QUALITY IMPROVEMENT

NHSProviders

The Health Foundation

Deliver and improve

A BOARD MEMBER'S GUIDE TO TRUST-WIDE IMPROVEMENT

FEBRUARY 2022

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PROGRAMME OVERVIEW

About the trust-wide improvement programme

NHS Providers **trust-wide improvement programme**, supported by the Health Foundation, aims to support NHS trust leaders to develop their understanding of organisation-wide approaches to improvement and develop the skills and confidence they need to support their organisation to take the next step on its improvement journey.

As part of this, the programme offers opportunities to reflect on the implications for improvement from COVID-19 and support trusts to sustain the beneficial changes made in response to the pandemic. The programme provides opportunities for board-level peer learning through webinars, workshops and action learning sets, and online resources to support their improvement journey. Our strategic partnership with the Health Foundation enables us to draw on its extensive work on this topic, and existing communities of improvement leads across the sector through the Q Community.

Visit our **online hub** for resources and information on the latest support available.

Support from senior organisational or system leaders is often vital to the success of an improvement intervention.

Quality improvement made simple
The Health Foundation (2021)

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FOREWORD

Our trust-wide improvement programme, supported by the Health Foundation, has proven popular despite the challenging context. As operational pressures continue to mount, trust leaders know that new ways of working are urgently required to support both staff and service recovery, to tackle the immediate pressures of the backlog of care, and to capitalise on the opportunities of working in provider collaboratives and across systems.

Most trusts have some experience of quality improvement, usually within specific services and divisions. However, the largest and most sustained benefits come when a whole organisation approach to improvement is taken – many of the trusts rated as outstanding have established trust-wide improvement approaches in place.

Evidence also shows us that senior leadership is vital to the success of improvement. As well as ensuring that teams have the resources and capability they need to plan and deliver, board members can help to unblock barriers and give teams the time and space to test and refine their intervention. They also have a critical role to play in creating a positive organisational culture, which has consistently been associated with improved quality outcomes. Placing improvement at the centre of an organisational or system-level strategy and fostering a learning culture, in which front-line teams feel psychologically safe to question existing practice, report errors and try new methods, is central to this.

Within today's deeply challenging context, the importance of rapid and robust problem solving has come to the fore even more. We know from the Health Foundation's Q Community research that organisations with a well-developed approach to improvement prior to the pandemic were able to use these skills more effectively during the crisis and are now in a stronger position to build on the changes made. There continues to be an opportunity for organisations to protect and improve on their improvement capacity and skill, to make best use of this valuable resource to help in solving the big problems facing boards.

The clear appetite to take stock of learning from the pandemic, and how systematic approaches to organisation-wide improvement can help meet the challenges we face today and tomorrow, shows a strong commitment despite the pressures boards and their staff continue to face. The appetite to engage in our programme demonstrates how many trusts recognise that organisations with the skills, relationships and leadership to drive improvement will be best placed to react, respond and learn in this new era of unprecedented uncertainty, complexity and pressure.

The case for developing improvement capability at scale has been widely recognised for some time. It is a key component of the NHS Long Term Plan, and forms part of CQC's Well-Led Framework. Continuous improvement is a key oversight expectation for quality placed on integrated care systems (ICSs) and their constituent parts by the National Quality Board, alongside the emerging expectation on provider collaboratives that they drive shared definitions of best practice and the application of a common quality improvement methodology.

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There is a wealth of resources available world-wide. This resource seeks to help you navigate these by bringing together a selection of useful articles, reports, videos and podcasts to support conversations at board and quality committee level, to support you in decision-making and taking action.

The content aligns with the factors required to drive and embed improvements in a health care organisation or system, as highlighted by the Health Foundation in their guide *Quality improvement made simple*, recently updated. We also signpost to the current range of learning support available to boards.

In an ever evolving context, with an increasing focusing beyond the boundaries of a single organisation, we hope this guide helps towards the next steps in your improvement ambitions.

Miriam Deakin
Director of Policy and Strategy
NHS Providers

THE IMPROVEMENT JOURNEY

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Developing an organisational approach to improvement in health care is a journey that can take several years. It requires corporate investment in infrastructure, staff capability and culture over the long-term. These resources explain why organisation-wide improvement in health care matters, and how to get started.

- **The Improvement Journey**: a report which draws on the learning and insights that the Health Foundation has generated over the past 15 years from funding and evaluating improvement at team, organisation and system level.

