

Outstanding

Our journey continues...

Quality Strategy @North Staffs Combined Healthcare NHS Trust

Our strategy for 2020 and beyond



Our Quality Strategy

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1. Foreword

We are very pleased to introduce to you our Quality Strategy. This is a key organisational strategy which describes the priorities and methodology for how we as an NHS Trust will continue to deliver services which aim to meet the needs of our local population over the coming years.

Following the CQC inspection of the Trust in 2016, we received a rating of 'Good' and we immediately launched our campaign 'Towards Outstanding'. This campaign set ourselves the aim of providing the highest quality clinical care and ensuring excellence in mental health and learning disability services. We sought to evidence this through our approach to achieving an 'outstanding' rating by the Care Quality Commission (CQC), which we achieved in 2019.

We have bold plans for service transformation across a number of our services over the next five years. In learning disability services, we intend to modernise our provision of Assessment & Treatment services.

The NHS Long Term Plan and Mental Health Implementation Plan (2019) set out significant investment in mental health services and, over the life of this strategy, we will shape the detail of what this means for us at a local level in North Staffordshire & Stoke-on-Trent. This strategy aims to support the delivery of the local Mental Health Implementation Plan, recognising the importance of focusing quality as the developments proposed in the MHIP are implemented.

We intend to strengthen our culture of strong clinical leadership and this will be critical to the successful implementation of this strategy. To ensure success, our clinical and management practice and behaviours will be focused on distributed leadership, multidisciplinary team working, and continuous improvement all with the core purpose of providing outstanding care for our service users and their families and carers.

During 2020 more than ever before the impact of COVID-19 has shone a light on the health inequalities which are experienced locally, nationally and across the globe.

A number of our communities have been disproportionately directly impacted by the virus and will also feel the wider impacts of the virus in relation to their mental health and well-being for years to come.

Those with mental health conditions and learning disabilities have significantly poorer health and well-being outcomes than those of the general population, including complex physical health problems and earlier death.

To be Outstanding in all we do and how we do it, we must all fulfill a role in tackling these inequalities.

We aim to achieve the commitments of this Quality Strategy through harnessing the potential contained within all our workforce, service users and carers to aiming further embed quality and performance using our SPAR quality priorities each year of the life of this strategy to provide the best care they can.



Kenny Laing
Executive Director of Nursing and Quality



Buki Adeyemo
Medical Director

Our vision, values and strategic themes

Our vision

Our vision is “To be Outstanding” – in all we do and how we do it.

To be Outstanding
In ALL we do and HOW we do it

We are on a continuing journey towards that vision that we call “Towards Outstanding”.

Our values

In delivering our services – as well as in all of our working relationships with service users, carers, families, stakeholders and each other, we are guided by our Proud to CARE values – to be compassionate, approachable, responsible and excellent.



Our quality priorities

Our quality priorities are the four key areas which evidence that we are delivering high quality care and treatment to those using our services in a way that is person-centred

To provide services that are safe, personalised, accessible and recovery-focused.

These guide all we do and are the benchmark against which we judge how we perform.



Our Strategic Themes

In creating our strategic themes, we have considered the national aspirations in the NHS Long Term Plan and NHS Mental Health Implementation Plan 2019/20 – 2023/24 alongside local priorities set out in the Staffordshire & Stoke-on-Trent System Plan.

Our Trust Board has agreed four strategic themes for the following four years to 2023/24.

These are:

Quality
We will provide the highest quality, safe and effective services

People
We will attract, develop and retain the best people

Partnerships
We will actively promote partnership and integrated models of working

Sustainability
We will increase our efficiency and effectiveness through sustainable development

We believe it is not just what we do that is important, it is the way in which we do things that sets us apart.

Our vision, values, quality priorities and strategic themes come together to build a cohesive offer to our service users, staff and all our stakeholders to continue to strive to improve our services.

Quality Strategy Aims

“The quality strategy sets out our approach to continuous quality improvement in the pursuit of high quality mental health and learning disability services”

Scope

This strategy's ambition is to make the Trust the best organisation to receive mental health and learning disability care and treatment from in England. Our quality approach will be to embed quality in all our work across the Trust - irrespective of clinical specialism or corporate role. Everyone who works for the Trust will strive for the same goal – excellence in care. For those people who use our services, this will mean having a positive experience every time you have contact with us and your needs being at the centre of everything we do.

