

EXCELLENCE IN QUALITY: A FIVE-YEAR QUALITY IMPROVEMENT STRATEGY FOR BARTS AND THE LONDON NHS TRUST

What would it take for all patients to say this about our hospitals and recommend us to their friends and family?

“I have been in four different hospitals over 30 years, and I have got to say that this is top notch. If I had to choose which hospital to go to it would be here” (*Comment from the Inpatient Survey 2008*)

Introduction

The purpose of this Quality Improvement Strategy is to outline the transformational improvement that will be undertaken over the next five years to ensure that all patients experience the standard of care and treatment described above, and continue each year to rate us among the best performing healthcare organisations.

1. Our vision for being world class in health care delivery

- 1.1 The vision of Barts and The London NHS Trust is to become a world leader in healthcare quality, delivering high quality, patient centred, clinically effective and safe care, and doing so in a way which is measurable and meaningful to all.
- 1.2 Put simply this means we aspire to ensuring that every patient and visitor contact with us at any site or location and at any time of the day or night is memorable for all the right reasons and not just meets but exceeds that individual's expectations and preferences.
- 1.3 Whether the contact is by telephone or in person, if someone is simply seeking advice, visiting a loved one, or attending one of our clinics or wards for care and treatment, they will experience the highest quality of care or service from every single member of staff and at every stage of their personal journey or contact.
- 1.4 The key building blocks to achieve this vision and the improvement goals set out below are for services to strive at all times for:
 - Patient centeredness
 - Clinical effectiveness
 - High levels of patient safety
- 1.5 Each year, through our Quality Account, we will report our performance and progress in each of these domains and set out the improvement priorities agreed by the Trust Board for the forthcoming year.

2. How will we improve and by how much?

- 2.1 We predict that through the development and implementation of the Quality Improvement Strategy, and by identifying ambitious annual Quality Development Plans, we will achieve unprecedented levels of clinical quality and patient safety over the next five years. This will include delivering the following high-level improvement and performance goals:

Achieving **patient centeredness**

- Getting it 'right first time' for all our patients
- Patient and staff satisfaction scores in the top 10% of NHS hospitals
- Excellent environment ratings in all hospitals
- 98% of patients recommend our hospitals to family or friends
- 98% of patients rate their care as 'excellent' overall

Being **clinically effective (and efficient)**

- Average length of stay reduced by 20%
- Readmission rates reduced by 30%
- Day case activity increased by 30%
- Six new integrated care pathways implemented each year
- In the top 5 of the Dr Foster 'Best Hospital' league table
- Achieve best outcomes consistently across all services
- Efficiency savings of 3%

Achieving high levels **of patient safety**

- In the top 5 hospitals with the lowest Hospital Standardised Mortality Rate (HSMR)
- Hospital acquired infections reduced by 70%
- 5,000 unintended harmful events avoided
- 95% reliable standardised care in high risk and volume conditions and clinical processes

3. An integrated framework for quality and service transformation

- 3.1 The Quality Improvement Strategy will engage all services and staff in developing hospital care which is patient centred, safe and effective, while also ensuring that **efficiency, equity and timeliness** are embedded within the service improvement and changes we make. These six interlinking domains or dimensions of quality are depicted in the model below.

Six interlinking dimensions of Quality Improvement



Institute of Medicine 1999

4. Where will we start?

4.1 **Getting it right, first time for our patients** – we will focus on addressing the known issues that are a cause of concern for our patients as part of our requirement to meet our ‘licence to operate’, i.e.

- Booking
- Way-finding
- Food
- Cleaning
- Cancelled operations
- Patient transport

4.2 **Maintaining and measuring national minimum quality standards –**

While the primary focus of the Strategy is a five-year improvement agenda to identify, develop and deliver best practice and innovation, it is equally important that the Trust achieves and maintains excellent performance against minimum national standards such as Care Quality Commission (CQC) registration criteria, national targets, NHSLA Risk Management Standards and other external inspection or accreditation schemes such as CPA. Delivery of national quality targets and standards (the “must do’s”) is reflected in the Quality and Safety Indicators Pyramid shown at Appendix 2.

5. Shaping the Future

- 5.1 Future markers as outlined in Section 1.4 for patient centeredness, clinically effective and efficient care, and patient safety will be further developed with input from the Trust's Clinical Academic Units (CAUs) and Clinical Divisions through the development of an annual Quality Development Plan (QDP), with a focus on areas which improve quality while reducing costs.
- 5.2 Local markers relating to these three key areas will be developed with each CAU and specialty, in line with business and operating plans to ensure that these are embedded at service line level and are consistent with future financial plans
- 5.3 Workforce measures will be developed at service line level to incorporate 'team' measures which will address staff-related quality issues, e.g. improved management of poor performance.
- 5.4 The development of the annual QDP will set out clear objectives and milestones for delivery for each of the quality indicators. The plan will clarify governance arrangements and accountabilities for delivery of the plan.