- **Six key steps**: a quick read summary from a presentation to trust leaders at NHS Providers annual conference and exhibition 2019 by Will Warburton, then director of improvement at the Health Foundation.

- **Building the business case for quality improvement: a framework for evaluating return on investment**: An article by Dr Amar Shah, consultant forensic psychiatrist and chief quality officer at East London NHS Foundation Trust, on creating a business case for QI and how to determine a ROI.

- **Board bites**: practical, actionable insights from board level peers that may help sustain the gains made as a result of the pandemic and respond to the scale of the challenges ahead. This digest was derived from a series of webinars exploring: the latest evidence and research on the implications of COVID-19 for trust-wide improvement; improvement successes of organisations during the pandemic, from the perspective of trust leaders; and how improvement across a 'place' can be delivered.

- **NHS-VMI partnership evaluation CEO interview** with Michael Wilson CBE: the then chief executive at Surrey and Sussex Healthcare NHS Trust details their journey from 'worst trust in England' in 2010 to a CQC outstanding rating in 2019.

UNDERSTANDING

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A selection from the vast literature and guidance on improvement, leadership and culture, to aid learning, reflection, collaborative conversations and strategic development.

Leadership and governance

We believe there is now, more than ever, an opportunity to nurture a culture of improvement across the provider sector, building on the experiences and achievements of the last year.

Miriam Deakin, *Nurturing a culture of improvement: how trust boards can embed organisation-wide improvement*, NHS Providers (2021)

Establishing effective leadership for improvement

- **The challenge of complexity in healthcare** (BMJ, 2001): a five-minute read outlining how healthcare is best considered a complex adaptive system and what this means for altering our understanding of how change happens.

- **Why healthcare leadership should embrace quality improvement** (BMJ, 2020): a five-minute read which succinctly explains the changes in leadership mindset to make quality improvement a core tenet of how healthcare organisations are run, to ensure safe, high quality, and responsive services for patients, and the opportunities this provides.

- **How do hospital boards govern for quality improvement? A mixed method study of 15 organisations in England** (BMJ Quality and Safety, 2017): although focused on hospitals, this ten-minute read offers useful insight into the characteristics of boards with a more mature approach to governing for improvement including: explicitly prioritising QI, balancing short-term (external) priorities with long-term (internal) investment in QI, using data for QI, not just quality assurance, engaging staff and patients in QI, and encouraging a culture of continuous improvement. These characteristics appeared to be particularly enabled and facilitated by board-level clinical leaders.

- **From super-hero to super-connector, changing the leadership culture in the NHS** (Royal College of Physicians, Future Healthcare Journal, 2019): a five-minute thought leadership article that challenges us to reimagine the role of leader, making use of emotional intelligence and relational skills alongside technical skills to improve.

- **Transformational change in health and care – reports from the field** (The King's Fund, 2018): both a summary (seven-minute read) and longer report which brings together stories of transformational change drawing on the collective experiences and reflections of four sites that have been recognised as successful transformation initiatives, including lessons on the need for transformational leadership.

- **Michael West on compassionate and inclusive leadership** (King's Fund, 2019): a seven-minute video explaining the connections between compassionate and collective leadership, the impact this has on a team, their decision making ability and innovation, as well as outlining the key leadership behaviours.

- **Leadership for continuous improvement in healthcare during the time of COVID-19** (Clinical Radiology Online, 2020): a ten-minute read article focusing on lessons from Royal United Hospitals Bath NHS Foundation Trust radiology department but relevant to leaders generally.

- **Making the case for quality improvement – lessons for NHS boards and leaders** (The Health Foundation and The King's Fund, 2017): a 25-minute read outlining ten lessons for leaders, as a starting point for those seeking to embed quality improvement in their work.

- **Leading large-scale change – a practical guide** (NHS England, Sustainable Improvement and Horizons teams, 2017): a more detailed read to help those involved in seeking to achieve transformational change in complex health and care environments.

- **The practice of system leadership – being comfortable with chaos** (King's Fund, 2015): this 80 page report draws on the experiences of 10 senior leaders to look in depth at the skills needed to be a system leader.

Creating governance arrangements and processes to identify quality issues that require investigation and improvement

- **CQC brief guide: assessing quality improvement in a healthcare provider** (June 2020): a three-minute read briefing guide for inspection teams which provides insights into how judgements are made into the maturity level of a provider's approach to quality improvement.

