

Quality Strategy: 2017-2020

Liverpool Women's NHS Foundation Trust



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Foreword

Our vision is to be the leading provider of healthcare for women, babies and families. Our Quality Strategy is ambitious and builds on our successes to date.

We aspire to deliver safe and effective care for every patient whilst at the same time ensuring that they are treated with compassion, dignity and respect. The Quality Strategy sets out how we at Liverpool Women's will deliver high quality care by putting patients at the centre of all we do.

Our Quality Goals are:

- Reduce avoidable harm
- Achieve the best clinical outcomes
- Provide the best patient experience

We will focus our attention on projects that will reduce avoidable harm and adult mortality, reduce stillbirths, improve patient experience and make the care that we give to our patients reliable and grounded in the foundations of evidence based care.

To achieve these challenging goals, our people will have to demonstrate unwavering determination and a commitment to quality improvement despite internal and external challenges. We will build on our performance and efficiency to create a culture of continuous quality improvement. Our goal is to become a learning organisation in which every member understands their role in delivering clinical quality and works towards that goal every day.

We will place considerable emphasis on understanding the systems, practices and behaviours that underpin clinical quality, working towards excellence in clinical systems and engaging all of our employees in improvement and learning.

Throughout the lifetime of the Strategy we will annually review and amend our quality indicators, and build on our existing governance and safety infrastructure to drive continuous improvement.

Kathryn Thomson
Chief Executive
Liverpool Women's NHS Foundation Trust

April 2017

Our Trust

Liverpool Women's NHS Foundation Trust was founded on 1st April 2005 continuing the long history of a focus on women's health services in Liverpool dating back to the 1800s. It is this continuing focus on women's health and the wider impact on families and communities that is a fundamental driver for our organisation and our future strategy.

We believe that women's health, and the health of their babies, is a specialist field, so we have brought together an outstanding range of expertise and experience in one organisation here in Liverpool. We are one of only two such specialist Trusts in the UK and the largest specialist women's hospital in Europe.

We provide a wide range of specialist women's services which are accessed at a local, regional, national and international level. We are extremely ambitious for our services and we actively work to build on our reputation for excellence, and grow our services, reputation and influence across the UK and beyond.

Each year the Trust delivers over 8,000 babies, carries out 10,000 gynaecological procedures and cares for 1,000 preterm infants on our Neonatal Unit. Our clinical services have been created and developed in response to the specific needs of the women and their families we serve.

We are constantly striving to improve and innovate for the benefit of the women and families in Liverpool and further afield, and as a result we encourage research and innovation at every level of our organisation.

Trust Board

The Trust Board is responsible for leading the organisation and ensuring the management and governance of the Trust. It is established in order to deliver sustainable, high-quality, person-centred care, support learning and innovation, and to promote an open and fair culture. The Quality Strategy is the resource by which the Trust Board:

- Sets out the definition of quality for the Trust
- Sets out our priorities for developing quality
- Defines our approach to developing a culture of continuous quality improvement in our services
- Defines our approach to assurance and governance of quality at Liverpool Women's

What is our Vision and what are our Aims and Values?

Our Vision

We will be the recognised leader in healthcare for women, babies and their families.

Our Aims – WE SEE

- To develop a well led, capable, motivated and entrepreneurial **W**orkforce
- To be ambitious and **E**fficient and make the best use of available resources
 - To deliver **S**afe services
- To participate in high quality research in order to deliver the most **E**ffective outcomes
 - To deliver the best possible **E**xperience for patients and staff

Our Values – we **CARE** and we **LEARN**

- **C**aring – we show we care about people
 - **A**mbition – we want the best for people
- **R**espect – we value the differences and talents of people
- **E**ngaging – we involve people in how we do things
- **LEARN** – we learn from people past, present and future

The drivers in developing the Strategy

The NHS is well used to challenge and change. In addition to the challenges faced by all healthcare providers of providing high quality services in an environment of increasing demand and patient expectation at a time of financial constraint, the NHS Five Year Plan drives an increased focus on public health to relieve pressure on hospital services. Such a major transition is challenging and required courage, energy and innovation from all within the service at every level.

Locally, we have an eye to the future sustainability of our clinical services in the form of our Future Generations Strategy. We believe the services we provide are important and add value and quality to the lives of women and their families. For that reason we are actively planning our future and working closely with our colleagues in commissioning and across the healthcare sector to find the best way forward to ensure continuing focus on women's services in Liverpool.

