NHS
Institute for Innovation and Improvement

15 Steps Challenge
Quality from a patient's perspective

The Fifteen Steps Challenge
Quality from a patient's perspective
Part of the Productive Care resources

Contents

1. Background

Both patients and NHS staff have high expectations for safe, good quality care, delivered in welcoming and clean environments. The Productive Ward programme helps the NHS to deliver this ambition. The Productive Ward *(sometimes known as the Releasing time to care™)* programme, works with teams in hospital trusts, supporting staff to identify time wasting activities, duplication and inefficiencies that take time away from caring for patients.

The programme identifies simple changes like protecting meal times, protecting drug rounds and preventing interruptions at staff handovers; these improvements can reduce errors and improve safety. In implementing The Productive Ward staff have freed up on average 20-30% of additional time, which can be spent with patients. This has a huge impact on improving the quality of care for patients in a visible and tangible way.

During our work with The Productive Ward programme we held a number of workshops with patients and relatives. At one of these workshops a mother spoke up. She told us about her daughter, whose condition needed frequent inpatient stays. She told us "I can tell what kind of care my daughter is going to get within 15 steps of walking on to a ward". This made us realise that it is really important to understand what good quality care looks and feels like from a patient's perspective. This sparked the development of "The 15 Steps Challenge", a toolkit to help look at hospital care through the eyes of patients and relatives, helping to hear what good looks like.

The 15 Steps Challenge has been developed by working with staff and patients linked to The Productive Ward programme, but the 15 Steps Challenge is a useful tool even if you are not delivering The Productive Ward.

"The patient is the most important person in our hospital. He is not an interrruption to our work: he is the purpose of it. He is not an outside in our hospital: he is part of it. We are not doing him a favour by serving him: he is doing us a favour by giving us the opportunity to do it!"

Mahatma Ghandi

2. Purpose of this Challenge tool

"I can tell what kind of care my daughter is going to get within 15 steps of walking on to a ward"

quote from parent that sparked the Challenge

First impressions count

- First impressions give us our initial feeling about any situation. When we first arrive on a ward, does it inspire confidence in the care that we are about to receive?
- What makes us trust a care environment? What makes us feel that we will be safe and cared for?
- What are the first clues to high quality care?
- What does good look, feel, sound and smell like?

The 15 Steps Challenge is a toolkit with a series of questions and prompts to guide you through your first impressions of a ward. The Challenge will help you gain an understanding of how patients feel about the care provided and how high levels of confidence can be built. This tool can also help trusts understand and identify the key components of high quality care that are important to patients and carers from their first contact with a ward.

The Challenge is designed to help trusts on their continuous improvement journey. By enabling the patient's voice to be heard clearly, the tool can be used to highlight what is working well and what might be done to increase patient confidence.

The Challenge strongly aligns with a range of strategic initiatives including supporting improvements to quality, safety and patient experience. It should be sponsored by the trust senior leaders and form part of wider improvement activity.

The purpose of the 15 Steps Challenge is to:

- help staff, patients and others to work together to identify improvements that can be made to enhance the patient experience
- provide a way of understanding patients' first impressions more clearly. It describes how a small 15 Steps Challenge team can explore what the patient is experiencing by undertaking ward walkarounds. The 15 Steps Challenge team can then give the trust structured feedback and useful information about how patients and carers view the hospital or ward

- provide a method for creating positive improvements in the quality of care through identifying what is working well on wards and what could be improved – it supports the sharing of good practice and concentrating on some patient experience improvements
- offer a tool that anyone can use to explore care environments. However, it is vital that the 15 Steps Challenge has a lead sponsor within the trust who can organise the practical issues of visiting care settings and can champion the feedback and actions to take after the challenge has been completed
- develop a collaborative process and must include both staff and patient representatives
- the Challenge is **NOT** a performance management tool
- the Challenge is **NOT** an audit (clinical, quality, safety or otherwise).

"This fits in so well with the work we are doing around the environment for people with dementia and our caring for carers."
Senior Nurse, Dementia Care, Ipswich Hospital NHS Trust

When should we use the 15 Steps Challenge?

There is no set time for undertaking the 15 Steps Challenge. It should be used to support other quality work that your trust is doing, so it is important to understand and agree how it will align and inform other work.

Feedback has shown that the Challenge is useful in the following contexts:
- while implementing The Productive Ward
- as part of improving patient experience programmes
- to support and inform PEAT Inspections (Patient Environment Action Team), but does not duplicate these, since the focus of the 15 Steps Challenge is on exploring first impressions and confidence in care from the patients' perspective, from when they first enter the ward.
- prior to Care Quality Commission (CQC) inspections in preparation for visits
- as part of The Productive Ward visit pyramids, putting the patient's voice at the heart of this.

While the 15 Steps Challenge has been designed to support The Productive Ward, the principles are equally transferrable to any ward. The Challenge will help wards understand how they are doing from a patient's perspective. The Challenge can be used at any point during a trust's Productive Ward journey.

