

Person Centred

Outcome: 1.01 Community Engagement - We will engage public partners (including Children & Young people) to discuss areas of interest and develop / deliver work based on their feedback through quarterly meetings of Forums

Action: Evaluate the Public Reference Forum (PRF) to reflect the new NHSL Communication and Engagement Strategy

Action: Implement the NHSL Communication & Engagement Strategy

Outcome: 1.02 Solicited Feedback - We will provide mechanisms and tools to support and enable staff to engage service users about their experiences of care and use it for reflection, learning and action

Action: Evaluate how NHSL captures solicited feedback

Outcome: 1.03 Unsolicited feedback - We will provide mechanisms and tools to support and enable service users to tell us about their experiences of care and use it for reflection, learning and action.

Action: Evaluate how we use Care Opinion to identify its impact on making a difference in NHSL

Outcome: 1.04 We will improve the efficiency and effectiveness of our overall complaints handling arrangements

Action: Assess application of a Datix dataset, in one clinical area, to allow frontline NHSL staff to record Stage 1 complaints directly onto the system.

Action: Carry out an initial evaluation of Stage 1 complaints training resources

Action: Develop training resources to further embed a resolution focused approach at Stage 1 of the complaints process

Action: Evaluate successful implementation of the Complaints Development Plan across the organisation through completion of quality assurance audits of closed health complaints records to assess compliance with best practice in complaints handling

Action: Promotion and awareness raising of the new Stage 2 Complaint Investigation Toolkit.

Action: Use complaints data as a measure of service outcomes and to drive learning and improvement through completion of focussed HCAT thematic analysis of closed complaints for selected clinical specialties.

Outcome: 1.06 Patient Information - Ensure information is available to the public in accessible formats to support shared decision making

Action: Assess NHSL compliance with accessibility guidelines

Action: Evaluate the current Patient Information System

Action: Evaluate the patient experience of using NHS Patient Information Leaflets

Outcome: 1.07 Shared Decision Making - We will ensure people and families are involved in decisions about their care

Action: Evaluate the facilities for breastfeeding mums to manage continuing to breastfeed an infant while having a child in hospital

Action: Review the Breastfeeding Framework in NHS Lanarkshire

Safe

Outcome: 2.01 Implement the Lanarkshire Falls, Frailty & Bone Health Strategy

Action: Evaluate the delivery of the Falls Strategy Implementation Plan

Action: Implement the SPSP Acute Adult Collaborative Falls Improvement Work in 3 inpatient areas in acute hospitals

Outcome: 2.02 Hospital Standardised Mortality Ratio (HSMR)

Action: Evaluate the Mortality Review processes to identify if the current processes are achieving the aim

Action: Evaluation of the LanQIP Morbidity & Mortality (M&M's) system

Action: Further development of the LanQIP Morbidity & Mortality (M&M's) system to include improved training resources and a suite of reports to support clinical decision making & evaluation of the system.

Action: Implement the Mortality Review Action Plans for each acute hospital site

Action: Undertake a Mortality Review in each acute hospital

Outcome: 2.03 Reduce rate of Pressure Ulcers in NHS Lanarkshire

Action: Evaluate NHSL performance in the prevention and management of pressure ulcers against best practice evidence

Outcome: 2.04 Implement the Lanarkshire Quality Medicines Strategy

Action: Evaluate the Quality Medicines Strategy Implementation Plan

Outcome: 2.05 Deliver improvements in quality and safety within Maternity & Neonatal Services

Action: Evaluate improvements in maternity services including stillbirths and mother and baby separation.

Outcome: 2.06 Deliver improvements in quality and safety within Mental Health services

Action: Evaluate improvement work within Mental Health services including Triangle of Care, Trauma Training Framework and use of patient and carer feedback

Action: Implement the SPSP Mental Health Collaborative within ward 2 at UHW

Outcome: 2.07 Reduce rates of Hospital Associated Infection across NHS Lanarkshire

Action: Implement a Breakthrough Series Collaborative for Infection Prevention & Control to support delivery of key areas of infection to contribute to reducing rates of CDI, SABS and ECB across Lanarkshire acute hospitals and both HSCPs

Outcome: 2.08 Implement the Value Management Collaborative in NHS Lanarkshire

Action: Evaluate the Value Management Collaborative improvements included in phase 1 of the programme

Outcome: 2.09 Implement the National Essentials of Safe Care within NHS Lanarkshire

Action: Undertake a scoping exercise and gap analysis to review NHS Lanarkshire's current position against the 4 elements of the Essentials of Safe Care Programme.

