



Lancashire &
South Cumbria
NHS Foundation Trust

Quality Strategy



We are
LSCft

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Foreword





Foreword

The Trust has developed six Strategic Priorities to enable delivery of the overarching organisational Strategy. Of these Priorities Three and Four relate specifically to quality but it is a thread through all six.

“ We will deliver safe care and we will embrace an open and learning culture, ensuring we continually improve”

“ We will respond to people’s needs by striving for the highest standards of quality, proactively reducing health inequalities”.

The Trust is committed to providing the highest quality services for patients. It is therefore essential we continually improve the quality of our services by engaging with and listening to service users and carers, staff and key stakeholders in order to meet their needs and expectations. Furthermore, continued strengthening of system-wide partnership working is imperative to promote population health across Lancashire & South Cumbria.

This Quality Strategy is a vehicle to transform and improve the aspects of care that matter most to service users, patients, staff and stakeholders. The strategy supports the organisation-wide improvement journey ‘*We are LSCft, heading for Good, driving towards Outstanding*’.

Our Quality Strategy is set around our quality priorities and is shaped by the healthcare definition of quality, namely patient safety, clinical effectiveness and patient experience. ‘You will receive safe person-centred care that is prevention and recovery focused and accessible in your local community’.



Our Quality Vision

'You will receive Safe Person-centred care that is Prevention and recovery focused and Accessible in your local community

The aim is to achieve our Quality Vision through the completion of our short and long term objectives outlined in this strategy. By focussing on our SPPA quality priorities, we will further develop and improve a high performance culture.

Strong clinical leadership is also critical to the successful completion of our quality objectives.

This Quality Strategy is underpinned by the People, Improvement and Culture Strategy, continuing to support the development of workforce to deliver high quality care which is person-centred.

*Maria Nelligan
Chief Nurse and Quality Officer*

**“Quality is not an act; it is a habit.”
– Aristotle”**

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Context





National context

In addition to understanding our organisation and workforce it is imperative that this strategy reflects the priorities outlined nationally for the NHS and care sector.

Following on from the Five Year Forward View for Mental Health (2016), the NHS Long Term Plan (2019) outlines the NHS commitment to transform mental health care in England. This has been followed by the NHS Mental Health Implementation Plan 2019/20 – 2023/24 (2019) which provides a framework to ensure that this commitment is delivered at a local level and outlines how local areas will be supported in improving access to high quality mental health care.

The National Institute for Healthcare Excellence (NICE) produces guidelines in relation to best clinical practice that is evidence-based. These guidelines should be the standard treatment offered to service users and the standards clinicians adhere to. Areas of priority include care and treatment relating to:

- Psychosis and schizophrenia
- Personality disorders
- Learning disabilities and/or autism
- Dementia
- Service user experience
- Management of violence and aggression

We use NICE guidelines to help us to improve quality and measure our progress. They enable us to audit and produce governance reports demonstrating the quality of care.

Where gaps to meet NICE clinical guidelines are identified, redistribution of resources will be considered alongside liaison with commissioners to highlight priorities for investment.



Local context

The Trust provides services for people with a wide range of mental health, learning disability and physical health needs. We serve a population of approximately 1.8 million people from a variety of diverse communities across Lancashire and South Cumbria and our staff are committed to providing high quality care.

This is not a stand-alone document; the Quality Strategy underpins the Clinical Services Strategy and is linked to other strategic documents such as the Service User and Carer Strategy.

Lancashire and South Cumbria has widespread health inequalities and some of the most deprived localities in the country. There is also a growing ageing population.

The need to address these health inequalities has been brought into sharper focus by the pandemic especially those in relation to mental health, learning disabilities and autism as well as those in specific groups such as our ethnic minority communities.