- It can be used before implementing The Productive Ward programme to understand the starting point.
- It is useful to complete after The Productive Ward has been implemented, as the tool will give a valuable understanding of what progress has been made and how the improvements are being maintained.
- Undertaking regular reviews, it can help encourage sustainable implementation of The Productive Ward programme.

"We linked it to the Productives, patient communication and patient experience. As a new organisation, we hope to integrate this with all of our patient quality and safety agenda."
Chief Nurse, First Community Health & Care C.I.C. (Community Interest Company)

How does The Challenge align with other strategic initiatives?

Care Quality Commission Standards

This tool has been developed to align with a number of the Care Quality Commission's core quality standards. Evidence of good practice identified through The 15 Steps Challenge may be useful material to supply in support of a Care Quality Commission inspection, or the development of a Quality Account.

In undertaking this Challenge, the team may note good practice or evidence in relation to the following Care Quality Commission quality standards:

- *Outcome 1 – Respecting and involving people who use the services*

- *Outcome 4 – Care and welfare of people who use services*

- *Outcome 5 – Meeting nutritional needs*

- *Outcome 8 – Cleanliness and infection control*

- *Outcome 9 – Management of medicines*

- *Outcome 10 – Safety and suitability of premises*

- *Outcome 11 – Safety, availability and suitability of equipment*

- *Outcome 16 – Assessing and monitoring the quality of service provision*

National Institute for Health and Clinical Excellence

The tool also matches many of the quality standards developed by the National Institute for Health and Clinical Excellence:

"Quality standard for patient experience in adult NHS services: improving the experience of care for people using adult NHS services."

The **NHS Operating Framework and Outcomes Framework 2012/13** both stress the importance of putting patients at the heart of their care experience.

It aligns strongly with several of the **Royal College of Nursing's Principles of Nursing Practice**.

"NHS Hertfordshire have been undertaking Quality Assurance Visits to all Hertfordshire providers for a number of years and whilst we had been using a checklist for the visits we were excited at the prospect of trialling the 15 Steps Challenge as it provided us with an evidenced based tool to strengthen our methodology. The 15 Steps Challenge mirrored what we were already looking for when we undertook visits and we found it worked well with our existing process. Firstly we used the Challenge as a training tool for staff who have not undertaken visits before or for staff who do not have a clinical background as it gave them an idea of what we did on a visit. As part of the trial we used the tool on three of our visits, which were to a maternity unit, an elderly care ward and a rehabilitation unit. Our visits covered three very different care settings but the principle of the 15 Steps Challenge remained the same and showed that the tool can also be used by commissioners."

NHS Hertfordshire, Quality and Patient Experience Team
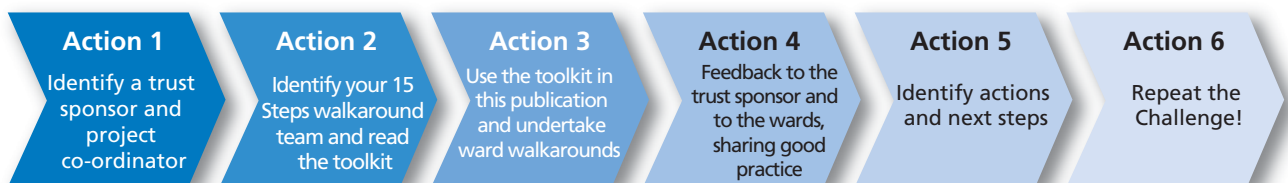
3. How do we use this Challenge tool?

"[Using the tool while] visiting other ward areas and comparing the differences between the wards, enabled the sharing of ideas and good practices."

Ward Sister, Nottingham University Hospitals NHS Trust

"People really liked this tool, for the first time we had more patient representatives than staff involved in our walkarounds."

Deputy Director of Nursing, Maidstone and Tunbridge Wells NHS Trust

The actions below outline the process of the 15 Steps Challenge.

| **Action 1** Identify a trust sponsor and project co-ordinator | **Action 2** Identify your 15 Steps walkaround team and read the toolkit | **Action 3** Use the toolkit in this publication and undertake ward walkarounds | **Action 4** Feedback to the trust sponsor and to the wards, sharing good practice | **Action 5** Identify actions and next steps | **Action 6** Repeat the Challenge! |

Action 1
Identify a trust sponsor and project co-ordinator

It is important that the 15 Steps Challenge has a senior sponsor. This might be the Director of Nursing or another Executive lead. The sponsor ensures that The 15 Steps Challenge is aligned to strategic priorities for the trust and supports Board to Ward involvement.

The trust sponsor's role is to champion the 15 Steps Challenge across the trust. It is important to communicate with both the Executive team and with frontline teams that The 15 Steps Challenge will be happening within the trust. This preparation work is essential so that everyone is aware of the purpose of the Challenge and understands that it is about improving care for patients. It is a good way to get "fresh eyes" and patients/carers views on how to improve care. The Challenge offers a way for people to work together on improvement, it is not an audit! The trust sponsor will also ensure that any corporate themes emerging from the Challenge can be addressed strategically and that good practice is shared and excellence celebrated. It is good practice to let staff know that the walkarounds are happening, it isn't necessary to tell staff which wards will be visited.

