

Board of Directors (Public)

SUMMARY REPORT

Meeting Date:

23rd March 2022

Agenda Item:

19(iii)

Report Title:	Quality Strategy	
Author(s):	Salli Midgley, Director of Quality Sue Barnitt, Head of Clinical Quality Standards Jo Evans, Continuous Improvement Manager	
Accountable Director:	Beverley Murphy, Director of Nursing, Professions and Operations	
Other meetings this paper has been presented to or previously agreed at:	Committee/Tier 2 Group/Tier 3 Group	Quality Assurance Committee
	Date:	9 March 2022
Key points/recommendations from those meetings	Final Draft version of strategy was presented to Quality Assurance Committee. Changes were accepted and strategy endorsed. No recommendations made.	

Summary of key points in report

This is the final draft of the Quality Strategy for 2022 – 2026 which is an enabling strategy to the Clinical and Social Care Strategy.

The strategy is grounded in the approach from NHSEI to move towards a Quality Management System which will co-ordinate and embed quality improvement, quality control, quality planning and quality assurance across the Trust. The strategy recognises that coproduction with people who use services, their families and carers is integral to understanding quality and links the Service User strategy to the Quality strategy.

Sustainability is strongly associated to quality, therefore this iteration of the Quality Strategy draws through the Trust ambitions aligned to the Green plan to ensure sustainable high-quality outcomes for the service users of today without compromising those of tomorrow.

Consultation has taken place to support the development of this strategy across the Trust and includes work undertaken earlier in 2021 led by National Collaborating Centre. The five priorities included within the strategy are:

1. Develop a culture of continuous improvement as an integral part of all that we do, ensuring a learning and just culture
2. Embed Coproduction and Lived Experience methodology in service developments and redesigns to provide responsive, accessible services
3. Support the implementation of an evidence-based Quality Management System (QMS) approach to co-ordinate and embed quality improvement, quality control, quality planning and quality assurance
4. Deliver a Quality Assurance Framework which provides tools and resources to assure and control evidence-based care, benchmarking nationally as good quality
5. Ensure sustainable high-quality outcomes for the service users of today without compromising those of tomorrow, by reducing healthcare's negative impacts on the environment and society

Recommendation for the Board/Committee to consider:							
Consider for Action		Approval	X	Assurance		Information	
The Board of Directors are asked to receive the final draft of the Quality Strategy and agree the priority areas and goals for achievement.							

Please identify which strategic priorities will be impacted by this report:				
Covid-19 - Recovering effectively	Yes	X	No	
CQC Getting Back to Good – Continuous improvement	Yes	X	No	
Transformation – Changing things that will make a difference	Yes	X	No	
Partnerships – working together to make a bigger impact	Yes	X	No	

Is this report relevant to compliance with any key standards ?					State specific standard
Care Quality Commission Fundamental Standards	Yes	X	No		
Data Security and Protection Toolkit	Yes		No	X	
Any other specific standard?					

Have these areas been considered ? YES/NO					If Yes, what are the implications or the impact? If no, please explain why
Service User and Carer Safety and Experience	Yes	X	No		Implicit within the strategy
Financial (revenue & capital)	Yes	X	No		NHSEI support will require some financial support
Organisational Development /Workforce	Yes	X	No		Developing the Quality management approach will support organisational development
Equality, Diversity & Inclusion	Yes	X	No		The strategy will seek to support diversity, inclusion and equality
Legal	Yes	X	No		There are no legal implications for the Strategy



 **Quality Strategy**
2022 to 2026

Delivering our vision and strategic direction





Contents

- Introduction to the strategy page 1
- SHSC and Sheffield page 4
- What has informed our strategy page 5
 - ❖ Policy context
 - ❖ Impact of the Covid Pandemic
 - ❖ Where are we now?
 - ❖ The views of service users, our staff and partners
- Our priorities page 13
- What will be different because of our strategy? page 20
- Our delivery plan page 21
- Monitoring progress page 27
- References page 28



Strategy approval

Date ratified by Board of Directors:	March 2022 (TBC)
Name of responsible Committee:	Quality Assurance Committee
Name of responsible Director:	Beverley Murphy
Name of author:	Salli Midgley
Date issued:	Version : Draft V0.10
Review date:	March 2023

▶ Introduction to the strategy

Welcome to our Quality Strategy 2022-2026. At SHSC, by 2026 we want to be 'The Best We Can Be', leading person-centred health and social care across Sheffield and supporting delivery of the Integrated Care System mental health and learning disability priorities

Our Vision is to improve the mental, physical and social wellbeing of the people in our communities.

Our strategic aims are to

- Deliver outstanding care.
- Create a great place to work.
- Make effective use of resources.
- Ensure our services are inclusive.

Our Clinical and Social Care Strategy¹ sits at the heart of all our delivery plans. It is focused on reducing health inequalities and delivering care that is **Person-Centred, Trauma-Informed, Evidence-Led and Strengths-Based**.

This **Quality Strategy** is one of eight enabling strategies working to support the delivery of the Clinical and Social Care Strategy in a coordinated framework.

SHSC Enabling Strategies



The purpose of our **Quality Strategy** is to support the delivery of our aims and key priorities set out in our Clinical and Social Care Strategy, ultimately facilitating our journey to becoming an improvement focused organisation.

Sheffield Health and Social Care Trust (SHSC) are committed to ensuring that high standards of quality and patient care are delivered for our service users whether they be resident within local SHSC inpatient areas or placed out of area with external providers.

