

# Whittington Health Quality Strategy

2012-2017

Safe care

Effective care

Excellent patient experience



# Quality Strategy for Whittington Health

## Introduction

The purpose of this quality strategy is to outline the strategic goals for Whittington Health in providing high quality services for the local population over the next 5 years. It will support the broad organisational objectives articulated within the Whittington Health Strategy and provide a vehicle for the delivery of the Whittington vision, through measurable objective quality goals and metrics. This will ensure that we achieve our vision of becoming 'an outstanding provider of joined up healthcare to local people in partnership with GPs, Councils and local providers'.

Wherever possible, our focus will be on the integration of health services across traditional health service boundaries to improve performance, access, value for money and the experience of care for our local population.

## National Context

*High Quality Care for All(1)*, the report generated by the NHS next stage review in 2008 set out the commitments for ensuring that quality improvement became the organising principle and driver for the NHS. It defines quality in healthcare as having three domains ensuring that care is safe, effective and provides the most positive experience possible.

Monitor, the independent regulator of NHS foundation trusts stipulate the conditions and standards required to achieve foundation trust status. Apart from strong financial governance, clear quality objectives need to be agreed and given equal status with financial sustainability by the organisation. Whittington Health is committed to driving forward the business agenda of the organisation in order to secure its future, without compromising clinical quality and safety and will ensure that these principles remain at the heart of our decision making.

The White Paper, *Equity and Excellence: Liberating the NHS(2)* set out how the improvement of healthcare outcomes for all will be the primary purpose of the NHS. This means ensuring that the accountabilities running throughout the system are focussed on the outcomes achieved for patients not the processes by which they are achieved. *The NHS Outcomes Framework 2011/12(3)*, published in December 2010, based is upon these principles, and reflects the vision set out in the White Paper. Its purpose is threefold:

- to provide a national level overview of how well we are performing, wherever possible in an international context;
- to provide an accountability mechanism between the Secretary of State for Health and the proposed NHS Commissioning Board; and
- to act as a catalyst for driving quality improvement and outcome measurement throughout the NHS by encouraging a change in culture and behaviour, including a stronger focus on tackling health inequalities.

The quality objectives for Whittington Health have been based upon the requirements of quality performance set out by the NHS outcomes framework.

## Local context

Whittington Health is a fully integrated organisation providing health and social care for people in North Central London in community and acute care settings. We aim to deliver high quality, high value care and provide health gain for our community. Our strategy covers the three domains of quality patient safety, patient experience and clinical effectiveness. Our quality strategy is owned by the work of the organisation, overseen by the Board. The Quality Committee will oversee the implementation of the strategy and to hold clinical service leads to account for their actions to deliver these improvements. The Quality Committee also engages with stakeholders and scans the wider horizon, both internally and externally, to be alert to new quality initiatives and to ensure we incorporate these promptly where relevant to our services. Whittington Health recognises its role in being part of the local community and supports the public health agenda for patients and staff in relation to reducing smoking, alcohol misuse, reducing obesity and encouraging healthy living styles. Whittington Health has strong academic partnerships with both UCLP and Royal Free and UCL medical school, ensuring the best possible opportunities for world class education and research.

## Organisational fit

Working in partnership with our service users, our local community, GPs, local authorities and our academic partners we will strive to ensure that our services evolve to support the development and delivery of the Whittington strategic goals. These include

1. Developing integrated models of care;
2. Ensuring an approach to care that supports the ethos of 'no decision about me without me';
3. Efficient and effective services;
4. Improving the health of local people;
5. Changing the way we work.

Additionally, the principles and work streams identified in the following strategies have been assessed to ensure the strategic fit with this quality strategy:

**Nursing and AHP strategy**

**Workforce development**

**Estates strategy**

**Risk management strategy**

**Clinical governance strategy**

## Our 'Quality Vision'

By 'providing high quality care', we mean providing services that will be clinically effective, safe, compassionate and innovative as well as offering value for money. Interventions will be based upon the best available evidence in a timely and equitable manner, as well as focusing effort on preventing illness, and supporting independence and quality of life within the diverse local population.