Priorities

During the development of this strategy in 2019, the service users, carers and staff who developed it were keen to retain the focus on our previous quality priorities which had delivered successful improvement in attaining an 'Outstanding' CQC rating.

At the time, these priorities were co-produced with service users and carers and form the mnemonic SPAR:

- S - Our services will be consistently **Safe**
- P - Our care will be **Personalised** to the individual needs of our service users
- A - Our processes and structures will guarantee **Access** to services for service users and their carers
- R - Our focus will be on the **Recovery** needs of those with mental illness

Development

The development process involved in refreshing this strategy involved :

- firstly, a retrospective analysis of the previously delivered strategy and plan, particularly reflecting on success and challenge; and
- secondly, discussion to looking forward to the transformation which will be required in the future to support the delivery of the NHS Long Term Plan.

The quality strategy was refreshed during 2019 at several facilitated forums, as set out below:

- During an Open Space Event with Service Users and Carers
- Clinical staff development sessions, with representation across professions and specialties
- Board of Directors development session
- Service User and Carer Council has reviewed the strategy throughout its development

Quality

We will provide the highest quality, safe and effective services



Where are we now?

We have a strong background of delivery in relation to the quality of our services. This delivery is built on the foundations of clear governance and leadership throughout the Trust.

These arrangements operate from the Trust Board to our frontline services and are co-produced with the people who use our services.

The CQC have rated the quality of our services as outstanding and we are proud that our strong governance relating to risk, clinical incidents, investigations and service user experience has enabled services to adapt and change to meet the needs of our population.

Over the past two years, we have been developing and implementing our new clinical directorate structures, based on needs and values, with recovery and service user experience at their heart. This commits to offer open access; choice of time and day of appointments, of practitioner and location; evidence based interventions; and hospital care as close to home as needed, when it is needed and only after all other options have been explored.

Where do we want to be?

We aim to be the provider of the highest quality mental health and learning disability services in the NHS.

We will be relentless in our pursuit of identifying and reducing harm, including human, process and systemic errors which could cause harm to people. In mental health this will also include self-harm and suicide

We will have clear cycles for reviewing the effectiveness and responsiveness of our service provision with key partners across health and social care, including most importantly our service users and carers.

Our clinical staff will provide interventions and care which is evidence based and targeted to the population we serve. It will make use of the latest technology and innovation to ensure effectiveness.

We will provide care which is person centred and responsive to people's needs, reflective of their beliefs, culture and spirituality.

We will achieve this by?

Our approach to achieving consistently high quality has four key components:

1. Planning for quality – we will ensure that our clinical services meet the needs of our service users and population. We will ensure clinical practice is based upon the best evidence and innovative practice, using our clinicians, service users and local, regional and national networks.
2. Assurance mechanisms – we will undertake periodic reviews using different mechanisms such as audit, internal assurance visits, peer reviews to make sure that good care is being delivered in keeping with the terms of our CQC registration. We will identify and deliver actions to address any identified deficits.
3. Quality control – we will have effective operational management which will monitor performance and quality metrics in clinical services and intervene when necessary to ensure quality is maintained. This will include the use of safety huddles, team meetings and reviewing quality as part of day to day business as usual.
4. Quality Improvement (QI) – we will use QI methodology to identify, test and implement changes required to tackle complex issues. This will involve clinical teams, service users working together with QI experts in close detail with those who understand the issues most.

Measures of success

- In order to accurately measure the impact of our strategy we will utilise data intelligently, ensuring reliable and well evidenced measurement supports our improvement (Safe)
- We demonstrate continuous learning from harm incidents and a reduction in the number or severity of harm incidents across the life of this strategy (Safe)
- We will see year on year increase in Service User and Carer engagement and co-production, evidenced by key measures agreed with partners and people who use our services (Personalised)
- We will ensure that our clinical services are clear about the interventions which are offered to service users and how they relate to NICE standards. We will implement standardised outcome measures in clinical services and monitor the clinical effectiveness of these interventions (Recovery focused)

People

We will attract, develop and retain the best people



Where are we now?

