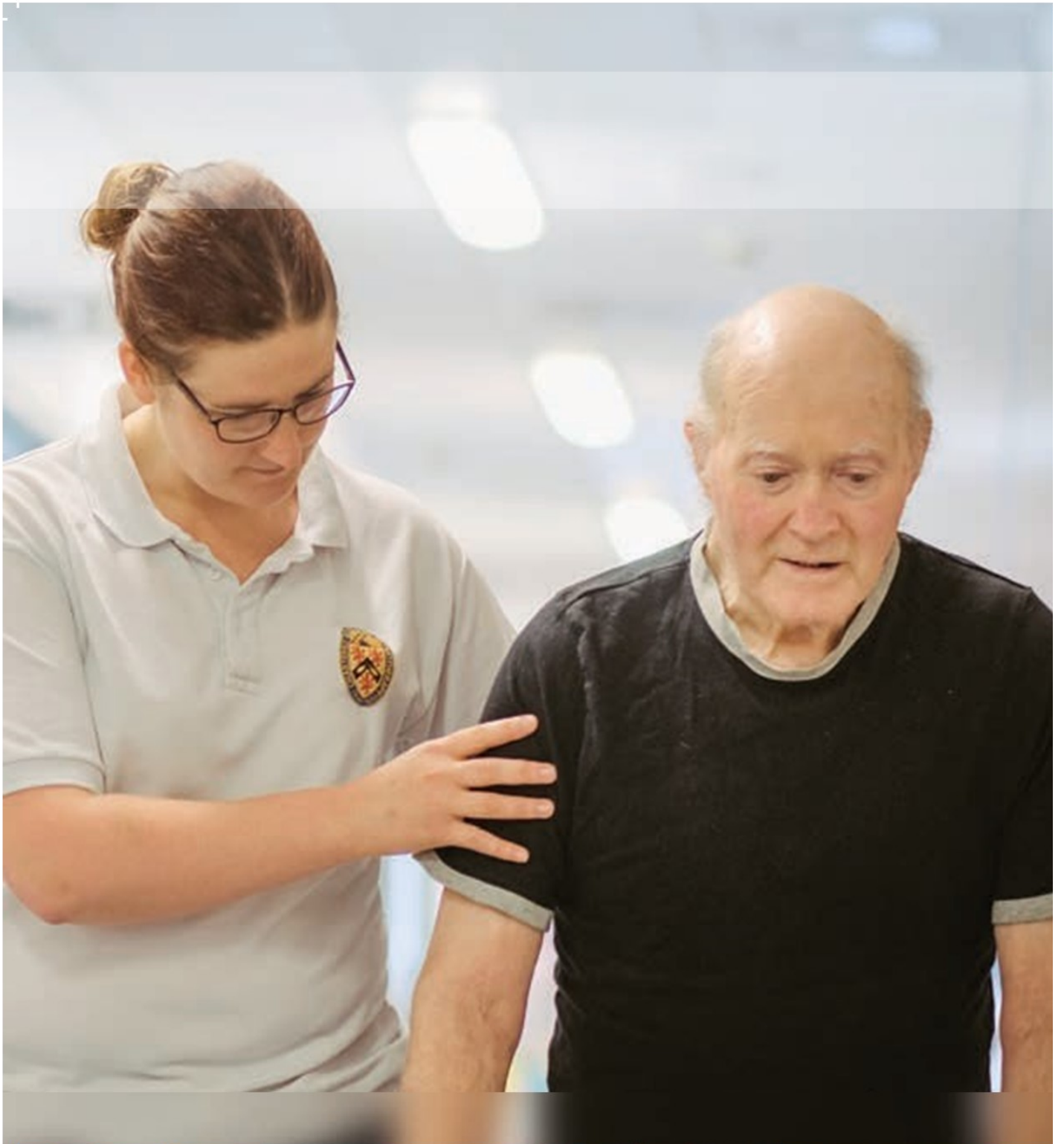




# Quality Strategy 2018—2023



Healthcare at its best  
with people at our heart



# Foreword: Medical Director

The Quality Strategy outlines our commitment to prioritise quality above all else. In this strategy, we continue to build on the progress made so far in line with the National Quality Board's (NQB) Shared Commitment to Quality (1). We outline our aims to continue to embed a culture of continuous improvement to increase and sustain the quality of our services for the people of Newcastle and beyond.

