



Medway
NHS Foundation Trust

MEDWAY NHS FOUNDATION TRUST QUALITY STRATEGY



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Quality Strategy

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Quality Strategy

Foreword from the Executive Director of Nursing

Quality and patient safety is this organisation's top priority and has continued to be our main focus with a wide range of changes implemented to make sure patients receive safe and compassionate care.

Our vision – Best of Care: Best of People – is a clear and unambiguous acknowledgement that providing the quality of care our patients expect depends first and foremost on our people. We have adopted **High Quality Care** as our fifth **core strategic objective**. Delivering High Quality Care means that we will provide the best of care by making “**the delivery of consistent, high quality care a priority for all staff**”.

Quality is everyone's responsibility and the purpose of this strategy is to create direction, focus and alignment of our people to enable achievement of our quality goals and priorities and to meet the expectations of our patients. By doing this we will create a **culture of high quality care**.

Our approach is to **design quality** into every aspect of our services to support achievement of our quality goals. This approach includes reviewing our services against four areas of **patient need – Staying Healthy, Getting Better, Living with Long Term Illness or Disability and Coping at End of Life**. We have included **patient need** in our design principles to make sure promoting health and well-being is an explicit ambition within our trust, in keeping with national and regional strategies.

By using a framework that will help us look at services as a series of 'design features' that need to be effectively organised to deliver desired quality outcomes for patients, we will be able to look objectively at how best we can improve quality and how best to use our finite resources.

This strategy is designed to support a 'ground-up' approach to quality improvement that our frontline teams can use every day to think about their service and how it might be better. We will know we have been successful when frontline quality improvement initiatives, small or large, start to happen spontaneously, not just when there's an improvement programme underway.

As a Board and Executive team, we acknowledge the challenges we face and believe that we have good, robust plans in place to address them. For our people and the people of Medway and Swale, we must truly live our values and be bold as we continue to improve and strive to achieve our ambition of becoming an outstanding, brilliant organisation.

Karen Rule
Executive Director of Nursing

Quality Strategy

1 Purpose

- 1.1 The purpose of the quality strategy is to set out the goals for Medway NHS Foundation Trust in providing **consistent high-quality care** over the next three years and, therefore, delivering our vision and strategic objectives through living our values and achieving our ambition of becoming an **outstanding, brilliant** organisation.
- 1.2 This strategy looks to continue underpinning our journey from better, to best, to brilliant. This isn't just an aspiration; it must become a reality if we are to achieve our strategic objective of delivering high quality care. Moreover, it is what our patients deserve.
- 1.3 This quality strategy describes our aims and ambitions in sustaining the improvements we have made and our new areas of focus to ensure we achieve our ambition.
- 1.4 Implementing this strategy will support the Trust to achieve its overall vision and strategic objectives. Importantly it provides a framework which will deliver a **culture of high quality care**.
- 1.5 To achieve a **culture of high quality care** we have incorporated five enablers which run through our strategy:
- An inspirational vision of high quality care
 - Clear aligned goals at every level
 - Employee engagement
 - Continuous learning and quality improvement
 - Team working, cooperation and integration.

2 Delivering Consistent High Quality Care

- 2.1 We will enable our people to deliver **Consistent High Quality Care** by:
- Using our patients, staff and members alongside national and international best practice and research to create the Medway quality system.
 - Designing quality into what we do at every level and **ensuring everyone owns the responsibility for quality**.
 - Designing services which meet areas of **patient need** rather than explicitly regulators' guidelines.
 - Proactively reviewing quality of care using a consistent approach to check and improve before our measurements tell us we need to.
 - Ensuring quality happens at the **front line**, is linked to the Board and everybody owns responsibility. Crucially, our people have **permission** to make changes.

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- Focusing on achievement against our quality goals and priorities.

2.2 Our **Quality Strategy** will be delivered through **three delivery domains**:



2.3 The strategy and delivery plans will be reviewed and refreshed in parallel with the annual business planning cycle to ensure they remain aligned with the Trust's vision and emerging priorities and to take account of internal and external demands and changing landscape of best practice.

