based Working

• Aston’s philosophy:

Team based working is a philosophy or attitude about the way in which organisations work – where decisions are made by teams of people rather than by individuals and at the closest possible point to the patient

• NHS research by Aston

• Reduced hospitalisation and costs
• Increased effectiveness and innovation
• Increased well-being of team members
• Multi-disciplinary teams deliver high quality patient care and implement more innovations
• Lower patient mortality
• Reduced error rates
• Reduced turnover and sickness absence
Team working and patient mortality

Mean Mortality Index

Percentage of staff working in teams

<40% 50-60% 60-70% 80-90% 100%

Mean Mortality Index Rating
Team functioning and patient satisfaction

![Bar chart showing the relationship between team functioning and patient experiences]

- **Team functioning levels**:
  - Low
  - Moderate
  - High

- **Patient experiences**
  - Clarity of objectives
  - Reflexivity
  - Support for innovation

The chart indicates a positive correlation between high team functioning and improved patient experiences across the dimensions of clarity of objectives, reflexivity, and support for innovation.
Aston Team Definition - What is a Team?

A group of people who:

- share common objectives
- need to work together to achieve these objectives
- have the opportunity to meet regularly to review performance and to plan for success

We identified some key professional teams – 95% took part

We wanted an inclusive approach – what about shift teams?

| Clinicians | Nursing | Admin & Clerical |
Aston Definition - What is an Action Team?

A group of people who:

- Share common goals
- Come together to perform a specific task or set of tasks, but do not generally perform as one stable, consistent team.
- In healthcare settings these include shift teams and theatre operating teams.

We volunteered to pilot the first large scale use of Aston Action Team questionnaire.
Aston Team Performance Inventory

Detailed questionnaire – 18 focus areas

- Inputs
  - Task Design
  - Team Effort and Skills
  - Organisational Support
  - Resources

- Processes
  - Team Processes
    - Objectives
    - Reflexivity
    - Participation
    - Task Focus
    - Team Conflict
    - Creativity and Innovation

- Outputs
  - Team Member Satisfaction
  - Attachment
  - Team Effectiveness
  - Inter-team Relationships
  - Team Innovation

Leadership
- Leading
- Managing
- Coaching
Aston Action Teams

- Short questionnaire (11 questions) completed by groups of multidisciplinary teams who come together to deliver a shift on the Emergency Department rota

- All staff invited to take part across every ‘Day’ and ‘Night’ shift for a six week period

- Provides feedback on rota team performance

- Enables rota teams to identify strengths and development areas in their performance

- 30% staff per shift responded to the Action Team questionnaire (generally 15 people per shift with an average of 45-55 staff on shift)
<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>April</td>
<td>Communication to all staff</td>
</tr>
<tr>
<td>May</td>
<td>Professional groups complete full ATPI questionnaire</td>
</tr>
<tr>
<td>May-June</td>
<td>Rota teams complete Action team questionnaire following the end of each shift. Short questionnaire – idea of differences in performance across shifts</td>
</tr>
<tr>
<td>August/September</td>
<td>Feedback collated and shared, strengths celebrated, action plan developed</td>
</tr>
</tbody>
</table>
Consultants

- Satisfied and committed to the team
- Have the chance to participate, with high focus on quality work and able to work innovatively
- Coached and managed well
- Concerned about resources and relationships with other departments can be challenging
CMFT ED SENIOR NURSING

Team Outputs
- Team Innovation
- Task Design
- Team Effort and Skills

Team Inputs
- Organisational Support
- Resources
- Objectives
- Reflexivity
- Participation

Processes
- Leadership Processes
- Team Processes

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Leadership Processes
- Managing
- Leading
- Creativity and Innovation

Team Processes
- Coaching
- Team Member Satisfaction
- Inter-team Relationships
- Team Effectiveness

Process Comparison
- -
- --- comparison group
Nursing

- Committed to the team
- Able to innovate
- Clear on objectives
- More positive relationships with other teams
- Well managed
- Concerned about resources
- Would like more involvement and skills development
Admin and Clerical

• All staff, at all bands included in full questionnaire

• Results less strong overall than comparator group but this is a general medical admin team rather than emergency department admin team – pressures more intense

• Leadership structure has changed since the questionnaire was completed to provide more support

• Focus on patient much higher by front desk team and relationships with other departments generally are positive

• Team would like more clarity about objectives and increased involvement and communication in all areas of the department
### Action Team Data – Consistent Performance

<table>
<thead>
<tr>
<th></th>
<th>Clarity of objectives</th>
<th>Role clarity and interdependence</th>
<th>Supportive environment</th>
<th>Focus on quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Team Score (551)</td>
<td>4.28</td>
<td>4.26</td>
<td>4.26</td>
<td>4.04</td>
</tr>
<tr>
<td>Day (301)</td>
<td>4.27</td>
<td>4.26</td>
<td>4.26</td>
<td>4.00</td>
</tr>
<tr>
<td>Night (250)</td>
<td>4.29</td>
<td>4.27</td>
<td>4.25</td>
<td>4.08</td>
</tr>
<tr>
<td>Weekday</td>
<td>4.27</td>
<td>4.27</td>
<td>4.23</td>
<td>4.00</td>
</tr>
<tr>
<td>Weekend</td>
<td>4.33</td>
<td>4.33</td>
<td>4.31</td>
<td>4.10</td>
</tr>
</tbody>
</table>

This information was collated from feedback from 101 shifts, and shows in the results in four key areas.

