

NAViGO Health & Social Care CIC

# Quality Strategy

2017/19

## Do you require information in a different format?

Please contact us to arrange this:

T: (01472) 583054  
E: [info.navigo@nhs.net](mailto:info.navigo@nhs.net)



Easy read



Large print



BSL



Braille



Email or  
SMS text



Other  
communication  
support

# Background

An NHS with quality at its heart was the vision in Lord Darzi's "High Quality Care for All" in 2008. The report set out that good quality care is achievable when focussing on patient safety, patient experience and clinical effectiveness.

Lord Darzi set the scene of putting quality at the heart of the NHS and his work was an important milestone in our changing NHS. The failings at Mid Staffordshire NHS Foundation Trust highlighted that further work was needed to promote quality. There was a public enquiry and Robert Frances QC produced a detailed report highlighting a culture of secrecy and defensiveness, causing horrendous suffering to many patients. This enquiry identified a whole system failure and made 290 recommendations for improvement.

The result was the commissioning from the government of Sir Bruce Keogh to undertake a review of 14 other NHS Trusts as indicated by high patient mortality.

'Hard Truths' 2013 was the government's response to the Frances report and it guaranteed to fully implement 204 of the 290 recommendations.

Dan Berwick undertook an independent review in 2013 with a national advisory group including Sir Robert Frances and Lord Darzi. "A promise to learn, a commitment to act" was the resulting paper which produced a series of recommendations.

The focus on quality in the NHS has continued to gain momentum with several other reports being commissioned, The National Quality Boards, 'How to ensure the right people with right skills are in the right place at the right time'; requires all hospitals to publish ward staffing levels and carry out bi-annual safe nurse staffing reviews. The Cavendish review also identified the requirement for healthcare support staff to undergo identified training.

NAVIGO is committed to adhere to all the recommendations within these reports in order to ensure safe and effective care is delivered at all times. By using every learning opportunity we aim to continuously improve the quality of care we deliver to our service users.

# Introduction

Our quality and patient safety strategy covers the next two years and aims to strengthen the quality of patient care and ensure there is a clear strategic approach for Quality Governance within NAViGO by creating a culture of continuous quality improvement where quality is everyone's responsibility.

Our Quality and patient safety strategy will contribute to our overall organisational strategy, aims and objectives.

- Continuous quality improvement focussing on patient safety, patient experience and clinical effectiveness
- To embed the principles of a learning organisation at all levels
- To provide care that is recovery focussed
- To put the issues of our service users at the heart of all we do
- To have an organisational understanding of what constitutes quality care
- Maintain financial balance
- Recruit, retain and develop our greatest asset – our workforce.



This strategy is informed by The Frances Report, The Keogh Report, The Bewick Review – and the five CQC domains.

- Are services safe?
- Are services effective?
- Are services caring?
- Are services responsive to people's needs?
- Are services well led?

# NAViGO Quality Strategy

**Our Aim:** Providing services that we would be happy for our families to use

**Our Vision:** To deliver the highest quality mental health and social care

**Our Values:** Humanity and equity is our approach to care

Creating benefits for the wider community

Passionate about all that we do

Promote independence and choice

To be an employer of choice

As a social enterprise and a CIC we are committed to work together with our members as a team to deliver care to our service users.

## What is our Quality Strategy?

It is our plan for continuous improvement in the care we provide for our service users.

To achieve this we will:

- Create a culture that promotes a positive attitude and a desire to strive for improvement in our staff
- Listen effectively to all our stakeholders
- Ensure every event is a learning event
- Develop our staff team
- Attract and retain the best staff
- Work positively with our commissioners to ensure quality is at the top of their agenda
- Make quality improvement our core business
- Make speaking up everyday practice and celebrate this
- Maintain our financial viability

## How Will We Govern, Measure And Improve The Quality Of Care We Provide?

The CQC are a significant part of our quality assurance process, we have already had an inspection and were rated overall 'Good'. We will continue to strive to improve on this under their new 'Well Led' inspection process. We have been issued with our PIR and are already improving and consolidating leadership issues based upon this.

We have a team of staff completing internal inspections to regularly check in the CQC's 5 key lines of enquiry

- Safe
- Effective
- Caring
- Responsive
- Well led

We inspect all our clinical areas at least annually.

External validation of our inpatient services is assured through our involvement with the Royal College of Psychiatrists Quality Accreditation Schemes. The Royal College have standards set for community services and we will use these standards to benchmark internally so that we can target specific areas for quality improvement.