This quality strategy has been developed with input from staff through a questionnaire which included asking staff what quality means for them. The 'Quality Vision' for Whittington Health has been partially shaped using this information. That is, to be among the best nationally in delivering safe, effective, innovative models of care, with the patient at the heart of everything that we do. We will work to ensure that every service user and their carers and visitors will experience the highest quality of care, at every point in the patient journey. We aspire to providing services that are among the top 10% nationally for all our quality objectives. This strategy identifies three domains of quality in which we will focus this aspiration:

- **Providing safe services:** means taking action to reduce harm to patients in our care and protecting the most vulnerable. It means ensuring that the workforce receives the right education and training in preparation for the delivery of competent and skillful intervention.
- **Providing effective services:** means providing care that is based upon the best evidence and that produces the best outcomes for patients.
- **Providing the best experience of our services:** means ensuring that the services that we provide are person centred and that people are treated as individuals with dignity, in privacy and with compassion at the right time and in the right place for them.

Each year, through our Quality Account, we will report our performance and progress in each of the domains that are set out in this strategy and will identify the improvement priorities as agreed by the Trust Board. Each division will identify service specific quality improvement priorities and will measure performance against these priorities.

## Equality and Diversity

We recognise the rich diversity of our community and of our staff. We believe this should give us better opportunities to empathise with our service users and to understand what is needed to provide excellent patient experience. We will work closely with our LINKs, our shadow governors and with local authorities and Health and Wellbeing Boards going forward, as well as with local community groups and with the London Health Improvement Board so that we better understand what we need to do to reduce existing inequalities in the provision and access of healthcare.



# Aims of the strategy

The aims of this strategy are to ensure that patients and service users of Whittington Health receive safe, effective services with a positive patient experience. We will demonstrate a year on year improvement against baseline, within all measurable benchmarks. The final outcome will ensure that Whittington Health will be among the best and safest in the country, remaining in the top 10%. We also aspire to ensure that no preventable harm will happen to service users in our care.

## Quality improvement domains

More specifically, all our efforts shall be directed towards ensuring that improvement is measured and achieved within the 5 domains of the NHS outcomes framework:

1. Preventing people from dying prematurely;
2. Enhancing quality of life for people with long term conditions;
3. Ensuring that people have a positive experience of care;
4. Helping people to recover from episodes of ill health or following injury;
5. Treating and caring for people in a safe environment and protecting them from avoidable harm.

Domains 1-3 include outcomes that relate to the effectiveness of care, domain 4 includes outcomes that relate to the quality of the healthcare experience from the patient's point of view, and domain 5 relates specifically to patient safety (3). The framework also aligns well with the overall Whittington Health objectives.

## 1. Preventing people from dying prematurely

### What does this mean?

Whittington Health is an organisation committed to preventing our service users from dying prematurely. This means that we shall work to reduce the number of years lost from causes considered amenable to healthcare. Some groups of people are more vulnerable than others, and we shall focus closely on those who we know are more likely to be at risk from serious harm. These include those who have cancer, those with serious mental illness, and those with learning disabilities. We shall work to endeavour that neonatal deaths are avoided, where possible. Our overall goal is to have no avoidable deaths and no avoidable patient harm. We shall achieve this by the following means:

- Ensuring that smoking cessation advice and support is available to all who need it;
- Providing support and advice to reduce the harm caused by alcohol misuse;
- We will maintain our status as being one of the safest hospitals in the country by remaining in the top 10% for the lowest standardised hospital mortality indicator;
- Improving the provision of health visitor services;

- We will ensure strong governance structures that support patient safety and develop an organisational culture that promotes patient safety;
- Reducing the number of medication errors;
- Ensuring our staffing levels are safe and appropriate;
- Improving the safety of surgical care through the continuing use of the safe surgery checklist.

