

Board Meeting
28 November 2018

NHS Lanarkshire
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SUBJECT: QUALITY ASSURANCE AND IMPROVEMENT

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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The purpose of this paper is to provide NHS Lanarkshire Board with an update on the Lanarkshire Quality Approach and on progress with quality initiatives across NHS Lanarkshire.

2. ROUTE TO THE BOARD

The content of this paper relating to quality assurance and improvement initiatives has been:

Prepared	<input type="checkbox"/>	Reviewed	<input checked="" type="checkbox"/>	Endorsed	<input type="checkbox"/>
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by the Executive Medical Director and Executive Director of NMAHPs.

3. SUMMARY OF KEY ISSUES

NHS Lanarkshire is committed to delivering world-leading, high-quality, innovative health and social care that is person-centred. Our ambition is to be a quality-driven organisation that cares about people (patients, their relatives and carers, and our staff) and is focused on achieving a healthier life for all. Through our commitment to a culture of quality we aim to deliver the highest quality health and care services for the people of Lanarkshire.

NHS Lanarkshire's Quality Strategy 2018-23 was approved by the Board in May 2018. Within it are four NHS Lanarkshire Quality Plans 2018-2023.

The paper provides an update on the following areas:

- Our work on NHS Lanarkshire Quality Plans 2018-23:
 - Person-centred Care Plan
 - Enabling Safety Plan
 - Effective Care Plan
 - Quality Improvement Capacity & Capability Building Plan
- Hospital Standardised Mortality Ratio (HSMR): April-June 2018
- Annual Report on Bereavement Care 2017/18
- IHI/BMJ International Forum on Quality and Safety 2019

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate Objectives	<input checked="" type="checkbox"/>	LDP	<input checked="" type="checkbox"/>	Government Policy	<input checked="" type="checkbox"/>
Government Directive	<input checked="" type="checkbox"/>	Statutory Requirement	<input type="checkbox"/>	AHF/Local Policy	<input type="checkbox"/>
Urgent Operational Issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

We will measure the progress we make towards our aim of delivering the highest quality health and care services for the people of Lanarkshire against the strategic priorities identified in the Quality Strategy and the Measures of Success contained within the associated Quality Plans.

7. FINANCIAL IMPLICATIONS

No financial implications are identified in this paper.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The Healthcare Quality Assurance and Improvement Committee oversee a corporate risk with controls in relation to achieving the quality and safety vision for NHS Lanarkshire. Corporate Risk 1492 - Consistent provision of high quality care, minimising harm to patients - is rated as Medium.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability	<input type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

An E&D Impact Assessment has been completed

Yes For the Quality Strategy 2018-23.
No

11. CONSULTATION AND ENGAGEMENT

The NHS Lanarkshire Quality Strategy 2018-23 was approved by the Healthcare Quality Assurance and Improvement Committee and the NHS Board in May 2018.

12. ACTIONS FOR THE BOARD

The Board is asked to:

- Note the range of work throughout NHS Lanarkshire to improve the quality and safety of care and services;
- Endorse the governance approach to this work and in particular the assurance being provided by the Healthcare Quality Assurance and Improvement Committee; and
- Support the ongoing development of the Lanarkshire Quality Approach.

Approval	<input type="checkbox"/>	Endorsement	<input checked="" type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	

13. FURTHER INFORMATION

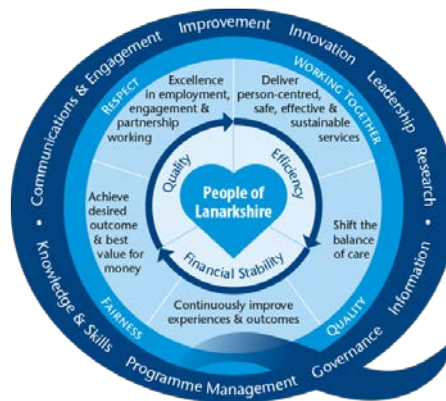
For further information about any aspect of this paper, please contact Marjorie McGinty, Interim Director of Quality. Telephone: 01698 858100.

Dr Jane Burns
Medical Director

QUALITY ASSURANCE AND IMPROVEMENT

1. LANARKSHIRE QUALITY APPROACH

- 1.1 NHS Lanarkshire is committed to delivering world leading, high quality, innovative health and social care that is person-centred. Our ambition is to be a quality-driven organisation that cares about people (patients, their relatives and carers, and our staff) and is focused on achieving a healthier life for all. Through our commitment to a culture of quality we aim to deliver the highest quality health and care services for the people of Lanarkshire.