Our quality-of-care principles are

- Service users should experience high quality care and support that is right for them
- Service users are fully involved in all decisions about their care and support
- Service users have confidence in the people who support and care for them
- Service users have confidence in the organisation providing their care and support
- Service users experience a high-quality environment

Our **Quality Strategy** speaks directly to the key priority of “Understanding What Matters to People”. It focuses on improving the experience, safety and quality of care for service users, carers and families through understanding what matters to people and co-producing systems and models of care. Through the implementation of our Quality Strategy we will:

- Develop a culture of continuous improvement as an integral part of all that we do, ensuring a learning and just culture.
- Embed Coproduction and Lived Experience methodology in service developments and redesigns in order to provide responsive, accessible services.
- Support the implementation of an evidence-based Quality Management System (QMS) approach to co-ordinate and embed quality improvement, quality control, quality planning and quality assurance.
- Deliver a Quality Assurance Framework which provides tools and resources to assure and control evidence-based care, benchmarking nationally as good quality.
- Ensure sustainable high-quality outcomes for the service users of today without compromising those of tomorrow, by reducing healthcare’s negative impacts on the environment and society.

What is Quality?

There has been a longstanding absence of a universally accepted definition of ‘quality’ within health care. However, the National Quality Board² has recently offered a nationally agreed definition. This definition refers to care that is effective, safe and provides as positive an experience as possible by being caring, responsive and person-centred. The definition also acknowledges that care should be well-led, sustainable and equitable, whilst recognising the environmental impact of service provision as part of efforts to improve care quality.



Our Vision for Quality



There is evidence that high performing organisations have evidenced-based Quality Management Systems (QMS) in place with quality improvement, quality control, quality planning and quality assurance co-ordinated and embedded in their culture. Over the next five years, we will invest in becoming an improvement focused organisation through the embedding of this approach.

▶ Our strategy on a page



Quality Strategy 2022 - 2026



Our Vision: to improve the mental, physical & social wellbeing of the people in our communities

Strategic Aims: Deliver outstanding care Create a great place to work
 Make effective use of resources Ensure our services are inclusive

Key Priorities:

<p>Develop a culture of continuous improvement</p> <p>as an integral part of all that we do, ensuring a learning and just culture</p>	<p>Embed coproduction and lived experience methodology</p> <p>in service developments and redesigns to provide responsive, accessible services</p>	<p>Implement an evidence-based Quality Management System</p> <p>to coordinate and embed quality improvement, quality control, quality planning and quality assurance</p>	<p>Deliver a Quality Assurance Framework</p> <p>to assure and control evidence-based care, benchmarking nationally as good quality</p>	<p>Ensure sustainable high-quality outcomes</p> <p>for the service users of today without compromising those of tomorrow</p>
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SHSC and Sheffield

Sheffield Health and Social Care NHS FT (SHSC) employs over 3000 staff and has an annual income in 2021 of £131m. We provide predominantly secondary care mental health, learning disability and specialist services to the people of Sheffield.

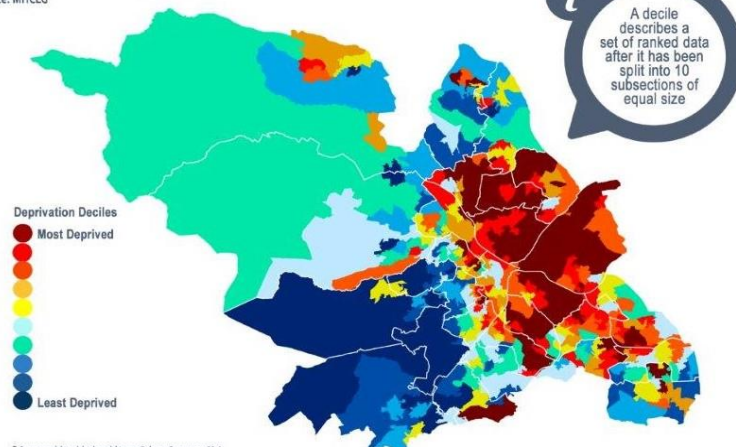
Our strategic direction sets out where we aim to be as an organisation by 2026 and what we need to do to get there, in an increasingly changing world and NHS environment. During the short to medium-term we will be working hard to improve the CQC ratings of our services, whilst also delivering our key strategic transformation projects.

To get there our Clinical and Social Care Strategy and our strategic framework of aligned enabling strategies will build a coherent programme of year upon year of continuous improvement across all our services, departments and partnerships. Our approach will be underpinned by a strong focus on living our values to support our cultural development and truly inclusive behaviours.

About Sheffield

Sheffield is an unequal city with an 8-10 year life expectancy gap between areas that fall within the 10% most deprived in the country (Burngreave, Firth Park, Southey, Manor Castle, and Park and Arbourthorne) and areas amongst the 1% most affluent in the UK (Fulwood, Ranmoor and Dore).

Index of Multiple Deprivation 2019 in Sheffield LSOAs
Source: MHCLG



We have a high concentration of people seeking asylum and refugee status living in the North of the city; a high population of people over the age of 65 years living in the South West of the city; and a high population of students living in the City centre.

We know that people in poorer parts of Sheffield live shorter lives and have worse health than those in more affluent areas. We also see similar disparities affecting groups with specific shared characteristics, such as people from BAME backgrounds, or people with learning disabilities. These differences and disparities are the health inequalities that exist in our city, which we see as unacceptable. We recognise that “one size doesn’t fit all” and our population requires different things of our services.

What has informed our strategy

Our Quality strategy sets out where we aim to be by 2026 and what we need to do to get there. Our strategy is shaped by the national and local context, our current position and the views of service users, carers, our staff and our partners.

Policy context

The requirement to focus on Quality is made clear in the NHS Long Term Plan, NHS Patient Safety Strategy and the revised Care Quality Commission regulatory framework. A plethora of evidence and research supports the direction for quality improvement, quality planning, quality assurance and quality control with embedded coproduction and co development with people who use services, their families and carers. This strategy also seeks to support the delivery of the national priorities outlined by the National Quality Board in the refresh of their 'Shared commitment to Quality'² document.

Developing the Quality Strategy during the Covid Pandemic of 2020/2021 brings into stark reality the ambitions from the Long-Term Plan to our Trust to develop new service models which gives more choice, better support and properly joined up care to our service users. The common challenges that face the system also unite us as we seek to recruit skilled, compassionate staff, improve and redesign within financial targets and improve the safety and wellbeing of those who not only use services but their families, carers and of our staff.