## 2. Enhancing quality of life for people with long term conditions

As an integrated care organisation we are well placed to develop models of care that transcend traditional care boundaries and offer more opportunity for service users and the public to be cared for in a way that is more acceptable to them, at a time and a place that is appropriate and enables people to live more independent lives. Looking at the way people are treated and improving care pathways is one way in which we intend to meet this objective. We will work hard to prevent ill health in our local population and work with GPs, dentists, schools and health visitors, local authorities and independent sector organisations to enable us to achieve this goal.

More specifically we will focus on the following:

- Improving the access to health services for hard to reach groups;
- Using integration of services to improve care pathways;
- Agreeing and defining quality metrics for each of our services so we know when we are improving;
- To identify and act on early signs of deterioration of patients in our care;
- Ensuring that service users receive care at the right time, in the right place;
- Introducing 5 new care pathways that reflect the integrated care principles each year;
- Keeping patients in our care well nourished and hydrated;
- Agreeing CQUINS (financial incentives) with our commissioners that are most able to help us achieve effective care;
- To support and promote the initiation of breast feeding;
- Increasing the number of patients that have the opportunity to take part in clinical research and clinical trials of new treatments;
- Delivering interventions based upon the best possible evidence.

### 3. Helping people to recover from episodes of ill health or following injury

Wherever possible, we aim to ensure that service users are not admitted to hospital unnecessarily and that re-admission rates following discharge are avoided. We shall work to improve recovery from illness such as stroke and fractures that occur due to older age, and reduce length of stay for those who receive treatment for elective procedures such as hip and knee replacement and hernia repair. To ensure that we meet this objective we shall focus on the following:

- Reducing length of stay and re-admission rates for people with long term conditions;
- To improve the quality and outcome for service users with a fractured neck or femur and fragility fractures;
- Working to improve outcomes from planned procedures using PROMs for elective hip replacements, knee replacements and groin hernia;
- Introducing 7/7 working to avoid wasted days for service users in hospital;
- Improving recovery for elderly people (proportion of elderly people who are still at home 91 days after discharge from intermediate care);
- Improving access to primary care services.

### 4. Ensuring that people have a positive experience of care

We understand that the experience of healthcare for service users is dependent on the relationships they foster with health professionals. Part of providing a high quality service ensures that service users have trust and confidence in us and that they experience kind, compassionate and competent care and treatment. We aim to improve the experience of service users:

- Improve the way we communicate and ensure that respect, dignity and compassion are at the heart of our relationships with service users;
- Improve the ways in which we communicate with each other, from service to board, from an individual to a whole systems level;
- Provide appropriate, kind and effective care for those with learning and communication disabilities;
- Ensure that we are responsive to inpatients personal needs;
- Listen to concerns and complaints, ensuring that we respond, act upon and learn from them;
- Improve people's experience of outpatient care;
- Reduce the number of appointments that are cancelled;
- Reduce waiting times for Emergency Department care;
- Improve women's and families experience of maternity care;
- Provide better care for people at the end of their lives;
- Improve the experience of care for people with mental illness;
- Ensure all staff have received appropriate training in equality and diversity issues and customer care.

## 5. Treating and caring for people in a safe environment and protecting them from avoidable harm

We are committed to ensuring that service users are cared for in surroundings which are clean, by caring and competent staff. We shall actively work towards avoiding harm to our patients through continually reducing the number of healthcare acquired infections and reducing the incidence of other health related conditions that can happen as a result of hospital or hospital at home care.

- We will work to continuously reduce our incidence of healthcare related infections;
- We will ensure close scrutiny of all in hospital deaths to ensure learning is achieved where possible;
- We will reduce the number of patient falls and the harm associated with patient falls by 25% to achieve the top decile of national benchmarked data;
- Continue to reduce pressure ulcers year on year;
- Reduce the incidence of VTE;
- Reduce medication errors across the ICO.

### Measurement

In order to know whether we have been successful in achieving this strategy, robust and ambitious targets will be set against each of our strategic objectives. These will be agreed with the service leads, divisional leads and the quality committee, a sub-committee of trust board. One of the ambitions of Whittington Health is provide seamless healthcare across traditional healthcare boundaries: therefore, the metrics that are agreed to support the delivery of this strategy will ensure that this ambition can be captured and performance measured from a perspective of integration.