Quality Improvement (QI) has become an integral part of everyone's daily work. Learning, improving and innovation have always been the Newcastle way but we are now moving towards a culture which encourages innovation, experimentation and change and empowers staff to give improvement a go; to try it, take a risk, learn from what does and doesn't work. We have created a culture and environment in which staff are empowered to innovate and overcome the current challenges they face. Addressing these challenges requires real-world leaders who understand the systems they work in and who are motivated to make things better; nobody is better placed to come up with the solutions than those facing the problems. We recognise that all staff, regardless of role or experience, are capable of influencing change, either by offering suggestions for improvement or participating in initiatives to enhance services. As an organisation, we have committed to releasing frontline staff to facilitate time and attention to the work of quality improvement and learning across the Trust will help us deliver sustained improvement in the quality and experience of care.

In 2019, the Trust was graded as 'Outstanding' by the Care Quality Commission (CQC) for a second time. This incredible achievement was a fitting acknowledgement of the hard work and compassion of all of our 18,000 staff. Our ambition is to maintain this, build upon this achievement and continue to strive towards safe and effective, high-quality patient focused care.



# Introduction

Delivering safe, effective, patient-centred care is the first strategic goal of the Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH).

We are committed to providing services which:

- Maintain patient safety at all times and in all respects
- Are clinically effective and lead to the best possible health outcomes for patients
- Provide a positive patient experience
- Are timely, equitable and efficient; responding to the needs of our population
- Are well-led, open and collaborative and are committed to learning and improvement across the system.

The COVID-19 pandemic is the biggest healthcare challenge this country has faced since World War 2. The demands of responding to the pandemic have changed over time from the urgent and immediate response to safely care for large numbers of patients with COVID-19, to starting our transition to 'living with COVID-19'. The Trust is facing the same challenges as healthcare services nationally; recovering our elective activity to pre-pandemic levels, improving patient flow in the context of unprecedented emergency admissions and increasing patient acuity. In order to sustain our NHS, we have to meet these challenges whilst embracing innovation and transformation, ensuring we improve the quality of service we provide. The National Quality Board (1) state "quality without efficiency is unsustainable, but efficiency without quality would be unthinkable" (p.2). In order to achieve this, we need to focus on continual learning and improvement at all levels and consider our role in the wider system, working collaboratively with the new Integrated Care Board and our partner organisations.

This strategy aligns our efforts as an organisation to the National Quality Board's Shared Commitment to Quality (1). However in the coming year there are some significant and transformational changes expected in the approach to quality and safety, both nationally and locally. Implementation of the new National Patient Safety Strategy is in the early stages and the CQC are changing how they regulate, taking a more dynamic and flexible approach. This will include assessing shared learning and improvement, with a focus on local systems and promoting equity of access, experience and outcomes. In the Trust we continue to build on our partnership with the Institute for Healthcare Improvement (IHI) to develop and strengthen our approach to transformation and continuous quality improvement. Following publication of the Ockenden Report the Trust has committed to fully implement all recommendations of the report, including installation of Badgernet, an end to end technological solution supporting all aspects of electronic recording for women through their pre-natal, labour, birth and post-natal period.

A new Quality Strategy reflecting all of these changes will be launched in 2023 setting out our vision, aims and objectives for the next 5 years.



# Seven Steps to Improve Quality

This strategy follows the 'Seven Steps' to improving quality as outlined by the NQB (1, p.8) but have been modified to align with the Trust's own goals and expectations. The steps define what we need to do, to continually improve the quality of care we provide to our patients and ensure we have a skilled and motivated workforce for the future.





1.

The Trust will continue to set a clear direction and identify quality priorities each year.

2.

Bringing clarity to quality by defining what high quality care looks like.

3.

Measuring and publishing quality to monitor standards and benchmark performance. We will aim to reduce duplication by measuring what matters.

4.

Recognising and sharing quality and best practice to increase the pace of change and avoid duplication.

5.

Maintaining and protecting quality to ensure we continue to deliver the best quality care. We will act quickly when this is not the case.

6.

Building capacity in front line staff to ensure more staff have an understanding of quality improvement techniques and human factors.

7.

Staying ahead by continuing to champion Innovation and research.

‘Putting patients at the heart of everything we do. Providing care of the highest standard, focusing on safety and quality’, is the first strategic goal of the Trust.

Quality and Safety are routinely placed on the top of the Trust’s agenda; both literally and figuratively. Key meetings always include a quality and patient safety item ensuring it is prioritised and emphasised alongside other key Trust objectives – this is our priority and we will ensure there is always time to discuss quality and safety issues. This commitment to quality and safety has also been demonstrated by the well-established role of Clinical Director for Patient Safety and Quality. These are senior and experienced consultants from a range of specialties across the Trust, who advocate, advise and steer the direction of the quality and safety agenda within the organisation. The Clinical Directors for patient Safety and Quality are highly motivated and clinically credible individuals who, by working closely alongside the Trust’s senior nursing leadership, act as ‘champions’ for the quality and safety agenda, offering strategic leadership on key priority areas and helping to develop a culture for continuous improvement by role modelling within the organisation.