The trust sponsor may choose to identify a project co-ordinator for the 15 Steps Challenge. The Project co-ordinator ensures that the 15 Steps walkaround team are recruited and briefed, any practical issues are addressed, keeping track of feedback from the Challenge and ensuring this is raised with the trust sponsor.
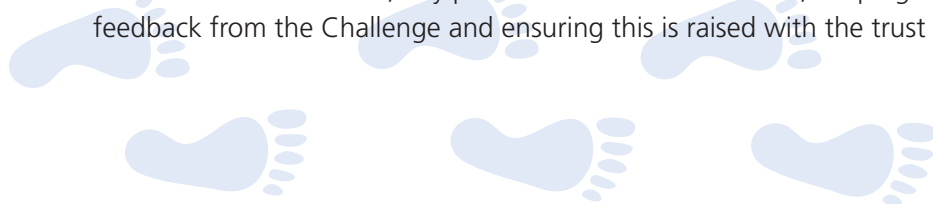
This is the team of around three or four people that bring different perspectives to the group that will undertake the ward walkarounds.

It is good practice to include staff with different perspectives e.g, Productive Ward leads, Patient Engagement leads, ward based staff, Health Care Assistants, therapists. Including non-clinical staff also brings valuable fresh eyes, for example staff from human resources, estates or governance teams. These teams may also help with improvements that arise from the Challenge.

Patient input can come from a range of sources, often current patients are happy to be involved in exercises like the 15 Steps Challenge. Alternatively the trust may have a patient council or forum, or may be aligned to a Local Involvement Network (LINk) or Healthwatch group with volunteers who represent patients' views. Some trusts are asking patients who have recently made a complaint to join the 15 Steps Challenge team and help identify improvements. Your Patient Advisory Liaison team can often help with this.

The team should include a Governor/ a Non-executive Director and/or Executive Director.

The 15 Step Challenge team should aim to meet together three times.

1) Meet for a briefing prior to starting the Challenge. Invite the patient, staff and non-executive director/governor representative to ensure that everyone is clear about the Challenge and has read the toolkit. It is useful to cover practicalities including how many and which wards will be part of the Challenge, dates and times of the walkaround, expectations of the walkaround and any follow up that might be required.

2) Meet to undertake the ward walkarounds and on the same day, meet afterwards to discuss feedback and findings.

3) Meet to repeat the walkaround and explore progress (the date for this needs to be agreed at the time of the walkaround).

The Challenge tool asks the team to explore the quality of care under four categories; "Welcoming", "Safe", "Caring and Involving" and "Well organised and Calm". On the day of the ward walkarounds start with a quick briefing. Ensure that everyone is clear about the tool. It is helpful for each Challenge team member to take on the role of focusing on one specific category. Agree the roles that your 15 Steps Challenge team will perform.

- With your 15 Steps Challenge team take 15 steps into the ward – not always literally – the point is to walk into the public space of the ward environment and get a feel for how the ward operates.

- It is good practice to let the ward team know that you are on the ward.

- Use your senses to build your first impressions and then look deeper – try to pinpoint some of the detail in what you experience.
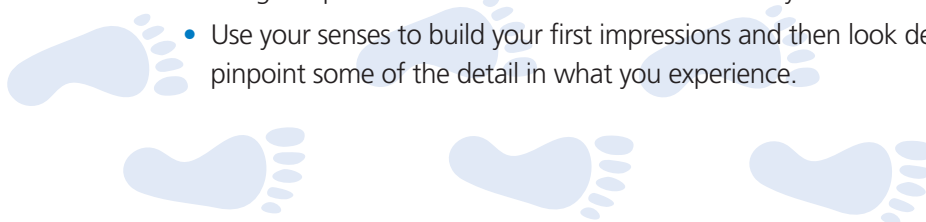
- Use the Challenge guides on pages 15 to 18 to structure your thoughts and record your comments.
- The focus is on first impressions. What do patients and visitors see? What is important to them?
- Spending about 15 minutes on the ward is usually enough time to do this. Explore the publicly visible spaces. What interactions can be observed? What do you notice that can be shared with other ward teams and spread to every ward? Absorb how the ward makes you feel.

Action 4
Feedback to the trust sponsor and to the wards, sharing good practice

The 15 Steps Challenge team should record their impressions from the ward walkarounds (there is space for this on pages 15 to 18).

- Sit down together as a 15 Steps Challenge team after the walkarounds and decide on the key points that you want to feedback.
- Share the highlights with the ward leader as quickly as possible.
- Make sure the feedback includes the great things that were observed. Celebrate the positives, this is about sharing good practice!
- Ensure that areas that could be improved are also identified.
- Ensure that the team also feeds back to your trust sponsor. Pick out key themes that are emerging rather than the specific details for each ward. It is their role to ensure that strategic support is given to help deliver any improvements identified.

