



Quality Management System

Purpose

The purpose of this report is to provide the Quality, Safety and Experience Committee (QSEC) with an update with regards to the development of a Quality Management System (QMS)

System-wide approach to achieving quality of care in a way that secures continuous improvement.

Context

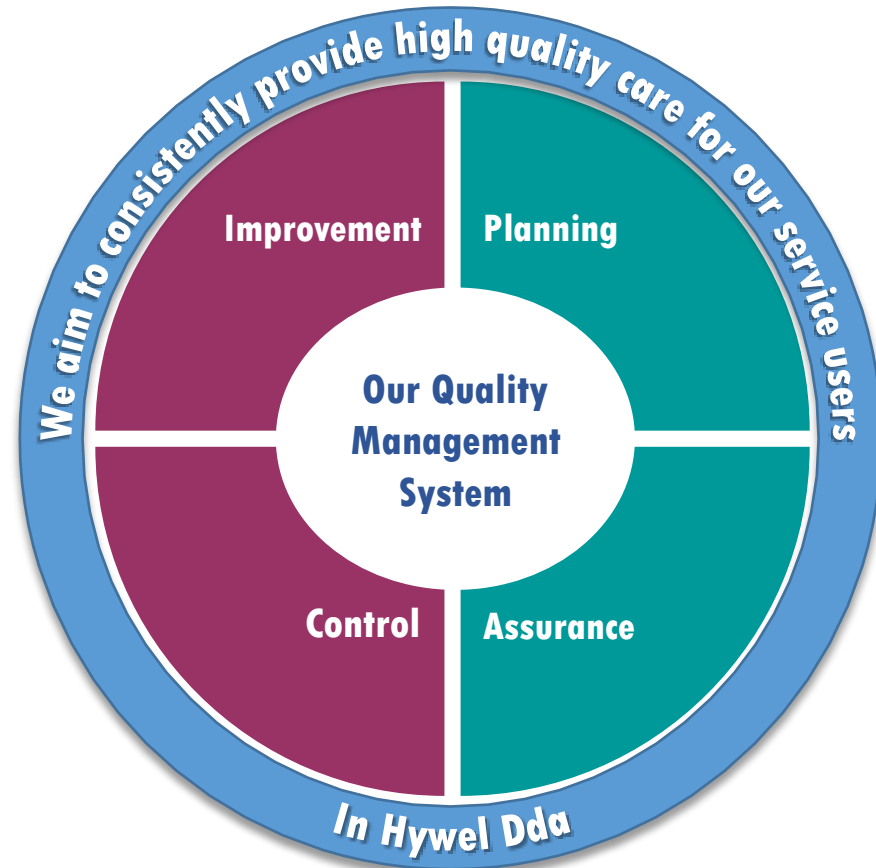
Health and Social Care (Quality and Engagement) (Wales) Act 2020 comes into force in Spring 2023

- Requires health services to demonstrate quality is at heart of all they do
- **System-wide approach to achieving quality of care in a way that secures continuous improvement**
- Duty applies to all health services functions (not just clinical)
- Applies to Welsh ministers in relation to their health functions
- Ministers and NHS bodies will have to actively consider whether their decisions will improve service quality and secure improvement in outcomes.
- This approach supports the five ways of working in The Well-being of Future Generations (Wales) Act 2015 to achieve a healthier Wales.

Our Quality Management System (QMS)

Component	Definition and scope	When to use it
Planning	Designing high quality in to the structure and processes that meet the service need	When it is clear that there is an unmet service need, do it once and do it well
Assurance	Method of verifying process integrity and all efforts made to avoid non-conformance	Any time to assure yourself that the system in your area is effective
Control	Visual leading and lagging measures of high quality performance to guide action	In real time for efficient operational management of service quality
Improvement	The generation and implementation of ideas for achieving high quality, QI science	To resolve enduring control issues that matter most to the delivery of a service

* Each has its own toolkit to use



Associated Tools

Planning

- Commissioning Contracts
- Service Specification
- Team Structure
- Strategic Board Objectives
- Clarity of the Operating Models

Assurance

- Audit
- Inspection
- NICE guidance
- Gap analysis
- Cause and effect diagrams
- Action trackers

Control

- Dashboards
- SPC charts
- Patient experience feedback
- Safety Huddles

Quality Improvement

- Team learning events
- Thematic analysis
- EQiP
- Driver diagrams
- PDSA cycles
- Identification of areas for improvement

What does this mean in practice?