Successfully managing quality relies on commitment, consultation and co-operation with all staff from the ward to the Board. Each year discussions with the Board of Directors, the Council of Governors, patient representatives, staff and public will take place in order to ensure quality priorities are identified to focus efforts for the coming 12 months. We will ensure the quality priorities are appropriate, meaningful, and resonate with all. Data and evidence will also play a vital role; each year we will ask where is there scope for improvement and in which areas is the quality gap the greatest?

The feedback from our front-line staff and our patients will help set core quality priorities that have an overarching impact across the organisation. Whilst these will change year in year, it is likely that the following will always focus in some guise:

#### Patient Safety:

- Reducing avoidable harm and early identification of deterioration
- Increasing incident reporting and learning from error
- Reducing healthcare acquired infections
- Safe staffing levels.

#### Clinical Effectiveness

- Enhancing capability in quality improvement
- Digital technology to improve safety, patient outcomes and experience
- Developments across the patient pathway encompassing recovery of elective activity.

#### Patient Experience:

- Acting on what patients tell us and co-creating solutions to challenges they face
- Improve health inequalities, particularly in relation to Mental Health and patients with Learning Disabilities and Autism.



## 2 . Bringing Clarity to Quality

The Trust measures quality using the CQC's inspection framework which is based on the Francis, Berwick and Keogh reviews (2 - 4 ) and the outcome of a public consultation. We therefore routinely ask, are services safe, effective, caring, responsive and well-led?

### Defining Quality

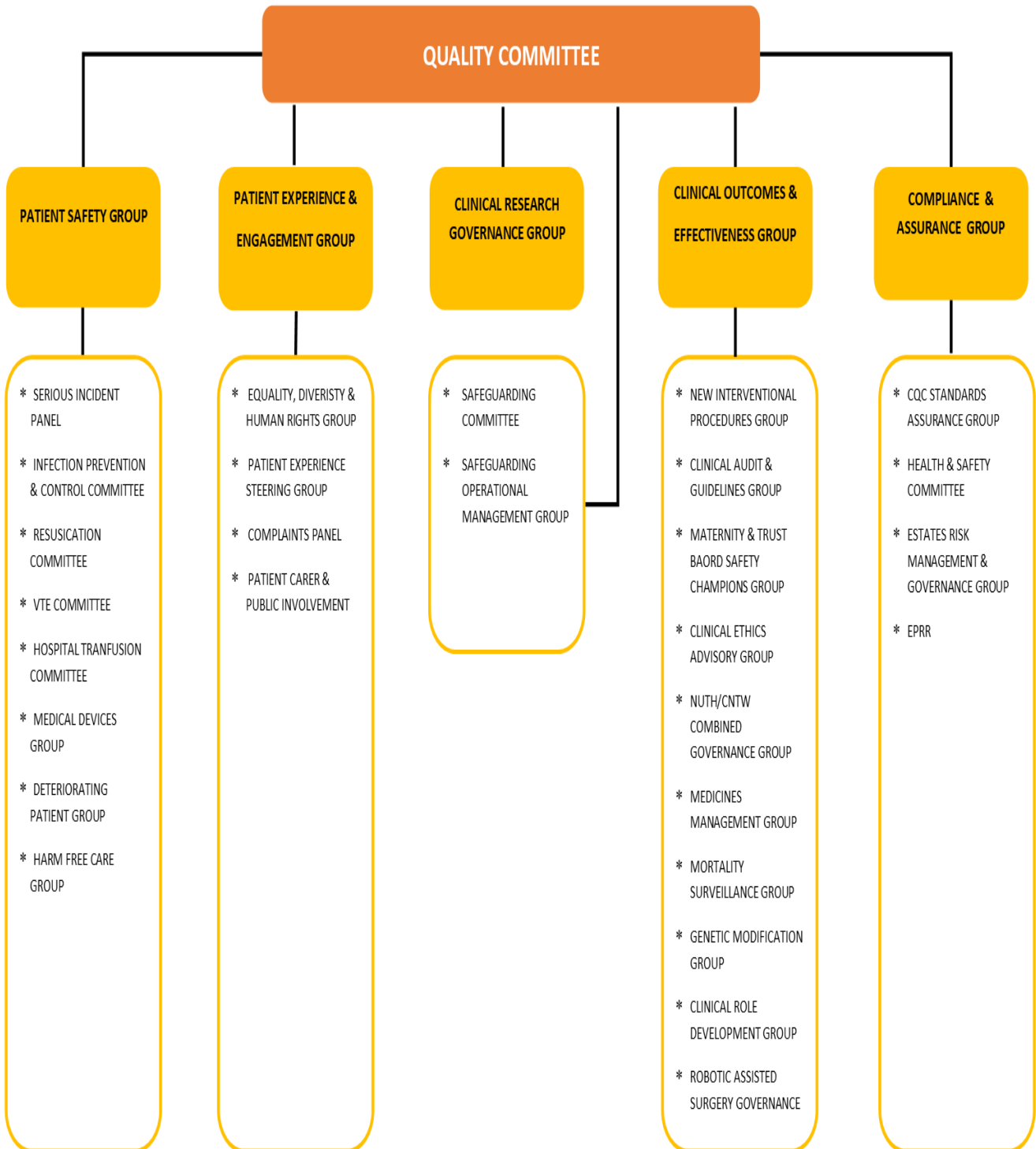
The quality domains are outlined here, together the descriptor of what these mean, the domains match those used by the CQC to ensure we are focused on making improvements which are aligned with their regulatory requirements.