Climate change presents a further challenge. This will transform our way of life and is likely to worsen both the physical and mental health of our communities. The NHS contributes 5% of the country's carbon emissions, therefore adds to climate change and its associated health impacts. Given this, in 2020 the NHS declared its aim to become the "World's first 'Net Zero' Health Service" and setting ambitious evidence-based targets. The quality-based framework and principles required aligns with those required to overcome other common challenges, ensuring that high quality care can continue to be delivered, without compromising the health of future generations or our planet.

The vision for Sheffield Health and Social Care NHS Trust is to improve the mental, physical and social wellbeing of the people in our communities.

We will do this by:

- Working with and advocating for the local population
- Refocusing our services towards prevention and early intervention
- Continuous improvement of our services
- Locating services as close to peoples' homes as we can
- Developing a confident and skilled workforce
- Ensuring excellent and sustainable services

The care we want to provide

The bedrock of our Clinical and Social Care Strategy is based on the values of SHSC and the recovery principle, delivering care that is Person-Centred, Strengths-Based, Evidence-Led and Trauma-Informed. Our development plan focuses on:

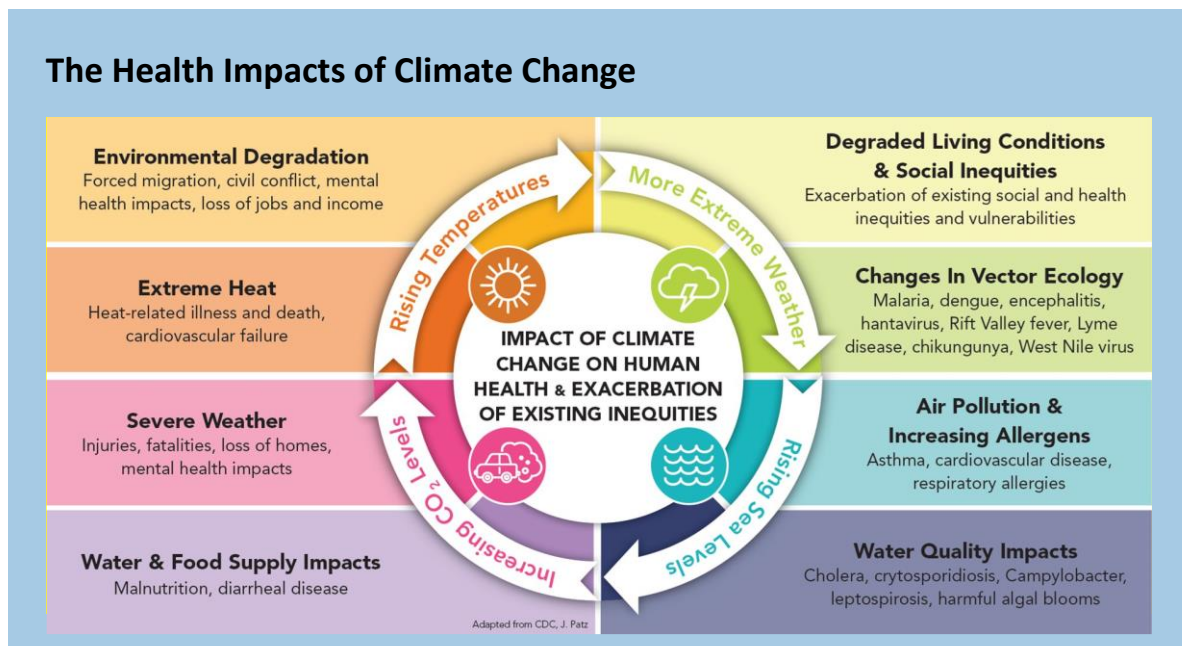
- **Understanding What Matters to People:** Improving the experience, safety, and quality of care for service users, carers and families through understanding what matters to people and co-producing systems and models of care.
- **Knowing We Make a Difference:** Seeking to help people to live well and reducing the inequalities associated with mental health problems and learning disability through early intervention, prevention and transformation of mental health care to be closer to communities and capturing impact and outcomes. We will develop systems and clinical practice where outcome measures are routinely used with service users to jointly monitor and share progress. We will develop a person-centred outcomes framework, tailored to what matters to people.
- **Creating Environments for Excellence:** Promoting the development of therapeutic teams through a well-trained workforce, working within with healing-built environments. To create environments for excellence and therapeutic environments that support care, we will develop environments that are safe, therapeutic, compassionate, enable best practice and provide the best for service users. These will be environments where people feel valued and listened to, and staff enjoy coming to work because they are supported to learn and develop together.
- **Transforming Care in Sheffield:** Building further and faster the partnerships and transformation with other organisations to become a more integrated health and social care system with improved outcomes, including a Zero Suicide ambition.
- **Leading the System for Outstanding Care:** Developing system quality networks for MHLDA and building an equitable system in South Yorkshire.

Addressing climate change to improve health and wellbeing

It is clear to protect our own health and wellbeing, and to protect the existence of future generations, we need to prevent further harm and adapt to an environment that is changing and the pace of change is accelerating. We can no longer let action on climate change be crowded out by other perceived more immediate concerns. We need to be ambitious if we are to meet this challenge and we have established key aims for our Green Plan:

- For the emissions we control directly (our carbon footprint) to be net zero by 2030 and for the emissions we can influence to be net zero by 2045.
- To provide sustainable services through ensuring value for money, reducing wastage and increasing productivity from our resources

- Continuously developing our approach to improving the mental, physical and social wellbeing of the communities we serve through innovation, partnership and sharing
- We will promote a culture of collaboration, supporting our people and suppliers to work together to make a difference
- We will innovate and transform to provide high quality care and support as early as possible in order to improve physical, mental and social wellbeing



Enjoying being at work

Our People Strategy sets out our ambition to create an environment in which our staff feel happy and safe at work and feel supported to fulfil their potential to provide the very best care for our service users. Staff who enjoy being at work provide better care, and when staff are more engaged, there is evidence of better service user care and higher levels of service user satisfaction.