Action 5
Identify actions and next steps

Agree actions that need to happen after the walkaround. If there was good practice to share, agree how this will be done and who will do it. There may be a number of improvements identified during the ward walkarounds that can be put in place quickly, some may be more complex. Agree what actions can be taken forward by the ward team, what needs to be taken forward by other teams and where the trust sponsor should have some strategic input. Can actions be aligned with other initiatives?

Action 6
Repeat the Challenge!

The 15 Steps Challenge is designed to help with continuous improvement. Regular reviews with walkaround teams will help ensure that good practice is frequently identified and rapidly shared. It also ensures that improvements are identified and actions are being delivered. Regularly taking the time to hear patients and carers perspective's will support them to feel confident in their care from the outset.

Tips for the ward walkaround

Let staff teams know that the 15 Steps Challenge is happening before the day of the walkaround – it can be useful to use the template poster for staff and patients in Appendix 2.

The visit on the day of the walkaround should be unannounced. Remember to brief the 15 Steps Challenge team on your infection control procedures.

Have a good look around you and work through the Challenge guide on pages 15 to 18 Based on our research, we have grouped these under four easy to use headings.

a) Welcoming

b) Safe

c) Caring and involving

d) Well organised and calm

Even before walking into the ward area spend some time noticing the entrance area – what is it like, is there useful information, is it locked but with procedures to access the ward? If this is the case, make sure that the 15 Steps Challenge team uses these procedures and "buzzes" in like a patient rather than "swipes" in as staff are able to do.

Walk slowly into the ward area, observing as you go. Make sure you let the ward manager know that you are on the ward and who you are.

Walk approximately 15 steps into the ward. All wards are different, sometimes 15 steps might only take you half way down an entrance corridor. This will provide useful information, but keep walking! The point is to get to the main public area of the ward. Stand quietly for a few minutes and have a good look around taking in what you notice from your different senses. What you smell and hear can be as important as what you see. Try not to get caught up in the detail of the toolkit at this point, really focus on your first impressions.

Once you have absorbed information quietly and independently, spend some time looking closely at the details. Look at the notice boards, the information on cupboard doors, any equipment that is stored in spaces open to public view. What do you notice about the activities of staff and patients going on around you? Be courteous and do not intrude, but observe how people interact.

Each of the following sections follows the same format. There are some questions, suggestions and images to prompt your thinking. These are not designed to be used as a checklist or clipboard exercise but to help you to structure your observations of some of the quality indicators that you may have subconsciously noticed.

You may wish to have short conversations with staff and patients if this has been agreed in advance with your 15 Steps Challenge team.

Beware of assumptions as you do your walkarounds. For example, the flustered person at the reception desk might not be the receptionist, but someone who is covering for five minutes while the usual receptionist is away from the desk. If in doubt, ask.

Often there are particular areas and times (for example protected mealtimes) that are not visible to the 15 Steps Challenge team, however, there is usually information about these areas and times; poster information, pictures and checklists on cupboards. These will all contribute to your sense of how the ward operates.

This toolkit is designed to help identify indicators of the quality of care in a ward environment. It gives examples to look out for and should prompt discussions that explore how care is being delivered. It is important to note that care settings will vary to meet the needs of the patients in that particular environment.

Do not forget to record your positive impressions as well as areas that could be improved. Let the ward manager know when you are leaving the ward and if you have seen some particularly good practice, let them know straight away.

4. The 15 Steps Challenge – what to look out for...

This section is not a checklist but will help structure your observation. It may be useful to detach this section and take it on your walkaround (or you can download just this section from www.institute.nhs.uk/productives/15StepsChallenge)

a) Welcoming

Questions to ask yourself	Comments:
• Using my senses – what can I hear, smell, see, feel, touch? • How does this ward make me feel? • What is the atmosphere like? • What interactions are there between staff/patients/visitors? • Is there visible information that is useful and re-assuring? What is it? • What have I noticed that builds my confidence and trust? • What makes me less confident? **Things to look out for** • Welcoming reception area • Welcome signs (including different languages) • Acknowledgement on arrival – eye contact, smiles, a greeting • Information available, clear and visible • Contact information for relatives and visitors is visible • Visiting times are evident • Information about who the staff team are and who the ward manager is • Is there information about what the uniforms mean? • Is there evidence that the ward is accessible to those with disabilities?	

Visit undertaken on .... (date) by .... (names of Challenge team)

b) Safe

Questions to ask yourself	Comments:
• What do I notice about safety issues? • Does this ward appear to think that safety is important? • What information tells me about the quality of care here? • What tells me that staff are concerned about safety and preventing harm (e.g infections, falls)? • How are medicines managed on the ward? • What have I noticed that builds my confidence? • What makes me less confident?	