### Monitoring and reporting

Under the Health Act 2009 and the NHS Quality Account regulations 2010, Directors of health trusts are required to prepare Quality Accounts for each financial year. Each year, our Quality Account priorities will reflect the priorities in this quality strategy. Selection of the priorities each year will be achieved through reviewing a combination of trust performance data, national benchmarking, incidents and complaints and consultation with internal and external stakeholders. The Quality Account will report performance against these objectives using agreed metrics.

# Governance

As well as the specific areas in the quality domains identified in this strategy, the performance of Whittington Health against national quality standards shall be evidenced through internal and external mechanisms such as the Quality Dashboard, performance against our CQUINs, outcomes of CQC inspections and effective and robust clinical governance structures including the management of risk.

Each of the divisions shall produce a quality report with agreed quality objectives as part of their annual work plans and shall report to the Quality Committee, a sub-committee of Trust Board. The Board has ultimate responsibility for the delivery of this strategy.

# Clinical audit

Audit is an important means of ensuring continuous improvement in the quality and effectiveness of care. The Trust will continue to produce an annual audit programme which is driven by national, local and internal priorities. Each division will have an agreed audit programme and will be required to report on progress in line with the Whittington Health audit policy. The programme will support the quality agenda and review of clinical performance. Progress with the programme will be monitored through the divisional boards and the Quality Committee . There is a clinical audit strategy for the organisation and a clinical audit policy that sets out roles and responsibilities as well as the strategic direction of clinical audit within the ICO. Implementation of both the strategy and the policy is monitored by the Audit and Effectiveness Committee.

# Drivers

## Accurate measurement

Quality metrics around our strategic goals shall be agreed by the Quality Committee, a sub-committee of the Board, in consultation with the clinical leads and Divisional Medical Directors, shall reflect the aspiration and vision of this strategy, and be monitored through the Quality Committee. Whittington Health aims to be performing in the top decile nationally, in terms of the delivery of safe, effective and compassionate care. Improvements in data capture and coding will be central in ensuring that we are able to demonstrate where the greatest improvements have occurred and will constitute a broad objective of this strategy. Clinical audit will also provide an important mechanism for ensuring that the gold standard is being achieved internally, and the Quality Account will provide an annual report of our achievements. Quality and safety indicators nationally will provide opportunities for triangulation of internal data and outcome measures. Appendix 2 identifies these external measures, which will be used in order to provide evidence of performance and improvement.

## Leadership and Safety Culture

High performing organisations recognise the importance of continuous quality improvement as an essential driver in achieving their organisational goals. Strong leadership is needed from service to board with clear, well-communicated organisational values that are shared and owned by all staff within the organisation. A commitment to developing leadership at all levels within the organisation will support the delivery of this strategy through inspirational and transformational leadership at all levels. The workforce strategy details the investment that has been placed in ensuring that aspiring leaders receive the right training and development opportunities to empower them to make sustainable changes that make a difference to service users.

A desire to ensure the safety of our patients is a primary organisational value of Whittington Health and is everybody's business.

## Research and Innovation

Implementing the Quality Strategy for Whittington Health will require our staff to work in new and innovative ways. We shall build a culture of continuous improvement throughout the organisation, investing in our staff to enable them to achieve quality improvements through 'small tests of change' right through to large scale research and innovation projects of national and international significance. We shall sustain and build upon links with our academic partners and invest in building capability and capacity within our workforce to lead and be part of translational research and innovation to drive productivity and efficiency as well as empower us with the knowledge needed to understand the health requirements of our population. This aspiration shall be articulated in our emerging ICO research and innovation strategy.

## Preparing the workforce

A well-trained, highly motivated workforce is needed to ensure the delivery of the quality objectives. As well as highly competent practitioners giving the best available evidence-based care, service users value friendly compassionate staff, and these qualities have a significant impact on how people rate our services. Excellent communication is central to staff being able to demonstrate these qualities, and this quality strategy articulates the organisational commitment to ensuring that staff are suitably prepared with the right skills to support service users through their health care experience.

