

## **Consultation Paper – Quality Priorities 2019/20**

### 1. Introduction

Every Quality Report must contain our priorities for improvement, to be achieved in the following year. These priorities are taken from the three dimensions of quality as set out by Lord Darzi in the 2008 publication "High Quality for all". These are:

- Improving patient safety;
- Improving clinical outcomes; and
- Improving patient experience

These priorities are selected on the basis of feedback from the people we care for, our stakeholders and our staff. There is also a requirement to publish our performance against NHS Improvement core indicators.

Once at least 3 priorities from each dimension have been selected a SMART measure will be identified that will allow the Trust to monitor our progress against the priorities. The monitoring and the review of the overall achievements will be the remit of the Quality Committee. The results will be reported in the 2019/20 Quality Report and Account.

The proposed priorities have been mapped to the trusts strategic intentions for 2019/20 to ensure we have a clear thread from the organisational strategy to operational service delivery. This aims to streamline the number of differing requirements placed on staff while delivering the key improvements we all agree are required for our people and our patients. We would value your views on the proposed quality priorities to enable us refine and conclude the final selection.

# Potential Quality Priorities 2019/20 and the rationale for inclusion

Patient safety (We are safe)

Suggested priorities	Rationale for inclusion
Human factors Enhance clinical performance through an understanding of the effects of teamwork, tasks, equipment, workspace, culture, and organisation on human behaviour and abilities	The principles and practices of Human Factors focus on optimising human performance through better understanding the behaviour of individuals, their interactions with each other and with their environment. By acknowledging human limitations, Human Factors offers ways to minimise and mitigate human frailties, improving patient safety. More broadly, Human Factors techniques can be used to inform quality improvement in teams and services, support change management, and help to emphasise the importance of the design of equipment, processes and procedures. <sup>i</sup> Aligns to Trust priorities – Quality Improvement, Prevention
Deteriorating patient – NEWS 2 Utilise NEWS 2 for detecting patients at risk of clinical deterioration or death, prompting a more timely clinical response, with the aim of improving patient outcomes	and Workforce When a deteriorating patient's worsening condition is not clear to clinical staff, it can lead to serious problems, complications, and death. In 2017, the National Reporting and Learning System received 100 reports where deterioration may not have been recognised or acted on and the patient died. <sup>ii</sup> In 2018 a Patient Safety Alert recommendation was published to adopt NEWS 2 (National Early Warning Score) to standardise how adult patients who are acutely deteriorating are identified and responded to, and to streamline communication across the NHS <sup>iii</sup> . Detecting patients at risk of clinical deterioration or death relies on a whole systems approach and the revised NEWS 2, reliably detects deterioration in adults, triggering a more timely clinical response, with the aim of improving patient outcomes. Aligns to Trust priorities – Prevention Supporting the empowerment of people to be active
<b>plan/PCP</b> Utilise personal care plans to work together with patients and their family/carers to understand what is important to the individual, identify support needs, develop and implement action plans, and monitor progress	participants in the planning and management of their own health and well-being ensures that the outcomes and solutions developed have meaning to the person in the context of their whole life. Leading to improved chances of successfully supporting them, and promoting 'living well' and healthy choices at every opportunity. Aligns to Trust priorities – Prevention
Falls Continue to work on falls prevention through reviewing best practice, national and local guidance and to share ideas and innovation	Falls represent the most frequent and serious type of accident in people aged 65 and over and can cause serious injury and increased care costs. Research has shown that falls can be reduced by introducing assessments and interventions. For KCHFT in 2016-17, there were 17 avoidable falls with harm in community hospitals compared with 10 avoidable falls with harm in community hospitals during 2017-18. Across Kent there were 6,447 hospital admissions for falls in 2017/18 <sup>iv</sup> . Aligns to Trust priorities – Prevention

Patient Experience (We are Caring/Compassionate and Responsive)

Suggested priorities	Rationale for inclusion
Experience based co design	Promotion of the ongoing engagement and involvement of
	people and carers to design services that are personalised,
Continue to find opportunities to	efficient and support greater self-care. Research has shown
involve our patients and carers	that stakeholder engagement supports wider improvements,
in improving care and	including helping to establish a wider culture of patient
redesigning services to support	involvement and facilitating greater and more open team
strategy implementation and	working and better communication across departments,
delivery	clinicians and staff of different grades <sup>v</sup> .
	Aligns to Trust priorities – Quality Improvement and
	Workforce
Capture Patient Feedback/Use	KCHFT is committed to listening to our patients, carers and
	families and is keen to involve them as partners to improve
Capture and understand	our services through driving continuous quality improvements.
patients' and carers'	During 2017-18 KCHFT received 63,912 surveys with an
experiences of services to	overall satisfaction rate of 97%.
develop improvements in care	Aligns to Trust priorities – Local Care and Quality
pathways End of Life Care	Improvement
End of Life Care	The number of bereaved people is growing - the annual
Eurther develop a pathway	number of deaths in England is increasing and is predicted to rise by 20% over the next 20 years <sup>vi</sup> . There is an increased
Further develop a pathway approach from prospective care	emphasis on the requirement to support family and carers
planning to bereavement	with bereavement.
support.	The NHS Long Term Plan also supports the need to introduce
	proactive and personalised care planning for everyone
	identified as being in their last year of life and to be able to
	support people to die in a place they have chosen.
	Aligns to Trust priorities – Local Care and Quality
	Improvement
Dementia	Dementia features strongly throughout the NHS Long Term
	Plan, stating "we will provide better support for people with
Improve patient journey for	dementia through a more active focus on supporting people in
patients with dementia.	the community". Additionally, forecasts show that in the 10
	years between 2016 and 2026, the population of 65-84 year
	olds in Kent is expected to increase by 20.2%, and over 85
	year olds by 24.5% <sup>vii</sup> , resulting in an increased population
	living with dementia.
	Aligns to Trust priorities – Local Care and System Leadership