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Trust Strategic Framework



Our Vision

To support our local communities by excelling in everything we do, together

Together our staff, service users, carers and partners will experience a culture of compassion and inclusivity, making LSCFT a place where we can all thrive and feel proud. Our values and behaviours are the principles that guide all that we do every day

Our Values

We are Kind **We are Respectful** **We are Always Learning** **We are a Team**

Our Quality Priorities

SPPA

Our Strategic Objectives

- 1**

We will put **service users** at the heart of all we do, supporting effective care, recovery and wellbeing
- 2**

We will employ and retain the best **staff** because our work culture will be inclusive and a supportive place to work
- 3**

We will deliver **safe** care and we will embrace an open and learning culture, ensuring we continually improve
- 4**

We will respond to people's needs by striving for the highest **standards** of quality, proactively reducing health inequalities
- 5**

In order to support our local communities by excelling at everything we do together, we will always collaborate with our **system** partners
- 6**

We will provide **sustainable** services that are delivered in an effective and efficient way, at the time people need it

Strategic Priority Three

We will deliver safe care and we will embrace an open and learning culture, ensuring we continually improve

Our service users will experience safe care delivered in high quality environments. We will invest in a safety culture and invest in our staff having improvement skills.

We will support and expand our research capability, innovating to contribute to the evidence base, as well as learning from clinical evidence and best practice. We will celebrate the innovation, knowledge and skill within our workforce.

Relevant Enabling Strategies:

Quality, Clinical Services, People, Improvement and Culture, Risk Management, and Digital Estates

Strategic Decision:

We will invest in continually improving our safety culture

Our Successful Strategy will mean:

- We will deliver evidence-based interventions that will improve outcomes.
- We will have the systems and processes to facilitate the rapid rollout of good practice.
- Technological advances will enable innovative practice and more flexible working but also more tailored and personalised care and treatment options.
- We will appreciate the value of knowledge and ensure we effectively leverage the 'knowledge capital' of the organisation by developing a Learning Health System.





Strategic Priority Four

We will respond to people's needs by striving for the highest standards of quality, proactively reducing health inequalities

Our ambition is to provide the highest quality of services across all our populations that service users, staff and our regulators rate as excellent. We will proactively invest in reducing health inequalities thereby reducing the variation in the quality of services that our diverse communities experience.

We aim to join up physical health, mental health, learning disability autism and social care needs, working proactively with partners to support holistic, prevention-focussed, person-centred care. We aim to enable service users to experience a seamless journey within patient pathways, regardless of provider.

As a provider of physical health, mental health, learning disability autism and social care services, we have an important role in supporting this integration of services.

Relevant Enabling Strategies:

Service User and Carer, Quality, Clinical Services, People, Improvement and Culture, Communications & Engagement, Health Inequalities and Risk Management

Strategic Decision:

We will ensure that our organisation plans and delivers services based on local population need and reduce inequalities

Our Successful Strategy will mean:

- We are ready for our next CQC Inspection and confident of being awarded 'Good' as an organisation and increase in 'Outstanding' across domains within our services.
- We will work with our staff and partners to ensure there is a reduction in variation in practice and quality will improve treatment outcomes.

- Improved supervision, training and career opportunities will improve recruitment, retention, satisfaction and performance.
- The four elements of the Quality Strategy SPP are embedded in all we do and all we measure.
- We will plan and deliver services as locally as possible, reflecting the health needs of that population.

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Developing the Quality Strategy





Where are we now?

Recent Successes - Quality Domains

Patient Safety

Over the past 12 months there has been extensive work undertaken to foster a culture of openness and safety improvement in which staff are able to learn lessons from incidents.

Our patient safety developments align to the national Patient Safety Strategy, including embedding a Just Culture philosophy and recognition of the need for Psychological Safety at work.

The on-going development of effective reporting systems will enable clinical teams to have access to their own data in order that they are able to understand their own safety culture.

Patient Experience

The Trust has recently established a Service User and Carer Council which will be an active well established and representative body which will be able to influence the development of Trust business at both a strategic and an operational level.

We believe that the Council will enable us to significantly strengthen our focus on service user engagement and co-production across all areas of our services and ultimately this will result in improved standards and quality outcomes for our service users.

Clinical Effectiveness

Increasingly we are developing integrated care pathways, working in collaboration with voluntary and public sector partners to provide comprehensive health and social care which avoids duplication and improves service user experiences.

We will continue to develop care pathways which reflect best practice and to ensure that our staff have the appropriate training and skills to deliver effective interventions in partnership within the context of co-operative working.



Co-Production

This strategy has been developed with service users, carers and our staff through a series of open space engagement sessions. This was followed by scrutiny at a Board Development session.

The first three quality priorities have been agreed through consultation with service users. The plan is to review and develop the quality priorities annually with service users, carers and staff to ensure they are up to date and relevant and demonstrate meaningful co-production. The quality programmes and Quality Account will be informed by these priorities. It ensures service improvements required to deliver these priorities will be agreed with service users and carers.