### **Quality Assurance programme Summary**

- Use RCP standards for community services to benchmark and improve quality
- Develop a group of service users and carers who can assist us in our mock CQC inspections and RCP inspections
- Continuously learn from near misses and actual incidents
- Benchmark services against NICE standards
- Develop regular meetings with quality improvement leads for all service areas
- All clinical staff to undergo training in quality improvement

### **Quality Control**

Our quality improvement team will oversee all quality improvement projects and set internal quality control mechanisms to ensure sustainability of any improvement made. These projects will be reported to the Board with regular updates. Audits will be performed by the quality improvement team.

### **Guidelines and Standards**

Best clinical practice as detailed in NICE guidelines is what we expect our clinicians to deliver as standard practice. Our benchmarking exercise will identify any gaps in provision which we will highlight to commissioners. These gaps will be considered in planning our annual training plans.

Our areas of priority include:

- Treatment of schizophrenia and psychosis
- Treatment of affective disorders
- Treatment of personality disorders
- Management of violence and aggression
- Dementia Care
- Treatment of eating disorder
- Service user experience

NICE standards will be used to assess our performance.

### **Collaboration with Service Users and Carers**

This is the cornerstone of our quality improvement strategy. There is a lot of work to be done in engaging fully with our service users and carers to ensure their engagement is meaningful to improving service provision. We do not underestimate their value in our quality improvement efforts.

### **Engagement of Service Users and Carers Programme Summary**

- Quality improvement leads in all service areas to recruit service users and carers to attend a welcome event in January 2018
- Recruitment of service user and carer volunteers into the quality improvement team in February 2018

### **What our Quality Improvement Volunteers will be Engaged in**

- Assisting with programmes of internal inspection/accreditation
- Identifying gaps in service provision
- Developing a journal of service user experiences
- Recognising or promoting good care and practice
- Helping to develop systems to capture more detailed feedback
- Developing peer support groups
- Feeding back directly to the board about their story and experience of using NAViGO services

We will further enhance the way in which we capture the experience of our service users using our services so that we can use this information to shape our services.

### **Wellbeing and Health, Improvement Service (WHISE)**

To address the physical health of our service users experiencing a severe and enduring mental illness we have developed our WHISE service which has already gained national accolade. This is a unique service protecting the physical health of our most vulnerable service users. The initial focus was on our CMHT clients, however, we are rolling this out across all of NAViGO services and aim to have a consistent level of provision across all services over the next 2 years.



# Quality Objectives

## What Are Our Quality Objectives?

NAVIGO sets its quality objectives annually in its Quality Account. For the coming year we will be focussing on 3 strategic quality goals:

- **1 To reduce the incidents of harm to service users**

Embed specialist Collaborative Assessment and Management of Suicide (CAMS) risk assessment tool

Reduce unwitnessed falls in older people's inpatient areas

Implement the 'Sign up to safety Scheme'

- **2 Improve on our engagement and involvement of service users and carers in NAVIGO's service areas**

Improve engagement with young carers and young service users

Continue to improve the carer assessment process

Develop experts by experience through community membership and volunteers within our services

- **3 Ensure care is monitored to demonstrate clinical effectiveness using appropriate tools**

Improve clinical pathways between NAVIGO service areas

Improve the use of clinical outcome measures and service user feedback within NAVIGO service areas

These priorities were informed by a review of our incidents, complaints, pals enquiries, listening to our service users, carers and our staff.

We aim to meet these objectives with a variety of interventions involving:

- Quality improvement
- Training and development
- Sign Up to Safety Initiative
- Engagement with service users and carers
- Accreditation and inspection
- Partnership working
- Evidence based interventions

## Quality Improvement

This is the first NAVIGO quality strategy so we need to introduce this to all staff and embed a culture of quality improvement throughout the organisation and develop our staff to be quality improvers. We aim to use the Q Initiative as a forum for sharing knowledge and learning from others.

## Quality Improvement Priorities

For all staff to have the support to improve the services they work in. Over the next 2 years all our staff will be trained in quality improvement, quality leads will have advanced training in this so they can lead projects with their peers. We plan to engage with other trusts to learn from those that have experience of formal quality improvement methodology.

## Quality Improvement Work Programme

Over the next 2 years we will have:

- Embedded the quality improvement leads forum
- Started quality improvement projects across all NAVIGO services
- Engaged service users and carers in quality improvement and facilitated training for them in this
- Engaged our commissioners with our quality improvement work
- Develop an IT strategy to share the good work of our quality team in NAVIGO
- Enhanced recruitment and retention.