- 1.2 We are committed to delivering **person-centred, safe, effective and sustainable services** in line with the NHS Scotland Quality Strategy.
- 1.3 Progress on this work is being monitored by the Healthcare Quality Assurance and Improvement Committee.

2. QUALITY STRATEGY

- 2.1 The **Lanarkshire Quality Approach** and the principles and objectives set out in the Quality Strategy underpin the Achieving Excellence Strategic Delivery Plan which is the organisation's overarching plan to deliver the Healthcare Strategy. In addition the Quality Directorate has developed four specific plans (Person-centred Care, Safety, Clinical Effectiveness and Building Quality improvement (QI) Capacity and Capability) to support the delivery of our underpinning quality ambitions to deliver person-centred, safe and effective care. These plans were presented to the Healthcare Quality Assurance & Improvement Committee for endorsement at its meeting on 13th September 2018.
- 2.2 Each of these plans describes our ambitions within each of the domains and sets out NHS Lanarkshire's priority areas for delivery over the next 5 years. In addition, detailed Implementation Plans 2018/19 are in place for each of the plans which are reported to the Healthcare Quality Assurance and Improvement Committee.

2.3 Person-centred Care Plan

- 2.3.1 Our ambition for person centered care is that it is a central component in improving health and care services. To do this, we need to ensure that services are re-orientated to be user-focused; to promote control, independence and autonomy for the patient and their carers and family; to provide choice; and be based on a collaborative team philosophy.

2.3.2 Our Person-centred Care priorities are:

- **Patient Experience**

We are committed to ensuring that Patient Experience demonstrates further improvements year on year. We will continue to promote Care Opinion across the organisation, improve the level of attainment against national Participation Standards and continue to develop and learn from feedback mechanisms and systems designed to capture patient, family and carer experience. Our focus will be on understanding ‘What Matters to Me’ from a patient and carer’s perspective and implementing changes as a result. NHS Lanarkshire is leading the way in Scotland on the use of Care Opinion as a means of encouraging and listening to patient experience.

- **Realistic Conversations**

To support realistic conversations and shared decision making there will be a focus on Anticipatory Care Planning, Hospital Anticipatory Care Plans/Treatment Escalation Limitation Plans and testing and implementing ‘5 Questions for Patients’.

- **Supporting Staff**

There is increasing evidence that supporting staff to increase their resilience at work and reduce the impact of ‘burnout’ can have a significant impact on patient care. It can increase patient experience as well as improving patient safety, reducing workplace accidents and increasing productivity.

Joy in Work is about connection to meaning and purpose – reducing burnout and increasing resilience. The Institute of Healthcare Improvement has developed a White Paper: IHI Framework for Improving Joy in Work and a virtual training course on finding and creating joy in work. A range of clinical and improvement staff are developing improvement initiatives to implement learning from this virtual training in NHS Lanarkshire.

Psychological safety is providing the culture where staff feel able to speak up about any concerns or learning needs they may have.

Testing the use of a Psychological Safety Questionnaire has been carried out with the NMAHP workforce and is currently being evaluated. It is anticipated that this approach will also be used with medical staff to further develop a culture of psychological safety within NHS Lanarkshire.

2.4 Enabling Safety Plan

2.4.1 Our ambition is to be the safest health and social care system in Scotland. Our vision for safety is that:

- There will be **no avoidable deaths**.
- We will deliver **harm free care**.
- Will develop **a sustainable safety culture**.

2.4.2 Our Safety priorities are:

- **Preventing Avoidable Deaths**

Preventing avoidable deaths is a multifaceted challenge and a key strategic priority for NHS Lanarkshire. The majority of deaths are inevitable due to the condition of the patient. However, some deaths can be prevented by improving care and treatment or by avoiding harm.

Hospital Standardised Mortality Ratios (HSMRs) allow acute hospitals to monitor progress in reducing these potentially preventable deaths. A new aim has been agreed by the Scottish Government and was announced in June 2016. This has been set as a 10 % reduction in HSMR by December 2018. A number of work programmes will drive the organisation towards this goal.