In developing the Quality Strategy nine key themes of focus were identified under 3 overarching priorities. These themes emerged through discussion with our staff, our patients & their families, and other stakeholders and were felt to be integral to the delivery of the Trust's overall vision of being the leading healthcare provider for women, babies & their families.

In reviewing the progress of the previous Strategy, it is recognised that whilst significant progress has been made in enhancing quality improvement within the Trust further efforts are required. In maintaining the 3 overarching priorities the Trust recognises that they remain relevant and important but with the nine key themes allowing for specific key areas of focus for the future Strategy.

Part of keeping this strategy live will include holding stakeholder events for both staff and our external stakeholders. We are committed to continuously engaging commissioners, service users and staff to both hold us to account against delivery of our priority areas and help us identify new areas for each year of the strategy.

Our definition of quality

The NHS, since the publication of High Quality Care for All in 2008, has used a three-part definition of quality. NHS England describes this as:

'The single common definition of quality which encompasses three equally important parts:

- Care that is **clinically effective** - not just in the eyes of clinicians but in the eyes of patients themselves;
- Care that is **safe**; and,
- Care that provides as positive an **experience** for patients as possible.

High quality care is only being achieved when all three dimensions are present- not just one or two of them. And when we strive for high quality care, we must do so for everyone, including those who are vulnerable, who live in poverty and who are isolated. By seeking to deliver high quality care for all, we are striving to reduce inequalities in access to health services and in the outcomes from care.'

Priorities for 2017-2020

With High Quality Care for All at the centre of our definition of quality, the priority areas for clinical quality improvement at Liverpool Women's are aligned to these three essential dimensions. They are:



Reduce Avoidable Harm

Safety is of paramount importance to our patients and is the bottom line for Liverpool Women's when it comes to what our services must be delivering.

Key Themes

Learning from incidents

Sepsis

Unplanned Admissions & Readmissions



Achieve the best clinical outcomes

Effectiveness is providing the highest quality care, with world class outcomes whilst also being efficient and cost effective.

Key Themes

Adult mortality

Neonatal mortality & Stillbirth reduction

Quality Standards/Indicators



Provide the best Patient Experience

Our patients tell us that the **experience** they have of the treatment and care they receive on their journey through the NHS can be even more important to them than how clinically effective care has been.

Key Themes

Health and Wellbeing

Engagement

Learning from Experience

Monitoring & Reporting

The GACA Committee is responsible for providing assurance to the Board of Directors that the Trust is managing the quality of patient care, the effectiveness of clinical interventions, patient experience and patient safety. The Committee will review the quality goals at its meetings to ensure that progress is being made in relation to the key areas for improvement.

Operational Committees within the Trust will also provide specialist advice and monitoring for their dimension (see table below).

In order to track progress there will be one single quality improvement plan that is cross referenced to other relevant quality initiatives, e.g. CQUIN, Quality Accounts etc. Progress will also be reported in the Trust's annual Quality Accounts, which will be made available on the Trust's website, NHS Choices and included in the Trust's annual report.

Measurement tools and outcome measures will be identified, developed and agreed by Quarter 1 2017 to enable quantitative monitoring in addition to work-stream updates.

Priority	Operational Lead(s)	Accountable Director	Operational Committee
Learning from incidents	Greg Hope	Director of Nursing	Safety Senate
Sepsis	Tim Neal, Ed Djabatey	Medical Director	Safety Senate
Unplanned Admissions & Readmissions	Cath Barton	Director of Operations	Safety Senate
Adult Mortality	Devender Roberts	Medical Director	Effectiveness Senate
Neonatal Mortality & Stillbirth Reduction	Devender Roberts, Bill Yoxall	Medical Director	Effectiveness Senate
Quality Standards	Devender Roberts	Medical Director	Effectiveness Senate
Staff Health & Wellbeing	Jean Annan	Director of Workforce & Marketing	Experience Senate
Engagement	Rachel London	Director of Workforce & Marketing	Experience Senate
Learning from Experience	Michelle Morgan	Director of Workforce & Marketing	Experience Senate

Learning from incidents

What do we want to achieve?

We will report and investigate incidents that could have or did harm a patient. We will inform patients, their families and our staff when we make mistakes and share any lessons we learn so that we can implement change to prevent recurrence.

