

# The Providers View of Quality

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# What is quality.....?

- Doing the right thing, first time, every time
- Patient (and Carer) Safety, Care and Experience as good as it can be.... always
  - Healthcare fitting the individual patient's needs
  - Healthcare that does not cause harm
  - Healthcare that is right for the patient's illness
  - Healthcare given without unnecessary delays
  - Healthcare that is fair, and respects equality & diversity principles
  - Healthcare that includes the patient's voice

# Or.....

- *I was so unbelievably happy with all of the midwives and the team at Stafford Hospital, the staff repeatedly went over and above what was expected of them and made my experience one to remember forever for all the right reasons. I have suffered serious postnatal depression with my two boys and have not with my little four month old girl and I know that our four nights in Stafford hospital gave me a better head start than I could have ever asked or hoped for. Amazing team, the N.H.S should be proud of them.*

# Mid Staff's history....

- 10 to 20 years “out of date”
- Policies and procedures not in date or being used effectively
- Lack of corporate ownership and accountability
- Matron and ward leadership roles unclear
- Medical staff engagement inconsistent
- Levels of patient & public confidence poor

# Our Vision

- **To be recognised as the safest and most caring NHS Trust in the UK**
  - Creating a Culture of Caring
  - Seeing Zero harm as our target by keeping patients safe
  - Listening, responding and acting on what our patients and community are telling us
  - Supporting our staff to become excellent, giving responsibility but holding to account as well
  - Continuing to do what we need to do to satisfy our regulators

# What has improved

- HSMR
- Comfort checks
- Nurse care indicators
- Patient experience day
- Patient passport
- Care of vulnerable patients
- Numbers and severity of complaints reduced
- Incident Management
- Community **Involvement**
- Staff involvement in front line changes
- Real time patient feedback
- 20% reduction in falls 2010/11
- Pressure sore incidence static
- MRSA blood stream infections  
2 cases recorded
- C diff reducing year on year
- Ward refurbishment 2011

Year	No. cases
2007/08	168
2008/09	135
2009/10	37
2010/11	35
2011/12	26

# Governance monitoring

- We have developed an **integrated performance report and dashboard** under the domains of quality, operations, workforce and finance – to Trust Board monthly
- Patient safety, patient care and patient experience monitored by Quality and Safety Committee
- Tightened up the role and function of Board sub committees – now assurance committees
- Daily adverse events email to all Executive directors
- Closer monitoring of themes from adverse events and investigation, and learning and outcome from serious incidents

# Launched our Quality & Safety Strategy in February 2012

- ...to further improve the quality and safety of patient care.... and improve the culture
- Improvement academy launched May 2012
- iwantgreatcare launch March 2012
- Clinical champions and link roles
- Refreshed focus on roles in the nursing department
- Specific actions around our staff survey



# Where do we want to make further progress?

- Embedding Clinical leadership
- Variation in the use of and compliance with policies & procedures
- Embedding financial ownership
- Still a lot of drive from the centre
- Clinical (Consultant) engagement
- External perception
- Engagement with GP's
- Consistency in the patient experience

# Thank you for listening

## Very happy to answer questions