- **How do NHS hospital boards govern for improvement?** (National Institute for Health Research, 2017): a mapping of characteristics of boards with higher levels of QI maturity, part of a wider study into how boards govern for QI. This two page findings summary also relates to QUASER, a research-based guide for senior hospital leaders to develop and implement QI strategies.

- **What every board member needs to know about improvement and quality assurance** (Good Governance Institute and Perfect Ward, 2021): exploring the current, rare opportunity to recast quality governance within organisations afforded by the pandemic, this 40-minute read outlines some of the key concepts of quality assurance

and improvement, key questions for board members, and best practice examples and tools to translate theory into practice. It also provides a maturity matrix to support organisations to self-assess whether they are appropriately applying the key principles.

- **Patient Safety Incident Response Framework (PSIRF) – introductory version** (NHS England and NHS Improvement, 2020): The PSIRF is a key part of the NHS Patient Safety Strategy published in July 2019. It supports the strategy's aim to help the NHS to improve its understanding of safety by drawing insight from patient safety incidents. In testing phase currently, the final version of the PSIRF and significantly updated associated tools are anticipated in spring 2022. Until instructed to change to the PSIRF by NHS England and NHS Improvement, non-early adopter organisations must continue to use the existing Serious Incident Framework (2015).

- **Seven features of safety in maternity units** (BMJ Quality and Safety, 2020): a 15-minute read outlining the findings of a study which aimed to characterise features of safety in maternity units, and to generate a plain language framework that could be used to guide learning and improvement.

- **Managing adverse events** with Susanna Stanford and Sarah Seddon: a 30-minute film with a positive message about managing adverse events in healthcare. Drawing together the patient and clinician perspectives, they discuss how clinicians and other healthcare professionals can prepare for the inevitability of things going wrong, and how both patients and clinicians need the same things in the aftermath of adverse events.

- **A thematic analysis of the Healthcare Safety Investigation Branch's first 22 national investigations** (HSIB, 2021): this outlines the most commonly identified patient safety themes and recommendations for a systematic approach to managing safety nationally, which offers insight into areas of improvement useful at a local level.

Adopting a consistent, aligned and systematic approach to improving quality

- **The hard work of healthcare transformation** (New England Journal of Medicine, 2016): by Dr Richard Bohmer, New Zealand-trained doctor and a management academic, this five-minute read outlines the importance of aligning frontline improvement with organisation-wide objectives, and how to support improvement work at senior levels.

- **How organisations contribute to improving the quality of healthcare** (BMJ, 2019): a five-minute article bringing together research to explain why an organisation-wide approach is beneficial and the role of leaders.

- **How to move beyond quality improvement projects** (BMJ, 2020, login required): a five-minute read which outlines the importance of using quality improvement alongside quality planning, quality assurance, and quality control to create a single, consistent management system that represents a holistic approach to managing quality.

- **A shared commitment to quality** (National Quality Board, 2021): a five-minute read which provides a nationally-agreed definition of quality and a vision for how quality can be effectively delivered through ICSs, outlining responsibilities for all levels including providers. It also outlines the three core quality 'functions' of quality improvement, planning and control as described in the Juran Trilogy, a quality management model.

- **Quality improvement at times of crisis** (BMJ, 2021): in this 10-minute read, Dr Amar Shah, chief quality officer at East London NHS Foundation Trust, and Penny Pereira, Q initiative director and others, outline the lessons from COVID-19 for improving healthcare.

- **Overcoming challenges to improving quality** (The Health Foundation, 2012): an outline of the 10 key challenges to improving quality, identified through a review of 14 quality improvement evaluation programmes.

- **Quality management systems: building the conditions for effective change** (Q, 2021): a 100-minute recording of a webinar on quality management systems hosted by the Q Community, exploring the link between QI, quality planning and quality control.

Improvement cultures, behaviours and skills

> *Evidence about successful quality improvement indicates that the method or approach used is not the sole predictor of success, but rather it is the way in which the change is introduced.*
> *Quality improvement made simple*, The Health Foundation (2021)

Building improvement skills and knowledge at every level, from the top tiers of organisations, through to front-line staff

- **The role of improvement during the response to COVID-19** (Q, 2021): a 25-minute insight report which outlines the key lessons for improvement from the earlier stage of the pandemic.

- **The habits of an improver: thinking about learning for improvement in healthcare** (The Heath Foundation, 2015): a 30-minute thought paper that considers the attributes individuals need to foster to be able to succeed with bringing about change and improvement in the quality of care and services.