2.4 Our vision and strategic objectives can only be realised through the engagement of our people, our patients, our partners and our community and by tackling health inequalities and by promoting a culture of equality and inclusion.

2.5 Our quality strategy has been designed in tandem with our **clinical** and **people strategies** to ensure that our culture, leadership and future are based on building continuous quality improvement and that we **design for quality** to deliver on the clinical services for the future.

3 Our Approach to Quality

3.1 We have worked collaboratively alongside our members, staff, public and local NHS partners. Together we have learnt that quality in healthcare is not a single idea, rather a series of ideas and appraisal criteria like **'Safe'**, **'Effective'** and **'Person-centered'** that taken together describe the overall outcome and experience for patients.

3.2 We also note that, increasingly, health services aim to keep people well, not just treat illness, therefore, our appraisal criteria include promoting better health and well-being.

3.3 Our strategy includes reviewing our services against four areas of **patient need – Staying Healthy, Getting Better, Living with Long Term Illness or Disability and Coping at End of Life.**

3.4 We have included patient need in our design principles to make sure this important area does not get overlooked and positions promoting health and well-being as an explicit ambition in keeping with national and regional strategies.

3.5 Quality at the Trust is therefore defined by whether services are **safe, effective, person-centred** while **promoting better health and well-being.**

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- 3.6 However, just defining quality will not guarantee success. Experience from many industries is that quality doesn't happen by accident and needs to be designed into every aspect of services if it is to be reliably achieved.
- 3.7 We have developed a framework that is built around easy to remember concepts, drawn from international experience and best practice. The framework will help us look at services as a series of '**design features**' that need to be effectively organised to deliver desired outcomes for patients.
- 3.8 Our five design features are **Leadership and Governance, People, Information and Technology, Resources and Facilities** and **Culture, Systems and Pathways**. When these features are effectively brought together we can be confident our services are well led.
- 3.9 This framework is our roadmap. But rather than describing where we will be, it describes how we will be. Our ambition is to become a community of people that places delivering and improving quality for our patients at the heart of everything we do, both individually and together.
- 3.10 The Trust has a devolved leadership model with a clear thread of accountability permeating through the organisation from frontline staff to senior management and the Board. This approach is a means to ensure quality is owned by frontline staff and therefore embedded in daily practice.
- 3.11 It is important that our staff feel valued and empowered to make the changes necessary without overburdening or overly constraining governance processes. This quality strategy provides the overall direction thus supporting our staff and giving the permission to make changes without referring everything to the highest level.
- 3.12 The key principle of the strategy is around local (ward, department, team) ownership underpinned by skills development and our scalable quality framework from which our improvement priorities will emerge and be delivered by staff at all levels. We will know we have been successful when front-line quality improvement initiatives, small or large, start to happen spontaneously, not just when there's an improvement programme underway. We will have a culture of high quality care.

4 Best Quality Design

Best Quality Design – We will undertake a systematic review of our core services using our 'designing for quality' assessment criteria, ensuring we check and adjust our quality position from board to ward.

- 4.1 The first year of our three-year strategy is **focused on making immediate quality improvements and assessing our core services** ensuring that we are successful in achieving our short term ambition to be awarded a rating of 'good' in our next CQC inspection. We will continue our journey to achieve our ambitions and strive for 'outstanding' in subsequent CQC inspections

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- while embedding continuous quality improvement into business as usual.
- 4.2 Our 'designing for quality' framework will help us look at services and assess against standard criteria in order to identify the areas we need to focus our efforts to generate the biggest improvement to the quality of care we provide.
 - 4.3 Our nine core services will undergo a comprehensive overarching review based on our Designing for Quality Framework. Any new or changing services within the Trust will utilise the Designing for Quality Framework to ensure we assess for Quality at every stage.

