1. What is the name of the department(s) that provides improvement, service improvement, quality improvement, continuous improvement or internal consultancy services to your organisation?

   EPUT as an organisation supports continuous improvement. The principles are embedded across the organisation as a whole and departments have a responsibility for quality improvement. Quality improvement and continuous learning is overseen in the organisation by the Trust Quality Committee (a standing committee of the Board of Directors) and each individual operational directorate has its own Quality and Safety committee.

   EPUT has a number of support services, which have a specific responsibility for improvement, service improvement and continuous improvement. Including the Nursing and Quality directorate, service development team, compliance and assurance directorate. There is no one specific team responsible

2. The job title(s) for the manager or executive responsible for quality improvement work in your organisation.

   The Patient Safety Strategy recognised all Executive Directors in having a role in delivering patient safety and driving quality improvements, however the lead is Natalie Hammond (Executive Nurse)

3. The name(s) of any formal improvement methodology or approach (eg Kaizen, Lean, Model for Improvement, Virginia Mason etc) that your organisation uses for quality improvement, continuous improvement, service improvement or internal consultancy projects. If it has been internally developed, please share any external approaches it has been based on.

   The Model embedded in the QI Framework is the Model for Improvement and is the main tool used. The Service development team along with others have training in Lean techniques and use these as appropriate. Internal training incorporates a mix of both methodologies

4. The details of any awards or external recognition that your organisation has received for quality improvement projects/work in the last 3 years.

   The Trust has been involved in a number of collaborative’s and have been recognised for their work resulting in it being shared across other Trusts

5. The approximate staff Full Time Equivalent (FTE) inside the team(s) identified in the answer to question 1 and the job titles of staff within those teams.

   As outlined in Q1 there is not an individual team who are responsible for improvement
6. The approximate staff Full Time Equivalent (FTE) outside of the team(s) identified in the answer to question 1 but with a proportion of their time formally allocated to service improvement, quality improvement, continuous improvement or internal consultancy, and the name of the department(s) or teams which these staff work in. There are two WTE Quality Improvement Leads in operational services plus another role that delivers 0.40wte, job title is Service Development and Assurance Lead.

7. The approximate total budget that your organisation has allocated to quality improvement in each of the last 3 years (financial or calendar years - whichever is easiest)
   There is no specific budget.

8. The approximate number of staff trained in quality improvement in each of the last 3 years (financial or calendar years - whichever is easiest)
   480

Publication Scheme:

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT’s Publication Scheme is located on its Website at the following link https://eput.nhs.uk