We have been successful in ensuring that we are an attractive place to work. This has included ensuring that different professional groups have been supported to work in the Trust in high quality services. We have processes in place to ensure that our hospitals have the right staff, in the right place at the right time.

We have invested in leadership and management development to ensure that services are delivering good performance and the Trust has been rated Outstanding overall, with the majority of services rated as good or outstanding.

Where do we want to be?

We want to have a positive learning culture, which supports people to work effectively in teams. This team working should be psychologically safe and focused on the wellbeing of our staff to enable them to deliver great care for people who use our services

We want everyone who people who works for us to have all the resources to do the best job possible. This is crucial to ensure that the people who use our services receive safe, effective and person centered care and treatment

We want to have leaders throughout the organisation who feel empowered to take decisions and drive positive change at the point of care.

We want to ensure that all we do is in collaboration with service users and carers, with co-production¹ driving improvement for staff and service users alike

We will achieve this by?

- We will have agreed processes and structures in all services, including community based services, to ensure that safe staffing is in place to meet the needs of the people in our communities.
- We will have leadership development opportunities available to all clinical and managerial staff
- We will invest in staff to have pathways to further their knowledge, skills and careers.
- We will make full use of technology to deliver outstanding care and support our staff to work effectively.

1. Co-production is where professionals and citizens share power to plan and deliver support services together, recognising that both partners have a vital contribution to make

Measures of success

- Performance in relation to safe staffing will be continuously met across our services (Safe)
- Retention rates for staff will be within an ideal range, as agreed by Director of Workforce (Safe)
- Staff will have access to Continuous Professional Development (CPD) opportunities which support their development, as demonstrated by relevant questions in annual staff survey (Personalised)
- We will have effective leadership in all our teams, as evidenced by relevant data in the annual staff survey (Recovery focused)
- We will increase our recruitment into the workforce of people with lived experience. (Personalised)
- We will embed the culture, systems and processes to support co-production across the Trust (Personalised)

Partnerships

We will actively promote partnership and integrated models of working



Where are we now?

The Trust has a range of partnerships with various external stakeholders. These are often based on mutually beneficial areas of business, such as service or contractual arrangements to provide mental health or learning disability services. We also have positive partnerships with local universities and our regulatory and commissioning partners. These partnerships are delivering good or outstanding care in their own right and our partnerships are built on positive relationships and good operational performance.

We have arrangements with our Service Users and Carers to be represented in the Trust's governance structure using the Service User and Carer Council (SUCC). The chair of SUCC is a full member of the Trust Board.

Where do we want to be?

The Trust will play a key role in building relationships between the NHS, local government, citizens and voluntary, community and social enterprise (VCSE) organisations to facilitate joint action that improves health and care priorities, through the development of integrated care systems. Through growing these partnerships, people working in and those using health and care services, our communities can co-design the improvements in population health that are needed.

We will have further strengthened our relationships with the local Universities, in relation to education, development and research capability and activity.

We will play a role in ensuring quality within our partnership arrangements through the interpretation of the strategy in the context of partnership working. This may take the form of support for our partners when quality standards are not met and having an open and transparent action taken on quality assurance standards.

We will achieve this by?

We will ensure that the development of the new Integrated Care Partnerships (our places) and Primary Care Networks (our communities) are focused on quality as defined in this strategy. The services which the Trust will provide in partnership will clearly reflect the needs of our communities, this will be empirically based on the evidence of need and rationale of how we deliver these services and will be based on what our people, both staff and service users, tell us.

Measures of success

There will be integrated care pathways working across NHS, local government, citizens and voluntary, community and social enterprise (VCSE) organizations, delivering effective, seamless care and treatment for our communities. (Accessible)

We will work with our health and social care partners in our communities to identify and address health inequalities and have plans to address them. (Recovery focused)

We will have multi-disciplinary working between clinical and academic partners including joint clinical-academic roles with the local Universities and all Trust professional groups with be regularly publishing in academic journals. (Recovery focused)

Sustainability

We will increase our efficiency and effectiveness through sustainable development



Where are we now?

We have a strong track history of delivering financial balance in the Trust and have been successful in the management of efficiency savings. This has been down to effective operational management and governance in relation to finance and budgets.