Our intention is to build a workforce that is happy, resilient and able to fulfil their potential, as we develop our services and implement our Clinical and Social Care Strategy and our Green Plan. We will ensure our staff experience is a positive one to attract and retain the best people and be able to change and adapt to provide excellent care and meet the needs of our service users. We will do this by:

- offering choices to keep happy and well at work.
- attracting, recruiting and retaining people into roles, with the values and skills required
- providing the right jobs to meet service needs
- providing development and support to reach their potential
- creating a positive workplace culture where staff feel valued and happy, supporting our aim to be an employer of choice.

Impact of the Covid Pandemic

State of Care, CQC 2021

The impact of the pandemic on many who use health and social care services has been intensely damaging. Many people have struggled to get the care they need, and there is also evidence that some people have not sought care and treatment as a result of COVID-19

Health and social care staff are exhausted and the workforce is depleted. People across all professions, and carers and volunteers, have worked tirelessly to help those who needed care. The negative impact of working under this sustained pressure, including anxiety, stress and burnout, cannot be underestimated

It is essential that we learn from this period of time, both those quality challenges but also those services and teams that flourished.

Through inviting feedback from both service users and staff across our services, we have been able to identify the local impact of the pandemic and how this can inform the quality of our care provision in the future.

- **Telephone / virtual appointments** enhanced the quality of care for many individuals. Whilst the majority looked forward to the return of face-to-face appointments, feedback evidenced that continuing to offer our service users telephone / online appointments increased accessibility and flexibility of appointment times, reduced the number of wasted appointments, and contributed to the reduction in travel and environmental impact.
- However, many of our **Service User / Carer Support Groups** suddenly stopped during the onset of Covid due to the national restrictions, with individuals consequently experiencing isolation and a decline in their health. We can learn from this, recognising the need to be more creative in our offer of peer/group support moving forward.
- The immediate need for staff to quickly adapt, collaborate and strengthen their support for each other during the pandemic demonstrated the **high-quality staff working within Team SHSC**. We are proud of our offer to colleagues, but also recognise opportunities for us to strengthen this support, giving more consideration to the impact service users' and carers' mental health has on staff.

Where are we now?

In reviewing our Quality Strategy 2016 – 2021 it is apparent that we did not realise all the Aims & Objectives that were set. During 2020 we found ourselves challenged by our regulators on the quality of our care; the assurance and control mechanisms failed and we were unsighted on safety and quality issues impacting on both our service users and carers, but also on our staff. Our quality was variable and whilst some parts of our system were challenged, others thrived and flourished.

During 2020 and 2021 we have been working hard to restore those critical safety requirements and demonstrate our commitment to providing good care that is evidence based. Set in the context of the Pandemic and challenges across estates, staffing and infrastructure, Team SHSC has delivered on a range of required improvements but also found capacity to innovate, explore and share some fantastic practice and services.

What is going well?

We have delivered on year one of our **Back to Good Programme** to meet the regulatory requirements from the CQC inspections in 2020/2021.

We have an inclusive **Clinical and Social Care Strategy** which gives us a road map to drive service delivery and work in a way that supports person centred, strength based, trauma informed evidence led care.

We have a number of services that are delivering **good quality care** with positive feedback from service users and good staff morale and retention. Over the past few years, a range of our services have also received accreditation from external sources.

As one of the four key partner organisations of the **Sheffield Microsystem Coaching Academy**³, SHSC is ideally placed to continue to build improvement capability across Team SHSC.

Organisationally, there is clear enthusiasm, positivity and energy amongst Team SHSC for **continuous improvement**, understanding the opportunities for developments such as reducing inequalities.

Processes are in place to engage all teams in **quality planning** through the development of annual Business Plans, identifying co-dependencies and ensuring strategic alignment.

We have created our first **Green Plan**, setting out our strategy to become more sustainable, and several services have gained College Centre for Quality Improvement (CCQI) 'Sustainable Service accreditation'.

What do we need to improve?

We must become more inclusive of **families and carers** in the way that we work.

We must invest in the leadership and growth of **continuous improvement** to build sustainable knowledge and skills at every level of the organisation.

We must **embed and assure** the improvements we have made and continue to make.

We must develop a robust **knowledge management system** / framework to support the adoption of good practice and shared innovation.

We must build **clinical quality standards** into our regular performance reporting.

We must ensure that improvements are environmentally, socially, and financially **sustainable**.

We must continue to **support and empower our staff** to deliver the best possible care, creating psychologically safe environments and providing ways for our staff to share their thoughts, views and ideas.

What is happening that can help?

Our Clinical and Social Care Strategy is clear about the care we want to deliver. The bedrock of the strategy is based on the values of SHSC and the recovery principle, delivering care that is Person-Centred, Strengths-Based, Evidence-Led and Trauma-Informed.

We are reviewing our **Service User Experience Strategy** and **Carer Strategy** to support coproduction and co-development across our strategic and improvement work. An implementation plan and resources will be aligned to deliver on the implementation plans.

We have Introduced **new innovative roles** to help us truly understand the experience of our service users and their families which informs the design and delivery of the care we provide.

Our **information systems** and **performance reporting** continues to improve and be refined to give teams accessible information about their performance and quality indicators.

We are developing a range of **quality assurance** mechanisms to support teams monitor against defined quality standards, working in a proactive and transparent way and involving lived experience colleagues in the assessment of these standards.

We have developed a **partnership with NHS England and Improvement** (NHSEI) to maximise expertise and shared values to implement an evidence-based Quality Management System (QMS) approach and further accelerate the development of our ambition to become an improvement focused organisation.

What do we need to pay attention to?

Retention: Our staff are exhausted from working through the pandemic and the increasing health and social care needs for the people of Sheffield; we must pay attention to their wellbeing.

Recruitment: With national recruitment shortages attracting high calibre staff is competitive. We must review our recruitment strategies and marketing to ensure SHSC is an employer of choice.

Skills Development: Our staff have had to adapt to an ever-changing landscape over the last few years as a result of the Covid Pandemic. Services have had to make decisions about what and how we provide care at times with limited guidance and at pace. We need to ensure that all our staff have the right skills and capabilities to promote continuous improvement and delivery of best practice.