6. Aligning the vision for quality with the 'Performing for Excellence' Programme

- 6.1 The Trust's vision and goals for quality and safety improvement are intrinsically linked and integrated with the overall aim and six workstreams of the *Performing for Excellence* Programme. This is to achieve desired productivity, efficiency and financial gains in tandem with increased patient and staff satisfaction and improved clinical quality. It is well researched and documented that poor quality and safety costs highly in human and reputational terms but also wastes valuable and limited healthcare resources.

7. Aligning the vision for Quality with Research and Innovation

- 7.1 Internationally, the highest quality of care and the best outcomes are found in hospitals that have developed a strong research mission. The evidence shows that this is because patient care is improved by participation in clinical trials and the benefits accrued by the application of clinical innovation and the most advanced surgical and medical techniques.
- 7.2 Each CAU will develop research plans to drive translational research whose origin lies in the biological sciences units in the School of Medicine and Dentistry. Each research plan will be managed to deliver

scientific partnerships, support for education of students and postgraduate research and appropriate commercial participation. Innovation to develop new care pathways and produce system change will be included in each CAU plan.

8. Identification and planning for Quality Innovation and Improvement through the Commissioning (CQUIN) framework

- 8.1 The Trust will work with Divisions and Commissioners to identify and align 2010/11 CQUIN improvement schemes with Quality Improvement Strategy goals and ensure that CQUIN schemes are included in the annual QDP.

9. Alignment to Business Plans and Performing for Excellence

- 9.1 The annual QDP will be developed alongside business plans each year. Discussions have commenced with Divisions and CAUs in line with the development of 2010/11 business plans.
- 9.2 Alignment and links to the Performing for Excellence programme and CQUIN priorities for 2010/11 will also be made through the business planning process. Where relevant, Lean transformation programmes will also be utilised to support the delivery of the Quality Improvement Strategy.

10. Public and Patient Involvement and Engagement

- 10.1 The Quality Improvement Strategy makes a commitment and signals even higher levels of engagement and involvement with patients, community partners and stakeholders in supporting the redesign and transformation of services. This will be achieved by integration of quality improvement with ongoing development and implementation of the Trust's Patient and Public Involvement Strategy.
- 10.2 Quality improvement will also extend where appropriate to preventative and anticipatory care, in support of improving health gain, reducing health inequalities and keeping people out of hospital when it is clinically effective and appropriate to do.
- 10.3 We will also engage and consult with Commissioners about our improvement plans to ensure that they are consistent and contribute to the vision and quality framework set out in NHS Tower Hamlets Quality Strategy 2010-2012, and we will seek their support in implementation. In particular, we will do this through the Commissioning for Quality and Innovation (CQUIN) payment framework, joint working and the

continuation of collaborative improvement schemes across the sector, e.g. as in the examples of Maternity and Safeguarding.

- 10.4 Public, patient and staff engagement has already commenced with significant engagement in the development of the strategy thus far. We asked patients and staff what was important to them in ensuring high quality services for all.
- 10.5 There are many definitions of quality in use. The Quality Improvement Strategy has been shaped with input from staff, users and patients through a series of consultation events and by encouraging dialogue about what quality looks like and how quality of service can be ensured.
- 10.6 Using this information and existing sources of patient and user feedback, the following themes emerge as to what **Excellence in Quality** and service looks and feels like to patients, carers and staff:
 - Caring, **compassionate** and competent staff
 - Clear **communication** and **explanation** at all stages of care
 - Effective **collaboration** and team work
 - **Clean** and **personal care** environments
 - **Continuity** of care and service between different stages and organisations
 - Clinical **excellence** in care and treatment
- 10.7 As part of implementing the Quality Improvement Strategy we will investigate these themes further, using Real Time Monitoring and other methods to ask high numbers of patients about their immediate experience of care and services. If patients say they would recommend us to others we will ask why and for those who would not, we will also ask why and use the information to give feedback to staff and target our improvement efforts.

11. The Quality Improvement Strategy Implementation Framework

- 11.1 The Quality Improvement Strategy framework aims to build on the organisation's strengths and previous successes in improving care and services and to complement the existing clinical governance infrastructure and quality initiatives already in place.