The Trust's internal inspection and reporting processes have been aligned to these domains to bring consistency and clarity to the process. Our routine reporting and monitoring also follows these 5 domains to reiterate the message. Our internal processes will be adapted to reflect the change in CQC strategy and their approach to inspections.

The Trust has well-defined quality assurance processes for setting the standards for what high-quality care looks like across our services. A key part of this is a well-established committee framework which plays a vital role in providing quality assurance to the Board in a large and complex organisation.





### 3. Measuring and Publishing Quality

The Trust maintains its commitment to delivering high quality services by monitoring effectiveness and studying outcomes. We will continue to be open and transparent, publishing progress against our quality priorities at public Board meetings and multiple staff forums. We will do this by producing a monthly Integrated Quality Report outlining the Trust's performance against a range of safety metrics and progress with the Quality Account priorities.

The new NHS Patient Safety Strategy is about maximizing the things that go right and minimizing things that go wrong for people experiencing healthcare. A core objective of the new strategy focuses on improved 'Insight' to help us understand safety across the whole system by triangulating data from multiple sources and a range of organisations. The emphasis will be on data for learning and measurable improvement to achieve sustained high quality care and reduce risk. We will continue to share our quality metrics to enable a responsive approach to our position, sharing excellence and also identifying areas for improvement. By improving the ways we display data it will make it easier for staff, from the ward to the Board, to understand where we are making

improvements and where we need to increase our efforts. Continual measurement will also help us to ensure that any improvements we do see are sustainable in the long term.

We will also continue to produce an annual Quality Account which will be our way of demonstrating to the public the progress we have made against our quality priorities each year and what we plan to improve in the succeeding year. This document will also demonstrate our commitment to participating in all relevant national audits, the outcomes of which provide another vital means of measuring the quality of our services.



## 4. Recognising and Sharing Quality

Moving forwards, we will strengthen our approach to recognising and sharing quality by building a network of staff throughout the organisation to improve patient care, work in a better way and build a sustainable future together.

A collaborative approach to enhance and promote QI across the Trust started with a network of staff based on the Health Foundation's Q initiative. 'Q' aims to connect people with improvement expertise across the UK, fostering continuous and sustainable improvement in health and care. This provided an excellent platform for us to build upon and in 2021, a partnership was established with the Institute for Healthcare Improvement (IHI) to develop and strengthen our approach as a Trust.

We are building a social movement around continuous quality improvement to increase knowledge and expertise through Newcastle Improvement learning & sharing events, development of an Improvement Coach Network and alignment with the Q-Network. Quality Improvement case studies are routinely shared in Dame Jackie's blog.



*A connected community working together to improve health and care quality across the UK*



**Newcastle Improvement**  
Continuous Quality Improvement

**Do you want to make things better at work?**  
Try the Newcastle Improvement Approach

  
**Newcastle Improvement**  
Continuous Quality Improvement



### Include

the people involved in the work to make the improvement



### Understand

how things are done now



### Test

your change ideas using the PDSA (Plan, Do, Study, Act) cycle



### Share

what you have done and sustain the change



Speak to Newcastle Improvement for information, advice and support on how to make the changes that matter to you – [nuth.newcastleimprovement@nhs.net](mailto:nuth.newcastleimprovement@nhs.net)



**Flourish**  
at Newcastle Hospitals

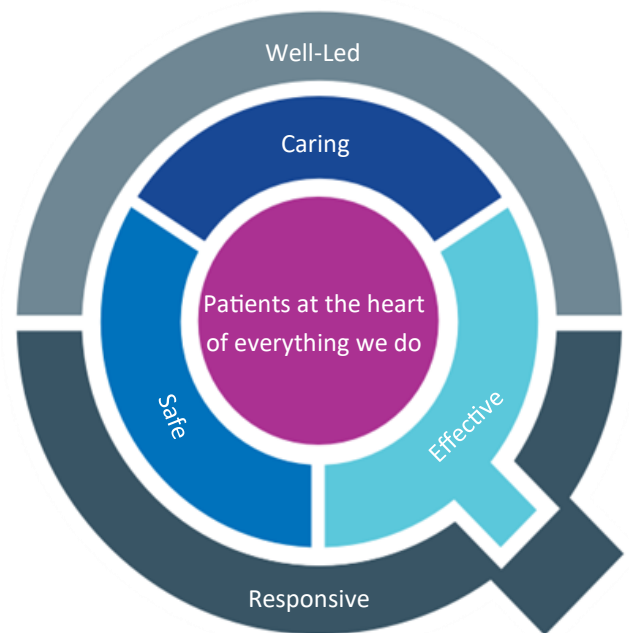
## 5. Maintaining and Protecting Quality