Things to look out for

- A clean environment
- Hand gels are available and used
- Clear information about infection control
- Rubbish/dirty items and linen are disposed of appropriately and not visible
- Patients and staff have identification bracelets/badges
- Patients have access to call bells, drinks, side tables, and walking aides they might have
- Can I see information that says the ward is improving in identified areas? Is the information clear and understandable?
- Equipment and environment appears to be well maintained
- Protected times/areas for staff to manage drugs and essential equipment
- Mealtimes might be protected on some wards to ensure patients are not interrupted while eating
- Security and fire procedures are evident

Visit undertaken on .... (date) by .... (names of Challenge team)

c) Caring and involving

Questions to ask yourself	Comments:
• What behaviours can I see that do or do not inspire confidence? • How have the staff made me feel? • What can I understand about patient experience on this ward? • Are there any indicators that patients and carers are involved in their own care? • How is dignity and privacy being respected? • How are staff interacting with patients (are lower voice tones used for private conversations)? • Can I observe good team working taking place? • Is the routine of the ward evident to patients (e.g, when ward rounds happen, mealtimes, drinks, when the League of Friends trolley comes around	

Things to look out for
- Staff are with patients
- Patient feedback is displayed
- Curtains are long enough, close fully and are used
- Patients are dressed to protect their dignity
- Information is available for patients and carers in a clear and user friendly format
- Information is seen that empowers patients (e.g, they can wear their own clothes, choose their meals)
- Signs that equality and diversity needs are being met
- Visitors have access to chairs and space to visit
- Information about how to complain and compliment is visible

Visit undertaken on .... (date) by .... (names of Challenge team)

d) Well organised and calm

Questions to ask yourself	Comments:
- Does the ward feel calm or chaotic (even if it is busy)? - Is essential information about each patient clearly visible (even where names are anonymised)? - Is there evidence that equipment is stored in particular places and where it should be - Are there doors open to other rooms? (e.g, stock/linen cupboard, staff room or kitchen)? Do they look well organised, clean and uncluttered? **Things to look out for** - An uncluttered, clean environment, including nurses' station, hallways, bays and visitor areas - Clear signage to rooms, WCs etc. - Well maintained, appropriate (e.g, non-slip) and clean condition of walls, floors, windows and ceiling - Staff have easy access to patient information that is visible and organised. There is a transparent and communal information board. (Patient Status at a Glance board). - Patient boards show evidence of co-ordination between different departments - Equipment stored tidily and managed e.g, colour-coded, staff return equipment after use, stock cupboards are clearly labelled – including visible management (photos of content)	

Visit undertaken on .... (date) by .... (names of Challenge team)

Your local priorities

Use this section to highlight things that are important to your own organisation:

Questions to ask yourself	Comments:
(agree these with the 15 Steps Challenge team in advance) Remember to ask questions about how this priority made you feel, what your senses can tell you from first impressions, what behaviours and interactions are linked. **Things to look out for** (What would patients, relatives and visitors notice about this priority from their first impression?)	

Visit undertaken on .... **(date) by** .... **(names of Challenge team)**

The template below might be useful to record the overall comments of the 15 Steps team:

15 Steps Challenge

The Reviewers:

Patient

Non Executive Director

Staff

Ward area: **Date:**

Welcoming:

Positives	Recommendations

Safe:

Positives	Recommendations

Caring and involving:

Positives	Recommendations

Well organised and calm:

Positives	Recommendations

Overall themes and comments:

With thanks to First Community Health & Care C.I.C.

5. Reporting back

After the walkaround, you will need to sit down with your 15 Steps Challenge team colleagues and compare thoughts and comments. It is best to do this straight after the walkaround while the visit and impressions are still fresh. 15 Steps Challenge team colleagues will have undertaken different roles and focused on different aspects of care during the walkaround.

Take some time to discuss what each person saw, felt and experienced. Team members will have noticed both similar and different things. Find a balanced view across the varied perspectives. As a team, it is important to discuss and note down the aspects of care that helped to build confidence. This needs to be fed back to the trust in order to share and encourage the spread of good practice. It is also important to note where things could be changed to improve the patient experience.

As a team, agree the following key points:

- what specific things will be fed back to the ward team – these are the details relating to that particular environment
- what themes across all of your walkarounds will you feedback to the trust's sponsor – these are broader issues that have a more strategic link. For example is there a need for better corporate signage, or information boards displaying uniform definitions? Is there a need to look in more depth at patient experience across the trust?

Arrange to meet with the ward leader and the trust sponsor and discuss your findings from the 15 Steps Challenge with them.

The template on page 20 is a useful form to summarise your feedback.

> *"As nurses it is our job to inspire confidence and make patients feel safe and cared for - the beauty of the 15 steps tool is that it provides a framework to quickly identify what patients and relatives will perceive and help you understand if you are achieving that."*
>
> Deputy Chief Nurse, Isle of Wight NHS Trust

Constructive feedback is a skill

Rapid feedback to the ward team (on the same day) is really important. Remember, they have been under scrutiny from the 15 Steps Challenge team and this may make everyone anxious. Make sure that the ward leader hears the team's comments as soon as possible. Give feedback verbally and agree if further written information would be helpful. Identify someone in the 15 Steps Challenge team who will give the feedback, and ensure that they have the skills for delivering constructive comments.