The operational plans are drafted and signed off by the clinical directors, supported by associate directors, to ensure clinical risks are well understood. These in turn are assessed for impact via the Quality Impact Assessment (QIA) process by the medical and nursing directors.

Where do we want to be?

We use a data-informed approach to sustainability across all our services and corporate services. This ensures that all our work, policies and processes add value directly or indirectly to our service users, carers and staff. We use a range of local and national data to transform our process and services to be as efficient and effective as possible to ensure that resources can be spent on direct care.

We will use emerging innovations in digital, evidence-based treatments and other new technologies to improve practice and free up clinicians' time to care.

We will achieve this by?

We will utilise various approaches to ensuring our services are sustainable, both effective and efficient.

- We will utilise benchmarking data to challenge ourselves, identifying variation in our services when comparing ourselves with similar organisations (our peers). When identifying this variation, we will have processes to interrogate, analyse and understand this variance to identify whether it is warranted or unwarranted variation.
- Where unwarranted variation exists we will apply Quality Improvement (QI) methodology to drive process improvement, evidence change and spread good practice.
- We will undertake QI assessments through the lens of our Quality Priorities (Safe, Personalised, Accessible and Recovery Focused) to ensure that all aspects of Quality are considered and where possible seek to improve quality in every organizational change process.
- We will use technology appraisals in redesigning our services to ensure that models of care incorporate innovation and enable us to respond to the needs of our communities.

Measures of success

- We will see sustained improvement in QI projects, as identified at baseline, with data supporting improvement at 30, 60, 90 days and one year post QI activity (Accessible)
- We will ensure that when we undertake benchmarking exercises our services are comparable with other NHS services in relation to efficiency and productivity. Where this is not the case for reasons of local need, we will have a clear rationale as to the reasons why in quality terms. (Accessible)
- We will see an increased use of new technologies, including the increased use of digital platforms, in our service offer to the population. (Accessible)

What's next?

How will we launch our strategy and translate vision into action?

- Launch of the strategy at Trust Board in October 2020
- Engagement with key stakeholders (including clinical staff, service users and carers) in November 2020
- Annual cycle of reviewing quality strategy work plan with service users, carers and staff

How will we monitor implementation and impact?

The success of this strategy will be monitored through the metrics associated with each domain. These are summarised below:

Safe	Personalised
<p>We demonstrate continuous learning from harm incidents and a reduction in the number or severity of harm incidents across the life of this strategy</p> <p>We will implement standardised outcome measures in clinical services and monitor the clinical effectiveness of these interventions</p> <p>Performance in relation to safe staffing will be continuously met across our services.</p> <p>Retention rates for staff will be within an ideal range, as agreed by Director of Workforce</p>	<p>We will see year on year increase in Service User and Carer engagement and co-production, evidenced by key measures agreed with partners and people who use our services</p> <p>Staff will have access to Continuous Professional Development (CPD) opportunities which support their development, as demonstrated by relevant questions in annual staff survey</p> <p>We will embed the culture, systems and processes to support co-production across the Trust</p> <p>We will increase our recruitment into the workforce of people with lived experience.</p>
Accessible	Recovery-focused
<p>We will see sustained improvement in QI projects, as identified at baseline, with data supporting improvement at 30, 60, 90 days and one year post QI activity</p> <p>We will ensure that when we undertake benchmarking exercises our services are comparable with other NHS services in relation to efficiency and productivity. Where this is not the case for reasons of local need, we have a clear rationale as to the reasons why in quality terms</p> <p>There will be integrated care pathways working across NHS, local government, citizens and voluntary, community and social enterprise (VCSE) organizations, delivering effective, seamless care and treatment for our communities</p> <p>We will see an increased use of new technologies, including the increased use of digital platforms in our service offer to the population.</p>	<p>We will have effective leadership in all our teams, as evidenced by relevant data in the annual staff survey</p> <p>We will work with our health and social care partners in our communities to identify and address health inequalities and have plans to address them</p> <p>We will ensure that our clinical services are clear about the interventions which are offered to service users and how they relate to NICE standards.</p> <p>We will have multi-disciplinary working between clinical and academic partners including joint clinical-academic roles with the local Universities and all Trust professional groups with be regularly publishing in academic journals.</p>

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