

**Agenda Item: 6.i**

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| <b>Report to:</b>                              | <b>Trust Board of Directors</b>                                       | <b>Date: 4 July 2019</b> |
| <b>Report from:</b>                            | <b>Andrew Raynes, Director of Digital and CIO</b>                     |                          |
| <b>Principal Objective/ Strategy and Title</b> | <b>Competency based Training to develop a digital ready workforce</b> |                          |
| <b>For:</b>                                    | <b>Information and approval</b>                                       |                          |

**1 Purpose of this paper**

To update the board on competency based learning and development for users of our EPR Lorenzo to support optimisation, better information and digital transformation at our hospital.

**2 Background**

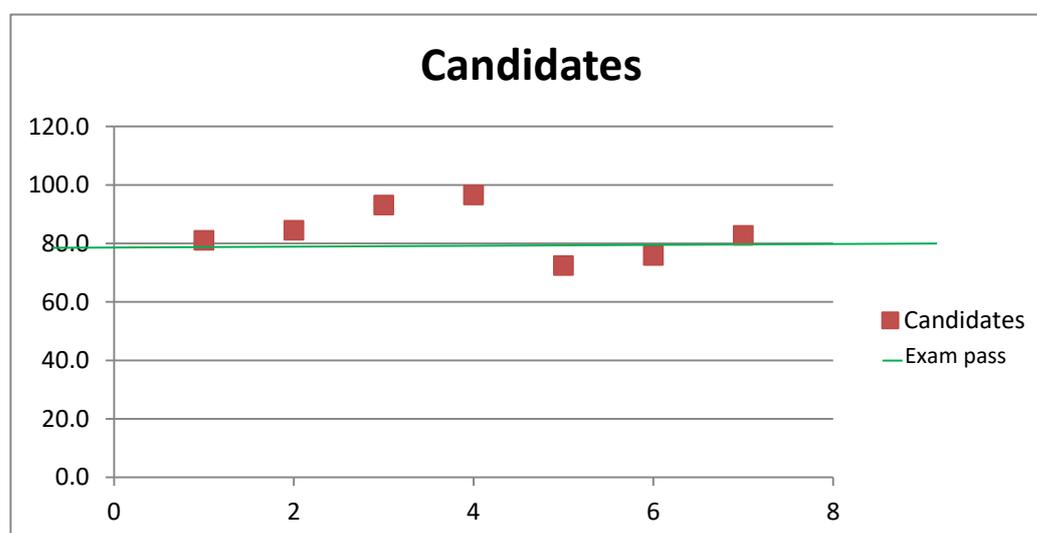
Following successful implementation of Lorenzo in June 2017, evidence from go-live, including performance reports have highlighted need to develop our staff using digital in particular Lorenzo. Root cause of the errors indicates incorrect and an inconsistent use of Lorenzo and understanding of a patient’s pathway. Recurring common themes from this include:

- RTT pathway not closed on Lorenzo post treatment.
- Follow up appointments have had pathways started on Lorenzo in error.
- Emergency episodes have had pathways started on Lorenzo in error.
- Poor data quality

As a result of these challenges a pilot for RTT training and assessment was undertaken on 19<sup>th</sup> September 2018 to test user competence and to improve our understanding of RTT and use of Lorenzo.

**2.1 Candidate results**

*Fig 1. Chart showing candidate passes following assessment*

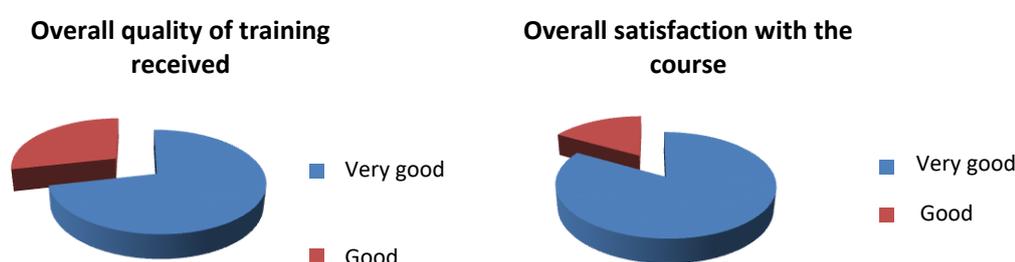


The training identified measurable results including two distinct competent individuals scoring above 90% in the assessment;

- 2 individuals achieved 90% and above
- 3 individuals achieved 80% and above
- 1 individual achieved a borderline pass 75%
- 1 individuals achieved below 75% (Not yet competent):

## 2.2 Candidate Feedback

Fig 2. Chart showing candidate responses to the training materials, approach and standards during the course



## 3 Conclusion

The real test of the training is whether the information about RTT has improved. Our analysis in this area has shown;

- *Evidence from our information PIPR suggests the training has made a positive contribution to improved performance*
- *Improved pathways; we can demonstrate that after the training and assessment that the majority of the candidates on the pilot have met satisfactory standards in their assessments showing steady improvement.*
- *For candidate not yet competent there is a scheme ensuring they have opportunity to pass through re-assessment and re attending the course.*
- *There is a full appeals process and the course conforms to ISO standards for learning and development.*
- *From the candidate results we have a competent group with two clear champions who should be used to further the skill mix and training roll out and be voices of authority on RTT in the Trust.*
- *There is a process in place under the scheme enabling continuous improvement of the course and course delivery.*

## 4 Recommendation and Proposed Action Plan

The training pilot for RTT administrators proved highly effective and has contributed to developing a team with new measurable knowledge and skills. Furthermore the recent launch of the Topol Review (NHSHEE 2019), suggests growing need to develop the digital workforce. Becoming a digital exemplar is not just about technology but our ability to harness its benefits through our users understanding the significance of the information

they are entering and the business processes to help improve patient safety and decision making by driving high quality information. At a system wide level such as in STPs, interoperability and big data will hold vital keys to unlocking benefits of population health, better outcomes for patients and also how we recoup vital funds for our services from commissioners. Collectively this provides compelling demand for better information and a digitally progressive workforce. Notwithstanding this the Lorenzo training under this scheme will support our optimisation plans delivering heightened awareness for improved data quality, Information Governance, Change and Project Management as we continue to transform our services.

The following action plan is proposed to support continued benefits of this scheme

- Implement the training over the next 12 months using a blend of taught and where appropriate eLearning content.
- Prepare and roll out a systematic programme to establish competency based training for Lorenzo using the training team to target Super-users and Champions followed by further roll out in a planned and systematic approach to other cohorts.
- Create a team of RTT champions spreading improvement from high quality training
- Roll out further programmes from this scheme such as EPR, Information Governance, and transformational topics such as Change and Project Management Training supporting development for (but not exclusively); Digital staff, Digital Strategy Board, EPR Steering Group, IG Steering Group, Lorenzo User Group, Training teams and Super users, Booking teams and medical secretariat, Clinical teams and other Staff who have been identified as having a particular development need.

The Board is asked to approve the recommendations and action plan in this report.