The Trust has developed and embedded a robust quality surveillance programme designed to provide assurance to the Board that high quality care is being delivered across all services and that areas requiring improvement can be quickly identified. The Patient Safety and Quality Review (PS&QR) process, is aligned to the CQC inspection approach. The framework has evolved since it was first launched in 2015 and delivers an

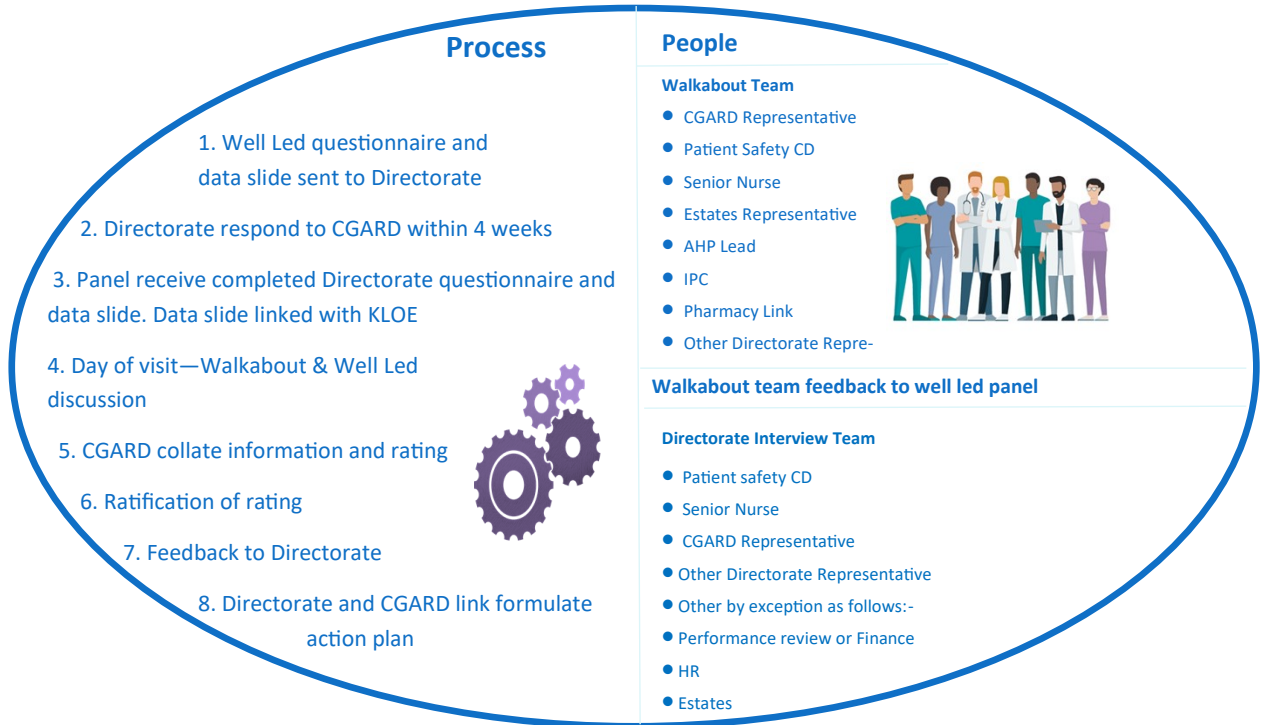
The PS&QR process involves an in-depth annual inspection using a framework aligned with the CQC inspection approach to help identify areas of care requiring improvement and to support more challenging issues that may be impacting on quality and patient safety.

In a change to previous annual reviews due to the impact of the pandemic, this process now includes a self-assessment tool. The clinical directorates, with support from Clinical Governance and Risk Department (CGARD), the Senior Nursing Team and Clinical Directors for Patient Safety and Quality are required to self-assess their performance related to the five CQC domains (safe, effective, caring, responsive, well-led) and provide a rating for each domain. The evidence, including areas of achievement and areas for improvement are presented to a ratification panel, Chaired by the Medical Director. This then forms the basis of an action plan and opportunities for shared learning across directorates.