Remember the rules of giving good feedback:

- Be timely
- Be constructive
- Be courteous

Some useful tips for giving feedback:

1. Avoid delays - delays in feeding back can result in reduced momentum and power of the recommendations.

2. Ensure the facts are right before you give feedback.

3. Plan in advance how you are going to give feedback – who will do this from the 15 Steps Challenge team?

4. Identify appropriate methods for giving feedback – will this be done verbally, or would it also be useful to have some written information?

5. Encourage staff to feel part of the process in advance so that it doesn't feel like a "them and us" situation.

6. Encourage the recipients of feedback to undertake their own self-assessment before giving feedback from patient stories e.g. "What do you think patients are saying specifically about how they experience our service?"

7. Provide non-judgemental feedback which is truthful, direct and constructive.

8. In feeding back, offer some positive examples, followed by some recommendations for improvement and end with some positives. This is a constructive way to deliver feedback.

9. Enable recipients of your feedback to give you feedback on how they found the process and help you to understand how it could be more effective.

10. Ensure that there is an opportunity for staff to action plan based on feedback and have ways to share good practice.

"[We saw] how The Productive Series has been implemented and the positive effects it has on the ward for both patients and staff. Action plans were drawn up within a week of our visits, asking for our feedback and clearly stating what will be done, by who and when."

Patient Representive, Cambridgeshire LINk

6. Developing actions and next steps

Having identified what is working well, and what can be improved, it is important to make sure that sharing good practice and improvements actually happen.

"This exercise allows staff to 'step outside the box' and whilst achieving subjective appraisal of another area of the hospital, the ensuing effect is consideration of how your own area is perceived by patient and visitors. Equally, methods of practice that are highly successful could be shared. By considering first impressions, the team members were able to constructively evaluate the department/ward using a patient centred approach"

Patient Experience Officer, Isle of Wight NHS Trust

1. **Discuss** the Challenge outcome with the ward leader, trust sponsor and other relevant staff (for example the estates department, Productive Ward lead, quality improvement lead or the patient experience lead). Feeding back specific details to the ward and key themes to the trust sponsor will help to make sure that the right actions are owned by the right people.

2. **Agree** on the actions at a ward level and themes for action at a trust wide level.

3. **Record** what the action is, who is taking these forward and by when.

4. **Identify and celebrate the positives** – agree what actions need to happen to do this. It is essential for sharing good practice.

5. **Be clever about tracking your actions** – you may wish to develop an action plan specifically for the 15 Steps Challenge (a template is provided in Appendix 3). However, wards can sometimes be inundated with action plans for a wide range of initiatives. Can some of the identified actions be linked to existing action plans, for example training plans or estates maintenance plans? This way there is an existing process to ensure actions are completed, monitored and reviewed.

6. **Review** the actions at an agreed date. Revisit the ward walkarounds regularly. Agree to repeat the 15 Steps Challenge within a specific timescale. This will help keep track of the progress and improvements that are being made within the trust.

7. Embedding the 15 Steps Challenge into regular reviews and continuous improvement

The 15 Steps Challenge is designed to support continuous improvement. It is not a one-off activity but should be a regular part of improving the care that you provide. The tool focuses your attention on what matters to patients. It is useful to think about:

- Repeating the Challenge for different wards, explore the difference between wards that are delivering different types of care/specialist units – often there are creative ideas that can be shared from one area to another.

- Visiting wards that are receiving lots of positive patient feedback and wards that have received complaints – what can be learnt and shared?

- Undertaking ward walkarounds at different times of the day, for example visiting times or evenings. How does the patient/carer experience change?

- Involving a wide range of patients and carers in the 15 Steps Challenge teams. Ask former patients/carers if they would like to get involved, some trusts have asked current service users for their input. One idea is to ask current patients to focus on one area each (e.g. "Welcoming" or "Safe") and ask them to apply the 15 Steps Challenge to their experience.

- Try making the Challenge a part of the PALs and complaints response – where appropriate ask those who have complained to be part of a 15 Steps team identifying improvements.

- Develop "You Said....We did....." information boards for ward areas. This helps to inform patients and visitors of the improvements that are being made and gives real examples of how patients views are listened to and acted on.

How can we embed this process?

- Develop a pool of 15 Steps Challenge volunteers which include a wide range of staff, patient, carers and board members. Over time, having a pool of people will reduce the number of briefings that are required. It will make sure that the visits and time commitment are shared by many people and not just a few. It also ensures that the pool of "fresh eyes" is enhanced, and different people can undertake review visits, rather than the same 15 Steps Challenge team repeating their visit.

- Agree a trust approach to regular 15 Steps Challenge walkarounds; what wards will be visited, over what time interval. Some trusts have decided to visit all of their wards over a year, and then repeating the visits each year, aiming for year on year improvements. Other organisations have decided to randomly select wards to visit every two or three months to get a flavour of patients' views. Other trusts have decided to add the 15 Steps Challenge to existing activities for example, monthly "Quality Walkarounds", "Board to Ward" days, weekly "frontline focus" days, an added dimension to the cycles of PEAT inspections.