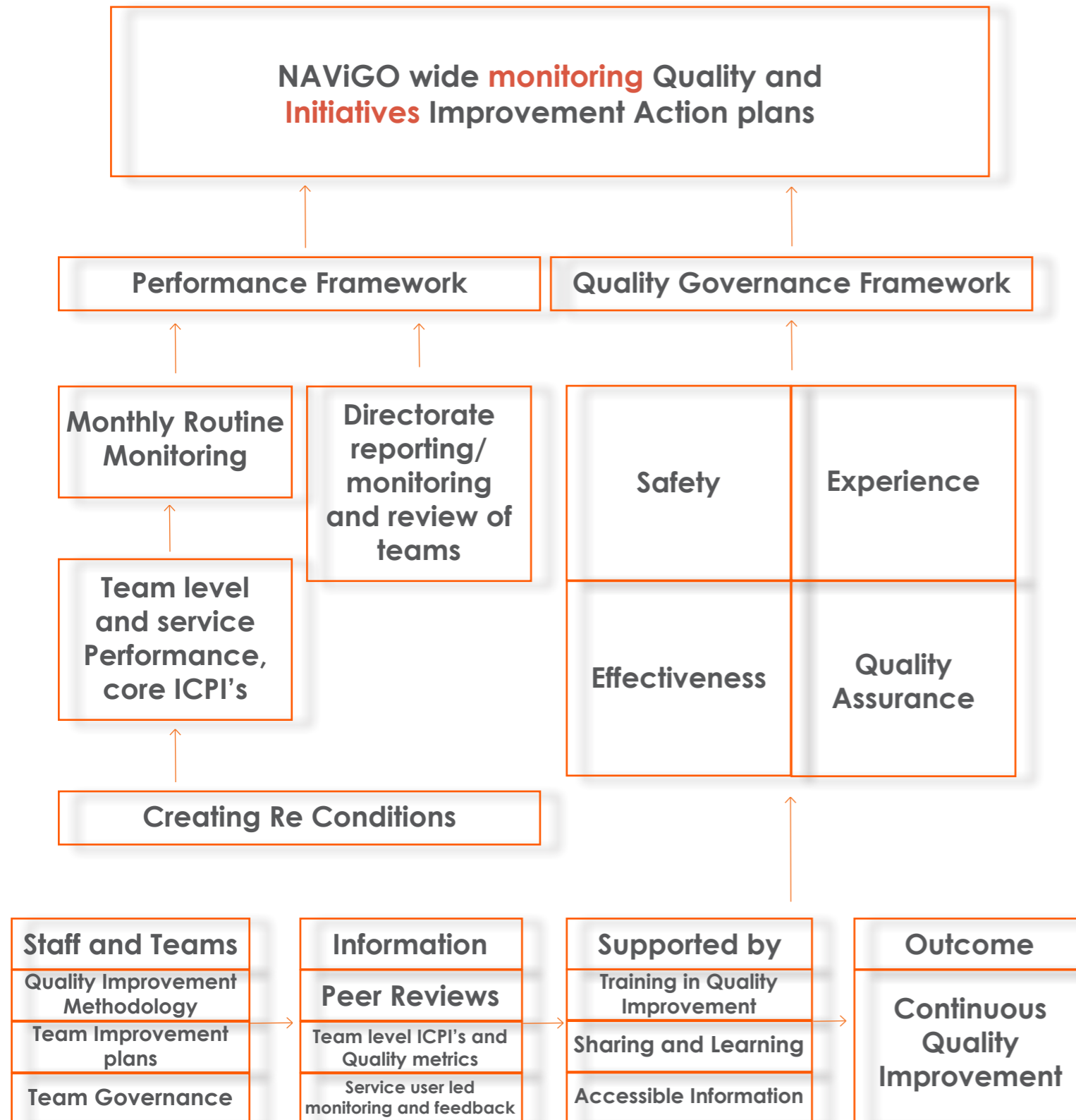
## Quality and Cost Implications

Although not the priority in our quality improvement strategy we will quantify the financial impact of our quality improvement initiatives. We will detail increasing efficiency and productivity and where relevant any cash savings and cost avoidance.

## Summary

Our ambition for quality improvement is high, this is the only way we can achieve better outcomes for our service users. We are fully committed to achieving all that we have set out in this strategy and feel that we have the foundations of a learning organisation. We will provide quarterly updates to the board to include progress against Quality Account Aims and Objectives.

# Quality Governance and Performance framework





**NAViGO, NAViGO House, 3 - 7 Brighowgate, Grimsby, DN32 0QE**

T: (01472) 583000 E: [info.navigo@nhs.net](mailto:info.navigo@nhs.net) W: [www.navigocare.co.uk](http://www.navigocare.co.uk)

Registered office: NAViGO House, 3 - 7 Brighowgate, Grimsby, DN32 0QE  
Company Registration Number 7458926

Copyright © NAViGO Health  
and Social Care 2017