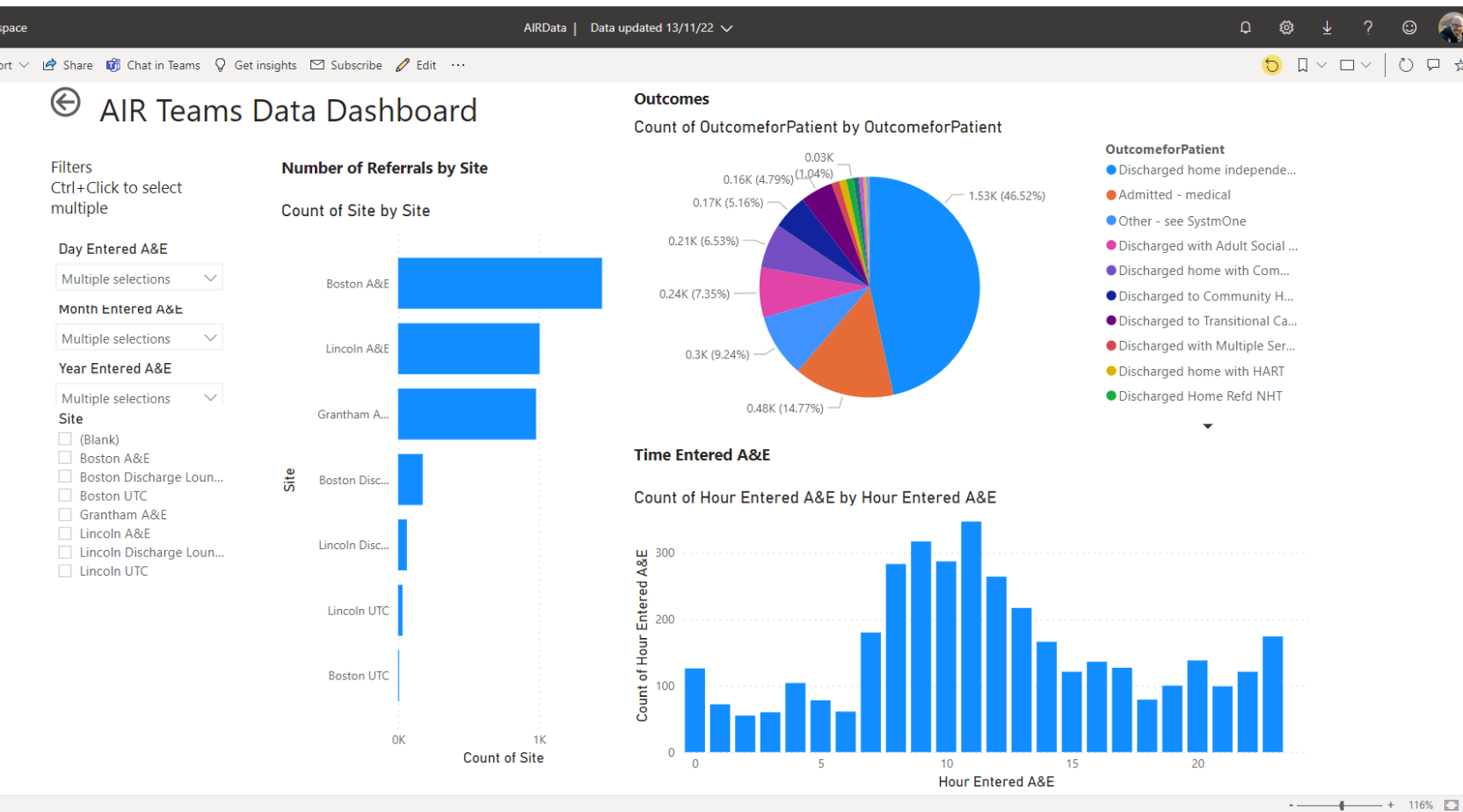




Jon Rouston

Thank you for reviewing this pack to accompany my application for the role of Associate Director for Information at Princess Alexandra Hospital NHS Trust.

The following slides demonstrate some of the projects I have recently been involved with which I believe demonstrate my ability to fulfil this role. Other projects which



AIR Team Dashboard

The AIR dashboard is a project I led from conception to execution and which demonstrate my understanding of and ability to manipulate data sources into a PowerBI dashboard.

The Lincolnshire Assertive In Reach Team (AIR) had very little information about the demand on their service in the face of a review of their working hours and how this aligns with social care opening and other factors.

Clinical staff entered information regarding patients into a power app which stored information in a sharepoint list, which was used to generate this dashboard. The information summarised on the dashboard was used to inform decisions about service changes.

Although this is included to demonstrate a level of technical competence, the leadership required to understand the problem and demonstrate that there could be a better way of visualising our data than just spreadsheets, is the element I would most like to emphasise in presenting this case study.