- **Quality improvement made simple** (The Health Foundation, 2021): a guide that takes around 35-minutes to read summarising the elements everyone should know about quality improvement.

- **Think of healthcare as an ecosystem, not a machine** (BMJ, 2018): a 35-minute podcast interview with Jeffrey Braithwaite, professor of health systems research and president elect of the International Society for Quality in Health Care, explaining how complexity science offers ways to change our collective mindset about healthcare systems, enabling us to improve performance that is otherwise stagnant.

- **Determining the skills needed by frontline NHS staff to deliver quality improvement** – findings from six case studies (BMJ, 2021): a 25-minutes read detailing the skills frontline staff use to improve care, offering boards an insight into the many nuanced and mutually supporting technical, learning and soft skills needed. Useful for reflection and conversation at board level on what is required by frontline teams in terms of acknowledgement, time, resource and support to enable successful improvement.

Creating a workplace culture conducive to improvement

- **Recovery and then renewal – the innovation imperative for health and care** (King's Fund, 2021): a five-minute blog exploring how to replicate, support and sustain the conditions that enabled innovation during the pandemic, including meeting the ABC core needs of staff (autonomy, belonging and contribution).

- **Developing people, improving care**: a national framework for action on improvement and leadership development in NHS-funded services (National Improvement and Leadership Development Board, 2019): a 15-minute summary of a framework to guide actions on people development aimed at creating systemic solutions for the long term.

- **Culture and behaviour in the English National Health Service**: overview of lessons from a large multimethod study (BMJ Quality and Safety, 2014): this 15-minute read highlights the importance of clear, challenging goals for high-quality care and how organisations need to put the patient at the centre of all they do, get smart intelligence, focus on improving organisational systems, and nurture caring cultures by ensuring that staff feel valued, respected, engaged and supported.

- **Association between organisational and workplace cultures, and patient outcomes – systematic review** (BMJ, 2017): 30-minute read that underlines why it's important to create a positive environment and the evidence for links to enhanced outcomes.

- **Did you know? Being fair – supporting a just and learning culture for staff and patients following incidents in the NHS** (NHS Resolution, 2019): a 40-minute read and 30-minute webinar, both setting out the argument for organisations adopting a more reflective approach to learning from incidents and supporting all staff.

- **Passing the peaks – longer term support for colleagues after COVID-19** (NHS Providers, 2021): a 60-minute webinar where experts and board members share learning on how to be prepared for the longer-term impacts of traumatic events on staff, successful strategies used during other extended crisis situations, and how you as leaders can apply them to support your workforce as the pandemic evolves and the service recovers.

- **Civility Saves Lives**: a self-funded, collaborative project with a mission to promote positive behaviours and share the evidence base around positive and negative behaviours. Full of useful research and infographics that explain and evidence the impact of incivility on performance.

- **Learning from excellence**: a collective capturing and studying peer-reported excellence in healthcare since 2014, evidencing the role this plays in creating a safer system, with a site full of open-access resources and ideas.

Giving everyone a voice and bringing staff, patients and service users together to improve and redesign the way that care is provided

- **Getting more health from healthcare: quality improvement must acknowledge patient coproduction** (BMJ, 2018): a ten-minute essay by Paul Batalden, professor emeritus, paediatrics, community, and family medicine, in which he shares his knowledge from ten years' studying change. He explains how modelling healthcare as either a product or a service is an over-simplification and neglects essential aspects of coproduction between doctors and patients.

- **Staff and patient experience as the driving force behind improvement** (NHS Providers, 2021): a 60-minute webinar in which board members from two trusts at different stages of pursuing a trust-wide approach to improvement, Northumbria Healthcare NHS Foundation Trust and Central London Community Healthcare NHS Trust, reflect on the personal journeys taken at a board level to accept and adapt to a new approach. They also share what they wish they'd known as they started out.

- **What we need now – recommendations** (National Voices, October 2020): drawn from National Voices Our Covid Voices platform, which asked people to contribute their personal experiences and stories, and features some co-produced recommendations as to how people would like to be treated, and how they would shape services.

- **Framework for involving patients in patient safety** (NHS England and NHS Improvement, 2021): guidance on how the NHS can involve people in their own safety as well as improving patient safety in partnership with staff: maximising the things that go right and minimising the things that go wrong for people receiving healthcare.

