Supplementary Material File 3: Case study RAP sheet – template

Case study RAP sheet – template

PART 1 Case study overview and qualitative insights

1. Trust name						
2. Category						
3. NHSI Segment						
4. CQC inspections and rating	Inspection dates					
	Report date					
	Overall					
	Safe					
	Effective					
	Caring					
	Responsive					
	Well-led					

5. Date entered SMQ or CP	Type	Entry date	Exit date
	SMQ		
	SMF		
	CP		

6. Trust type	e.g. acute, general etc
7. Population	
8. Trust history / background	
9. Sites (if multi-site)	
10. Provider economy	
11. Main areas for improvement identified by CQC inspections and reports	

12. Main areas for improvement identified by interviewees	
13. Main areas for improvement in latest Quality Improvement Plan / Strategy	
14. Main changes in leadership and governance	
15. Interventions delivered by NHSI and their duration	
16. Improvement Director details (if applicable)	
17. Other interventions	e.g. QI methodologies, external management consultants
18. PPI and public engagement	e.g. What has the Trust done / is doing currently to engage with local patients and the public? Has this changed over time?
19. Evidence of improvements main improvement made since inspection [qualitative insights and examples]	
20. Challenges and demands	
21. Reported impact on staff	
22. Perspectives of SMQ or CP regime (support vs scrutiny)	
23. Lessons learned and recommendations for other providers	
24. Lessons learned and recommendations for CQC and NHSI/E	

25. Future steps/plans	
26. External collaborations and partnerships to support improvements	
27. Financial context or considerations	
28. Estates	
29. New organizational capabilities for QI or service innovations	
30. Perspectives of external stakeholders	e.g. CCG, Healthwatch, Regional NHSI/E teams and other stakeholders with external knowledge of the Trust and region

PART 2 Cost Consequences Analysis and Opportunity Costs

1. What NHSI funds did the organisation bid for? By year	
2. What NHSI funds were awarded? By year	
3. Opportunity Costs	
4. Alignment with CQC priorities for quality improvement	

PART 3 Use of data

1. What have trusts been asked to do that may be relevant?	
2. How are trusts using data to address any concerns raised by CQC/NHSI? - What are they monitoring that relates to these concerns? - How are they reporting this? (e.g. to Board)	

- Is this something they have always been monitoring/reporting, or only after concerns were raised? - Have they been specifically asked to monitor certain data? - Is there data they could be monitoring but aren't?	
3. Has the topic of use of data or board accountability been raised by CQC? Where?	
4. What does the trust think are the important ways of using their data? - How important do the trusts think this is in relation to their status as challenged or in special measures?	
5. What other data do they routinely monitor and report?	

6. How are they tracking improvements in quality?
  - Are they monitoring processes or are they also collecting data?
  - What gives them assurance that things are on track?
  - What do they do if they do not spot improvements in outcomes?
  - Are they giving themselves enough time?
  - Are the measures that are used ones that are readily responsive to improvements?
  - Is there sufficient granularity?
  - What techniques do they use?
  - Have they changed any methodology since being identified as challenged or in SMQ?	

7. Have they seen improvements in areas of concern?
  - How has use of data assisted in those improvements
  - What were the important components of their improvements?	

- Was monitoring outcomes part of the process? - What part did it play? - Which outcomes? - Was it effective and why?	

8. How are they accounting for system factors that are beyond their immediate control?
   - Is this being recognised?
   - What collaborations are there with other organisations?	

Part 4 Trust chronological timeline (key events)

Date	Event

Part 5 Dissemination and feedback

Site preferences for dissemination	