5 Best Quality Improvement System

Best system – We will develop our staff and build their capability to deliver Continuous Quality Improvement throughout the organisation as daily business as usual and apply the concepts to improving quality in our services.

- 5.1 We recognise that our people are key to delivering the strategy. Developing our people and building their capability to deliver Continuous Quality Improvement throughout the organisation as daily business as usual and applying the concepts to improving quality in our services is critical. We will make sure that we are training and supporting our people to make improvements continuously.
- 5.2 The Care Quality Commission recently published a document 'Quality Improvement in hospital trusts – Sharing learning from trusts on a journey of QI'. We have adopted the advice and case studies within it to build our Continuous Quality Improvement system across the Trust.
- 5.3 This standardised approach to quality improvement is designed to encourage and support our people by providing them with the tools they need to make sustained improvements. We believe this will be one of the long term drivers to deliver the strategy. We want this to stimulate energy for learning and development in improvement methodology and ensure that change becomes the way of doing things at the Trust.
- 5.4 Our Quality Improvement system is made up of four domains.

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- 5.5 **Continuous Improvement Training** is a standard way to create sustainable quality improvements. The Trust will continue to build on Continuous Improvement Training delivered in previous years. Now with the capability internally to deliver high quality training, the Trust is benefiting from a comprehensive programme incorporating international standards of problem-solving methodology and Quality Improvement processes.
- 5.6 The aim is to deliver training to 1,000 of our staff over the first two years of the strategy. Everyone trained is expected to contribute to making an improvement within the Trust, aligned to our strategic objectives. Targeted training will be delivered to teams responsible for priority workstreams and teams who nominate a Quality Improvement project.
- 5.7 An ongoing development programme offering a range of QI training will be accessible to all staff. The target is to train approximately one quarter of our workforce in continuous improvement techniques across a range of professional levels as outlines below.



- 5.8 In 2018 we launched an innovative improvement system '**Daily Improvement Huddles**'. The improvement huddle conversation brings

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continuous improvement into daily business as usual and allow our people to feel empowered, in control and encourages a 'from ground up' approach to innovation and improvement.

- 5.9 These 'improvement huddles' are run and managed by staff from the area that generate ideas and identify improvements that they can complete and implement as a team. The standardised meeting format allows a set period of time to work together without impacting the normal running of the day and has been shown to increase productivity, engagement and complete numerous small improvements aligned to our strategic objectives.



- 5.10 We will build on the success we have had in early implementation and roll out 'improvement huddles' across the Trust.
- 5.11 We will utilise our apprenticeship levy to procure, train and qualify a number of staff in advanced improvement techniques in order to support and coach our internally trained improvement practitioners. These **Improvement Specialists** will work within our directorate teams to ensure we continually seek new improvement opportunities and sustain the gains from successful implementations.
- 5.12 The improvement specialists will also manage the cohort of improvement practitioners to ensure we maintain engagement and continued utilisation of our investment and talent.
- 5.13 Alongside the Trust quality goals and targets, we will develop measurable and structured **Quality Improvement Projects**, led by our trained improvement practitioners.
- 5.14 All quality projects will demonstrate how they will support delivery of the quality strategy before being initiated. This will increase our improvement potential by having a co-ordinated approach to delivery of our goals and targets.
- 5.15 The projects will be informed by analysis of a number of measures of our performance and will span all quality domains. The projects will be assessed for their potential to positively impact on the quality goals and targets we

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have set and we will ensure we have the necessary capability to deliver the required improvements.

- 5.16 Progress with these improvement projects will be managed by the Transformation Team who will support and coach our improvement practitioners throughout the project.

6 Best Quality Focussed Delivery

Best Delivery – We will have a continued and even more robust focus on delivery of our National and Local Quality Priorities with effective communication and dissemination across our organisation and a focus on joined up improvement.

- 6.1 Our quality strategy will be delivered through the achievement of our quality goals. Our goals have been developed in collaboration with Trust governors, staff, members and patient group representatives and have been chosen to ensure we focus on where improvement is most needed and on sustaining improvements we have made over the past two years. These are set out below.

