

The Pursuit of Healthcare Excellence

NHS Greater Glasgow and Clyde
Healthcare Quality Strategy

2019/2023

The Pursuit of Healthcare Excellence



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NHSGGC Quality Vision

“Working together to provide excellent care for the public we serve.”



1. Introduction

NHS Greater Glasgow and Clyde (NHSGGC) is the largest Health Board in Scotland.



NHSGGC provides health and social care services to the **1.15 million people resident in our area**



We provide **specialist services** on behalf of **West of Scotland**

And **national services** which are accessed from **across Scotland**



The Board has an annual turnover of **£3.337 billion per year**



And employs **39,286 staff**

The provision of high quality health and social care services to our population is at the centre of everything we do. The success of the NHS over the last 70 years has led to people enjoying longer and healthier lives. One of the key challenges for NHSGGC is how to improve and transform our services to meet the current and future health needs across all health and care settings. As our health and social care services change, we also need to make sure that the care that we provide to our patients and their families or carers is person centred and meets high standards of clinical quality and safety. This Healthcare Quality Strategy is a framework which outlines how we intend to continuously improve the quality of care to our patients, carers and communities over the next five years.

The Healthcare Quality Strategy sits within the context of the Patients Rights Act which became law in Scotland in 2011. This provides a legal basis requiring the NHS in Scotland to provide care which is person centred, safe and effective. This law requires all employees of the NHS to promote the Act, for all Boards to make their staff aware and be able to deliver the Act.

The strategy will also link to the many other programmes and initiatives (**see Appendix One**) which build on our significant tradition of success. In particular, the Moving Forward Together programme recognises the crucial role of our clinical and non clinical staff, in the delivery of our quality ambitions and emphasises the need to work together across geographical and organisational boundaries to make sure that people are at the centre of everything we do.

Moving Forward Together and the Healthcare Quality Strategy

Moving Forward Together is NHSGGC's vision for the future delivery of health and social care services and has been developed in line with Scottish Government, national and West of Scotland regional strategies and requirements and the projected needs of our patient population. The Blueprint provides the strategic direction for our decision making for the coming years and will give us the basis on which to discuss innovative ways to meet our challenges of delivering care for our people.

In relation to the Healthcare Quality Strategy, Moving Forward Together will require us to work with patients in a range of areas including the development of new services and also specifically to develop "supported self care" across all levels of care and settings. Examples of this will include:

- Developing accessible patient information
- Delivering structured patient education programmes
- Providing disease-specific individualised medicines advice
- Developing generic self management skills
- Enabling access to wider health, social care and voluntary sector support systems.

The delivery of the vision is also underpinned by the intelligent use of modern information technology and communications platforms. The creation of a single integrated care record and integrated care plan for individuals which is shared across our network and owned by the person, is key to our success.

1.1 What is meant by Healthcare Quality?

As part of the development of the Healthcare Quality Strategy, we asked patients, visitors, carers and family members about what "a quality NHS" means to them and what matters to them the most when they use the services we provide.

They told us that a high quality NHS is one that:

- Takes time with patients and listens to them
- Takes care of people, looks after them and makes sure they get the right treatment
- Communicates well with patients by explaining all they need to know and involving them in decision making
- Is knowledgeable, safe and trustworthy
- Is efficient
- Is caring, compassionate and shows empathy
- Has friendly, kind, competent and professional staff
- Communicates with the people who matter to them regarding their progress and condition.

This feedback supports the three quality ambitions, i.e. **person centred**, **effective** and **safe care**, outlined in the **Healthcare Quality Strategy for NHS Scotland**, which are embedded in our strategic objectives as a Board. The quality ambitions underpin everything we do, informing how we will drive forward changes within NHSGGC services over the next five years. We will do this by ensuring that all staff understand their responsibilities and the role they have in delivering healthcare quality.

Table 1. NHS Scotland Quality Strategy Ambitions

 Person Centred Mutually beneficial partnerships between patients, their families, carers and those delivering healthcare services which respect individual needs and values and which demonstrate compassion, continuity, clear communication and shared decision making.	 Effective The most appropriate treatments, interventions, support and services will be provided at the right time to everyone who will benefit and wasteful or harmful variations will be eradicated.	 Safe There will be no avoidable injury or harm to people from the healthcare they receive and an appropriate clean and safe environment will be provided for the delivery of healthcare services at all times.
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1.2 Building on Success

NHSGGC has developed an extensive infrastructure to celebrate and strive towards high quality, whilst facilitating learning and best practice. The work that is showcased in our annual clinical governance reports (**Clinical Governance Annual Report 2017/2018**) and local quality events provide numerous examples and detail on the delivery of many programmes and initiatives to develop healthcare quality. Below are a few examples of successful quality improvement initiatives that we wish to build on through this strategy. From these examples, we can see the way people have worked together to identify needs and improve care and treatment.