- **Reduction in Harm**

Further reductions in harm from Falls, Deterioration and Medicines have been identified as priorities and work programmes have been developed and implemented to ensure delivery against targets that will be agreed during 2018/19. A pan Lanarkshire Falls Prevention Group is developing a Falls Strategy for NHS Lanarkshire based on the recently published National Falls Strategy. A Medicines Quality Strategy is being developed at present which will provide direction and guidance on the storage, prescribing, dispensing and administration of medicines. Improvement work in NHS Lanarkshire on Sepsis, Acute Kidney Injury and Cardiac Arrest have been highlighted nationally as areas of good practice.

- **Safety Essentials**

The Ten Safety Essentials set out by the Scottish Government (CEL19 2013) continue to be implemented to deliver these measures reliably and consistently to all patients who could benefit. These Safety Essentials will continue to form a key part of our safety programme.

2.5 Effective Care Plan

2.5.1 Our ambition for effective care is that the most appropriate treatment, interventions, support and services will be provided at the right time to everyone who will benefit, and that wasteful or harmful variation will be eradicated.

2.5.2 Our Clinical Effectiveness priorities are:

- **National and local evidence, guidelines and standards**

We continue to develop and implement a programme plan for Clinical Audit that will ensure that data gathered through NHS Lanarkshire's participation in local and national clinical audit programmes are reported, analysed and acted upon as appropriate and that the knowledge thus gained is regularly disseminated to monitor and improve quality, and performance of the organisation.

- **Clinical and Care Pathways**

We continue to work to develop clinical and care pathways that, rather than being traditional guidelines, are an agreement between primary and specialist services on how patients with particular conditions will be managed in the local context.

- **'Real' evidence based medicine**

While evidence-based guidelines will continue to inform the management of people with complex, interrelated conditions, we will implement an approach to guideline implementation that makes the ethical care of patients the top priority. Guideline will provide individualised understandable evidence for clinicians and patients, will incorporate expert judgment rather than simply 'following the rules', and will ensure shared decisions with patients.

2.6 Quality improvement (QI) Capacity and Capability Building Plan

2.6.1 NHS Lanarkshire is committed to establishing a connected infrastructure that supports the organisation to deliver on its ambition of putting quality at the heart of the organisation. One of the components of this infrastructure is the need to develop capacity and capability in quality improvement science which will ensure that we have people who are skilled, knowledgeable and empowered to make improvements where they work.

2.6.2 Quality Improvement educational programme for individuals and for teams continue to be delivered by the Quality Directorate with 7 cohorts of staff (225 staff) trained in improvement science to date.

3. HOSPITAL STANDARDISED MORTALITY RATIO (HSMR)

3.1 The Scottish Patient Safety Programme's **aim is to reduce hospital mortality by 10% by the end of December 2018.**

3.2 HSMR data for April - June 2018 were published on 13th November 2018. The Scottish HSMR for April - June 2018 is 0.81 which represents an 11.2% reduction. The HSMR for NHS Lanarkshire's hospitals for the same time period range from a **reduction of 14.5% - 29%** and are shown below:

	Scotland		NHSL		Hairmyres		Monklands		Wishaw	
	Crude Mortality	HSMR	Crude Mortality	HSMR	Crude Mortality	HSMR	Crude Mortality	HSMR	Crude Mortality	HSMR
January to March 2017	3.1	0.93	3.3	0.88	3.7	0.89	3.5	0.87	2.9	0.87
April to June 2017	2.8	0.87	2.8	0.8	3.4	0.86	2.9	0.76	2.3	0.77
July to September 2017	2.8	0.86	2.8	0.76	3.5	0.88	3.0	0.74	2.2	0.69
October to December 2017	3.3	0.95	3.5	0.88	3.7	0.83	4.0	0.92	3.0	0.89
January to March 2018	3.3	0.94	3.4	0.87	3.4	0.82	3.7	0.92	3.1	0.88
April to June 2018	2.6	0.81	2.7	0.78	3.2	0.80	2.7	0.78	2.4	0.77
% change	-11.2%		-22.4%		-14.5%		-16.9%		-29.0%	

Detailed charts for each of the acute sites are included in Appendix 1.

3.3 HSMR remains the Board's high level indicator of the quality and safety of care provided on our acute hospital sites. It is monitored on a quarterly basis and reported regularly via the Integrated Corporate Performance Dashboard to the Planning, Performance & Resources Committee, and in the Quality Report to the Healthcare Quality Assurance & Improvement Committee.