- **NHS Complaint Standards** (Parliamentary and Health Services Ombudsman, 2021): how organisations should approach complaint handling, this aims to support organisations in providing a quicker, simpler and more streamlined complaint handling

service, with a strong focus on early resolution by empowered and well-trained staff. They also place a strong emphasis on senior leaders regularly reviewing what learning can be taken from complaints, and how this learning should be used to improve services.

- **Can pizza lead to sustainable quality improvement in the NHS?** (NHS Providers, 2021): A short, three-minute blog that outlines the importance of connecting diverse professional groups for regular and informal interaction. Professor Nicola Burgess, reader in operations management at Warwick Business School, explains how social network analysis can help boards identify the level of connectedness in their staffing body, to aid conversations on how knowledge exchange and collaboration can be better nurtured.

Flattening hierarchies and ensuring that all staff have the time, space, permission, encouragement and skills to collaborate on planning and delivering improvement

- **The importance of psychological safety** (King's Fund, 2020): a three-minute video where Amy Edmondson, Novartis Professor of Leadership and Management at the Harvard Business School, explains how leaders can create an environment where staff feel safe to speak up, share new ideas and work in innovative ways.

- **Psychological safety as a cornerstone of improvement** (NHS Providers, 2021): a three-minute read, in this blog, chief executive of Mersey Care NHS Foundation Trust Joe Rafferty, discusses the paradigm shift in mind-set, behaviour and practice that is necessary to achieve their ambition to become a best provider and best employer.

- **How a culture of improvement powered health systems' response to COVID-19** (HSJ, 2020): a three-minute article outlining the impact a culture of continuous improvement had at The Leeds Teaching Hospitals NHS Trust and Surrey and Sussex Healthcare NHS Trust during the pandemic, including the role of empowering staff and the need for leaders to move from solving problems to being problem framers.

- **Open organisational culture: what does it entail?** (BMJ, 2021): this 20-minute read outlines the important elements of an open culture, what it entails, and the conditions required. It also details how to use this insight as a practical tool that facilitates dialogue.

- **The power of giving away power** (Great Podversations, 2021): a 30-minute podcast in which former US ambassador to the UK Matthew Barzun discusses the potential of distributed leadership with Amy Edmondson, Novartis Professor of Leadership and Management at the Harvard Business School.

- **Encouraging a sense of psychological safety through board leadership and role modelling** (NHS Providers, 2021): a 60-minute webinar featuring trusts who are focusing on the role of leadership culture and behaviours, in recognition of its importance to relationships, creativity, engagement and performance, and how this relates to high quality care and their approach to board assurance.

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KEY QUESTIONS FOR BOARDS
What to ask yourself and others

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A selection of example questions boards should ask themselves in relation to their role in improvement. These aim to help guide personal reflection, conversations between board members and in quality committees, with staff and with partners locally.

This list does not cover everything you may wish to or need to ask, but is intended to help provide a starting point and overview of important aspects to consider.

Leadership and governance

- Do we have sufficient quality expertise on our board to ensure adequate scrutiny and challenge around quality issues? *

- Have we provided NEDs with sufficient induction and developmental support to ensure that they are comfortable contributing to discussions around quality issues, and do they understand how change happens in a complex adaptive system like healthcare?

- Have we considered how our leadership styles may need to adapt to support improvement, for instance, from being a 'problem solver' to a 'problem framer', and adopting a coaching mentality?

- How do our board and committee reports support discussion and debate around quality issues? *

- Do the board and committees /consider the breadth and quality of the data used for improvement, and have the skills to interrogate and analyse it, and ensure it is used meaningfully in decision-making and acted upon?

- It can take several years to plan and implement a trust wide improvement programme. How prepared and willing are you to maintain support for a programme of this length?

- Do we have a clear understanding of the place of quality improvement in the way we work as a board and organisation, and a plan to use it?

- Do we consider performance, improvement and organisational development together at board level, articulating how they work towards our shared goals for improvement?

- Are we considering how the board can create a better balance between improvement and assurance moving forward, and enable innovation?

- Are we framing the narrative of improvement around the positive impact for patients and in line with what is most meaningful for staff, rather than articulating in terms of financial objectives?

- Are we considering how we might commit some resources for improvement based on trust, to allow people to take action and test ideas?

Improvement cultures, behaviours and skills

- Has the right environment been created within our organisation to support quality improvement? How do we know?*

- Has an audit of existing improvement knowledge and skills within the organisation, alongside current and previous improvement interventions, been undertaken to identify skills gaps, and identify good practice and knowledge on which to build, as part of the planning process for an organisation-wide programme?