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Enabling Priorities



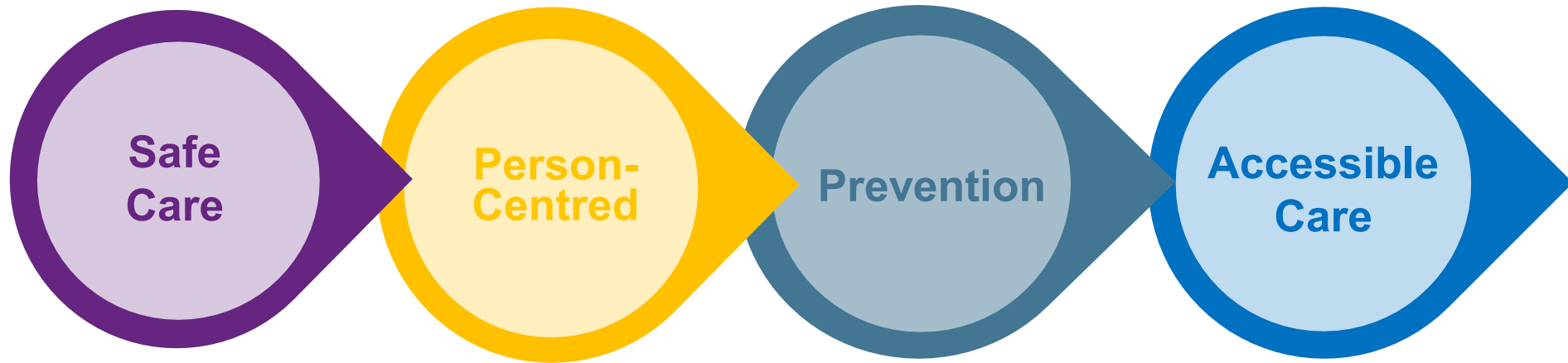
Our Quality Priorities



SPPA

Our Quality Priorities

Below are our Quality Priorities



Safe care delivered every time

Person-centred care delivered with you

Prevention and recovery focused care delivered consistently

Accessible care delivered in your local community





Priority One Safe Care





Priority One

Key Objectives

- To implement a high profile “My Safety” campaign to improve service user and staff safety
- To embed our key safety strategies
 - Reducing Restrictive Practices
 - Suicide Prevention
 - Infection Prevention Control
 - Physical Health in Mental Health
 - Pressure Ulcers
- To deliver Quality assurance systems that support the delivery of safe care
- To deliver programmes of Quality Improvement to deliver outstanding care

What does success look like?

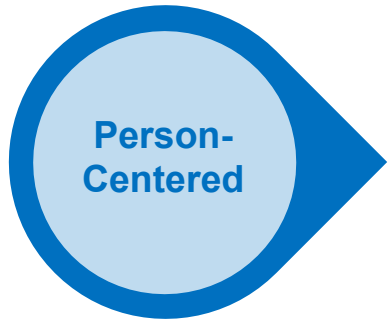
- A 20% increase in no harm and low harm incident reporting over 3 years
- Improved national staff survey results in relation to safety domain
- Increased use of person-centred strategies and a 30% reduction in the use of restrictive practices over 2 years
- Zero suicides within MH inpatients and 10% reduction across our community services
- 5% reduction in pressure ulcers acquired in our care
- Improved IPC audit and cleanliness scores
- Clinical teams engaged with their data and using this for improvement
- Increased QI knowledge and skills and widespread use of QI methodology for improvement



Priority Two

Person-Centred





Priority Two

Key Objectives

- To co-create and implement a Person-centredness Framework connecting with people as unique individuals with their own strengths, abilities, needs and goals
- To deliver our Service User and Carer Strategy
- To embed the Trust Service User and Carer Council supported by 5 local Service User and Carer Councils

What does success look like?