Why is this important?

NHS England is clear that organisations that report more incidents usually have a better and more effective safety culture. At Liverpool Women's we firmly believe that you can't learn and improve if you don't know what the problems are. It is therefore important that patient safety incidents that could have or did harm a patient are reported so they can be learnt from. Only by doing this can we take any necessary action to prevent similar incidents from occurring in the future.

How will we achieve this?

- Take action where we identify variations in incident reporting practises between departments and staffing groups.
- Develop a never events assurance framework.
- Develop an awareness programme to increase the reporting of incidents, particularly low and no harm incidents.
- Train our staff to undertake robust root cause analysis investigations to better identify causes and contributing factors of incidents.
- Monitor actions to reduce harm, both in response to root cause analysis investigations and following thematic analysis of incidents. This will include an annual audit to ensure embedded change.

How will we know we have been successful?

- ✓ No never events
- ✓ Compliance with Duty of Candour Regulations
- ↓ Reduction in medication incidents resulting in harm
- ↑ Increase in patient safety incident reporting
- ↑ Increase in the proportion of near-misses and no harm incidents
- ✓ Remain in the upper quartile in the national reporting and learning system for patient safety incident reporting.

Sepsis

What do we want to achieve?

We will identify & treat sepsis at the earliest opportunity. We will reduce rates of hospital acquired infection and maintain them at a low level compared to other trusts.

Why is this important?

Sepsis is a life threatening condition that arises when the body's response to an infection injures its own tissues and organs. A third to half of patients who develop sepsis do not survive. Early diagnosis and treatment improves the chance of survival and recovery with MBRRACE- UK estimating that every hour delay increases the risk of death by 8%. Specifically within neonates sepsis is associated with longer hospitalisation and poorer clinical outcomes, including higher mortality, more lung and brain injury.

How will we achieve this?

- Build on our use of the sepsis 6 bundle to prevent the development and escalation of sepsis
- Continue and enhance staff education on mandatory study days and within clinical areas.
- Ensure coding for severe sepsis and septic shock are appropriate and implemented.
- Improve emergency treatment of sepsis including prompt involvement of a senior clinician.
- Review compliance with normothermy management.
- Raise staff professional awareness internal and external to the Trust through partnership working, enhanced training, study days and ward based educational sessions, and the importance of adhering to infection control practice
- Enhance support at RCA reviews to ensure there is specialised infection control input to facilitate lessons learnt and actions to prevent reoccurrence.
- Display data relating to sepsis on information boards in the clinical areas.
- Benchmarking against other similar neonatal units in the UK

How will we know we have been successful?

- ✓ No deaths from sepsis where the sepsis has not been identified & treated appropriately
- ✓ Root cause analysis of all instances of sepsis
- ✓ 100% Sepsis screening against the local protocol
- ✓ Intravenous antibiotics administered within 1 hour of presenting to all patients with severe sepsis, red flag sepsis or septic shock
- ↓ Reduction in instances of neonatal sepsis

Unplanned Admissions & Readmissions

What do we want to achieve?

We will strive to reduce unplanned admissions and readmissions to hospital. We will reduce rates of patients being admitted to neonatal care or returned to theatre unexpectedly.

Why is this important?

Quality of care factors are more common among readmitted than among non-readmitted patients. This suggests potential for remedial strategies and quality improvement. Preventing unplanned admissions and readmissions and unplanned escalation will have a positive impact on patient experience, will improve care coordination and reduce unnecessary spending.

How will we achieve this?

- Increased understanding of patient flow
- Planning patient discharges as early as possible and ensuring clear discharge plans are in place
- Monitoring and understanding why patients are returned to theatre unexpectedly including analysing variation as part of the revalidation process
- Targeted clinical audit
- Monitoring the factors that influence patients being returned to theatre unexpectedly
- Sharing learning from root cause analysis investigations

How will we know we have been successful?

- 😊 Positive patient feedback from Friends & Family Test and the National Inpatient Survey
- ↓ Reduction in unexpected returns to theatre
- ↓ Reduction in unexpected readmissions to hospital
- ↓ Reduction in unexpected term admissions to the neonatal unit

Adult Mortality

What do we want to achieve?

We will strive to achieve zero maternal deaths, zero unexpected deaths in women having gynaecological treatment and high quality care for women dying as an expected result of gynaecological cancer.

Why is this important?