“Must do with me” – Renfrewshire HSCP

Renfrewshire Health and Social Care Partnership (HSCP) worked with a local volunteer to gain valuable insight into patient service user and carer’s experience. A number of services invited the volunteer into their services to have conversations with people we care for and their carers about their experience, treatment, involvement and care. Conversations were based on the five ‘**Must Do With Me**’ criteria recommended by Healthcare Improvement Scotland (HIS) to support person centred principles of practice. Each service area received direct feedback following this initiative and supporting action plans were put in place based on areas identified for improvement.



Helping us Grow Group (HUGG) – Royal Hospital for Children

The award winning ‘**Helping us Grow Group**’ (HUGG) focuses on improving partnership and integrated care with families within the neonatal unit at the Royal Hospital for Children. Parents and staff work together to shape improvements to the service based on what matters to families. HUGG is reported to be having a profound effect on the culture of the unit, breaking down professional barriers and barriers to communicating effectively with parents.

Some specific successes include:

- Communication boards to allow two-way communication between parents and staff, using technology so parents can receive secure video updates of their babies when they are not able to be there
- Fingerprint recognition technology has been introduced so parents can come and go from the unit anytime
- Improvements in the provision of skin-to-skin contact
- The introduction of new, popular parent awareness sessions.



Distress Response Framework – NHSGGC

Currently people present in distress across a range of locations and services within NHSGGC. It is important that people in distress receive a compassionate response and that the response meets their emotional needs at the time they require it and they are supported until the distress has reduced in order that they can then contribute to any decision regarding their options for follow on care.

NHSGGC have developed a Distress Response Framework and has delivered a number of actions including:

- A proposal for alternative community response to distress in the form of a Safe Haven Distress Café
- A Standard Service Response Pathway has been implemented, aimed at people who are known to mental health services who repeatedly attend Emergency Departments more than once in a six-month period.



Candour Meetings in Acute Medicine Department Royal Alexandra Hospital

Using the Measurement and Monitoring for Safety Framework of the Health Foundation (MMSF), a monthly Candour Meeting for the junior doctors was created where they can discuss recent errors at work. This helped junior doctors promote their professional duty of candour and at the same time allowed them to reflect on the errors from a system point of view using the MMSF.

These meetings helps the junior staff flip a negative experience of error into a positive learning experience. It promotes use of a common language to analyse errors and a consistent approach and thus improve their resilience. A live meeting and concepts of this improvement work was captured by the Healthcare Improvement Scotland and NHSGGC.

2. Developing the Healthcare Quality Ambitions



2.1 Person Centred Care

Person centred care is about providing care that is responsive to individual personal preferences, needs and values, and ensuring that these guide all decisions about care and treatment. NHSGGC has already developed a successful Inequalities Sensitive Practice work programme which responds to the life circumstances that affect people's health. Evidence shows that if these issues are not taken into account by the health service, opportunities are missed to improve health and to reduce health inequalities.

People generally experience good person centred care as:

- **Fast access** to reliable health advice
- **Effective treatment** delivered by trusted professionals
- **Continuity of care** and smooth transitions
- **Involvement in decisions** and respect for preferences
- **Clear, comprehensible information** and support for self-care
- **Involvement** of, and support for, family and carers
- **Emotional support**, empathy and respect
- **Attention to physical** and environmental needs.

Source: Picker Institute, 20153.

A good patient experience has been positively associated with objectively measured health outcomes including adherence to recommended medication and treatments; preventative care such as use of screening services and immunisations. Providing person centred care is a legal, ethical and professional requirement but it is also crucial in helping to achieve positive health outcomes for our patients.

NHSGGC aims to work in partnership with people in all aspects of healthcare provision; from involving individuals in decisions about their immediate care; to how we engage with people, communities and the population to plan the delivery of high quality services to meet their needs. A number of mechanisms have been developed and used by NHSGGC to allow patients, carers, families and visitors to give their feedback about our services.



These include:

- **Face to face discussion** with our staff
- Online, via **Care Opinion** or our own NHSGGC **website tool**
- **Over the phone** or by **emailing** our managers and clinicians
- In **'real-time' conversation** with people receiving care or support close to or during their episode of care
- Via **comment cards, questions and surveys**
- Through **participation in specific groups**, for example by working with us to improve the experience of British Sign Language (BSL) users
- Making a **formal complaint**.

However it also important that once we receive feedback, we act on it and improve and learn. Within NHSGGC, we have developed internal processes and systems which are intended to help us learn from these experiences, including:

- **Supporting care teams to reflect on feedback** gathered and learn what matters most to people in our care as well as where we can make changes and improvement
- **Assisting teams and services** to constructively apply feedback to improve the quality of care and treatment
- **Providing coaching and mentoring** support to care teams to test and implement changes and improvements to care and service delivery
- **Analysis and evaluation** of all feedback sources to identify common themes, patterns and trends, to identify areas to reward success and identify key priorities where improvement needs to be concentrated
- **Monthly feedback reports** to services and quarterly to Board level committees
- **Working in partnership** with patient and carer experience groups
- **Demonstrating the priority of person centred care** within communications and meetings
- **Clinical and care governance systems** and reporting structures.