Approach	What does it mean	When should I consider its use	Cautions	Aligned programmes of work
Quality Planning/ redesign	Understanding the needs of the population through feedback from people that use our services. Scrutinising the evidence base to identify the best available service models, to design the structures & processes which enable us to meet the identified need and agreed national and local standards	On an annual basis, or more frequently, if standards are not met or when the population, we serve has identified an unmet need within our current service model.	Top-down reorganisation has large risks of unsettling and disempowering staff the best redesign and planning efforts deeply engage all stakeholders in the process	<ul style="list-style-type: none"> Annual Planning Population health assessments VBHC (aligning our pathways to patient outcomes) CIVIVA and patient feedback Service driven equality impact assessments
Quality assurance	Structured assurance 'check-in' approach to assess whether we are providing 'good' care and meeting minimum requirements / standards. This can be done by 'walk arounds' measuring against standards, Identifying gaps, developing action plans and re-checking to ensure compliance	All services should be able to describe how they assure themselves and others that they are providing 'good' care. To provide assurance to the Board directly or via Quality, Safety Experience Committee, To provide evidence to inspectorate bodies/regulators	Assurance cannot in itself help a service provide excellence. It can merely ensure we are meeting standards and providing good care. Don't over-rely on assurance alone	<ul style="list-style-type: none"> QSEC Clinical effectiveness Spot check Audits Walkabouts
Quality control	Excellent operational management - A set of measures which will monitor service quality & performance, chosen by the team, and tracked transparently in real-time. A visual management system of key work processes and data such as being made available through 'Improving Together' /dashboards. Regular team huddles around the data, responding to changes in the data as needed, with clear escalation protocols when the team can't solve something	Every service should have a quality control system, to enable it to manage service quality and performance in real-time more effectively	Quality control imposed from outside the team is less effective. It needs to be owned and developed by the team	<ul style="list-style-type: none"> Improving Together Digital whiteboards DTDC Recognised standards Quality dashboard - Quality metrics, Harms dashboard
Quality improve ment	A systematic process to improve performance, quality and safety, efficiency, effectiveness and experience driven by those closest to the area for improvement. Requires a project team with diverse members with improvement knowledge and skills. This skill and knowledge capacity building is being provided locally through EQiIP e.g developing a change theory with ideas and testing these, collecting and using data to inform the testing.	To solve a complex problem to which we do not know the answer or where a possible solution has not been tested in context. Tackling what matters most to our service and population	Quality improvement requires time and effort. Only utilise it for complex problems focused on what matters most. Quality improvement requires a discrete team, meeting regularly and testing changes. Be clear about the aim and ensure your theory of change is strong enough to meet the aim.	<ul style="list-style-type: none"> EQiIP Culture programme – considers skills, behaviours, values and beliefs and leadership Improvement Coach Development Improvement Advisor Programmes Pathway redesign

Who does what?

Manager / Team leader

- Planning – I am part of planning and commission services and put the structure and processes in place
- Assurance – I help make sense of the data and address gaps against standards
- Control – I am transparent about performance and empower the team to act on small problems
- Improvement – I facilitate identifying the area for change and remove barriers to team participation.

Team member

- Assurance – I participate in audits, inspections and learning lessons
- Control – I listen to feedback from our service users, use our quality dashboards, meet standards and flag and solve daily issues
- Improvement – I communicate my view on the area to change and help generate and implement ideas.

Consultant / Senior clinician

- Planning – I identify the optimal service model to meet the need from evidence and my expertise
- Assurance – I help identify and set standards the team operates to, and participate in assurance
- Control – I use the data to monitor how our team is performing, and take in and act of the feedback
- Improvement – I use my clinical and research knowledge to bring ideas and help a diverse team achieve.

Senior leader

- Planning – I contribute to the strategy and vision and help our teams and partners align their work
- Assurance – I ensure systems are in place to provide meaningful assurance to the Board and its committees
- Control – I monitor performance, regularly listen to staff and service users, and use data in decisions
- Improvement – I am a sponsor of innovation, helping prioritise and then challenging people to achieve.

Service user

- Planning – I have stories to contribute to identifying the need and how the service might best fit
- Assurance – I can be involved in understanding service standards and in service audits
- Control – I can feed back my experience in real time and subsequently
- Improvement – I can input into change, co-produce it, and feed back on whether the change is helpful.

Quality Management System

Covers four areas



Golden thread to deliver the QMS

- Visionary and compassionate leadership;
- Culture and value of people;
- Measurement in terms of experience and outcomes;
- Learning, improvement and innovation; and
- Systems perspective – governance.

Steps to improving governance

- Embed the business partner model between corporate functions and Directorates / localities
- Directorates to review their approach to quality governance to ensure it meets the agreed organisational approach (as recommended in the quality and governance internal audit.
- Consideration to be given as to how the governance within services and specialties is reported to Directorates.

Steps to demonstrating and ensuring quality

- Prepare for the Quality and Engagement Act coming into force in Spring 2023 and ensure that the duty of quality requirements are met;
- Continue EQlIP and ensure that projects meet organisational priorities
- Further develop the harms dashboard



Steps to getting better at knowing our outcomes

- Introduce a new management system to monitor implementation and compliance with NICE (National Institute for Clinical Excellence) and other national guidance
- Further develop the system that links the organisational risks and evidence through triangulation of data (Harms Dashboard)
- Develop key outcome measures through use of PREMs & PROMS

Steps to getting better at being a learning organisation

- Listen to patient stories and experiences and identify new areas for improvement;
- Listen to staff stories and experiences and identify new areas for improvement;
- Encourage EQlIP graduates to continue to use their learning with new improvement projects;
- Develop a portal for sharing learning from improvement projects, lessons learnt from concerns, and patient / staff feedback etc.

What are we trying to achieve

Outcomes

We are a learning organisation that is getting better at being better

- Organisation that promotes best practice
- Organisation that learns from incidents/complaints and feedback
- Organisation that works collaboratively and have empowered staff with knowledge, skills and resources to deliver quality, safety and improvement to the best of their ability

Recommendation

For QSEC to take an assurance that actions are being taken to progress the QMS from the presentation provided.