Climate Change: Every little helps and whether changes are on a larger scale organisationally or smaller initiatives led by teams and services doing things differently, they all have an impact.

The views of service users, carers, our staff and our partners

The approach we took in creating our Quality Strategy was to engage as widely as possible with service users, carers, staff and partners to listen to experiences, gather ideas about improvements and priorities and bring people on board.

During our 2021 Annual Continuous Improvement Event, we held a number of 'drop in' engagement events seeking input to the development of this strategy. We facilitated structured conversations with our colleagues, service users and carers through established development and team sessions and internal governance meetings including our dedicated SunRise meeting (SHSC service user group). We asked the participants what quality meant to them and through the conversations aimed to understand the challenges and opportunities for improving the quality of the care we provide across the organisation.

The November 2021 Quality Improvement Forum was dedicated to focusing on a Greener SHSC, providing the opportunity for a group conversation about how best to progress with ongoing ideas as well as any new ones. Outcomes from that forum have helped further shape the direction of this strategy.

What is important to our service users?

Two clear messages came across within the conversations we held with our service users:

- Service users want to be heard, they want to know when they give us feedback that we will use it and seek to improve.
- Service users, carers and families want to be involved in service redesigns, they want a voice that influences both their care and care for the people of Sheffield.

Service users highlighted the importance of being treated as individuals and being made to feel that they matter. It was felt that services were not always that well integrated and didn't always communicate with each other; this impacted on trusting relationships between our service users and the services they were receiving care from.

A service users view on what is important to them:

That services and staff are **“Helping you to help yourself and get back to your life”**

What is important to our staff?

Staff tell us they want to have pride in their work and pride in their place of work, they want to have a shared vision of quality with tools to help them measure quality and opportunity to continuously improve through feedback from service users and carers. Staff highlighted the need for time for reflection and processing, as well as time and support to implement and embed new practices.

Staff want to ensure dissemination of learning and use this to continuously improve the care we offer. They want us to follow-up research where there are unanswered questions, through developing closer links between research, evidence, clinical effectiveness, audit and quality improvement.

They want us to become an environmentally and socially sustainable Trust as well as recruiting and retaining good colleagues.

A staff member said **“The people who deliver the care and the people receiving care need to be the ones making the improvements”** This reinforces the shared belief between our staff and people who use services that we need to work together to deliver on quality.

What is important to our partners?

Partners want us to grow and develop, they want us to continue our journey `back to good` and to be the best we can be as part of system wide development. Understanding our contribution to the Green Plan and sustainability is another important area for us to deliver on.

How has this shaped our strategy?

From consulting with staff, service users, families and our partners over 2021 it is evident that we need to create the time, skills and capacity to think about quality. A clear theme that arose during consultation was about the drive to achieve targets set by the system to improve performance and the potential impact on quality.



Our priorities

Through the development of our Quality Strategy, we have agreed the priorities that will support us to make lasting improvements to the care we provide and to deliver our Clinical and Social Care Strategy. Delivery will be underpinned by the growth of an evidence-based Quality Management System (QMS) approach to co-ordinate and embed quality improvement, quality control, quality planning and quality assurance.

- Priority 1.** Develop a culture of continuous improvement as an integral part of all that we do, ensuring a learning and just culture
- Priority 2.** Embed Coproduction and Lived Experience methodology in service developments and redesigns to provide responsive, accessible services
- Priority 3.** Support the implementation of an evidence-based Quality Management System (QMS) approach to co-ordinate and embed quality improvement, quality control, quality planning and quality assurance
- Priority 4.** Deliver a Quality Assurance Framework which provides tools and resources to assure and control evidence-based care, benchmarking nationally as good quality
- Priority 5.** Ensure sustainable high-quality outcomes for the service users of today without compromising those of tomorrow, by reducing healthcare's negative impacts on the environment and society

Priority 1

Develop a culture of continuous improvement as an integral part of all that we do, ensuring a learning and just culture

Why have we prioritised this?

There has been an on-going challenge for progressing the Quality Improvement (QI) agenda across SHSC that relates to the concept of QI being seen as 'something separate'. The impact of recent service reconfigurations affected many services, staff, service users and their families/carers. Similarly, the latest visits from CQC generated additional work, particularly for many senior members of staff. Consequently, teams have continued to struggle to find the time, the staff numbers or the motivation to meet to explore quality improvement. As a result, many service improvements have developed from the teams 'reacting' to situations as they arise.

Driving a culture of continuous improvement seeks to adopt a more 'proactive' ethos, investing time and resource to constantly develop services as opposed to one-off projects as they arise. Change at scale and with increased pace is still required in terms of shifting individual and organisational thinking to one of continually learning from experience to provide better and safer care.

In order to improve the services we provide it is essential that we listen to and understand the lived experience of our staff, service users, their families and carers and we support them to take an active role in the continuous improvement of our services where possible.

We have set the following goals

- Develop and implement a quality improvement delivery plan to promote and enable Team SHSC to embed improvement work into everyone's 'day job'
- Build continuous improvement capacity and capability at all levels of the organisation focusing on improvement skills relevant to roles and priorities
- Encourage and develop an environment and culture in which our workforce feels supported, able to speak up, contribute ideas, raise concerns and learn from errors
- Build on the city-wide partnership for improvement by maximising benefits of the Sheffield Microsystem Coaching Academy, increasing the number of trained improvement coaches at SHSC year on year
- Ensure efforts are acknowledged and celebrated, including at Board level
- Agree a formal process for exploring and approving appropriate partnerships to support improvement projects across the Trust