Over the next five years we want to build on this work so we can demonstrate that we effectively listen to people and make sure their views and experience are central to how we pursue excellence in healthcare.



Strategic Intention for Healthcare Quality Strategy (2018-2023) in relation to “Person Centred Care”

- **We will enable people to share their personal preferences, needs and wishes about their care and treatment** and include these in their care plan, care delivery and in our interactions with them
- **We will involve the people who matter to them in their care** in a way that they wish and that meets the requirements of the Carer’s Act (2018)
- **We will develop further the person centred approaches to visiting** throughout NHSGGC
- **We will make sure people experience care, which is coordinated** and that they receive information in a clear, accurate and understandable format, which helps support them to make informed decisions about their care and treatment
- **We will give people the opportunity to be involved and/or be present in decisions about their care** and treatment and include the people who they want to be involved in accordance with their expressed wishes and preferences
- **We will provide training and education**, to enable staff to treat people with kindness and compassion, whilst respecting their individuality, dignity and privacy
- **We will inform people about how to provide their feedback**, comments and concerns about their care and treatment. We will review our approach to collecting and managing feedback to make sure it is fit for purpose
- **We will make sure there is a collaborative and consultative approach in place** to enable staff to actively listen, learn, reflect and act on all care experience feedback received and to ensure continual improvement in the quality of care delivered and the professional development of all staff
- **We will continue to identify and build opportunities for volunteers** to help improve the health and wellbeing of patients, families and carers
- **We will engage with people, communities and the population** we serve to deliver high quality services to meet their needs.



2.2 Effective Care

Clinical effectiveness is the reliable provision of evidence based healthcare which makes a difference to the quality of people's lives. This is well established and involves numerous activities such as:

- Education, training and ongoing research
- Developing and publishing clinical standards or guidance
- Optimising the way clinical practice is delivered
- The application of clinical data to improve quality
- The evaluation of personal outcomes.

One of the most significant development areas for our Healthcare Quality Strategy is providing well organised, timely data to support decisions on clinical quality. In particular we will develop systems to present detailed clinical information, in line with the Digital Strategy, that helps staff understand what is working well and identify areas where we can improve. Presenting more detailed clinical information through "Clinical Dashboards" will support clinicians to make informed and better decisions about care and treatment in partnership with patients. It will allow us not only to improve quality of care but also reduce "variation" in healthcare.

2.2.1 Reducing Variation

An increasingly recognised factor which can limit the quality of healthcare is the impact of variation in the way healthcare is provided. This is a feature of all health care organisations.

As part of our Healthcare Quality Strategy, we will strengthen our approach in understanding and resolving variation in healthcare which does not contribute or add value for the patient. Recognising variation is of vital importance to our organisation because it allows the identification of:

- Under use of interventions within our patient population – i.e. under-treatment
- Over use of interventions (which should be used less frequently)
- Over use of interventions which may result in harm.

Our vision for the Healthcare Quality Strategy is to determine the right level of intervention(s) in partnership with patients. Within NHSGGC, we have been working on a range of programmes to help reduce variation which will be further strengthened as part of the strategy.



Strategic Intention for Healthcare Quality Strategy (2018-2023) in relation to “Effective Care”

- **We will develop better ways to collect and organise clinical information** that enables healthcare professionals to identify best diagnostic and clinical treatment options
- **We will continue to improve the high quality education and training** we provide to our staff to make sure that our patients continue to receive evidence based interventions
- **We will develop a work programme that supports the identification of “variation”** and creates action plans to reduce this
- **We will focus on learning, improving and embedding good practice** across our system and take pride in what we do well.



2.3 Safe Care

The majority of people will receive care that is delivered without mishap or a significant adverse outcome. However, it is the experience of all healthcare systems across the world that people will occasionally suffer harm whilst being cared for. For example, some treatments and medicines have known complications or side effects, which are discussed with patients as part of the routine care planning and consent processes. In other instances the complexity of care can give rise to unintended harm.

NHSGGC seeks to minimise the frequency and degree of such instances of patient harm through an approach collectively described as **clinical risk management**. The aim of clinical risk management is to prevent harm by applying knowledge and technology to improve levels of safety and wellbeing. It involves investigating, analysing and sharing information relating to the causes or potential causes of harm to patients and ensuring this knowledge is applied to reduce risk and maximise the benefit of healthcare.

There is an ethical responsibility, as well as a professional and statutory requirement for healthcare professionals and managers to inform patients who have suffered as a result of a safety incident that was caused by the organisation and has resulted in harm. This is termed “**Duty of Candour**” and is included in health professional’s codes of conduct instructing staff to be honest with patients concerning their care and treatment.