Clinical Effectiveness (we are Effective/Excellent and Aspirational)

Suggested priorities	Rationale for inclusion
IT & Documentation	Improving the use of technology for staff and the people we care for is a high priority area for the NHS Long Term Plan.
Improve patient information and	Patients, carers, families and staff have higher expectations
methods of communication and	around digital services due to sustained advances in
service delivery	computing, which drive choice and control throughout our daily lives. Technology is continually opening up new possibilities for prevention, care and treatment. Aligns to Trust priorities – Digital
Quality Improvement	Systematic methods of Quality Improvement (QI) provide an
Further development of QSIR	evidence-based approach for improving every aspect of how the NHS operates. Through developing improvement
principles and increase the	capabilities, including QI skills and data analytics, systems
spread of QI projects	will move further and faster to adopt new innovations and
	service models and implement best practices that can
	improve quality and efficiency and reduce unwarranted
	variations in performance. A programme to build improvement
	capability is established in around 80% of the trusts rated 'outstanding' by the CQC <sup>viii</sup> .
	Aligns to Trust priorities – Quality Improvement
Frailty	High priority area in the NHS Long Term Plan, focusing on using proactive approaches to enable earlier detection and
Support the development of	intervention. Alongside the increase in the aging population of
frailty pathways through	Kent and those living with complex conditions, this will
reviewing best practice, national	generate an increased strain on the NHS.
and local guidance and to share	Aligns to Trust priorities – Quality Improvement and Local
ideas and innovation	Care
New models of care	The NHS Long Term Plan sets out how the NHS will move to
Duild on our stress other of	a new service model in which patients get more options,
Build on our strengths of	better support, and properly joined up care at the right time in
innovation by delivering services in a way to meet patient needs.	the optimal care setting. KCHFT has the opportunity of working in partnership CCG's and the STP to develop local
	care and deliver services in a way to meet patient needs.
	Aligns to Trust priorities – Quality Improvement, Local Care
	and Workforce

Staff Experience (we are Caring/Well Led/Responsive and Aspirational)

Suggested priorities	Rationale for inclusion
Workforce development Developing the workforce	As highlighted in the NHS Long Term Plan, the future publication of the national workforce implementation plan will focus on developing the workforce for the future. The Trust's
through consideration of what future teams may need to look like – structure, skill mix and developments of new roles to meet patient need	People Strategy outlines how we build and maintain the culture, capacity and capability required to meet the challenges we face in the years ahead and continue to deliver high-quality patient centred care. Aligns to Trust priorities – Workforce

Improve recruitment and retention	Developing the workforce culture will support in creating a culture of support and appreciation where people are
Create and maintain a culture where people are retained and supported to perform at their best. Health and wellbeing (mental health, flu vacs, MSK)	motivated to perform at their best. As set out in KCHFT's People Strategy, the health and wellbeing of the workforce is really important to the Trust. It is recognised that our staff can only provide high-quality care, if they feel supported in their own health and wellbeing. We also recognise that if our staff are role models of health and wellbeing, they will inspire our patients and their careers and make every contact count. Aligns to Trust priorities – Workforce

## Name of Author of Report - Megan Hare Designation of Author – Head of Quality and Standards Assurance Date – January 2019

#### References

<sup>i</sup> National Quality Board. (2013). *Human Factors in Healthcare*. Retrieved from NHS England: https://www.england.nhs.uk/wp-content/uploads/2013/11/nqb-hum-fact-concord.pdf

<sup>ii</sup> England, N. (2018). Resources to support the safe adoption of the revised National Early Warning Score (NEWS2). Retrieved from https://improvement.nhs.uk/documents/2508/Patient\_Safety\_Alert\_-\_adoption\_of\_NEWS2.pdf

<sup>III</sup> Royal College of Physicians. (2017). *National Early Warning Score (NEWS)* 2. Retrieved from Royal College of Physicians: https://www.rcplondon.ac.uk/projects/outputs/national-early-warning-score-news-2

<sup>iv</sup> And <sup>vii</sup> Observatory, K. P. (2018). *Kent Public Health Observatory: Ageing Well (Older People in Kent Districts)*. Retrieved from https://www.kpho.org.uk/\_\_data/assets/pdf\_file/0018/45261/Older-people-District.pdf

<sup>v</sup> The King's Fund. (2011). *The Patient-Centred Care Project*. Retrieved from The King's Fund: https://www.kingsfund.org.uk/sites/default/files/field/field\_publication\_file/patient-centred-care-project-evaluation-aug11.pdf

<sup>vi</sup> Office of National Statistics (2016) *National Survey of Bereaved People (VOICES): England, 2015.* http://www.ons.gov.uk/peoplepopulationandcommunity/ healthandsocialcare/healthcaresystem/bulletins/nationalsurveyofbereavedpeoplevoices/ england2015#support-for-relatives-friends-or-carers-at-the-end-of-life

viii England, N. (2019). The NHS Long Term Plan. Retrieved from www.longtermplan.nhs.uk