Key Points:

- Skills in data manipulation and visualization
- Understanding of clinical need which can be met through data
- Information flow from Power Apps -> Power BI
- Designing data collection methods to suit clinical staff

Power BI | My workspace

Dashboard | Data updated 11/09/22

COMMUNITY SERVICES DASHBOARD

Community Hospitals - Summary

Ward	Last Report Time	Staff OPEL Early	Staff OPEL Late	Staff OPEL Night	Beds OPEL	Occupancy	Beds Available	Total Beds on Ward	Patients on V
Archer Assessment Unit	03/03/2022 14:11	OPEL 4 (Critical Incident)	OPEL 4 (Critical Incident)	OPEL 4 (Critical Incident)	0	0.00%	0	0	
Butterfly Hospice	11/09/2022 07:04	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 1 (Green)	33.33%	4	6	
Scotter Ward	10/09/2022 07:42	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 1 (Green)	88.24%	2	17	
Welland Ward	11/09/2022 07:40	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 2 (Amber)	OPEL 1 (Green)	80.77%	5	26	
Archer Ward	11/09/2022 07:04	OPEL 1 (Green)	OPEL 2 (Amber)	OPEL 4 (Critical Incident)	OPEL 3 (Red)	95.00%	1	20	
Gloucester Ward	04/09/2022 08:02	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 4 (Critical Incident)	OPEL 4 (Critical Incident)	100.00%	0	24	
Scarborough Ward	07/09/2022 08:00	OPEL 1 (Green)	OPEL 1 (Green)	OPEL 4 (Critical Incident)	OPEL 4 (Critical Incident)	100.00%	0	15	
Total						71.05%	12	108	

Total Number of Beds on Wards

108

Total Beds Not Available

14

Average Occupancy

71.05%

Total Number of Patients on Ward

89

Power BI | My workspace

Dashboard | Data updated 11/09/22

COMMUNITY SERVICES DASHBOARD

By moving the reporting to Microsoft Teams, I was able to develop a system which received information from multiple sources, collated it into a list and then compiled it into 'single source of truth' messages which kept trust leadership sighted on the daily operational position and reduced the amount of reporting clinical managers were completing, releasing time.

Urgent Care

- On Call
- Community Nursing - D...
- Community Nursing - S...

Other Services - Summary

Date&Time	Division	Service	OPELLevel	Narrative
8/16/2022 9:03:00 AM	Children, Young People and Specialist Care	Adult Speech and Language Therapy	OPEL 3 (Red)	Currently working to BCP due to demand exceeding capacity communication referrals. Dysphagia waits slowly coming down
3/3/2022 2:11:00 PM	Collaborative Community Care	Archer Assessment Unit	OPEL 3 (Red)	
9/11/2022 7:04:00 AM	Collaborative Community Care	Archer Ward	OPEL 1 (Green)	
9/11/2022 7:04:00 AM	Collaborative Community Care	Butterfly Hospice	OPEL 2 (Amber)	Community cardiology remains on risk register still have one member of staff off sick two on phased return one vacancy
9/5/2022 12:47:00 PM	Collaborative Community Care	Cardiac Rehab	OPEL 1 (Green)	
11/5/2021	Integrated Urgent and Emergency Care	CAS	OPEL 1 (Green)	
8/11/2022 9:32:00 AM	Children, Young People and Specialist Care	Child Health	OPEL 1 (Green)	
8/25/2022 8:46:00 AM	Children, Young People and Specialist Care	Children in Care	OPEL 3 (Red)	Ongoing vacancy in admin team Long term sickness and annual leave in nursing team Long term absence and annual leave in medical team
8/16/2022 9:04:00 AM	Children, Young People and Specialist Care	Childrens Respiratory Service	OPEL 1 (Green)	Care units 18-19, demand meeting capacity.
9/7/2022 9:02:00 AM	Children, Young People and Specialist Care	Childrens Therapy	OPEL 2 (Amber)	Demand exceeding capacity.
Total				

Total Services OPEL 1

20

Total Services OPEL2

8

Total Services OPEL 3

6

Total Services OPEL 4

2

- Leadership from conception to implementation
- 'Selling the vision' for staff
- Designing easy to use data collection methods in collaboration

- 
- An illustration depicting a virtual ward environment. In the center, an elderly man with a grey beard and a yellow shirt sits in a green armchair, using a laptop. Behind him stand a woman in blue scrubs and a man in a grey hoodie. To the left, a large screen shows a virtual nurse with blonde hair in a clinical setting. To the right, a wooden desk holds a pink orchid, a tissue box, and a framed photo of two elderly people. The background features a large window with a city view and a green plant on the far left.
- Leadership for the development of operational virtual wards
 - Prototyping of virtual ward development coproduced with clinical staff
 - Balance of development of operational services and satisfying local, regional and national reporting requirements
 - Developing governance and assurance frameworks
 - Highlighted requirements for development of own trusts data reporting and responsiveness