Our isolation from other acute adult services at Liverpool Women's Hospital increases the risk to our adult patients in maternity and in gynaecology. It is important therefore that we maintain the highest possible quality of care at all times, across all of our medical, midwifery and nursing specialties. Equally important, when a woman is dying of a gynaecological cancer, we want to be sure that she is receiving the best possible care at all times as a matter of dignity and respect.

How will we achieve this?

- Introduce an Adult Mortality Strategy
- Monitor all adult deaths by introducing an audit sheet allowing the opportunity for the Trust to reflect upon the standard of care that was provided, even if this was an expected event.
- Place the family and carers at the centre of our approach to adult mortality.
- Improve oversight of mortality through discussions at local working groups, the Effectiveness Senate, Governance & Clinical Assurance Committee and Board of Directors.
- Help patients to make positive choices about the location in which they are cared for and the location where they die.
- Benchmark against other trusts to ensure our outcomes are comparable and publicly available.

How will we know we have been successful?

- ✓ No avoidable adult deaths
- ✓ No adult deaths without a completed adult mortality sheet
- ✓ All adult deaths subject to a mortality review
- ↑ Increase in performance in the Annual Cancer Survey

Stillbirth & Neonatal Mortality

What do we want to achieve?

We will strive to prevent the avoidable death of any baby before or after its birth.

Why is this important?

The death of a baby before or after birth is a devastating event. Although this is sometimes unpredictable or unavoidable, in some cases, steps can be taken to reduce the chance of it happening. Bereaved women and their families also need specialist care from a dedicated team of professionals to help them through this most difficult of times.

How will we achieve this?

- Introduce a Stillbirth and Early Neonatal Death Strategy.
- Respond quickly when a woman complains of reduced movements
- Provide training to our staff in fetal heart rate monitoring
- Ensure that we are providing the best possible quality of care for women with gestational diabetes, a risk factor for stillbirth.
- Respond to evidence linking increased maternal age with stillbirth.
- Ensure that any stillbirths meeting the criteria for Each Baby Counts are reported nationally.
- Reduce the risk of early neonatal death by improving our monitoring of the baby's condition when a woman is in labour.
- Press for improvements in our neonatal unit estate that will reduce the risk of severe infections.

How will we know we have been successful?

- ✔ All stillbirths and neonatal deaths subject to a mortality review
- ✔ All relevant staff will be able to show evidence of recent training in fetal heart rate monitoring
- 😊 Mortality rates for very low birthweight babies to be comparable to the best other neonatal units nationally and internationally
- 😊 Increase in positive feedback from our Honeysuckle Team

Quality Standards & Indicators

What do we want to achieve?

We will demonstrate compliance with evidenced based practice and will aim to be in the top performing 20% of trusts for anticipated critical outcomes

Why is this important?

Quality standards set out the priority areas for quality improvement in health and social care. They are developed independently, in collaboration with health and social care professionals, practitioners and service users. They are based on NICE guidance and other NICE-accredited sources. Increasing compliance will ensure the trust is aligned with best practice and supporting our clinicians in providing care that is evidence based and known to provide the best results.

How will we achieve this?

- Agree implementation plans for NICE Quality Standards in each division
- Audit compliance.
- Identify a suite of clinical indicators for each division, establishing baseline data.
- Develop and implement improvement plans for clinical indicators that fall outside the top 20% against appropriate peers
- Increased oversight of delivery via the Effectiveness Senate and Governance and Clinical Assurance Committee

How will we know we have been successful?

- ✓ Agree implementation plans for at least one NICE Quality Standard per division each year
- ✓ Develop a suite of clinical indicators for each division
- ↑ Increase in performance in divisional indicators against recognised peer groups

Health & Wellbeing

What do we want to achieve?

We will strive to create a workforce that is aware of and takes ownership of how to maintain its physical and psychological welfare. This includes a culture in which leadership is focussed on the wellbeing of its staff. There will be a range of accessible and utilised facilities, information and resources to support individuals and leaders to maintain a culture of wellbeing.

Why is this important?

Maintaining staff wellbeing has a range of well documented benefits including:

- Direct positive impact on patient experience
- Promoting good physical and psychological health
- Creating healthy workplaces for staff to grow and achieve
- Allowing staff to engage with and role model healthy approaches to modern day living for patients and relatives
- Encouraging dialogue between staff regarding service improvement
- Developing leadership skills
- Reducing sickness absence
- Increasing staff effectiveness when at work
- Contributing to the achievement of Trust business objectives
- Promoting the empowerment of staff

How will we achieve this?