4. BEREAVEMENT CARE GROUP ANNUAL REPORT

4.1 The Bereavement Care Group has met on 5 occasions (18th May, 18th July, 22nd September, 29th November, 25th January 2018) and has examined Bereavement Care issues relating to the need for ongoing relevant education (both for staff and the people who live and work in Lanarkshire); the need to ensure appropriate environments are provided which may impact on the provision of Bereavement Care; and finally that the correct systems, processes and infrastructure are in place to support the best possible delivery of care to those who are bereaved.

4.2 The remit of the Bereavement Care Steering Group is to ensure that Bereavement Care is delivered in line with the national standards across NHS Lanarkshire.

4.3 The main areas of work programme/activity of the Bereavement Care Steering Group during 2017/18 has been to develop care delivery in line with the national standards for Bereavement Care as well as ensuring NHS Lanarkshire care is influencing the national bereavement care agenda.

- 4.4 The main areas of work of the Bereavement Care Steering Group were revised for 2017/18 and this covered the following key areas for development:
- Education
 - Systems, Processes and Infrastructure
 - Environmental issues
- 4.5 Achievements and progress of the Bereavement Care Steering Group during 2017/18 are summarised as follows:
- Development of a detailed work plan – July 2017.
 - Implementation of the End of Life Care clinical records to support end of life care
 - Development of a maternity bereavement suite within the reconfigured Maternity Services.
 - A new Bereavement Care Answer Service – any calls to this service are followed up by the Spiritual Care and Wellbeing Team.
 - The inclusion of a ‘With Sympathy’ card in the Bereavement pack issued following a death. The Bereavement Care Answer Service details are on the back of the card.
 - An updated and revised edition of the “Following a Bereavement” booklet which is issued to the next of kin following a death.
 - A pilot of an Improving Support for Bereaved Families discussion available with the Consultants in Older People’s Services in University Hospital Monklands.
 - Ongoing delivery of the educational workshop ‘Death: Addressing The Great Taboo’ across NHS Lanarkshire (Over 50 of these workshops have now been delivered).
- 4.6 The impact of the work of the Bereavement Care Steering Group during 2017/18 has been monitored during the year and can be evidenced by the following examples:
- The initial 50 “Addressing the Great Taboo” educational workshops were concluded (delivered over 2 years). There were a total of 1,168 attendees. 701 returned evaluation sheets (60%). A summary report is available. In general people found the sessions very interesting (65%) and over 80% of those who responded requested more training in the area of bereavement care and supporting people during these difficult times. A further 30 workshops have been funded over the next two years 2018-20.
 - Full implementation of the Record of End of Life Care across in patient services.
 - Support of the National Launch of the Anticipatory Care Plan in Lanarkshire.
- 4.7 Further Work Plans of the Bereavement Care Steering Group during 2018/2019 are summarised as follows:
- Work with partnership organisation to support ongoing education around death and dying.
 - Introduction of a Bereavement Care Questionnaire to capture feedback from bereaved relatives about how NHS Lanarkshire have supported them.
 - Expansion of the Support for Bereaved Families across the three acute sites.
 - Establish an improved and consistent mechanism for bereavement care record keeping
 - Continue to collaborate with the Anticipatory Care Plan initiatives as this will have an impact on how people prepare for grief and loss.
 - Contribute to improvement initiatives around the Death Certification process.

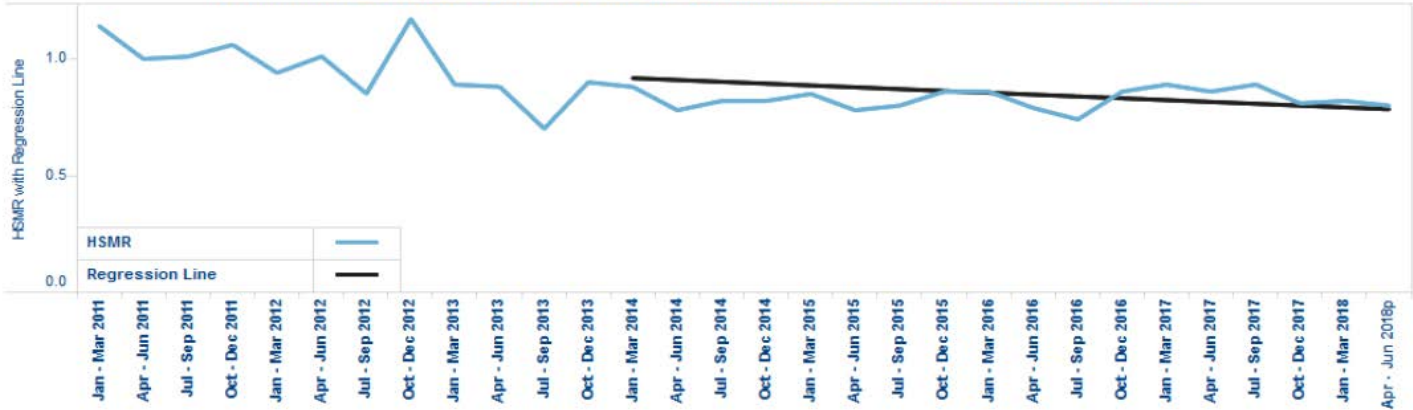
5. IHI/BMJ International Forum on Quality and Safety in Healthcare 2019