- The way in which the 15 Steps Challenge is embedded will be different for each organisation, depending on processes, structures and opportunities that already exist. The toolkit is designed to be flexible to fit in with local opportunities.

NEED HELP?

- Visit our website at www.institute.nhs.uk/productives/15StepsChallenge Here you will find additional information within a number of slide sets.
- Contact us via email at productivecare.institute.nhs.uk
- Contact the director of nursing and the Productive programme lead in your trust.

Appendix 1

Frequently Asked Questions

1. What is the 15 Steps Challenge?

The 15 Steps Challenge is a tool to help staff, patients and others to work together to identify improvements that can be made to enhance the patient experience. The Challenge takes place in the ward environment. A 15 Steps Challenge team, consisting of a patient, a staff member and a board member, walk onto the ward and take note of their first impressions. The idea is to see the ward through a patient's eyes. Does the environment build confidence and trust?

The Challenge tool contains a guide to help the team structure their observations, this is underpinned by the Care Quality Commission's essential standards. After the ward walkaround, the 15 Steps Challenge team feeds back to the ward and senior leaders in the trust. Feedback focuses on good practice to share, and areas for improvement. The Challenge is repeated on a regular basis, to cover all ward areas and to ensure that improvements are being progressed. It can:

- be used to help trusts to hear how patients view their wards and care, bringing a stronger patient voice into the care that we provide
- identify areas for improvement from a patient perspective will support better patient experience
- identify issues in advance of CQC and PEAT inspections
- support the sustainability of The Productive Ward: *Releasing time to care*™
- support continuous improvement.

Remember, The Challenge is not an audit nor is it designed as a performance management tool.

2. How do I prepare for the 15 Steps Challenge?

- **Be clear about the 15 Steps Challenge and what you hope to achieve**
  Read through the 15 Steps Challenge document and familiarise yourself with what the Challenge is and how it works. Understanding the detail of the Challenge will bring ideas around how it fits with the current processes and strategic priorities of your organisation, what outcomes it will bring to your trust and who might be involved.

- **Identify which trust priorities this fits with**
  There will be similarities and differences across trusts. Think about how you hope to use this to enhance quality of patient care. Are you looking to improve patient satisfaction scores? Are you implementing The Productive Ward programme? Are you about to have a PEAT inspection or CQC visit? Make a quick list of key issues that the Challenge links to.

- **Identify the Trust Sponsor**
  The 15 Steps Challenge needs to have executive awareness and support within the trust. Evidence tells us that engaged senior leadership is key to successful and sustainable approaches to continuous improvement. The role of the trust sponsor (most commonly the director of nursing) is to ensure that the 15 Steps Challenge has a clear strategic fit with quality improvement initiatives, and that the Challenge is aligned with quality, safety and patient engagement work.

  If you are the trust sponsor – have you ensured that your executive team is aware of the programme, and that you have Board support?

  If you are the project co-ordinator – have you ensured that you have a named trust sponsor for this Challenge?
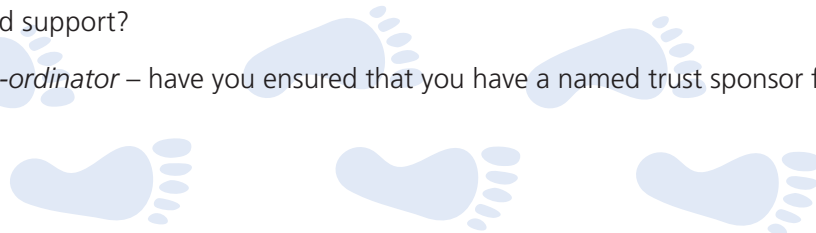
- **Prepare your project co-ordinator**
  Your project co-ordinator might be the Productive Ward lead, a ward sister or matron, the patient experience lead or others. They need to be well briefed about the Challenge and will need a small amount of time to set up and implement the Challenge. They will need to recruit and brief 15 Steps Challenge team members, ensure that the logistics of the walkaround (e.g. visitor passes, agreed dates and times) are dealt with and that feedback is collated and passed to the ward lead and trust sponsor. The project co-ordinator may also wish to be part of the 15 Steps Challenge team.

- **Prepare the staff team/s**
  Both the trust sponsor and the project co-ordinator have a role in raising awareness and preparing staff team/s about the Challenge. It is important that staff in the trust know that the 15 Steps Challenge tool is happening and that it is about improvement not performance management. The patient's perspective will bring valuable learning for everyone. It is also important to prime wards teams and let them know the Challenge team might visit them, but also important not to be specific about which wards so that the walkaround remains unannounced.

- **Identify a board member to work with on the Challenge**
  The Board to Ward involvement in the Challenge team is important. It will create strong Board ownership of the Challenge. There has been extremely positive feedback from non-executive directors and governors about this toolkit.