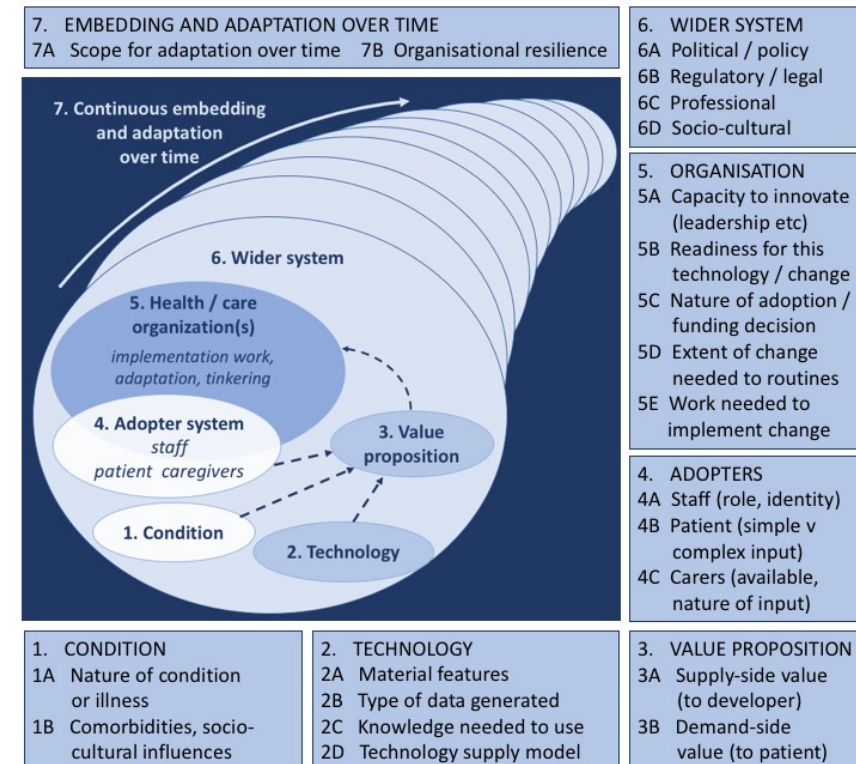
Virtual Wards

SRO – Remote Health Telecare

- Governance for a system wide programme - 'Remote Health Telecare' including Remote Monitoring, Wearables, Care Home Monitoring and Patient Portals.
- Accountability for ensuring the programme meets it's objectives
- Working with programme and project managers to develop reporting and ensure oversight without requiring overly-arduous reporting of projects

Clinical Reference Group

- System wide reference group for co-production of digital tools
- Professional focused with wide representation from health, care and third sector staff
- Use of NASSS (Greenhalgh et. al 2017) Framework to promote discursive co-design aiming to lead into robust requirements gathering to inform procurement.
- Development of separate 'service user reference group' so as to not be tokenistic in involvement.
- Influence without authority



Clinical – Digital Strategy

- Development of a 'Clinical-Digital Strategy to be included in the refreshed Clinical Strategy
- Culmination of raising awareness of the importance of digital in the clinical space
- Set direction and vision for the use of digital in the clinical spaces
- In collaboration with clinical staff and clinical, operational leadership within the organisation.
- 3-5 year strategy

CLINICAL DIGITAL AMBITIONS

Principles for the clinical strategy is the role that digital can play to enable the organisation to achieve its vision. These clinical digital ambitions will be delivered through the implementation of the clinical strategy.

• Enable clinicians to influence how they record and share data through a team of Digital-Clinical and Data-

• Make data relevant to the people they work with, so they can make decisions about their care, jointly with patients, and understand the impact they have on population health and understandability.

• Support tools which are data driven and use appropriate methods of treatment for patients and staff confidence.

• Embed digital in the trust, the ICS and wider to ensure it is supported by AI and data care.

• Enable people to find relevant insights.

• Support people with people able to use digital and time which is

• Service leads and service design to be informed by clinical data when designing services, so that the story of the service, both for patients and staff, is understandable and actionable.

• Staff will have the digital and data skills to use of technology and data.

• Staff will have the skills to apply digital as part of the clinical record so that it is

• People will have a single 'portal' for digital tools, whether this is delivered for Mental Health Care.

• There will be a detailed roadmap for digital with flexibility around new innovation.

• People and staff will be involved in digital fundamental to the codesign of digital

EPR Governance

- Bringing together disparate strands of governance for EPR which have developed over time from operational, clinical, informatics and digital health departments.
- Focus on usability and efficiency whilst meeting all reporting requirements
- Developing in line with user feedback within the existing EPR constraints.
- Ambition to develop per context user interfaces as other trusts.

EAT Service

- Growth of a service from six employees to over twenty, budget of £350K to £2m and delivery of a local service in Lincolnshire to a regional (East Midlands) service.
- Development from scratch of processes and care pathways to enable people to access service.
- Delivery of communication aids and environmental controls to people across the East Midlands.
- Local, regional and national governance / assurance.
- Engagement with other services nationally move from competitive to collaborative.



Improving Patient Information

- Long term development of resources to enable supplementing patient information leaflets with videos, podcasts.
- Development of practical resources to enable alternate information
- Use of early adopters and enthusiastic staff to demonstrate 'art of the possible'