Data was also collated relating to the Consultant and the Nurse in charge for each shift.
## Action Group
### Individual scores

<table>
<thead>
<tr>
<th>Sister</th>
<th>Band (Score)</th>
<th>Clarity of objectives</th>
<th>Role clarity and interdependence</th>
<th>Supportive environment</th>
<th>Focus on quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sister A</td>
<td>45/11</td>
<td>4.15</td>
<td>4.22</td>
<td>4.21</td>
<td>3.89</td>
</tr>
<tr>
<td>Sister B</td>
<td>48/7</td>
<td>4.23</td>
<td>4.23</td>
<td>4.16</td>
<td>3.93</td>
</tr>
<tr>
<td>Sister C</td>
<td>46/8</td>
<td>4.32</td>
<td>4.26</td>
<td>4.27</td>
<td>4.10</td>
</tr>
<tr>
<td>Sister D</td>
<td>71/12</td>
<td>4.36</td>
<td>4.39</td>
<td>4.39</td>
<td>4.00</td>
</tr>
<tr>
<td>Sister E</td>
<td>69/10</td>
<td>4.21</td>
<td>4.23</td>
<td>4.16</td>
<td>4.01</td>
</tr>
<tr>
<td>Sister F</td>
<td>73/17</td>
<td>4.20</td>
<td>4.18</td>
<td>4.17</td>
<td>4.02</td>
</tr>
<tr>
<td>Sister G</td>
<td>68/10</td>
<td>4.42</td>
<td>4.47</td>
<td>4.43</td>
<td>4.23</td>
</tr>
<tr>
<td>Sister H</td>
<td>48/8</td>
<td>4.38</td>
<td>4.32</td>
<td>4.27</td>
<td>4.20</td>
</tr>
<tr>
<td>Sister J</td>
<td>32/6</td>
<td>4.33</td>
<td>4.28</td>
<td>4.23</td>
<td>4.06</td>
</tr>
<tr>
<td>No band 7 identified</td>
<td>61/6</td>
<td>4.20</td>
<td>4.21</td>
<td>4.15</td>
<td>3.76</td>
</tr>
<tr>
<td>Sister K</td>
<td>2/1</td>
<td>Insufficient data to report</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Individual results

Clarity of objectives

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>J</th>
<th>No Band 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>45/11</td>
<td>48/8</td>
<td>71/12</td>
<td>69/10</td>
<td>73/17</td>
<td>68/10</td>
<td>48/8</td>
<td>32/6</td>
<td>61/6</td>
<td></td>
</tr>
</tbody>
</table>

Note: The numbers in parentheses represent the numerator (scores) and denominator (participants) respectively.
Individual results

Role clarity and interdependence
Individual results

Supportive environment

- A (45/11)
- B (48/7)
- C (46/8)
- D (71/12)
- E (69/10)
- F (73/17)
- G (68/10)
- H (48/8)
- J (32/6)
- No Band 7 (61/6)
Individual results

Focus on quality

<table>
<thead>
<tr>
<th></th>
<th>Focus on quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>(45/11)</td>
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<tr>
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<td>(48/7)</td>
</tr>
<tr>
<td>C</td>
<td>(46/8)</td>
</tr>
<tr>
<td>D</td>
<td>(71/12)</td>
</tr>
<tr>
<td>E</td>
<td>(69/10)</td>
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<td>J</td>
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<tr>
<td>No Band 7</td>
<td>(61/6)</td>
</tr>
</tbody>
</table>
Ideas for Action - Inputs

Team Effort and Skills
• Valuing all grades of staff - eg encouragement to access Assistant Practitioner role
• Customer service training
• Floating band 7 nursing – support for all staff, gives staff development opportunities and more management responsibility
• Role development for junior doctors - management week
• Prioritise development/appraisals - Documented One to ones by senior management team to all grades of staff to invest in development ensure staff feel valued and important

Organisational Support, Information and Participation
• Relaunch of the ED newsletter- sharing information / good news

Resources
• Plans for the department – does everybody know?
• Share info on project RED, planned environment changes
• More access to resources – money for training, up to date equipment – inventory, critical area inc lifecycle date and include in bid
Ideas for Action - Processes

Objectives
• Collaborative exercise to ensure clarity of objectives and purpose
• Individual feedback to all band 7’s – identify development needs.

Participation
• Staff suggestion board (you said, we did)
• All grades of staff involved in meetings – Clinical effectiveness meeting – invite staff off area/shop floor to hear the discussions, get exposure, demystify meetings, show learning from errors/mistakes. Incident reviews - share more effectively
• Huddles to include all staff (including Admin)– shift team working together and they know each other - Fix time for the huddle after medical handover at 8.30 so all can attend
• Picture board – who’s who in dept
• Admin meetings – take votes on actions and decisions
• Schwartz rounds – once a month, share issues that affect everyone (not clinical)
• CSW Forums- Chaired by CSW's
Ideas for Action – Processes and Outputs

Task Focus

• Increase patient focus - Start every meeting with a patient story – good and bad – praise and learning

• Complaints and compliments on display on notice board in staff room- (sharing lessons learned, improve practice)

• Patient liaison support workers

• A&C – stress test and audit results

Outputs

Inter-team relationships

• Staff exchange to experience working in interdependent areas – walk in each other shoes understand the pressures
Improvements so far

- Sickness 3.5%
- Turnover 0.8%
- Patient experience tracker- improved responses
- Friends and family

Maintaining this level of improvement will be the challenge.
Any Questions