- 5.1 The IHI/BMJ International Forum on Quality and Safety in Healthcare is a biannual gathering of healthcare professionals in quality improvement and patient safety, now in its 24th year.
The International Forum supports and energises the movement for healthcare improvement and connects healthcare leaders and practitioners worldwide to improve outcomes for patients and communities.
- 5.2 Scottish Government are one of the IHI's Strategic Partners and Glasgow has been chosen to host the conference which is being held on 27-29th March 2019. This is a great opportunity to showcase Quality Improvement work being carried out in Scotland in the NHS and beyond.
- 5.3 The first day of the conference is an Experience Day which allows delegates to choose to attend one of a range of Experience Day visits hosted by organisations within the host country. This year NHS Lanarkshire has been invited to host delegates for an "Experience Day" on the 27 March. The experience days are an opportunity for delegates to see first-hand Quality Improvement work being carried out on the front line of healthcare organisations.
- 5.4 The Experience Day visit will accommodate between 60 and 100 delegates visiting various locations across NHS Lanarkshire. Detailed joint planning for the day has started between the Quality Directorate and Scottish Government.

HSMR April - June 2018

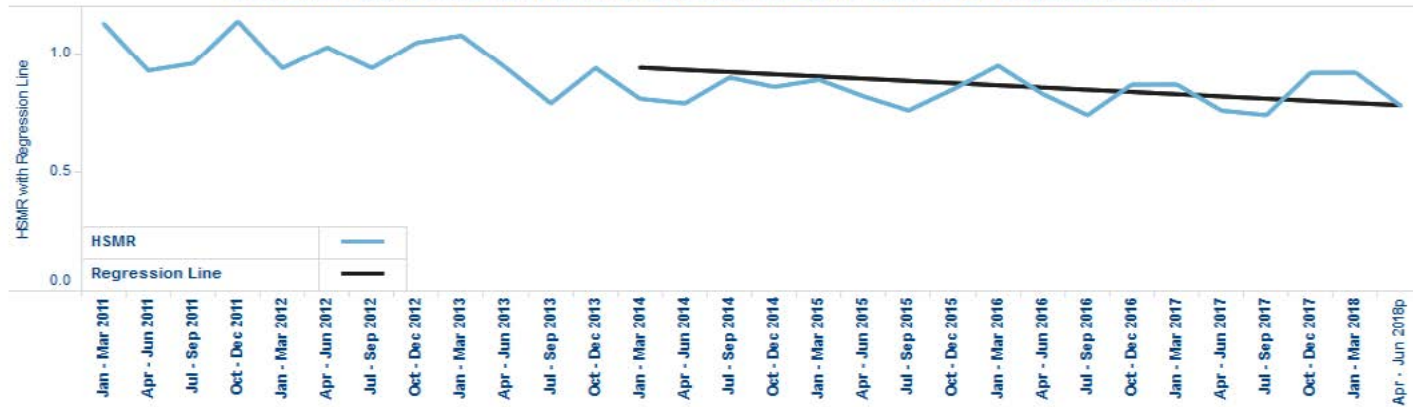
Crude Rate (%)	HSMR	Change in HSMR (%)
Apr - Jun 2018p 3.2	0.80	-14.5

HSMR with Regression Line (within 30 days of admission) - University Hospital Hairmyres



Crude Rate (%)	HSMR	Change in HSMR (%)
Apr - Jun 2018p 2.7	0.78	-16.9

HSMR with Regression Line (within 30 days of admission) - University Hospital Monklands



Crude Rate (%)	HSMR	Change in HSMR (%)
Apr - Jun 2018p 2.4	0.77	-29.0

HSMR with Regression Line (within 30 days of admission) - University Hospital Wishaw