Whittington Health aspires to being an organisation which is committed to life-long learning, and in return for the investment placed in the development of staff, we will also ensure that, through appraisal and other mechanisms such as medical revalidation, staff are held to account for their performance but also rewarded for excellence and recognised appropriately for exceptional practice.

We shall continue to value the contribution made by students of the healthcare professions to the quality agenda, particularly in relation to the latest advances in knowledge, standard setting and the joint learning that arises from aspiring to be a centre of excellence for both medical and nursing education.

## Risk assessment

The Board Assurance Framework (BAF) and the Trust Risk Register provide assurance to the Board that risks to patient safety, reputation and quality are appropriately managed in a timely way. There is a clear and dynamic process for the management of risk in the organisation and both the BAF and the Risk Register are regularly reviewed to ensure that appropriate preventative and corrective action have been taken. Whittington Health will continue to work to instil a culture of reporting, to ensure that the board, the divisions and individuals manage risk to people who use our services successfully.

We shall ensure that our staffing levels are safe and appropriate for the delivery of high quality services and that any changes to staffing are risk assessed to ensure that quality is not compromised at the expense of financial pressures.

## Public and patient involvement and engagement

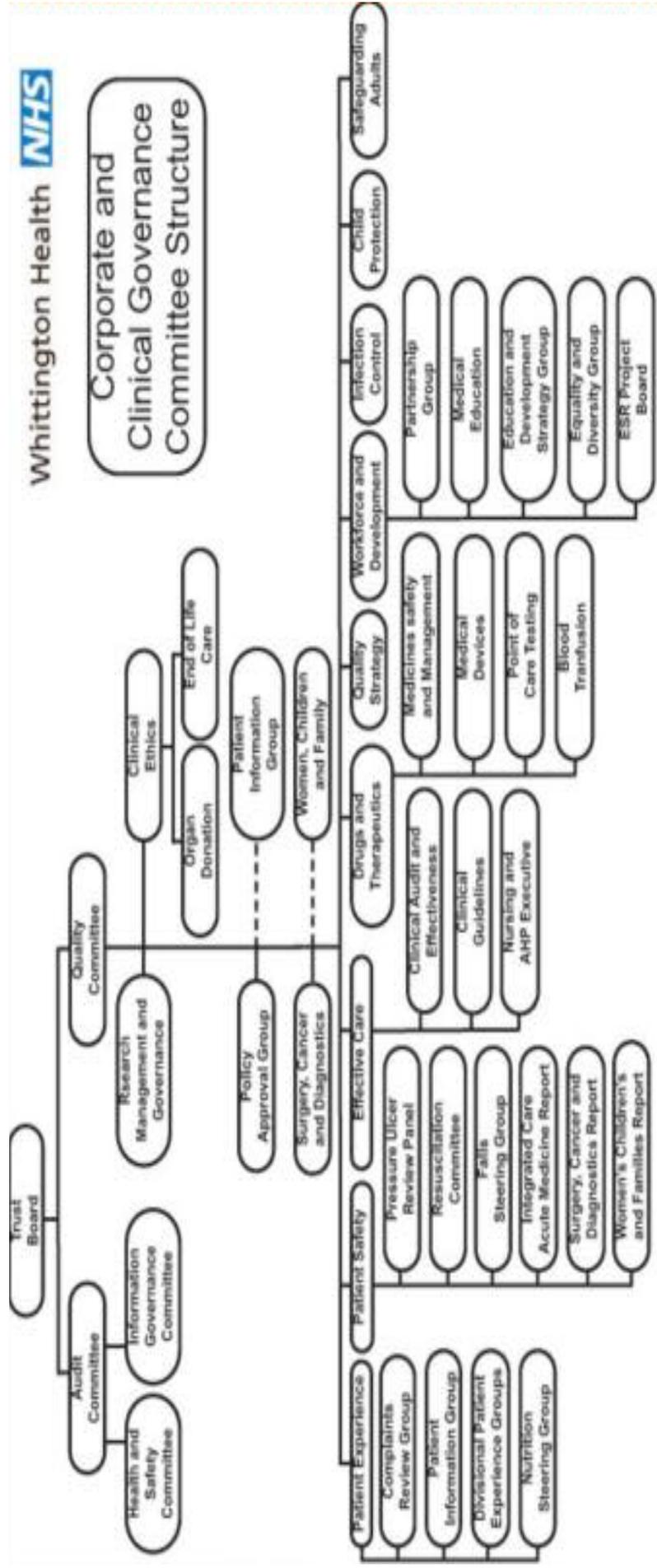
This strategy shows our commitment to developing and providing quality care and sets out our plan for ensuring that Whittington Health becomes an organisation of continual improvement that strives for excellence in everything that it does. We cannot achieve this without genuine, open consultation with our community and commissioners to ensure that our vision for quality is unified and shared.