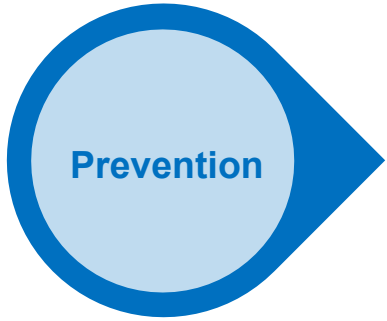
- Person-centredness Framework made up of tools and approaches to help us to practically apply person-centred principles in all we do
- Service users and carers are involved, as equal partners, in the design, delivery and evaluation of the way that care is provided
- Nurture and support service users and carers to ensure they feel confident in being equal partners and the associated activities



Priority Three

Prevention





Priority Three

Key Objectives

- To enhance employment opportunities and embed a Peer Support Strategy
- To extend the Recovery College across the ICS footprint working in partnership with the 3rd sector
- To deliver a clinical education programme to ensure that all staff highly skilled in delivering prevention and recovery focused interventions
- To increase accessible information to ensure that service users and carers have the information they need

What does success look like?

- Well-developed peer support system embedded across services
- Increase in service users reporting improved levels of self-esteem, confidence and positivity
- Recovery College offer available across the ICS footprint
- Improved service user and carer experience
- Improved staff experience
- Service users and carers have the right information to make informed decisions



Priority Four

Accessible Care





Priority Four

Key Objectives

- To deliver large scale transformation programmes which deliver high quality, integrated, place-based care
- To deliver rehabilitation pathways for people with mental health and/or learning disabilities
- As ICS Lead Provider, to transform learning disability and autism services

What does success look like?

- Evidence-based, contemporary, sustainable services are available to people locally
- Rehabilitation pathways are available locally and out-of-area rehabilitation placements are reduced
- The learning disability and autism transformation standards are met across the ICS



Quality Improvement



One of the key enablers in achieving this priorities set out within this Quality Strategy is via embedding a culture of Quality Improvement. The vision regarding this is identified as one of the priorities within our People, Improvement & Culture Strategy.

We will empower, educate and support our staff to ensure that improving our services for patients is everyone's business, working in partnership to ensure we become a centre of excellence for learning, continuous improvement and innovation.

It is only by working together with staff, service users and families/carers, with a combined vision that better performance, better outcomes and greater professional development is achieved.

Quality Improvement

Key Objectives to enable this Strategy include the following pledges:

- We will build Improvement capability and practice across the Trust to ensure a culture of learning and continuous improvement is embedded across the Trust
- We will establish a LSCft change and Continuous Improvement science and model, so that we can ensure tests of change are consistently implemented, measured and improvements are adopted and spread
- We will deliver a focused co-produced transformation and improvement programme, aligned to the delivery of the Trust and Clinical Services Strategy to enable better service user outcomes and experience
- We will develop Quality and Innovation hubs across the Trust – with improvement and innovation resources and support being available to our staff and service users
- We will work in partnership with external organisations, AQUA, Innovation Agency, education, ICS to ensure that LSCFT grows its reputation for driving improvement and innovation



Clinical Audit

Clinical Audit is an important means of ensuring continuous improvement in the quality and effectiveness of care. The Trust will continue to develop an annual audit programme driven by national, local and internal priorities.

We are also implementing a programme of peer reviews and unannounced assurance visits involving the Nursing and Quality Team, Service Users, Executive and Non-Executive Directors. These programmes will continue to support the quality agenda and review of clinical performance and will be used to provide assurance to the CQC.





Staff Wellbeing and Development

Proactively enhancing staff wellbeing is not only important in its own right but is also important for the quality of patient experiences. It is therefore important to invest in and support staff wellbeing to enable staff to better deliver high-quality patient care.

Psychological safety enables staff to work at their best, through a compassionate and inclusive environment. Psychological safety operates at a group level ensuring individuals feel confident in the support they will receive if things go wrong or they raise concerns.

We are committed to developing staff to ensure we have development and wellbeing of individuals and this is detailed within our People, Improvement and Culture Strategy. This includes development programmes, flexible working, access to support and wellbeing interventions. Additionally, during the pandemic and over coming years, the Trust Psychological Resilience Hub will play an essential part in supporting staff well-being.



Inclusion

Our Experience of Care priorities, set out in our Service User and Carer Strategy, have a golden thread of inclusion running throughout, with the aim to:

- seek and understand people's feedback to improve our services
- co-production with people with lived experience
- proactively support diverse communities
- support engagement and collaboration with carers

These priorities align to our Quality Vision and will be supported by our Person-Centred Framework which we have developed with service users, carers and staff. This provides the framework and tools to recognise each person as a unique individual and improve their experience with the Trust whether as a service user, carer or member of staff.