- Are we able to articulate and demonstrate how the organisation's improvement approach aligns with the values and behaviours expected of all?

- Have we introduced a people and culture committee, or similar forum, to consider cultural and organisational development issues?*

- Is there training in improvement principles and methodology for the board and staff, along with on-going access to expertise, and protected time and resources to devote to quality improvement and quality assurance activities?

- To ensure a strong link between training and practice, following training, do people have the opportunity and support to put those news skills into practice immediately?

- How are we ensuring that quality improvement and quality assurance activities are not siloed within the remits of certain individuals?*

- Do we create regular formal and informal opportunities for staff to have open, non-hierarchical and mutually respectful conversations about care quality and how to improve it, across a mix of roles, teams, departments and specialties?

- Do we show visible engagement with our organisation's shared purpose when the board visits services?

- How are improvement and transformation success stories shared across the organisation and up to board level, and are we celebrating successes in a way that motivates staff and informs patients?

- Is your response when things go wrong consistent with the enabling, learning environment you're trying to create?

- In what ways are we considering whether our improvement approach is accessible for all, with simple language that moves away from jargon and helps people engage?

- Have we considered how we will engage effectively with our staff and the public in a post-pandemic world? Has this considered the needs of all the populations that we serve?*

Beyond the boundaries of your organisation

- How are we avoiding operational silos and creating a shared vision for improvement between partners, staff and patients?

- Do we have a high level of quality expertise amongst the strategic leadership of collaborative partnerships, to best guide systematic improvement across boundaries?

- How will collaborative work help in creating an open culture and learning system that enables improvement, with a shared understanding of objectives, needs and issues?

- Is there an understanding of the Quality Management System (QMS) approach (a proven model for improvement, based on three functions: quality planning; quality control; quality improvement)?

- How is improvement embedded into your shared governance model, how will that be developed in partnership and is there clarity around accountabilities?

- In what ways are we drawing on a diverse set of experiences, knowledge and perspectives for improvement across boundaries?

- Quality improvement can provide a common and systematic way in which to solve problems, therefore how will we reflect on the differences and similarities in our existing approaches, and how will we progress together towards a unified one?

- How will we come together around a common way of speaking about improvement and create a shared understanding of the principles that underpin it?

- What are the skill levels in improvement across the set of partners' workforce, and what support is in place to increase or level this?

- How will we assess what work of lower value could be removed or deprioritised to make way for new improvement work?

* Questions from *What every board member needs to know about improvement and quality assurance*, a report from the Good Governance Institute and Perfect Ward, September 2021.

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SUPPORT

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A directory of current support offers for boards in this area, within the NHS and the not-for-profit sector.

AQuA

AQuA is a network made up of 70 members based in the North West of England. It supports them to deliver high quality care and provides quality improvement expertise to NHS organisations. AQuA also works with organisations outside the north west on an associate membership model, providing co-designed bespoke support.

They provide intensive support to boards around the well-led domain and on systems and processes.

Themes for 2021-22:
- Building capability and organisational systems for improvement
- Delivering high quality care
- Accelerating system transformation and improvement outcomes
- Working as a system improvement partner

Full directory of offers available here. Specific support in response to COVID-19 includes the *Rapid change learning package* which details the key enablers observed to be driving rapid improvements, to help refocus quality improvement strategies.

Contact: 0161 206 8938 or aqua@srft.nhs.uk

East London NHS Foundation Trust QI microsite

Full of materials and resources accessible online, including stories of improvement, plus a subscription to a regular round up newsletter with news, events, helpful hints, tips and educational information, plus an archive of past issues.

Access the microsite here.

NHS Improvement and NHS England Improvement – Fundamentals Programme

Developed and run by NHS England's sustainable development team, Improvement Fundamentals is a programme of online, self-directed mini-courses in quality improvement for people working in heath or social care services. The courses are free to access via the QI Learning platform, and are delivered through videos, articles, discussions and practical exercise covering QI tools, spread, measurement and theory. There are also *Lean* and *Getting started in large scale change* modules via this platform.

NHS Quest (ex Haelo)

NHS Quest describe themselves as 'the first member-convened network for NHS trusts who focus relentlessly on improving quality and safety. NHS Quest members work together, share challenges and design innovative solutions to provide the best care possible for patients and staff'.

Twelve NHS trusts are listed as members currently, and they work together as partners on improvement projects.