Consultation with Public and staff about this strategy has already begun and signals our commitment to listening to those who use our services. Feedback from patients is obtained through a number of internal and national mechanisms such as the national patient survey and internal patient surveys. Complaints and compliments, and incidents and risks are monitored to ensure that we are capturing areas of concern for our population. A series of workshops for staff and service users will be planned to launch this strategy to ensure continued ownership but also to validate the objectives that we have identified.

# Appendix



# Appendix 1 Corporate and clinical governance committee structure



# Appendix 2. Improvement measures: Indicators that will be used to measure performance within the

1. ~~Identifying~~ people from dying prematurely

2. Enhancing quality of life for people with long term conditions

3. Ensuring that people have a positive experience of care

4. Helping people to recover from episodes of ill health or following injury

5. Treating and caring for people in a safe environment

Under 75 mortality rate from cardiovascular disease	Health related QOL for people with long term conditions	Patient experience of primary care. GP services; out of hours and NHS dental services and patient experience of hospital care	Emergency admissions for acute conditions that should not usually require admission	Patient safety incident reports
Under 75 mortality rate for respiratory disease	Proportion of people feel supported to manage their condition	Patient experience of out-patient care	Emergency re-admission within 30 days of discharge	Safety incidents involving severe harm or death
Under 75 mortality rate for liver disease	Employment of people with long term conditions	Responsiveness to inpatients personal needs	PROMs for elective procedures	Reducing incidence of avoidable harm: Incidence of VTE rates, Incidence of HCAI (MRSA and C Diff) and 4 pressure ulcers Incidence of medication errors causing serious harm
1 and 5 year survival from colorectal cancer	Time spent in hospital by people with long term conditions: Unplanned hospitalisation for chronic ambulatory care sensitive conditions in adults Unplanned hospitalisation for asthma, diabetes and epilepsy	Patient experience of A and E services	Emergency admission for children with LRTI	Admission of full term babies to neonatal care
1 and 5 year survival rate from breast cancer	Health related quality of life for carers	Access to GP and dental services	Improving recovery from injuries and trauma (indicator being developed)	Incidence of harm to children due to 'failure to monitor'
1 and 5 year survival rate from lung cancer	Employment of people with mental illness	Women's experience of maternity care	Recovery from stroke-an indicator being derived from proportion of patients who report an improvement in activity/lifestyle on the Modified Rankin Scale at 6 months	
Excess under 75 mortality rate in adults with serious mental illness	Enhancing quality of life for people with dementia	Improving access to primary care	Fragility fractures: the proportion of patients recovering to their previous level of mobility/walking ability at 30 days and 120 days	
Infant mortality rates		Experience of care at the end of life-indicator being developed-survey of bereaved carers	Independence following illness in older people: those 65 and over still at home 91 days after discharge into rehabilitation and those offered rehabilitation after discharge	
Neo-natal mortality rates		Patient experience of community mental health services		

# Whittington Health Quality Drivers



# References

## Reference List

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