Outcome: 2.10 Deterioration - Reduce % Sepsis Mortality in NHS Lanarkshire

Action: Evaluate NHS Lanarkshire's performance against key Sepsis measures to identify areas of good practice and areas for improvement to be undertaken

Outcome: 2.11 Deterioration - Prevention and management of Acute Kidney Injury (AKI)

Action: Evaluate NHSL performance in the prevention and management of Acute Kidney Injury against best practice evidence

Outcome: 2.12 Deterioration - Reduce rate of Cardiac Arrest in three acute hospitals in NHS Lanarkshire

Action: Implement the SPSP Acute Adult Collaborative Cardiac Arrest Improvement Work in 3 inpatient areas in acute hospitals

Outcome: 2.13 Develop a Lanarkshire Rehabilitation Strategy

Action: Evaluate the delivery of the Rehabilitation Strategy Implementation Plan

Outcome: 2.14 Develop a culture of Quality & Safety within Lanarkshire

Action: Evaluate tools used to support staff psychological safety e.g. safety culture cards

Outcome: 2.15 We will identify and manage Adverse Events with a clear emphasis on transparency, prompt remedial action and learning for quality improvement

Action: Evaluate successful implementation of organisational Duty of Candour (DoC) processes in NHSL through assessing understanding of DoC via a staff survey.

Action: Evaluate successful implementation of the organisational Adverse Event policy and associated toolkit and training through QA of closed SAER reports using the SAER Team checklist to assess quality of reporting.

Effective

Outcome: 3.01 NHS Lanarkshire has an annual clinical audit programme for the organisation for 2022/2023, which reflects the identified national and local priorities

Action: Evaluate the implementation of the consent policy by completing the second round of the audit cycle

Action: Refresh and enhance the function and content of the Clinical Audit Project Register as part of the move to LanQIP2

Action: Review existing Quality Performance Indicator cancer reporting system

Outcome: 3.03 We will agree a strategic direction for the management of locally developed clinical guidelines across the organisation

Action: Develop a process for the identification and relocation of guidelines on FirstPort to the NHSL Guidelines App.

Action: Develop a standardised approach for guideline analytics

Action: Develop an IT support system for guidelines and relevant processes.

Action: Evaluate the COVID-19 Toolkit.

Action: Evaluate the NHS Guidelines App

Action: Launch of the Maternity Guidelines & Pathways

Outcome: 3.04 Realistic Medicine – promoting shared decision making

Action: Enhance community and Primary Care Anticipatory Care Planning (ACPs) and pilot the recommended summary plan for emergency care and treatment (ReSPECT) to support Shared Decision Making in four community areas

Action: Promote use of revised TEPs in the three acute hospitals and undertake snapshot audit

Action: To meet the actions for improving the outpatient review process for Long Term Conditions

Action: To meet the actions to improve the process for waiting list management

Action: To meet the actions to increase awareness and embed Realistic medicine across the systems

Outcome: 3.05 Evaluation of the improvements in patient pathways for services in the national Access QI Collaborative Programme

Action: Implement new Gynaecology Service pathway as part of the national Access QI Programme

Action: Implement new Rheumatology Service pathway as part of the national Access QI Programme

Outcome: 3.06 We will ensure that every child and young person receives an appropriate and high quality review in the event of their death

Action: Establish and co-ordinate a Child Death Review Oversight Group

Action: Establish and maintain a central database of Child Death reviews and produce reports and analysis on the deaths of children and young people.

Action: Scope existing practice in relation to engagement with families and carers and provision of bereavement support and make recommendations for improvement.

Capacity & Capability

Outcome: 4.01 Implement a consistent approach to using QI methodologies, tools and techniques in service design and delivery across NHS Lanarkshire

Action: Evaluate the current awareness service (Vable)

Action: Evaluate the quality of the literature search service in NHSL (benchmarking)

Outcome: 4.02 Design and deliver QI training to staff across Lanarkshire

Action: Evaluate the aEQUIP quality improvement training programme

Action: Evaluation of NHSL Data & Measurement Framework & NHSL Data Visualisation Framework to assess how well the principles of these documents have been embedded in the organisation

Action: Further embedding of the NHSL Data & Measurement and Visualisation Frameworks through introduction of a mandatory Quality Planning checklist for all planned service changes / transformations which includes development of quality indicators and Measurement Plans to measure impact of the proposed changes.

Action: Review the Human Factors resources available in NHS Lanarkshire

Outcome: 4.04 Promote and support NHS Lanarkshire staff to undertake national QI Training Programmes

Action: Provide advice and guidance to staff wishing to apply for national QI training programmes

Outcome: 4.05 Establish a Quality Management System for NHS Lanarkshire

Action: Deliver a Quality Management System (QMS) across NHS Lanarkshire

Action: Design a Quality Management System (QMS) for use across NHS Lanarkshire