Contact: Andrea McGuinness at nhs.quest@nhs.net

Patient Safety Improvement Programmes

National Patient Safety Improvement Programmes (SIPs) are a key part of the NHS Patient Safety Strategy, launched in July 2019 and recently updated in February 2021, to deliver safety and quality improvements across the NHS in England. They are managed and led by NHE England and NHS Improvement's National Patient Safety Team.

SIPs aim to create continuous and sustainable improvement in settings such as maternity units, emergency departments, mental health trusts, GP practices and care homes, with five national programmes working towards improvement in deterioration, maternity and neonatal, medicines, adoption and spread, and mental health. They are delivered by local healthcare providers working directly with the National Patient Safety Improvement Programmes Team and through 15 regionally-based Patient Safety Collaboratives.

The SIPs support continuous and sustainable improvement through culture, evidence-based improvement, QI capability and system level change.

Contact: patientsafety.enquiries@nhs.net or visit each programmes' FutureNHS Collaboration page:

- Medicines Safety Improvement Programme
- Mental Health Safety Improvement Programme
- Maternity and Neonatal Safety Improvement Programme
- Managing Deterioration Safety Improvement Programme

The Q Community

Q is an initiative connecting people, who have improvement expertise, across the UK and Ireland. There are over 4000 members and its mission is to foster continuous and sustainable improvement in health and care. It achieves this through creating opportunities for people to come together and form a community – sharing ideas, enhancing skills and collaborating to make health and care better. Q is delivered by the Health Foundation and supported and co-funded by partners across the UK and Ireland.

A wide variety of toolkits, methods, guides and other resources shared by Q members and the Q team are available online.

Quality, Service and Redesign (QSIR)

Run by NHS Improvement's Advancing Change and Transformation (ACT) Academy, QSIR includes a range of service improvement programmes for clinical and non-clinical staff involved in service improvement within their organisation and/or system:

- **QSIR Practitioner**: a six month programme for staff working on a service change programme, consisting of five day-long workshops and support provided through virtual action learning sets.
- **QSIR Fundamentals**: a one day programme which introduces participants to service improvement tools and approaches.
- **QSIR College**: designed to develop candidates (both clinical and non-clinical) to become associate members of the QSIR teaching faculty and go on to upskill other staff across their organisation or within their system.

The training covers a range of topics including *Leading improvement*, and they have worked with Royal United Hospitals Bath NHS Foundation Trust, Worcestershire Acute Hospitals NHS Trust, and Nottingham and Nottinghamshire ICS amongst others.

Contact: england.mixedmethods@nhs.net (with *QSIR College* as the subject of your email) if interested in developing a quality and service improvement capability teaching faculty or to organise a QSIR for boards session

RUBIS.QI

RUBIS.QI is the external facing quality improvement delivery arm of Northumbria Healthcare NHS Foundation Trust. It is the official support partner for the Health Foundation's scaling up improvement programme which supports teams with approaches or interventions that have been successfully tested at a small scale, shown to improve care and are now ready to be implemented more widely. RUBIS.QI is also involved in the Quality Improvement in Surgical Teams (QIST) collaborative, a partnership between Northumbria Healthcare, British Orthopaedic Association, University of York trials unit and NHS Improvement to drive improvements for patients having joint replacement surgery. In partnership with The King's Fund, RUBIS.QI delivered the first cohort of the NHS Improvement Leadership for Improvement Board Development Programme (2019-20).

Contact: via online form

The Improvement Academy

The Improvement Academy, established in 2013 as part of the Bradford Institute for Health Research to support innovation and improvement in delivery of health care services, is hosted by Bradford Teaching Hospitals NHS Foundation Trust. The academy is the implementation arm of the NIHR Applied Research Collaboration in Yorkshire and Humber and delivers the patient safety collaborative on behalf of the Yorkshire and Humber Academic Health Sciences Network (AHSN).

Over a number of years The Improvement Academy Model approach to implementation and improvement has been developed. The academy offers a nine month *Leading for improvement* advanced programme which works with organisations to develop those leading in improvement, as well as various quality improvement training offers.