In 2022 we will concentrate our efforts on examining culture, leadership, governance, risk management, innovation and improvement across the organisation in the form of Well-Led reviews.



## Well Led Review Process



## Directorate Well Led Review

Patient Experience

Quality Assurance



Safety Culture

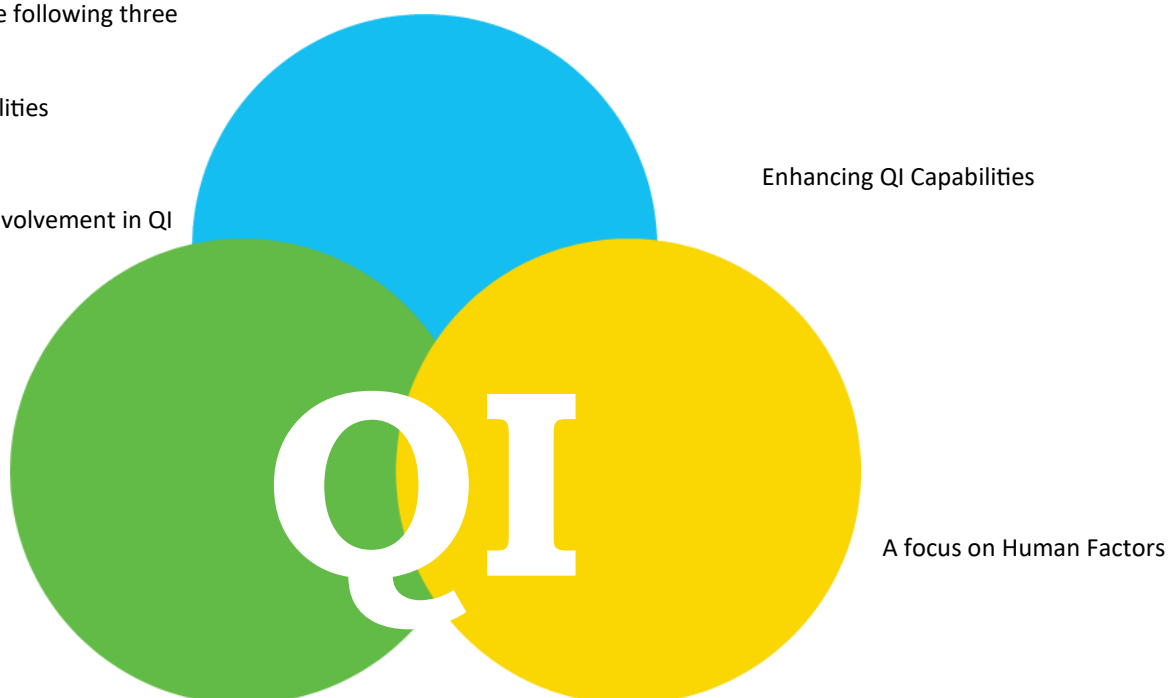
Human Resources

## 6. Building Capacity

We consider Quality Improvement to be an integral part of everyone's work through learning, improving and innovating. Building capacity in our front line staff is vital if the aims outlined in this strategy are to come to fruition. Whilst we want to create a movement, success will be limited if we are empowering and enabling staff to take control of these improvement projects without the skills to bring their plans to fruition. In order to achieve our aims, we therefore need to invest in the education and training of our workforce.

We will build capacity in the following three key areas:

- ◇ Enhancing QI capabilities
- ◇ Human Factors
- ◇ Patient and Public Involvement in QI