Creating the environment where staff are open about what happened and discussing patient safety events promptly, fully and compassionately with patients and/or relevant persons can:

- Help maintain trust and confidence necessary for an effective therapeutic relationship
- Help patients and/or relevant people cope better with the after-effects
- Promote a thorough investigation into the patient safety incident including the patient's and/or relevant person's perspective
- Provide patients and/or relevant people with assurance that lessons learned will be implemented to help prevent a similar type of incident
- Provide an environment where patients and/or relevant persons, healthcare professionals and managers feel supported when things go wrong.

Strategic Intention for Healthcare Quality Strategy (2018-2023) in relation to "Safe Care"

- **We will improve the working arrangements to escalate more rapidly and implement Board wide learning** from incidents, quality improvement work and external risk notices or publications
- **We will enhance the stability and reliability of safety critical care processes** such as prevention, acute deterioration, medicines management and clinical handovers
- **We will integrate learning about clinical risk with ergonomic sciences** to create safer designs for healthcare procedures and practices
- **We will develop methods that enable a better evaluation** of the impact and value of changes in achieving safer care
- **We will continue to develop the consent to treatment practices** to help patients better understand risks and consequences of options and choices in planning care
- **We will improve the method of analysing themes and patterns** in key clinical risks and the causative factors
- **We will work in an integrated way** to support teams through healthcare inspection and provide assurance to external agencies on the quality of our services.

3. Working with Our People

We recognise the quality of care experienced by people is due to the commitment and professionalism of our staff, volunteers and partners. Evidence confirms that staff who feel they are valued, trusted, involved and cared for by their organisation are better able to relate effectively with others and develop high quality healthcare. This means that if we are to deliver the strategic aim of a positive patient experience we must create a positive workplace environment for everyone who works with NHSGGC.

Strategic Intention for Healthcare Quality Strategy (2018-2023) – Our People

- **We will develop and support staff and volunteers at all levels in the organisation to understand our Healthcare Quality vision** so that we continue to deliver high quality care to our patients
- **We will demonstrate organisational behaviours** promoting the link between a positive workplace environment and positive patient outcomes
- **We will develop tools, resources and education** that support the ability of individuals, teams and managers at all levels of the organisation to provide high quality healthcare
- **We will continue to develop our values based recruitment** and induction processes to make sure our priority is on our patients
- **We will continue to demonstrate and promote values and behaviours** that are consistent and aligned to patients needs and preferences
- **We will strengthen our relationships with the third sector** so we can work together and offer the public the best quality of experience, by collaborating with them in the design and delivery of services
- **We will fully support our volunteers** and expand the valuable additional support they can offer to improve the experience of patients and their families
- **We will support staff** to contribute to quality improvement programmes at site, locality, and service or specialty level.

4. Providing Assurance and Governance on Healthcare Quality

4.1 Clinical and Care Governance

In order to fully achieve the quality ambitions we require all teams and services to work in an integrated organisational framework that coordinates and develops the appropriate governance of Healthcare Quality across NHSGGC. Having the right governance process will help us to:

- Sustain high quality once it has been achieved
- Maintain good practice and minimise variation between comparable services e.g. wards and hospitals
- Match the right type of interventions to improve quality of care at a local level
- To develop and sustain high quality within healthcare
- Strengthen the internal and external assurance process for managing quality
- Increase public confidence in the quality of healthcare.