Delivering consistent high quality care will be the priority of all staff

Safe

We will learn when things go wrong and reduce the incidence of hospital acquired harm

Effective

We will ensure the right patient is in the right place receiving the best of care and that their care is safely transferred between care providers

Person Centred

Patients, carers and families will be listened to and supported to meet their needs

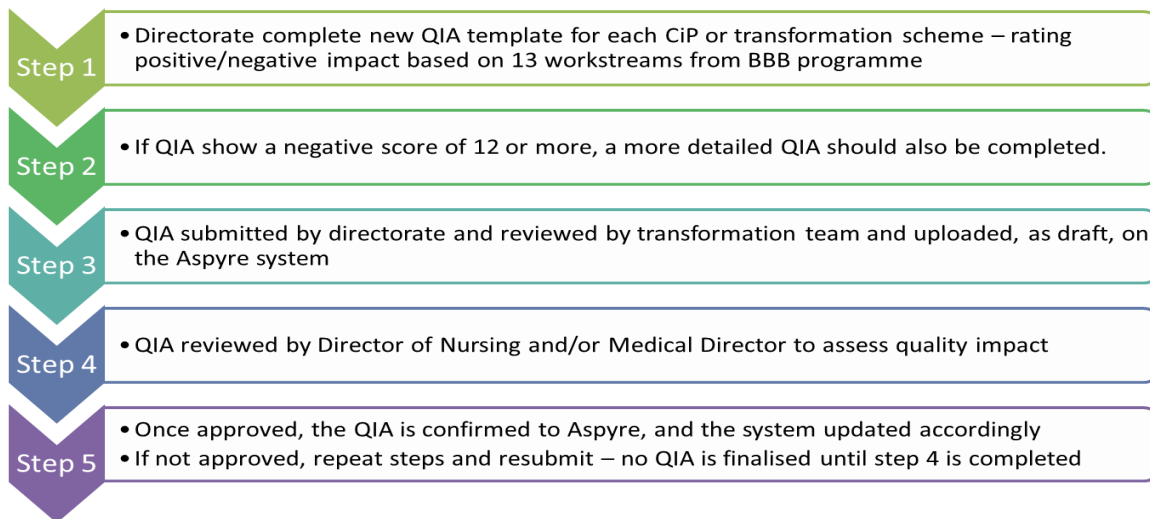
- 6.2 The quality priorities and targets which support delivery of these goals have been developed for **year one of the strategy**. Each year, we will review our progress and redefine our targets to ensure we are focused on the areas where improvement is most needed.
- 6.3 The quality priorities are attached as an Appendix to this strategy.
- 6.4 By achieving our goals, we will realise our ambition to be a brilliant organisation which provides the best of care.

7 Measuring success

- 7.1 Our devolved leadership model ensures quality is owned by frontline staff and therefore embedded in daily practice, providing a seamless approach to quality monitoring from Ward to Board.

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- 7.2 Monitoring of quality takes place through an established quality governance and performance framework. Our quality goals, priorities and targets are incorporated into the integrated quality and performance reports, ensuring they can be tracked from ward to board. This provides clarity on the Trust's priorities and local priorities and show the impact of the improvements we make.
- 7.3 Our approach is to improve quality, safety and efficiency in parallel. All service development, efficiency, improvement and transformation plan and projects are assessed to ensure they will not adversely affect quality of care. All transformation schemes are assessed against a five-step Quality Impact Assessment Approval Process. This is shown below.



8 Strategy Ownership

- 8.1 The owner and leader of our quality strategy and supporting plans is the Executive Director of Nursing who will ensure it is implemented across the organisation.
- 8.2 The delivery plans will be used to monitor and measure success of the implementation of our quality strategy.

9 References

Document	Ref No
References:	
Trust Associated Documents:	

Appendix 1: Quality priorities 2019/20