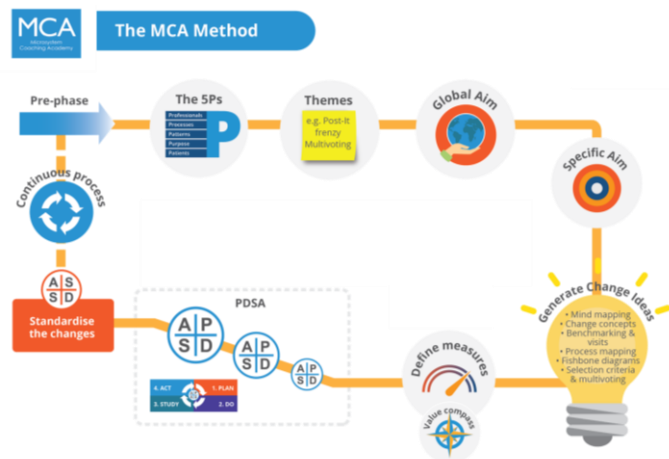
“Quality improvement is about giving the people closest to issues affecting care quality the time, permission, skills and resources they need to solve them. It involves a systematic and coordinated approach to solving a problem using specific methods and tools with the aim of bringing about a measurable improvement.”

Quality improvement made simple. London: The Health Foundation, 2021⁴

Evidence has not yet evolved to the point where one improvement approach can be recommended above another. However, evidence does show that discipline is important to commit to one methodology and strive to embed this within the culture of the organisation.

The QMS recognises the importance of building upon any existing improvement approach or methodology in use locally, as opposed to bringing in anything new. As SHSC is one of the four key partners in the Sheffield Microsystem Coaching Academy (MCA), the intention is to build on this existing improvement approach.

The Microsystem improvement methodology involves engaging multi-disciplinary members of staff, as well as service users and carers/family members, in a structured process to improve the quality of care for patients and the staff who work there. The methodology supports a wide range of national recommendations in terms of approaches to continuous improvement.



Priority 2

Coproduction and Lived Experience methodology is embedded in service developments and redesigns to provide responsive, accessible services

Why have we prioritised this?

National strategy and clinical guidance will steer service redesign and provide a structure framework but experience of those services can only be understood from a service user and carer perspective.

We want to increase the influence of experts by experience in the services we deliver, build trusting relationships and involve people as part of all service redesign, organisational governance and continuous improvement plans. To do this we need clear involvement mechanisms and standards. We need to know when we do this well and shine a spotlight on identified priority areas and key themes

We have set the following goals

- A new Involvement Strategy with a well-developed implementation plan will be launched in 2022 with four priority themes
 - Embed lived experience voices
 - Improve service user experience
 - Develop strong feedback mechanisms
 - Improve partnership working
- To set 2022 as the Year of the Carer and Family in SHSC recognising the improvements in how we work with families and carers that are required.
- Coproduction standards will measure the involvement of people who use services, their families and carers paying attention to representation of diversity and inequalities in the system.

- There is a clear strategy for the continued development of Peer Support which builds on the existing Peer Support workforce in line with the ambition of the NHS Long Term Plan
- A clear focus for gathering service user feedback is incorporated within our service level business plans.

Priority 3

Support the implementation of an evidence-based Quality Management System (QMS) approach to co-ordinate and embed quality improvement, quality control, quality planning and quality assurance

Why have we prioritised this?

To maximise opportunities through learning from others, SHSC acknowledges the significant benefit of working in partnership with an organisation experienced in successful application of a QMS approach. A partnership that brings expertise and shared values is vital, as well as one that supports a collaborative way forward to developing better patient care. Working in partnership with NHS England and Improvement (NHSEI) will support successfully achieving this ambition.

We have set the following goals

- Develop a Delivery Plan to support implementation of a QMS approach
- Align the relevant enabling strategies to ensure a unified approach to leading quality across the organisation
- Develop a language and culture around quality that is meaningful and accessible to everyone, encouraging inclusivity and involvement from the whole of Team SHSC
- Use QMS as an organisational framework for bringing together and building on the work already underway in quality planning, control, improvement and assurance
- Team SHSC will work collaboratively at all levels to ensure everyone is able to access, understand and contribute to SHSC becoming an improvement focused organisation

Priority 4

Deliver a Quality Assurance Framework which provides tools and resources to assure and control evidence-based care, benchmarking nationally as good quality

Why have we prioritised this?

Maintaining a robust approach to quality assurance is a critical function of a well led organisation. We recognise the need to ensure that the standards are clearly defined, understood by those expected to deliver them, monitored robustly and action taken when they are not being met. Our quality assurance framework will be strengthened to enable us to respond more flexibly to the way CQC carry out their regulatory functions as outlined in the CQC 2021 strategy 'A new strategy for the changing world of health and social care'. Our ambition is to have an internal assurance recognition programme that supports identification and development of best practice and aims to promote shared learning across the organisation. We will ensure that our quality visiting programmes make best use of the resources and information we have available. We will triangulate the intelligence we have to provide clarity regarding the standard of care being provided by our services and understand the support required to monitor, maintain and promote improvement. For example, where possible we will facilitate Board Visits to areas following a Culture and Quality visit; this will promote opportunities for focussed conversation regarding areas of best practice and improvement and further support required.

We also need to understand the variation in the quality of our services and how this may contribute to inequity and inequalities for the communities we serve. Our service users expect standardised quality care that does not vary dependent on practitioner or postcode. We know in some services our quality controls were not robust and did not tell us that care was poor.

We have set the following goals

- Implementation of the Patient Safety Strategy from NHSEI
- Roll out of Tendable audit platform
- Completion of Culture and Quality visits across the organisation with internal rating and achievement awards. The culture and quality programme will utilise a range of methodologies to detect potential closed cultures.
- Implement a quality assurance framework to embed improvements and ensure governance structures have robust oversight and scrutiny which includes routes of escalation
- Using patient experience and staff reported data to understand safety, effectiveness and experience in our services through the IPQR and team dashboards.

- Review of the Physical Health Strategy and associated implementation plan and develop a set of Physical Health Key Performance Indicators (KPIs) that help us improve the health and wellbeing of our service users.

Priority 5

Ensure Sustainable high-quality outcomes for the service users of today without compromising those of tomorrow, by reducing healthcare's negative impacts on the environment and society

Why have we prioritised this?