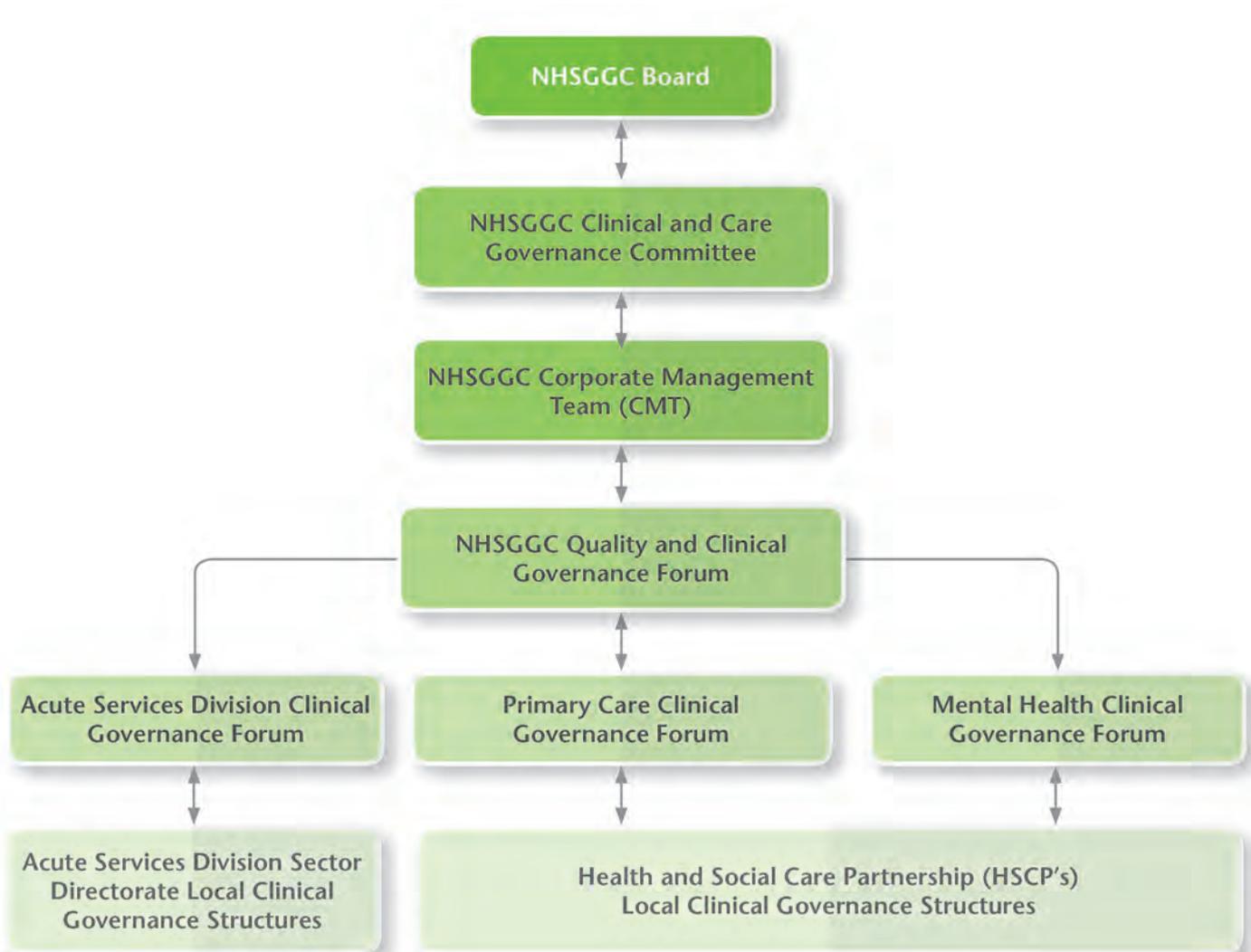
Our existing healthcare governance framework relates to the broader systems, processes and practices through which NHSGGC manages services to achieve our wider organisational objectives. It supports the conditions for productive relationships with people, the wider community and partner organisations. It is integrated with other aspects of the corporate governance arrangements within the Board to achieve effective and high quality healthcare.



4.2 Monitoring and Assuring Healthcare Quality – Current arrangements

Our current healthcare governance arrangements consist of a Clinical and Care Governance Committee which is a standing sub-committee of the main Board and is led by Non-Executive Board members who take an overview of healthcare quality and clinical governance. The role of the non executive Board members is to seek assurance that NHSGGC have formal arrangements that work effectively to safeguard patients and to continually improve the quality of care we provide. These committee arrangements are set out below:

Figure 1- NHSGGC Clinical and Care Governance Structure



The Board Nurse Director is the Executive Lead for Healthcare Quality Strategy and Board Medical Director is the Executive Lead for Clinical Governance. The Clinical and Care Governance Committee receives reports from the key service areas as well as a range of thematic reports on issues relating to feedback and complaints, the wider patient and carer experience perspective, person centred care, clinical safety and clinical effectiveness. In addition, individually commissioned reports and local service updates are also considered as part of the broader assessment of the effectiveness of the arrangements.

Health and Social Care Partnerships (HSCP's), Acute Sectors and Directorates have their own Quality and Clinical Governance Forums, which are in turn linked with other groups at specialty and sub-specialty level. This broad network provides significant opportunity for local teams and managers to contribute to the agenda. The Board uses Internal Audit as a means of independently checking the effectiveness of all these arrangements.

4.3 Monitoring and Assuring Healthcare Quality – Future arrangements

Within the first year of the Healthcare Quality Strategy, we will create a Healthcare Quality Review group. Our aim is to build on our existing Clinical and Care Governance structures and how this can be strengthened, to better meet local and national priorities. The group will involve key stakeholders and develop short/medium and long term plans which will allow us to coordinate the actions contained in this strategy. Engagement of public partners including patient and carer representatives will be integral to this work.

The further development of local arrangements will need to take account of external developments within the governance of health and social care in Scotland. For example the recent publication of the new Quality of Care approach by Healthcare Improvement Scotland (HIS) will change existing inspection processes e.g. HEI, OPAH, and more notably create a new model of generic inspections of corporate governance for each Health Board in NHS Scotland.