Contact: academy@yhahsn.nhs.uk

If your trust provides externally facing support or you recommend a not-for-profit supplier, we'd be delighted to add information to the directory. Please contact twi@nhsproviders.org

QUALITY
IMPROVEMENT

DELIVER
AND IMPROVE
A BOARD MEMBER'S
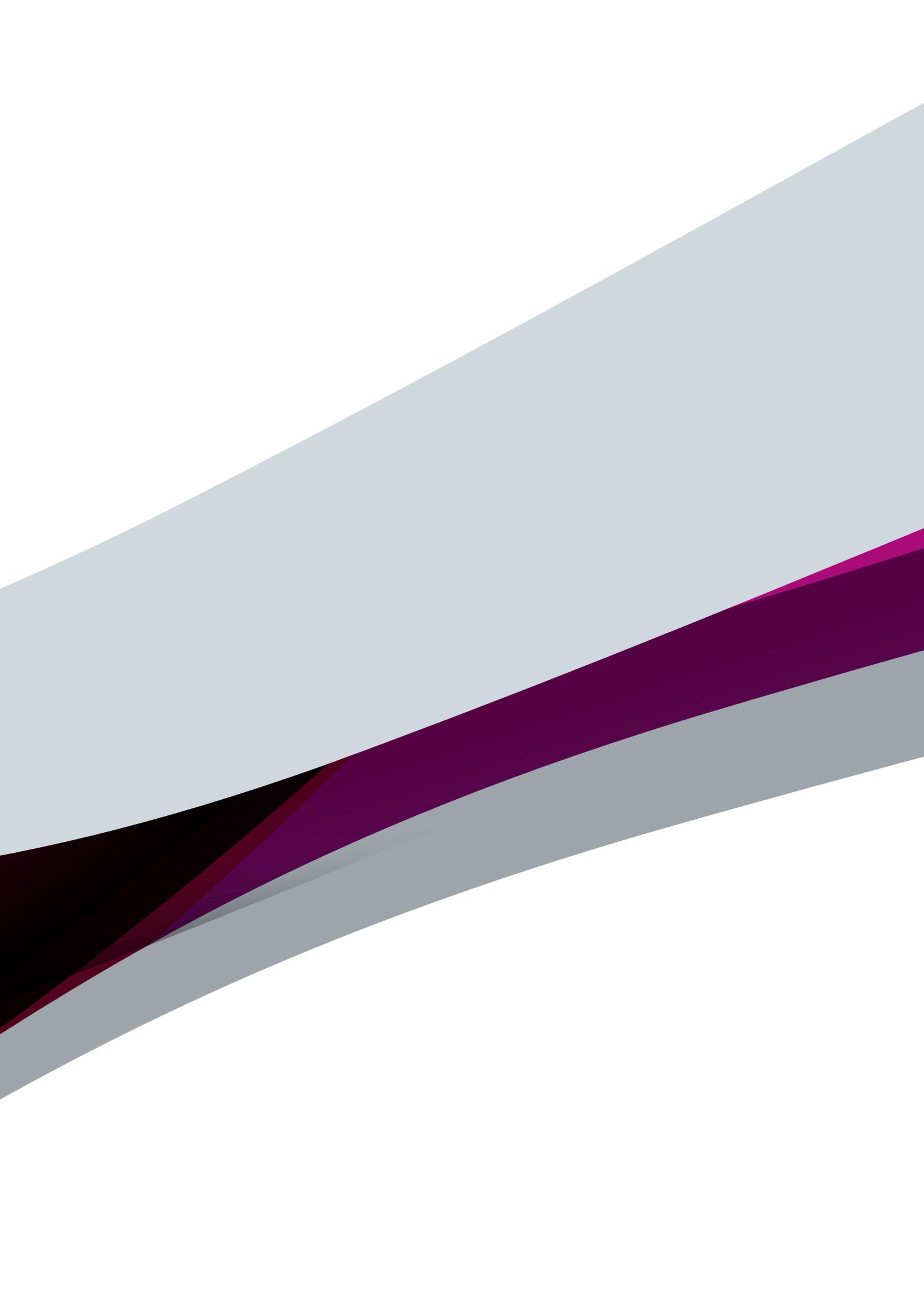GUIDE TO
TRUST-WIDE
IMPROVEMENT

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Interactive version

This report is also available in a digital format via:
www.nhsproviders.org/deliver-and-improve

For more information

Please contact:
twi@nhsproviders.org

NHS Providers is the membership organisation for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS foundation trusts and trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate.

NHS Providers has all trusts in voluntary membership, collectively accounting for £92bn of annual expenditure and employing more than one million staff.

NHSProviders

One Birdcage Walk, London SW1H 9JJ
020 7304 6977
enquiries@nhsproviders.org
www.nhsproviders.org
@NHSProviders