Climate change poses the most profound long-term threat to the health of our communities. We need to understand and reduce the negative environmental and social impacts of our services to deliver the Trust's commitments to a 'Net Zero NHS' and to improving the wellbeing of the people in our communities. This commitment to sustainable healthcare must run throughout all quality improvement.

We have set the following goals

- Implementation of our Trust Green Plan including developing sustainable models of care.
- Meaningfully assess and improve environmental, social and financial impacts of current services and plan those of the future.
- Ensure that where applicable, our services accredited by the College Centre for Quality Improvement gain additional 'Sustainable Service accreditations'.
- Empower and engage staff at all levels to see social and sustainability as part of everyone's role, feel able to contribute ideas and enact improvements.
- Encourage frontline staff and service users via projects such as SHSCs 'Small Change BIG Impact' to re-design the physical environment by enhancing and maximising use of green spaces, working in parallel with the green plan and connecting with nature.



What will be different

Across our organisation, every day that passes in every service we provide, there exists a rich tapestry of experiences of care received and delivered. We believe that the learning from the experiences from our services users, staff and carers gives essential insight into the good care that is provided but also the gaps that sometimes exists between care as intended and care as experienced. We will use this insight to evaluate and understand the impact of our [name of] strategy.

From listening to our service users, carers, our staff and key partners we are clear about the benefits we aim to achieve from this strategy.

Trust strategic aims	Intended benefits
Deliver outstanding care	<ul style="list-style-type: none"> • Coproduction of continuous service improvements, influenced and informed by both those using our services and those providing them
Create a great place to work	<ul style="list-style-type: none"> • Creating a learning and improvement focused environment, where everyone feels able to speak up, contribute ideas and learn from each other • Create a culture that supports our workforce, offers space for reflection and has a continuous focus on staff wellbeing • Attract and retain staff by providing training opportunities and skill development around all aspects of quality, supporting improved job satisfaction
Make effective use of resources	<ul style="list-style-type: none"> • Use of outcomes to monitor effectiveness of our services to ensure we are delivering quality care • Creating services with low environmental, social and financial impacts, to ensure a sustainable future.
Ensure our services are inclusive	<ul style="list-style-type: none"> • Embed a culture of coproduction where staff, service users, carers, families and partners can work together to improve the quality of care provision

“We know having spoken to our service users, staff, partner agencies and commissioners that we are connected by a single aim of seeking to improve the mental, physical and social wellbeing of the people in our communities.”



Our delivery plan

We recognise that the changes we will implement need to follow the key deliverables outlined within the NHS Long Term Plan, meet the needs of service users and carers, commissioners and partners to deliver on the goal of improving quality and reducing health inequalities. We will focus on incremental change, progressively strengthening our partnerships and delivering tangible improvements in health and wellbeing.

Separate comprehensive delivery plans will sit alongside this strategy, developed on an annual basis and detailing the priorities to be progressed during each twelve-month period ahead. These plans will identify specific measurable aims, timescales for completion and action owners. This will enable careful monitoring against progress in a timely manner and allow for flexibility in approach as may be required over the five-year period of this strategy.

Priority 1 – Develop a culture of continuous improvement (CI)

Strategic Alignment

- Align coherent and accessible narrative for continuous improvement to the Trust vision, strategy and priorities
- Clear governance structures, processes and metrics to support delivery of Trust vision, strategy and priorities

Leadership for Improvement

- Board members, clinical and professional leaders at all levels know and understand their role in leading continuous improvement in key priority areas
- Staff at all levels are supported to lead and deliver continuous improvement work
- Achievements and learning from improvements are captured, shared and celebrated across Team SHSC

Everyone's Role

- Embed continuous improvement in recruitment and induction processes
- Embed continuous improvement in business planning processes
- Embed continuous improvement in PDR process
- Celebrate improvements and learning through the SHSC Annual Improvement Event

Building Improvement Capacity & Capability

- Develop 'dosing' approach for building and embedding improvement skills and support at every level of the organisation
- Make Quality Improvement skills training and coaching support accessible for all teams to lead continuous improvement work

Priority 2 - Coproduction and Lived Experience

Embed Lived Experience Voices

- Increase the influence of experts by experience (EbE)
- EbE roles are properly inducted, supervised and supported
- Increase in number and diversity of EbE workers

Improved Service User Experience

- Reach and communicate with groups who are underrepresented
- Utilise different mechanisms of communication
- Shine a spotlight on key themes and priority areas
- Build trusting relationships between leaders, staff and service users

Strengthen Feedback Mechanisms

- Seek out service user experience feedback and use this to embed continuous quality improvement
- Close the feedback loop

Partnership Working

- Increase dialogue and partnership work with a range of community /voluntary organisations
- Learn from good practice elsewhere
- Develop a culture of creativity in service user engagement within and outside the organisation

Priority 3 - Implement an evidence-based Quality Management System (QMS)

Defining our Expectations

- Work in collaboration with NHSEI to maximise QMS expertise and shared values

- Build QMS language into all aspects of our work to help embed a system-wide approach to quality across SHSC
- Align the relevant enabling strategies to ensure a unified approach to leading quality across the organisation
- Develop key indicators to measure success and identify areas for continuous learning
- Ensure coproduction is at the heart of development and delivery of a QMS

Strategic Alignment

- Use QMS as an organisational framework to align quality planning, control, improvement and assurance
- Team SHSC will work collaboratively at all levels to ensure everyone is able to access, understand and contribute to SHSC becoming an improvement focused organisation

Celebrating and Sharing Best Practice

- Develop a range of internal and external communications to help create and embed a language of quality management
- Develop a proactive approach to showcasing improvements and achievements across SHSC and beyond
- Collaborate with local, regional and national partners to share best practice, knowledge, learning and skills

Priority 4 - Quality Assurance Framework

Defining our Expectations

- Development of standards for practice related to Fundamental Standards of Care (Tendable)
- Development of Out of Area Quality Assurance and Monitoring Process
- Work with partner agencies across the system to ensure a joined up collaborative approach to patient safety initiatives, investigation framework (PSIRF) and system wide challenges.
- Implementation of the Patient Safety Syllabus to Trust staff along with access to resources that aid learning and development (Staff focussed Learning Lessons, Learning Hub, Human Factors Training).
- Development of key performance indicators for Physical Health and Service User and Carer Experience.