4.4 Delivering the Quality Framework

Over recent years NHS Scotland has created a number of programmes which focus on how to better apply quality improvement practices. The diligent use of well recognised methods and tools has been repeatedly shown to improve clinical quality at a local level. However a broader quality framework is used in organisations with the highest quality reputations, which enables large scale and sustainable support for quality. As part of the Healthcare Quality Strategy, NHSGGC will implement its own Quality Framework based on four key areas, namely:

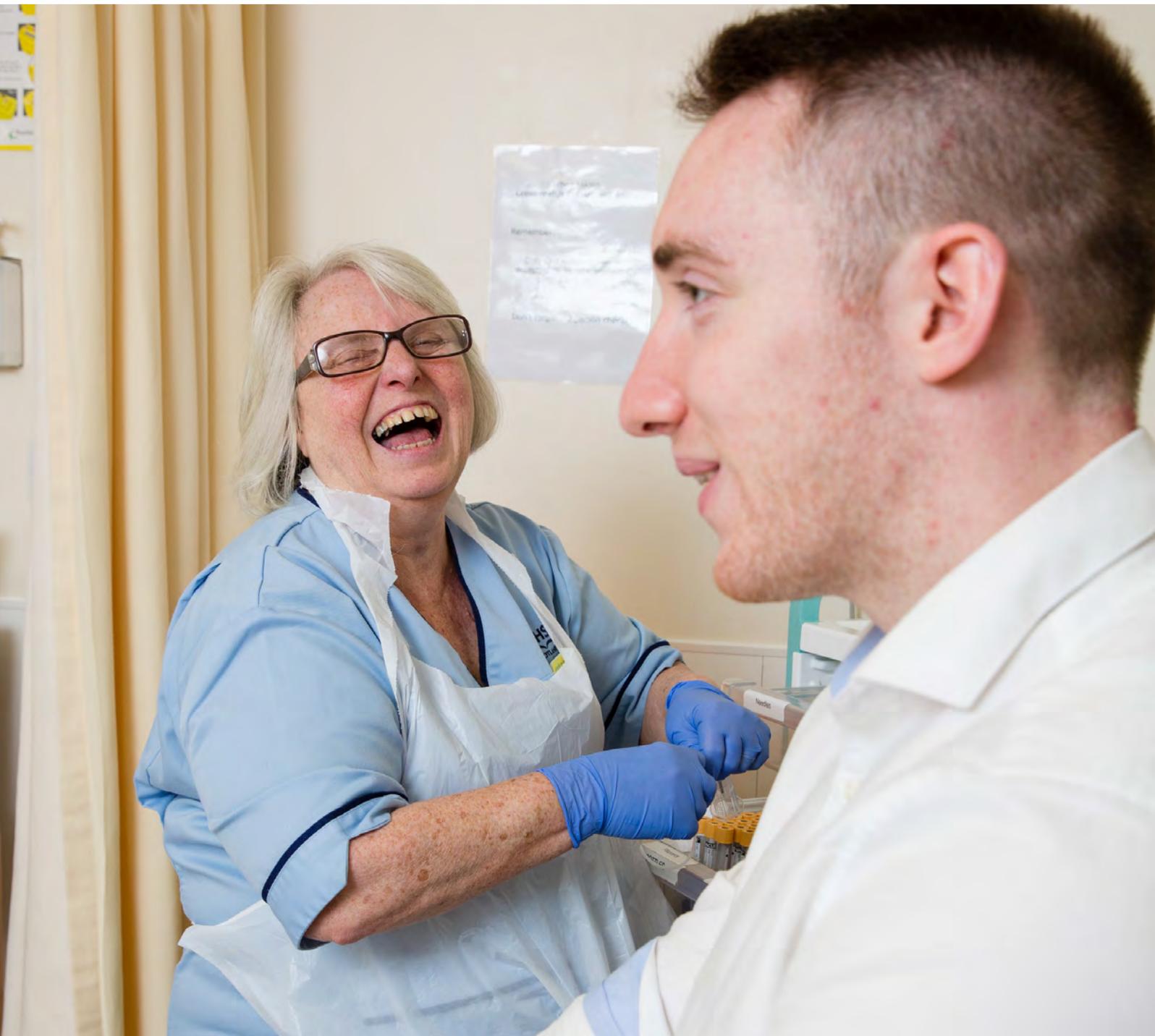
- Learning system for healthcare quality
- Quality planning
- Quality improvement
- Quality management.

Strategic Intention for Healthcare Quality Strategy (2018-2023) in relation to “Healthcare governance”

- **We will make sure that corporate oversight and approval of the Healthcare Quality Strategy will be the role of the Clinical and Care Governance Committee,** and the Board Nurse Director as executive lead for the Healthcare Quality Strategy will ensure overall coordination and maintenance of the strategy and its implementation
- **We will review our Healthcare governance structures** in line with national requirements, ensuring there are auditable governance processes, which support internal and external assurance
- **We will create a group to review the Healthcare Quality Strategy** and ensure high level strategic intentions are firmly embedded within strategic plans and priorities across NHSGGC
- **We will enhance the reporting processes** to the NHS Board, the Corporate Management Team and the public
- **We will implement the Healthcare Quality Framework** (appendix 2) to ensure NHSGGC remains focussed and committed to providing the best care for our patients.