# Quality Improvement

### Enhancing QI capabilities:

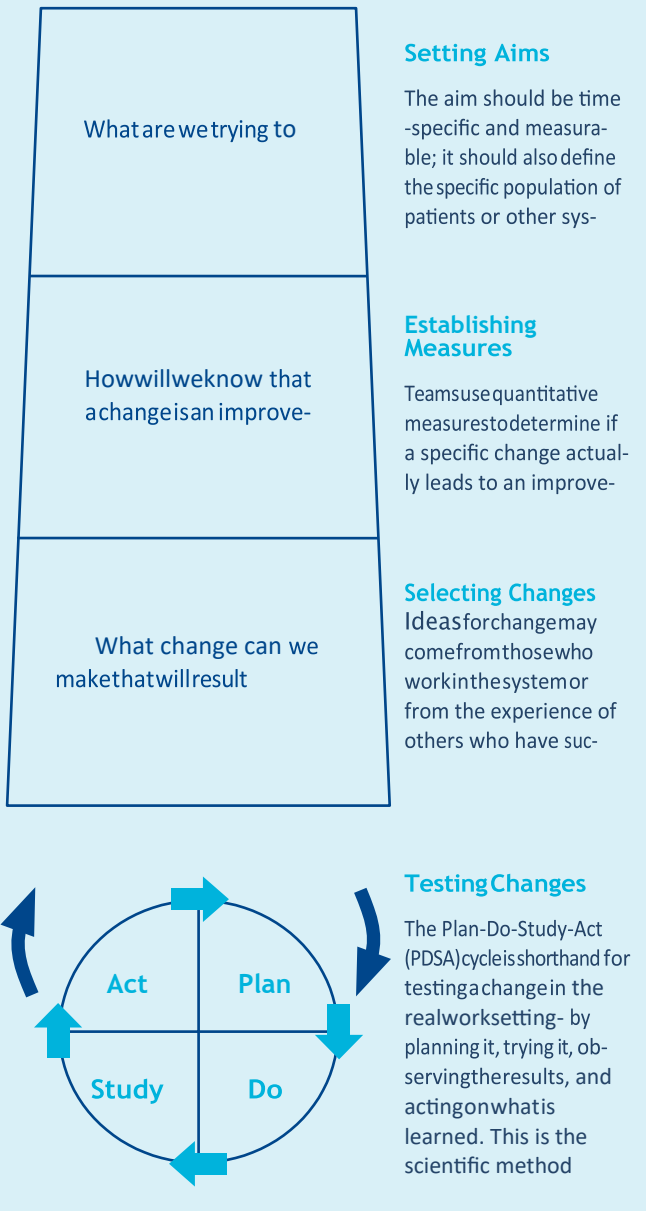
Our aim is to provide an opportunity for all 18,000 colleagues and relevant strategic partners to gain an understanding of the Newcastle Improvement approach, incorporating the Model for Improvement, and to have the confidence and ability to apply this learning to deliver improved outcomes for patients and enhanced staff experience.

An e-learning package and a new induction video has been launched on ESR, in addition to an enhanced induction session introducing staff to Newcastle Improvement and the role of continuous quality improvement. More formal QI training programmes including a selection of teams and coaches linked

to Trust strategic and patient safety and quality priorities are also planned.

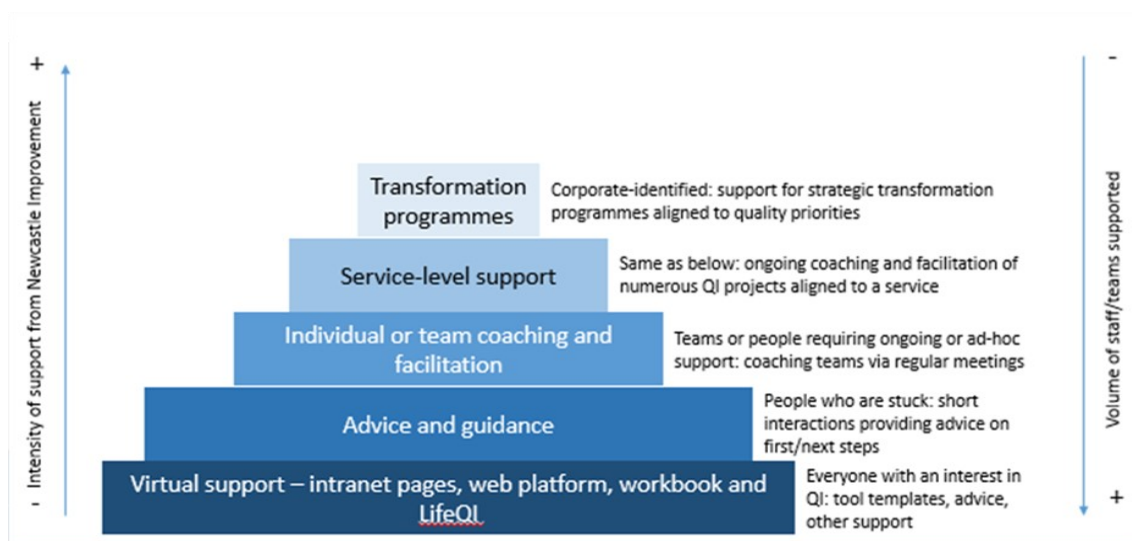
The Model for Improvement, developed by Associates in Process Improvement, is a simple, yet powerful tool for accelerating improvement. This model has been used very successfully by hundreds of health care organisations, in many countries, to improve many different health care processes and outcomes.

## Model for Improvement



The work-plan for the coming year has been set in the context of the following core areas of focus:

1. Workforce Expansion and Wellbeing
2. Operational Recovery for Delivery and Performance
3. Financial Stability
4. Transformation and Quality Improvement
5. Quality and Patient Safety



### Human Factors:

Human factors is considered to be one of the core concepts underlying QI. The science behind the fundamental principles concerning the design of work systems, that match the needs of the people who work in them, is essential to understand if teams want to change them. The inclusion of Human Factors considerations in the design structure and process has the potential to improve outcomes for patients and families and to improve the comfort and usability of systems for staff. New technologies and continual change must be informed and designed through the application of Human Factors methods and principles to realise the full potential of QI.