- Re-launch the HWB agenda
- Provide a dedicated web page with health and wellbeing information
- Display information and leaflets regarding opportunities and information
- Pilot exercise sessions in the Trust
- Promote Occupational Health availability to support individuals
- Raise the profile of mentoring
- Realign leadership programme sessions to highlight the importance of leadership to staff health and wellbeing
- Engage with staff side, volunteers, communications and the wider community for their expertise

How will we know we have been successful?

- 😊 Positive feedback from staff, patients and families
- ↑ Increase in positive feedback from leadership programme reflection sessions
- ↑ Increase in number of visits to web page
- ↓ Reduction in sickness absence
- ↑ Increase in staff recommending the trust as a place to work

Engagement

What do we want to achieve?

We will ensure a well led, capable, motivated and entrepreneurial workforce are in place. This will mean a culture where staff are aligned with the values and objectives of the Trust, a workforce who are motivated to deliver excellent care, a workforce who have regular opportunity to contribute ideas for improvement and who have a clear voice, a workforce who have the training and development to enable them to deliver and a workforce who feel valued and recognised. We will strive to ensure the trust has the ability to retain talented individuals.




Why is this important?

Engaged and motivated staff have a direct impact on quality of patient care and mortality rates. Management of turnover and retention of key staff is fundamental to organisational stability and engaged and motivated staff are critical to enable us to deliver challenging performance targets.

How will we achieve this?

- Build the capabilities of our managers through the Leadership Programme which will be made mandatory for targeted individuals.
- Ensure first line managers are equipped with core skills in rota management, budget management and staff management.
- Develop internal communications strategies with a focus on visibility from executive team, senior managers and local managers.
- Ensure all staff have the opportunity to contribute to quality improvement programmes in their own areas.
- Review local and trust wide reward and recognition structures, ensuring that positive feedback is formally reported.
- Audit quality of PDRs and provide support on team objective setting to operational department and ensure local objectives are aligned with organisational goals.

How will we know we have been successful?

-  Positive feedback from staff and patients
-  Attendance & completion of all mandatory training elements
-  Increase in the staff engagement score

Learning from Experience

What do we want to achieve?

We will promote a positive patient experience that allows the trust to deliver a high quality, carer and family experience.

Why is this important?

Delivering a positive experience is a key strategic objective for the trust and is fundamentally the right thing to do for our patients. Learning from experience is central to building and strengthening the Trust's reputation and increasing public confidence. It is what we would expect for our family and friends and has been linked to more positive clinical outcomes. The Trust is determined to get things right for our patients first time, every time.

How will we achieve this?

- Implement a new complaints policy and process in all areas of the Trust
- Increase the prominence of patient stories through all available channels
- Develop a database of all patient engagement in the Trust, establishing a baseline position from which to improve
- Use the Experience Senate to identify key issues for patients from a variety of sources to inform an annual work-plan
- Respond to themes from PALS, Complaints, and Feedback & Surveys. This will begin with improving patient access to telephone triage systems.

How will we know we have been successful?

- 😊 Positive feedback from staff and patients
- ↓ Decrease in formal complaints
- ↓ Decrease in the time taken to respond to formal complaints
- ↓ Decrease against the thematic issue identified in each annual work-plan (e.g. triage access)
- ↑ Increase in staff recommending the hospital as place to receive care

Measuring Success

Each priority work-stream will have an implementation plan and outcome measures aligned to the 'How will we know we have been successful?' sections. There will be one Quality Improvement plan and set of measures to track progress. The overall success of the Strategy will be measured via mechanisms, which include:

- Patient experience feedback – this will be via surveys, compliments, complaints, focus groups & patient groups
- Quality Accounts – achieving the annual priorities described in the Quality Accounts will contribute to achieving the aims of this strategy
- Mortality ratios, clinical outcomes & national clinical audits – we will continue to monitor our performance against our peers.
- Care Quality Commission – if this strategy is implemented successfully, we will obtain a minimum of a 'good' rating, aiming for 'outstanding' where possible.

A full implementation plan will be presented to the Senate providing an overview of the quality priorities and the vision for each element of quality as we progress through the lifetime of the Strategy.