5. How NHSGGC will Deliver the Healthcare Quality Strategy

The Healthcare Quality Strategy outlines our intentions for the next five years to ensure our care is person centred, effective and safe across NHSGGC. A number of high level strategic intentions have been described in our strategy and we will develop local implementation plans to drive forward improvements that support the delivery of our underpinning quality ambitions for person centred, effective and safe care.



Our immediate priorities, to be achieved are:



Person Centred Care and the Wider Patient and Carer Experience

Within the first year of the Healthcare Quality Strategy, we will review and improve our approach to collecting, managing and using feedback to improve the quality of healthcare. In addition we will plan and implement improvements for a more welcoming environment, including our person centred approaches to visiting.



Effective Care

Within the first year of the Healthcare Quality Strategy, we will enhance clinical effectiveness through the better use of clinical information. We will review key indicators of clinical quality and ensure these are systematically presented. Whenever possible this will capitalise on the Boards Digital Strategy and be linked to internal and public assurance.



Safe Care

Within the first year of the Healthcare Quality Strategy, we will further develop processes to rapidly respond to adverse events, ensuring risk to patients are immediately managed and that we are better at sharing and applying practices that reduce the possibility of the event reoccurring.



Our People

Within the first year of the Healthcare Quality Strategy, we will develop approaches to build capacity, capability and leadership amongst our staff in order that all clinical and non clinical staff can identify roles and responsibilities to support delivery of the Quality Strategy.



Assurance and Governance

Within the first year of the Healthcare Quality Strategy, we will create a Healthcare Quality Review group with an aim to build on our existing Clinical and Care Governance structures and how this can be strengthened, particularly in line with national and local priorities. The group will involve key stakeholders with a remit to develop short/medium and long term plans which will allow us to coordinate the strategic high level actions contained in this strategy.

6. Appendices

6.1 Appendix one – High Level Strategic Intentions

National Clinical Strategy

The priorities outlined in the National Clinical Strategy (2016) sets out a framework for the development of health services across Scotland for the next 10-15 years. The strategy provides a strategic clinical case for change which impacts on local, regional and national services delivered by NHSGGC. As new and improved services develop, healthcare governance structures will be developed and strengthened to ensure clinical safety and quality for our patients, families, carers and communities.

Moving Forward Together

The Moving Forward Together (MFT) Programme outlines how we intend to change and reconfigure health and social care services within and across NHSGGC to meet demands over the next 5-10 years. The MFT programme will result in services that are optimised to deliver person centred, effective, safe and sustainable care to meet current and future needs of our population.

Excellence in Care

Excellence in Care (EiC) is a national programme designed to provide assurance and improve care. In the first instance EiC is focusing on nursing and midwifery care, however EiC will then spread to all other professions and those involved in healthcare provision.

Care Assurance System (CAS)

The Care Assurance System (CAS) is a continuous quality improvement approach, which enables NHSGGC to achieve a set of standards for the delivery of person centred, effective and care. It is a system that enables senior charge nurses and midwives to locally benchmark their team's progress against the standards and to identify where support is needed for improvement. The CAS framework currently consists of 13 standards reflecting the policy requirements of NHS Scotland and involves nurses, midwives and allied health professionals within NHSGGC's inpatient and community areas. Within NHSGGC, a mapping exercise has been completed to make sure that the CAS standards are aligned to meet the requirements of EiC as set out by the Scottish Government in the Care Assurance "Excellence in Care Principles" document.

Realistic Medicine

Realistic Medicine was launched in 2015 by the Chief Medical Officer for Scotland and contains 6 core elements:

- Shared decision making
- Personalised approach to healthcare
- Reducing unwarranted variation
- Reduce harm and waste
- Managing risk better
- Making innovative improvements.

Realistic Medicine puts the person receiving health and care at the centre of decision making and creates a personalised approach to their care. It aims to reduce harm, waste and unwarranted variation, whilst managing risks and promoting innovation.

Patients Rights Act (Scotland) 2011

The Patient Rights Act (Scotland) 2011 supports the Scottish Parliament's vision for a high quality person centred NHS in Scotland. The Act states that everyone involved in the delivery of NHS services in Scotland and their employers must uphold a set of healthcare principles that underpin quality care and treatment such as participation, communication, patient focus and patient feedback. All NHS staff require knowledge of the Act and the impact of this on their roles and responsibilities.

NHSGGC Digital Strategy

NHSGGC has developed a five year digital strategy, which contains a prioritised programme of work that will harness the opportunities for innovation and deliver digital solutions to meet the growing health and care demands into the future. The strategy is a powerful tool to fundamentally improve day to day health and social care across NHSGGC and support transformation of our health and social care services going forward.