Measurement, monitoring and reporting

It is essential that we are able to demonstrate success, therefore a series of quality and safety metrics are being used to monitor and measure our continuous improvement. This is managed through close scrutiny and monitoring via the Trust's Integrated Quality Dashboard and national benchmarking.

Our electronic Integrated Quality Dashboard enhances sharing of key data at all levels of the organisation, enabling a more effective means of triangulating this data with risk etc.

A quarterly Quality Report will be produced and presented to the Quality & Assurance Committee and shared with commissioners to demonstrate our current performance and recent trends.



Quality Governance

Our Quality Improvement Board is chaired by the Chief Executive and oversees the delivery of service improvement. The function of this Board is embedded into the Senior Leadership team (SLT) meeting who meet on a monthly basis.

Additionally the Trust's performance is measured against the National Mental Health and Learning Disability Trusts' benchmarking tool.

The Trust had a CQC inspection in June 2019 and following this we have launched our overarching quality improvement action plan.



Risk Assessment

In order to effectively deliver a quality service there is a need to ensure that there is an effective and comprehensive process in place to identify, monitor, understand and address current and future risks. We have a Board Assurance Framework (BAF) and Trust Risk Register to enable the Board to be fully engaged in risk management.

Furthermore, all Cost Improvement Plans (CIPs) are developed within the Networks with input from clinical and non-clinical representatives including HR and Finance leads. Following review they are signed-off by the Chief Nursing & Quality Officer, Chief Medical Officer, Chief Operating Officer and the work stream lead prior to being discussed at the Quality & Assurance Committee with final sign off by the Trust Board.

We will continue to develop a positive safety culture within the Trust; identifying risks to the safe delivery of care and the implementation of robust plans to develop staff competencies and knowledge and to ensure timely access to safe systems and training.



Transparency

In order to be open about the quality of our services and to drive forward our quality vision, it is essential that our staff, service users, carers and the general public are informed about the quality of our services. We will ensure that such information is readily accessible, published through our annual Quality Account and where appropriate our external website.

The trust website will be able to demonstrate a culture in which there is an open and transparent approach to safety, with robust internal reporting and review procedures. Safety data will be publically available through the trust website.



Delivering our Quality Strategy

This Quality Strategy provides a framework through which improvements in the services provided to patients and service users can be focused and measured.

We have taken time to listen to patients, service users, public and staff about the things that really matter to them within this strategy. We will address these issues through clear objectives and an established performance management framework over the next five years.

Ensuring the delivery of high quality clinical care and ensuring excellence in mental health, physical health and learning disability services is the Trust's overriding priority. Therefore the experience of service users and carers is at the heart of our plan and we will ensure that we continuously improve to meet the needs of our local population and support wellbeing and recovery through practice which is based upon the best available evidence. We aim to be recognised as a centre of excellence with a culture of continuous learning in which we are able to work in partnership with service users and carers to develop effective care pathways and innovative solutions.



Delivering our Quality Strategy

We recognise that quality and good governance is a hallmark of a high performing organisation. We are committed to building on our strengths and addressing any weaknesses.

We aspire to be an outstanding organisation and everything we are doing is laying the foundations for this. We will know if we have been successful in delivering this strategy by our measurement and performance monitoring framework which is regularly reviewed to ensure that it remains robust and it is fit for purpose.

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Equality Assurance





Equality Assurance

Equality Impact Assessment

LSCft puts equality, inclusion, and human rights at the centre of the design and delivery of inclusive services for the diverse communities we serve, and the empowering culture we create for our staff.

The legal case is set out in the Equality Act 2010 and the practice is embodied by our staff every day, without exception. We are stronger together.

Potential Impact

This strategy has been developed with service users, carers and our staff through a series of open space engagement sessions. This was followed by scrutiny at a Board Development session.

The first three quality priorities have been agreed through consultation with service users. The plan is to review and develop the quality priorities annually with service users, carers and staff to ensure they are up to date and relevant and demonstrate meaningful co-production. The quality programmes and Quality Account will be informed by these priorities. It ensures service improvements required to deliver these priorities will be agreed with service users and carers.



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**For more information about accessible formats
please contact communications@lscft.nhs.uk**