- **Engage your Patient Experience/Participation and Involvement lead**
  The Challenge focuses on patients' experience. It is important to involve the lead for patient engagement and experience in your trust and align the Challenge with other patient engagement and experience work. The lead will also help to identify patients and carers that can participate in the Challenge Team.

- **Get going on the Challenge**
  Follow the Challenge guidelines and toolkit. Use the online slide sets with further tips and information to help you prepare and deliver the Challenge www.institute.nhs.uk/productives/15StepsChallenge. Record comments and impressions from the ward walkarounds and feed these back to the ward team and trust sponsor. There is a template to help you do this in Appendix 3 of the toolkit.

- **Making improvement happen**
  Moving from feedback to action is key to creating better care for patients. Develop an action plan that focuses on specific detailed improvements or good practice to share that the ward team can act on. Also ensure that themes and actions that require wider organisational input are discussed with the trust sponsor. It is useful to get these wider actions aligned with and informing existing strategic plans. Aligning actions in this way makes better use of resources and uses existing monitoring and governance processes. Make sure each action plan specifies what the action is, who will do it and by when. Ensure that there is a review process so that you can see when action is completed.

3. How can I embed the 15 Steps Challenge so that it happens on a regular basis?

It is important that the 15 Steps Challenge becomes part of a continuous improvement and learning process. Seeing through fresh eyes and hearing from patients and carers on a regular basis is essential for improving the patient experience. Agree an approach to embed the Challenge with your trust sponsor. One approach is to seek to visit every ward within a fixed time period and then repeat this over time. An alternative approach is to visit different wards and areas randomly, at different times; this helps to get a real sense of what patients and carers are experiencing at any given time in different parts of your organisation.

In order to embed the 15 Steps Challenge, it is useful to develop a pool of volunteers to take part in the walkarounds. This shares the time commitment across a larger number of people, and because they are familiar with the principles and format of the Challenge, it reduces the requirement for in-depth briefing. It is useful to develop the pool of volunteers from a wide range of clinical and non-clinical staff, non-executive directors and board members, governor members, the patient councils and forums, your Local Involvement Networks (LINks), former patients.

For further information, please contact productive.care@institute.nhs.uk or visit www.institute.nhs.uk/productives/15StepsChallenge

VISITORS, STAFF AND PATIENTS – WE NEED YOUR HELP!

The 15 Steps Challenge

*"I can tell what kind of care my daughter
is going to get within 15
steps of walking on to a ward"*

quote from parent

What did you think when you first arrived on this ward?

We know that there are lots of important elements to excellent care, and we believe that first impressions count. A good first impression builds confidence and reassurance. We want to get this right for patients and carers.

To help us do this we are working on our **15 Steps Challenge**. This means that we are working with groups of patient representatives and others to help us identify what works well and what can be improved on our ward. You may see this group visiting our ward. Please feel free to talk to them about your experience and ideas.

If you have comments and ideas, you could also talk to

_____ on our ward, who can make sure that your feedback is added into our 15 Steps Challenge.

THANK YOU FOR YOUR HELP

15 Steps Challenge Action Plan

Date: Completed by:

WELCOMING:

Action required	Strategic link	Who will do this?	By when?	Where will it be reported?

SAFE:

Action required	Strategic link	Who will do this?	By when?	Where will it be reported?

CARING AND INVOLVING:

Action required	Strategic link	Who will do this?	By when?	Where will it be reported?

WELL ORGANISED AND CALM:

Action required	Strategic link	Who will do this?	By when?	Where will it be reported?

Appendix 4 Links to useful resources

The following web address are links to useful material and resources that might help when it comes to thinking about ideas for improvement.

- **The Productive Ward information, tools and case studies:**
  http://www.institute.nhs.uk/productiveward

- **Exploring patient experience; research outlining "What matters to patients", tools and ideas for transforming patient experience, further reading and information.**
  http://www.institute.nhs.uk/patient_experience/guide/home_page.html

  http://www.institute.nhs.uk/patient_experience/guide/the_patient_experience_research.html

  http://www.institute.nhs.uk/quality_and_value/experienced_based_design/the_ebd_approach_ (experience_based_design).html

  http://www.pickereurope.org/pickerapproach

  http://www.pickereurope.org/Filestore/Press_releases/2010/Invest_in_Engagement_news_release_ from_Picker_Institute_Europe.pdf

- **Improving practice – using observation techniques, improving environments, addressing safety and quality**
  http://www.fons.org/library/journal.aspx

  http://www.nhsemployers.org/PlanningYourWorkforce/Nursing/toolsandresources/ Highimpactactionsfornursingandmidwifery/Pages/Background.aspx

  http://www.harmfreecare.org/

  http://www.kingsfund.org.uk/current_projects/enhancing_the_healing_environment/ehe_design.html

- **Aiming for high standards of care**
  http://www.cqc.org.uk/standards

  http://www.rcn.org.uk/development/practice/principles

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To find out more about The Productive Series visit:
www.institute.nhs.uk/productives