Human Factors training enhances clinical performance through an understanding of the effects of team work, tasks, equipment, workspace, culture and organisation on human behaviour and abilities and application of that knowledge in clinical settings.





### **Patient and Public Involvement:**

Don Berwick (3) states that *“Patients and their carers should be present, powerful and involved at all levels in healthcare”* (p.17).

The Trust has a long term commitment to listening and learning from the experience of patients and carers and well established forums and committees to lead this work (Public, Carer and Public Involvement Committee, a Community Advisory Panel, and an active Equality, Diversity and Human Rights Group.

Patient involvement is crucial to the delivery of appropriate, meaningful and safe healthcare and is essential at every stage of the care cycle: at the front line, the interface between patient and clinician and at the organisational level.

The aim of this strategy is not for patients and carers to be the passive recipients of increased engagement, but rather to

achieve a pervasive culture that welcomes authentic patient partnership – in their own care and in the processes of designing and delivering care. This should include participation in decision-making, goal setting, care design, quality improvement, and the measuring and monitoring of patient safety. Patients should, when they wish, advise leaders and managers by offering their expert advice on how things are going, on ways to improve, and on how systems work best to meet the needs of patients.

The importance of the role of patients, their family and staff in improving quality is a core component of the Patient Safety Strategy. This includes appointment of Patient Safety Partners which will be key roles in helping us to co-design improvement initiatives, safety governance, strategy and policy. The Trust has already appointed Patient Safety Specialists who are key leaders and supporting the Trust’s safety agenda.



## 7. Staying Ahead

NuTH has a rich history of research and innovation. We will continue to champion and spread innovation by making better use of our collective insight to inform research, adapting how we work so we can respond to and support innovative new models of care.

Our Clinical Research Strategy was launched in 2021. This strategy sets out our vision and plans to further advance Newcastle Hospitals' clinical research activities, embedding research into patient care in new and exciting ways. The collaborative approach already taking place within Newcastle Hospitals has shaped this new understanding, helping to show how a culture of embedded research can create a virtuous circle of improvement for patients, staff, organisations and ultimately, the wider population.

This collaborative approach and our partnership with Newcastle University is critical to our delivery of high calibre research and the strength of this relationship is evidenced by the Academic Health Science Centre (AHSC) status awarded to the partnership in April 2020 by the National Institute for Health Research (NIHR), NHS England and NHS Improvement. This partnership, Newcastle Health Innovation Partners (NHIP), includes in addition to the Trust and Newcastle University, Newcastle City Council, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust and the Academic Health Science Network for the North East and North Cumbria. The collective vision is to become the most integrated and innovative AHSC in the world, working with innovators to discover, develop and deliver new solutions in healthcare to improve population health in the North East and North Cumbria.

The Trust also leads the way in developing a national CRN Research Patient Satisfaction Survey. We will collect regular feedback from patients who have experienced care as part of a research study through patient satisfaction surveys, friends and family initiatives and regular public engagement events. The Health Education England (HEE) Research & Innovation (R&I) strategy identifies the importance of a workforce that embraces R&I as being central to improving the quality of care and patient experience.

Historically, practice-based research has more commonly been developed by medical practitioners, with non-medical professionals predominantly supporting research delivery.

Since the launch of our first Nursing, Midwifery and Allied Health Professional (NMAHP) Research Strategy in 2015, significant work has been undertaken to continue to strengthen NMAHP research capability and capacity, ensuring we are at the forefront of this agenda nationally. This has been demonstrated by investing in a Trust Lead for NMAHP Research, appointing a Professorial Chair in Nursing and supporting over 135 individual NMAHP applications to externally competitive research related funding and training schemes over the last few years (from pre-to post doctoral). The Newcastle Hospitals Charity has recently supported a multi-million pound application to set up a NMAHP Research Institute which will benefit 100's of NMAHP in the years ahead.

The link between research active organisations and those that deliver the highest quality care is clear and so maintaining our longstanding commitment to research will be essential if we are to continually improve the quality of the services we deliver.





## Conclusion

We are confident that by implementing this strategy, and continuing to put *patients at the heart of everything we do*, we will continue to ensure that our services are safe, effective, caring, responsive and well-led. By working hard to foster a culture of continuous improvement, by empowering staff and patients to make the changes they want to see, we will continue to deliver the best possible care to the people of Newcastle and beyond. We will monitor the implementation of this strategy closely and look forward to working together to make the Newcastle upon Tyne Hospitals NHS Foundation Trust even better.





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