- 11.2 Quality improvement is a continuous process. Successful quality programmes require vision, creative thinking and ideas but also clear delivery plans with measurable goals and targets to ensure progress and success is tracked and celebrated.
- 11.3 In implementing the Strategy, the organisation will need to learn and adopt a range of quality improvement techniques and approaches, including measurement and the use of data for quality improvement. Clinicians and managers will need to work together and demonstrate drive and determination to develop the will and infrastructure required locally in each service to deliver and sustain the unprecedented scale of quality improvement we want to achieve.
- 11.4 The Quality Improvement Strategy quality driver diagram (Appendix 1) identifies four key interlinking and complementary organisational drivers, which when implemented will support achievement of the vision and the improvement goals set out in Section 1.4. These are driving development and implementation of:
- Leadership and culture for quality improvement
 - Measurement for quality improvement
 - Evidence-based interventions and proven best practice
 - Workforce capability and skill for quality improvement

12. Leadership and Culture

- 12.1 Effective high-performing organisations recognise the significance of quality and continuous quality improvement to achieving their strategic and core business goals and are successful in engaging and communicating this to all staff and to service users.
- 12.2 The Trust Board will oversee implementation of the Quality Improvement Strategy. It will agree and articulate clear improvement goals, drive an improvement culture throughout the organisation, support effective clinical leadership and ensure and approve an infrastructure for strategy implementation.

13. Measurement

- 13.1 The challenge set by *High Quality Care for All* was for healthcare organisations to be able to define, deliver and measure quality in the three dimensions of patient experience, safety and effectiveness and in all services and at every service level.

13.2 Implementing the Quality Improvement Strategy across the Trust will require continuing investment in expertise and resources to enhance existing data capture, improve coding and support frontline staff to acquire new skills and expertise in using data to support quality improvement at ward and service level. This will include a revised training and implementation plan for Dr Foster clinical benchmarking and ongoing development and use of visual management and 'Ward to Board' metrics.

13.3 Process and outcome metrics at Board, Divisional, CAU and ward level will continue to be developed to enable progress towards the Strategy's goals and targets to be measured and reported for each implementation year.

14. Evidence-based interventions and implementing best practice and innovation in quality and safety

14.1 The Trust already has experience of implementing proven improvement initiatives such as the Safer Patients Initiative, Lean and Essence of Care. There are also national benchmarks and indicators such as for cardiac, stroke and trauma care which demonstrate that in some clinical services 'Excellence' is already achieved by clinical teams at Barts and The London.

14.2 The Quality Improvement Strategy will require increased use of benchmarking and continued implementation of evidence-based safety interventions and recognised best practice to achieve excellent clinical outcomes.

14.3 All clinical teams and services will identify and define quality and best practice standards and markers for their services, including any nationally-agreed standards, guidelines for clinical effectiveness and quality indicators derived as a result of participation in national audits.

14.4 Non-clinical services and departments will also identify and establish systems to define and monitor the quality of their services, including high quality customer service where appropriate and to demonstrate value for money and service efficiency.

14.5 The Trust Board will encourage and promote innovation in quality and safety improvement at all levels and ensure achievements and successes (big and small) are recognised, rewarded and communicated widely both internally and externally to the community, patients and partners.

15. Workforce capability and skill in quality improvement

- 15.1 The Quality Improvement Strategy recognises the significant contribution that a well-trained, motivated and supported workforce makes to delivering and achieving high quality care and services. It is well documented that changes and improvements which are owned and driven by an individual service or team are the ones which are most likely to be successful and sustained.
- 15.2 When asked, patients frequently cite that not only the skills but also the empathy and friendliness demonstrated by the people looking after them are important and are what contribute significantly to their overall experience of care. The Strategy will escalate action to ensure that all staff have and demonstrate highly-developed customer care and communication skills.
- 15.3 A longer-term strategy aim is to become a learning and quality driven organisation in which every member of staff understands their role in delivering clinical quality and works towards that goal every day. Excellence in clinical leadership and mentorship for safety and quality improvement will be rewarded and effective leaders will be the role models for staff development and career progression.
- 15.4 The Strategy will align closely with the development of the Trust's new Organisational Development Strategy. Emphasis will be placed on understanding our clinical systems and processes in greater detail, working towards excellence in those systems, engaging all staff in improvement activity, using small tests of change to build momentum, and learning from mistakes and poor quality to do better.