6.2 Appendix Two – Healthcare Quality Framework

Quality Indicator	Overview
<p>A Learning System: for Healthcare Quality</p>	<p>The learning system includes both formal organisational and informal networking activities, encompassing the experience of patient and staff, in identifying and sharing of knowledge of how to continuously improve quality.</p>
<p>Quality planning (QP)</p>	<p>Quality planning is founded on all of those activities which generate a profound understanding of patient needs. Working collaboratively with patients and communities this includes setting requirements for the design and operation of clinical care systems which meet patient, community clinical and organisational needs. Quality is matching the service to a need.</p>
<p>Quality Improvement (QI)</p>	<p>Quality improvement involves the rigorous application of well established methods. These methods focus on incremental testing and implementation changes shown to improve the performance of the clinical system in reaching the agreed level of care quality. All QI projects should improve the life of patients and staff.</p>
<p>Quality Management (QM)</p>	<p>Quality management focuses on activities which sustain quality by recognising factors associated with excellence whilst preventing and rectifying quality failures. It includes activities which monitor the clinical process or pathway to ensure the stability of required performance. When gaps in performance are recognised quality management will identify an appropriate treatment plan to address the issues (e.g. which may use quality planning or quality improvement).</p>

6.3 Appendix Three – Healthcare Quality Strategy Roles and Responsibilities

Role	Responsibilities	Activities
Overseeing Role	<p>Board Clinical Governance Forum (currently under review)</p> <p>Patient and Carers Experience Group (currently under review) and associated and reporting structures</p>	<ul style="list-style-type: none"> • Checking that the appropriate structures are in place to undertake the activities that underpin clinical governance • Assuring the NHS Board that the arrangements are working by providing the Board with regular reports on the operation of the system • Bringing to the attention of the Board specific reports on any problems that emerge • Involving patients, carers and the public in service design and decision making.
Delivering Role	<p>Management (managers and clinicians) structures throughout the organisation</p>	<ul style="list-style-type: none"> • Ensuring suitable local arrangements are in place and are integrated with existing structures. Any structures and processes put in place must ensure that all the underpinning activities described above are an integral and integrated part of the mainstream business of the organisation • Involving patients, carers and the public in service design and decision making.
Supporting Role	<p>Corporate Teams and Departments employed in activities underpinning support, care and clinical governance</p>	<ul style="list-style-type: none"> • Supporting the implementation of the NHSGGC Healthcare Quality Strategy and Quality Approach • Delivering person centred, effective, safe care • Involving patients, carers and the public in service design and decision making.
Practicing Role	<p>All clinical and support staff</p>	<p>Participating in:</p> <ul style="list-style-type: none"> • Professional codes of practice • Continuous professional development • Improvement activity • Audit • Evidence based practice • Seek, review and act on feedback • Personal reflection • MDT working and communication • Involving patients, carers and the public in service design and decision making.

6.4 Appendix Four – HIS Proposed Quality of Care Domains

1. Key organisational outcomes
2. Impact on people experiencing care, carers and families
3. Impact on staff
4. Impact on the community
5. Delivery of person centred, effective, safe and compassionate care
6. Policies planning and governance
7. Workforce management and support
8. Partnership and resources
9. Quality improvement – focused leadership.

6.5 Appendix Five – References

Local Strategies and Policies

Moving Forward Together

www.movingforwardtogetherggc.org

Care Assurance System

www.nhsggc.org.uk/about-us/professional-support-sites/cas/care-assurance-system-introduction

Public Health Strategy

www.nhsggc.org.uk/media/250037/item-9-paper-no-18_36.pdf

Digital Health Strategy

www.nhsggc.org.uk/media/250044/item-16-paper-no-18_42.pdf

Clinical Governance Annual Report

www.nhsggc.org.uk/media/250809/item-18-cg-annual-report-2017-2018-final-version-for-board-meeting-16th-october-08102018-1025am.pdf

Duty of Candour

www.nhsggc.org.uk/working-with-us/staff-communications/news/duty-of-candour

National Strategies/Drivers

Healthcare Quality Strategy for Scotland

www.2.gov.scot/Publications/2010/05/10102307/2

Patients Right (Scotland) Act 2011

www.legislation.gov.uk/asp/2011/5/contents

Realistic Medicine

www.gov.scot/news/realising-realistic-medicine

Tackling Healthcare Variation

www.holyrood.com/articles/news/scotland-get-%E2%80%98atlas-variation%E2%80%99-health-and-care

Must Do With Me

www.healthcareimprovementscotland.org/our_work/person-centred_care/person-centred_collaborative.aspx

National Clinical Strategy

www.2.gov.scot/Publications/2016/02/8699

Making it Easier- Health Literacy Action Plan

www.gov.scot/publications/making-easier-health-literacy-action-plan-scotland-2017-2025

Monitoring for Safety Framework of the Health Foundation

www.health.org.uk/publication/measurement-and-monitoring-safety

Excellence in Care (EiC)

www.nhsggc.org.uk/about-us/professional-support-sites/nurses-midwives/care-assurance-system-excellence-in-care

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A systematic review of evidence on the links between patient experience and clinical safety and effectiveness:

<https://bmjopen.bmj.com/content/bmjopen/3/1/e001570.full.pdf>

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