Measuring our Success

- Increase the utilisation of our electronic audit platform (Tendable)
- Develop a set of prioritisation criteria to support timely review of services through our Culture and Quality Visit Programme.
- Triangulation of intelligence to ensure best use of resources and optimum outcomes

Celebrating and Sharing Best Practice

- Create a compendium of learning derived from Quality Assurance activity to strengthen organisational memory, share good practice and disseminate in a timely and meaningful way.
- Development of Quality Intranet Pages on Jarvis

Promoting Equity

- Review incidents and patient experience to understand any inequalities affecting particular communities or communities we are not hearing from and act to address these.
- Involve and support our service users, carers and families where appropriate, in investigations to ensure that their experience of care is understood and informs learning and subsequent improvements.
- Embedding inclusion, diversity and equity as part of our Culture and Quality Visit programme.

Priority 5 – Sustainable Services

Engaging the Team

- Embed our trust sustainability goals and principles into staff induction.
- Develop and deliver sustainability training for staff at all levels to gain necessary skills and knowledge.
- Engage and involve service user groups in identifying, developing, and prioritising sustainable improvements.

Measuring and Sustaining Improvement

- Develop sustainability markers for integration within Culture and Quality visits.
- Integrate sustainability principles within our QMS to enable sustainable improvements and innovations whilst ensuring any changes do not have unintended environmental and social costs.
- Develop and integrate environmental and sustainable impact assessments into our business planning processes.

Celebrating and Sharing Success

- Create a Green Staff Network which integrates with existing staff and service user networks.
- Collaborate with regional Integrated Care System partners to share best practice, knowledge, and skills.
- Develop a range of internal and external communications to champion examples of sustainable care innovations.

Resource plan

Resources	What is required to support delivery of our strategy
Workforce plan	<p>Our staff need the right skills and knowledge to support them in their roles and promote delivery of quality priorities.</p> <p>Workforce that supports the delivery of SHSC values and behaviours</p>
Digital plan	<p>Flexible, responsive and accessible methods of collecting data from our Electronic Patient Record System</p> <p>Development of systems that help us to understand themes and trends which can then be used to inform learning</p>
Estates plan	<p>Provision of sustainable services through ensuring value for money, reducing wastage and increasing productivity from our resources</p> <p>Provision of services that promote the privacy, dignity and optimise therapeutic outcomes for our service users, carers, and their families</p>
Research & innovation	<p>Easy access to best practice evidence based guidelines which support services to define high quality care, measure outcomes and benchmark against similar services</p>
Quality plan	<p>The Trust needs to ensure that policies and procedures are in line with national guidance and best practice which supports our staff to deliver good quality care.</p>
Finance plan	<p>Need to ensure the leadership and capacity is in place to support the development of our quality management system approaches</p>

Milestones

A high-level timeline for delivery is defined below and this will be supported by a detailed implementation plan that clearly define the actions required and the timescales for achievement.

2022	Robust QI skills training programme in place offering a suite of options to ensure accessibility and suitability for all	Benchmarking data for Inpatient areas against the fundamental standards of care will be available
2023	Continuous improvement embedded in all recruitment, induction, and PDR processes	Implementation of the SHSC Quality Management System (QMS) Approach
2024	All SHSC staff will have an enhanced understanding of Patient Safety having completed an agreed syllabus and implemented the Patient Safety Incident Response Framework (PSIRF)	Completion of Culture and Quality visiting programme across the organisation
2025	Evidence of established relationships across the city of Sheffield with voluntary and third sector communities that reflects the diversity and vibrancy of lived experience and support active involvement with SHSC	Collaborative working with local, regional and national partners to share best practice, knowledge and learning regarding our integrated approach to Quality Management
2026	Evidence of QI skills, knowledge and ownership embedded at every level of the organisation	Significant reductions in the emissions we control directly to support our goal of 'net zero' by 2030

Monitoring progress

Monitoring progress

We will review our performance in delivering this strategy. We will monitor the implementation of our delivery plan, evaluate the impact this has and adjust our plans when necessary as we move forward.

We will ensure that our program of strategy implementation is triangulated, aligned and embedded in our annual operational planning process and linked to regular performance reviews. Effective governance arrangements will be important to our success. The delivery and success of our quality strategy will be reviewed by the Quality Assurance Committee.

Each year we will set out in our Annual Operational Plan those activities that we will be delivering as part of our strategy delivery. The Annual Operational Plan is monitored through our governance arrangements and progress reports are provided to our Finance and Performance Committee, each quarter.

Any risks relating to the delivery of our Strategic Direction will be escalated from our Corporate Risk Register to our Board Assurance Framework and discussed at Board subcommittees and the Board.

Continuing to develop our plans with our service users, carers and staff

We will continue to monitor national and best practice guidance to continually adapt and refine our work programmes to ensure that our approaches are aligned to deliver the best quality outcomes for our service users, their families and carers and staff. More specifically, over the course of 2022 we are expecting the release of the new Patient Safety Incident Response Framework which will help to shape how SHSC respond, manage and learn from patient safety incidents. Engaging with our staff, service users and their families to coproduce our methodology is integral to delivering a successful approach.

We will use our existing forums and reporting arrangements to ensure that progress against our implementation plan maintains pace and focus. Predominantly oversight will occur through:

- Lived Experience and Coproduction Assurance Group & Service User Engagement Group
- Infection Prevention Control and Physical Health Committee
- Quality Assurance Committee
- People Committee

Our defined approach to quality improvement demonstrates our commitment to continuously work in collaboration with service users, carers/family members and staff to improve the quality of care we provide.



References

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3. Sheffield Microsystem Coaching Academy. <https://www.sheffieldmca.org.uk/>
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