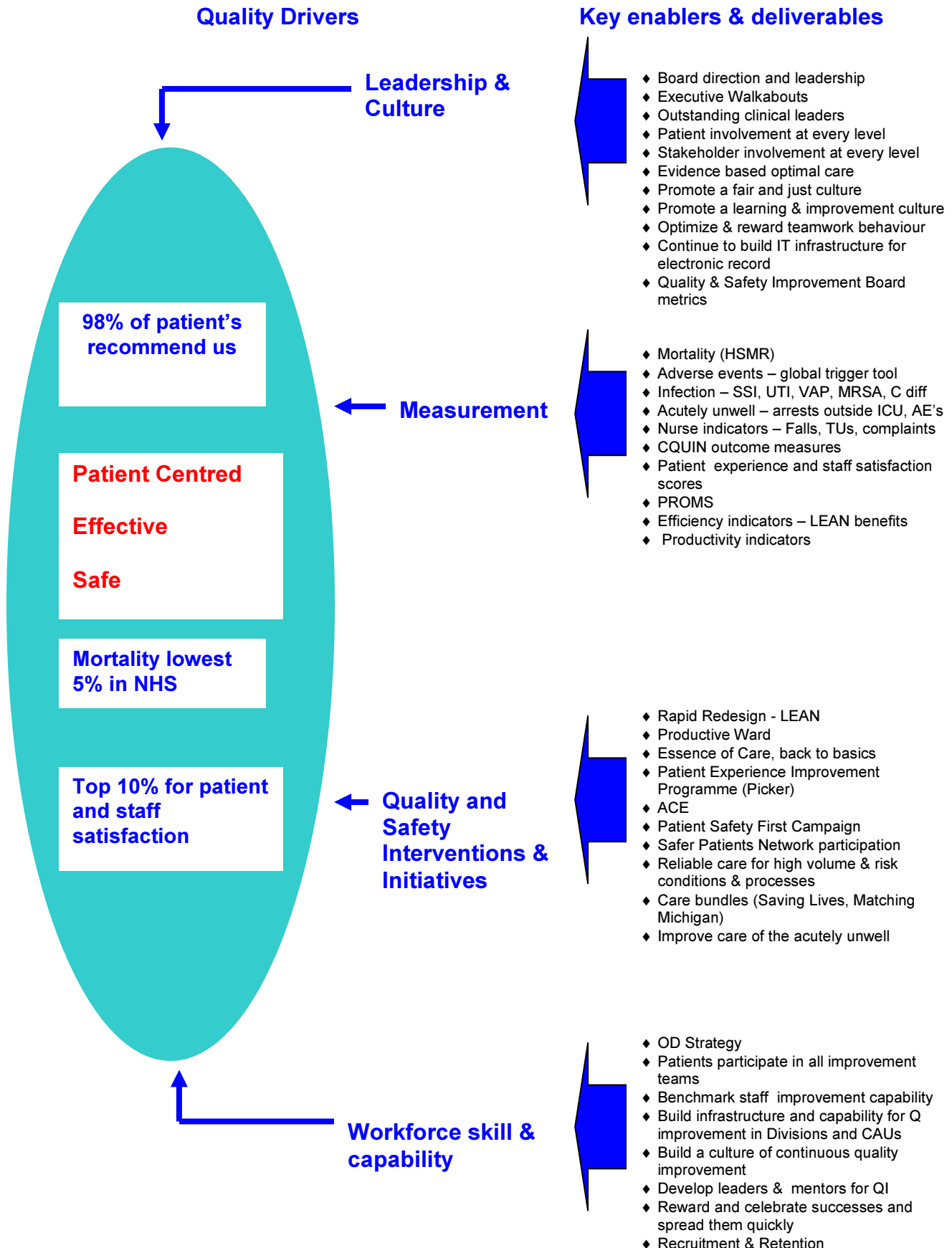
16. The Quality and Safety Indicators Pyramid

- 16.1 The Quality and Safety Indicator pyramid describes the Performance Dashboard and other indicators collected and reported currently, including the 12 London-wide and local developmental CQUIN projects.
- 16.2 Meeting national quality standards provides assurance to patients, users and Commissioners that Barts and The London is a safe and high-performing organisation with effective and robust clinical governance, including risk management, processes embedded in every ward, service and CAU.
- 16.3 Where significant gaps or risks to meeting minimum standards, national guidance or accreditation requirements are identified, corrective action will be identified and if appropriate prioritised as part of that year's QDP.
- 16.4.1 This will ensure an integrated approach to continuous quality improvement, with equal priority given to maintaining minimum quality

and safety standards, as well as working towards Excellence in quality and service delivery, and ensuring year-on-year advances in innovation.

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December 2009

Quality Improvement Framework



Quality and Safety Indicators Framework

