Productive Care Workstream – Data Collection Template
Definitions & Frequently Asked Questions

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Definition of Completing - Completing is the total used in all reporting, and is the sum of Commenced plus Completed.
Definition of Commenced - the module lead has read the module and started the prepare phase.
General Note - Please do not double count the "Completed" total within the "Commenced" figure as this adversely affects the appearance of your organisation's results in our report, indicating trends that are misleading.
Definition of Completed - the team have worked through the module, and the evaluation milestone checklist at the end of the module has been completed. The Productive Operating Theatre does not have evaluation milestone checklists, therefore the definition of completed is that the 1st PDSA cycle within the model for improvement has been completed, and the team have either adapted, abandoned or adopted a change.

Formula for entering data - in both Foundation & Process Modules (applies to ALL Productive programmes)

In light of recent feedback on how trusts embark on the completion of Process Modules, we have amended the template for greater flexibility for the user. Trust feedback was that Process Modules are completed depending on the individual trust's priorities, and are not adopted in the same sequential manner as Foundation Modules.

As a direct result of this feedback we have added in one further entry cell within each module (in both Foundation and Process Modules for consistency) to allow trusts to confirm how many wards out of the trust's overall ward number are completing the specific module, giving a much clearer picture. Please see "An Example Hospital" tab for a detailed working example.

Definitions for each Productive Programme

The Productive Ward / Community Hospitals / Mental Health

100% penetration definition - 100% of Acute, Community Hospital and Mental Health wards to have completed the 1st cycle of all foundation and process modules by 31st March 2013.
100% penetration measure - the number of wards who have completed the 1st cycle of foundation modules and progress of individual wards through the 1st cycle of the process modules.

Definition of 'ward' - an inpatient area where patients are admitted overnight for treatment or assessment. Community Hospitals should include wards and clinical areas such as MIU / day hospitals (Rapid Assessment Units / Rehabilitation Assessment Units) within the definition of ward.
Definition of 'non ward' - Intensive Care Units, Neonatal and Paediatric Intensive Care Units, assessment clinics, outpatient departments, surgical day case units, day renal dialysis
units, day assessment units, labour wards, A&E, or non clinical departments like HR / cleaning - do not count these within the total ward figures, if you are implementing in these areas please note in the relevant box (below the module house).

**Questions and Answers on Productive Ward/ Community Hospitals/Mental Health Definitions**

**Question:** What if our wards have already completed the 1st cycle of the modules and are starting to work through the box set again?

**Answer:** Enter them onto the data collection form as though they have completed the module.

**Question:** What if we are not implementing some of the modules due to strategic decisions - e.g. we have had a standardised organisational approach to a module like Patient Status at a glance.

**Answer:** Please note this information in the success and challenges box. We would recommend that wards still review the module as there may be broader learning for each individual team.

**Definitions for Productive Community Services**

**100% penetration definition** - 100% of Community Service clinical WTE / teams to have completed the 1st cycle of all foundation, planning and delivery modules by 31st March 2013.

**100% penetration measure** - the number of clinical WTE / teams in each organisation who have completed the 1st cycle of foundation modules and progress of individual clinical WTE / teams through the 1st cycle of the planning and delivery modules.

**Definitions for The Productive Operating Theatre**

**100% penetration definition** - 100% of Acute Theatres to have completed the 1st cycle of all foundation, enabler and process modules by 31st March 2013.

**100% penetration measure** - the number of Acute Theatres in each organisation who have completed the 1st cycle of foundation modules and progress of individual theatres through the 1st cycle of the enabler and process modules.

**Definition of Theatre** - this includes all theatres - i.e. main theatres, day surgery units, minor operation suites, cath lab etc.
Background Information

What is The Productive Care Workstream?

One of the 12 Department of Health workstreams focusing on improving Quality, Innovation, Productivity and Prevention of unnecessary harm to patients.

What does the Productive Care Workstream do?

The workstream supports and promotes use of productive methodology within NHS healthcare organisations, including but not exclusively implementation of The Productive TM Programmes developed in collaboration with the NHS for the NHS by the NHS Institute. The workstream's objective is to ensure that 100% of patients are cared for in the most appropriate 'productive' environment by April 2013 - whether that is on a ward, in a theatre or in their own homes.

Which Productive Programmes is the workstream currently collecting data on?

The workstream currently collects implementation data for:

- The Productive Ward TM
- The Productive Community Hospital TM
- The Productive Mental Health Ward TM
- Productive Community Services TM
- The Productive Operating Theatre TM

How often do the workstream report implementation data back to the DoH?

We currently report bi-annually in September and February.

What if we are implementing productive methodology but it is not in the Productive Series – i.e. programmes which increase efficiency, increase patient safety, reduce harm and build leadership skills and capability?

There is a box in each template for you to include this information.

What is the 100% measurement focus group and how do I get involved?

The focus group was set up in November 2010 to gain input from NHS Programme / Project Managers and front line staff on how the Productive Care Workstream should report back to the DoH whilst continuing to add value to front line clinical teams. We started by looking at implementation measures and agreed definitions around this, we have since moved onto look at national quality measures related to the Productive Care Workstream. Meetings mainly take place virtually via webex meaning anyone can join regardless of geographical location. If you are interested in joining this focus group please contact productivecare@institute.nhs.uk
What else is the Productive Care Workstream working on?

- linking in with SHA leads to understand how the programmes are currently being supported and how they will be supported by GP Commissioning networks into the future
- working with NHS programme leads and the Care Quality Commission to advise on how organisations can utilise data to support their Care Quality Commission reports
- working with patient LINK representatives to increase the awareness of patients
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