



St George's, Epsom  
and St Helier  
University Hospitals and Health Group



# Group Quality & Safety Strategy

## 2024 – 2028

# Contents:

- I. Overview (slide 3)**
- II. Where are we now? (slide 4)**
- III. Our vision (slide 5)**
- IV. What do we want to achieve? (slide 6-9)**
- V. How do we get there? (slide 10-11)**

# Our quality & safety strategy

The NHS is operating in a difficult environment. We face major financial and workforce pressures, with growing demand for our services. Waiting times for planned care and patient flow (making sure the patient is in the right place at the right time) for unplanned care are worse than we want them to be. There is significant overcrowding in our three Emergency Departments, impacting on patient experience and outcomes.

But our aspirations remain high. **Our aspiration by 2028 is to deliver outstanding care together:**

- waiting times among the best in the NHS,
- lower than expected mortality rates and a reduction in avoidable harm,
- improved outcomes and patient experience
- a reduction in health inequalities.

The route to delivering those aspirations is not going to be to spend more money on additional staff or capacity – indeed the financial context is going to get harder. Instead our strategic priorities are ...



## STRONG GOVERNANCE

*We will strengthen governance & oversight of quality and safety*

1. Reform our Group quality governance approach and embed this throughout the Group to ensure collective understanding of quality & safety.
2. Enhance patient safety by systematically learning from incidents through implementation of the Patient Safety Incident Reporting Framework and Learn from Patient Safety Events (LFPSE) service.



## BETTER FLOW / SHORTER WAITS

*We will improve flow through our services, so that patients get the right care, in the right place, more quickly.*

3. Improve waiting list management for planned care, and improve patient flow in hospitals, so that all patients get timely, safe care in the appropriate environment and timely discharge. Mental health patients in Emergency Departments will be a focus, as will be improving the integrated care service for frail elderly patients at St George's. This will involve collaboration with system partners.



## A LEARNING ORGANISATION

*We will embed a culture of psychological safety, continuous improvement, learning from mistakes and learning from others*

4. Develop an outstanding patient safety culture in which all our staff feel psychologically safe to speak up and confident the organisation will act in response.
5. Embed a new Group-wide approach to clinical effectiveness, incorporating better use of data and intelligence, and greater use of peer learning/review across our services.

Enablers

6. Maximising the clinical value of every pound we spend

7. Tackling health inequalities

8. Engaging patients & co-production

9. Embed continuous improvement in everything we do

## Where are we now?

- We are operating in a **significantly challenging environment** with severe constraints around **finances** at both Group and ICS level.
- Furthermore, with people across the NHS waiting longer **in A&E and on waiting lists**, our emergency care pathways are experiencing **poor flow**.
- This has significant **consequences for quality and safety** including patient experience and outcomes.
- Given increased demand, and **significant resource constraints**, both financial and human, we must **prioritise the actions** we take over the next four years to ensure we meet our strategic objectives.
- **Industrial action and post COVID backlogs** continue to pose major challenges in managing long waiting lists and addressing health inequalities, alongside the increasing demands for services.
- We are facing ongoing challenges with **supply, recruitment and retention** and a workforce, which has experienced ongoing extreme pressures, resulting in morale issues and greater need to focus on staff wellbeing.

# Our Vision

This strategy sets out our strategic objectives for 2024-2028 against these three areas:

## STRONG GOVERNANCE

*We will strengthen governance & oversight of quality and safety*

## BETTER FLOW / SHORTER WAITS

*We will improve flow through our services, so that patients get the right care, in the right place, more quickly.*

## A LEARNING ORGANISATION

*We will embed a culture of psychological safety, continuous improvement, learning from mistakes, and learning from others.*

# Strategic objectives and actions

## STRONG GOVERNANCE

*We will strengthen governance & oversight, to provide safe, effective & patient-centered care*

#	Strategic Objectives for 2024-2028	Actions 2024 - 2028	In year quality priorities 2024/25
1	Reform our Group quality governance approach and embed this throughout the Group to ensure collective understanding of quality & safety.	<ul style="list-style-type: none"> <li>Define and embed a new Quality Management System across the Group, setting out our approach to quality improvement, quality control, quality planning and quality assurance using a continuous improvement approach</li> <li>Building on the governance review of the Group maternity service we will now extend this approach to other clinical areas</li> <li>Integrate corporate quality and safety functions within Nursing and Medicine to deliver a Group-wide approach</li> </ul>	<ul style="list-style-type: none"> <li>Strengthen the governance and quality of our maternity services</li> <li>We will strengthen our governance processes to ensure effective ward/service to Board reporting</li> </ul>
2	Enhance patient safety by systematically learning from incidents through implementation of the Patient Safety Incident Reporting Framework and Learn from Patient Safety Events (LFPSE) service.	<ul style="list-style-type: none"> <li>Achieve required levels of mandatory patient safety training</li> <li>Improve patient safety related learning across the Group (including the introduction of further learning events)</li> <li>Improve involvement and experience of patients, families and staff in responding to patient safety incidents</li> <li>Use the patient safety incident response framework to ensure a more co-ordinated and data-driven approach to patient safety incident response</li> </ul>	<ul style="list-style-type: none"> <li>In line with the national patient safety strategy, we will implement the new patient safety incident response framework</li> </ul>

# Strategic objectives and actions

**BETTER FLOW / SHORTER WAITS**

*We will improve flow through our services, offering right care right place right time, to improve patient outcomes/experience*

#	Strategic Objectives for 2024-2028	Actions 2024-2028	In year quality priorities 2024/25
3	Improve waiting list management for planned care, and improve patient flow in hospitals, so that all patients get timely, safe care in the appropriate environment and timely discharge. Mental health patients in Emergency Departments will be a focus, as will be improving the integrated care service for frail elderly patients at St George's. This will involve collaboration with system partners.	<ul style="list-style-type: none"> <li>• Work with our mental health Trusts to improve care for patients with mental illness, including in our ED and on paediatric wards</li> <li>• Work with partners in our local places to improve care for our frail elderly population – reducing attendances, reducing length of stay and speeding up discharge</li> <li>• Manage patients on waiting lists better, focusing on reducing the impact of health inequalities and deterioration through use of new tools and technologies, including emerging AI tools.</li> <li>• Improve our inpatient flow and ED overcrowding through better use of data around discharges and reducing variation</li> </ul>	<ul style="list-style-type: none"> <li>• We will deliver our flow programme</li> </ul>



# Strategic objectives and actions

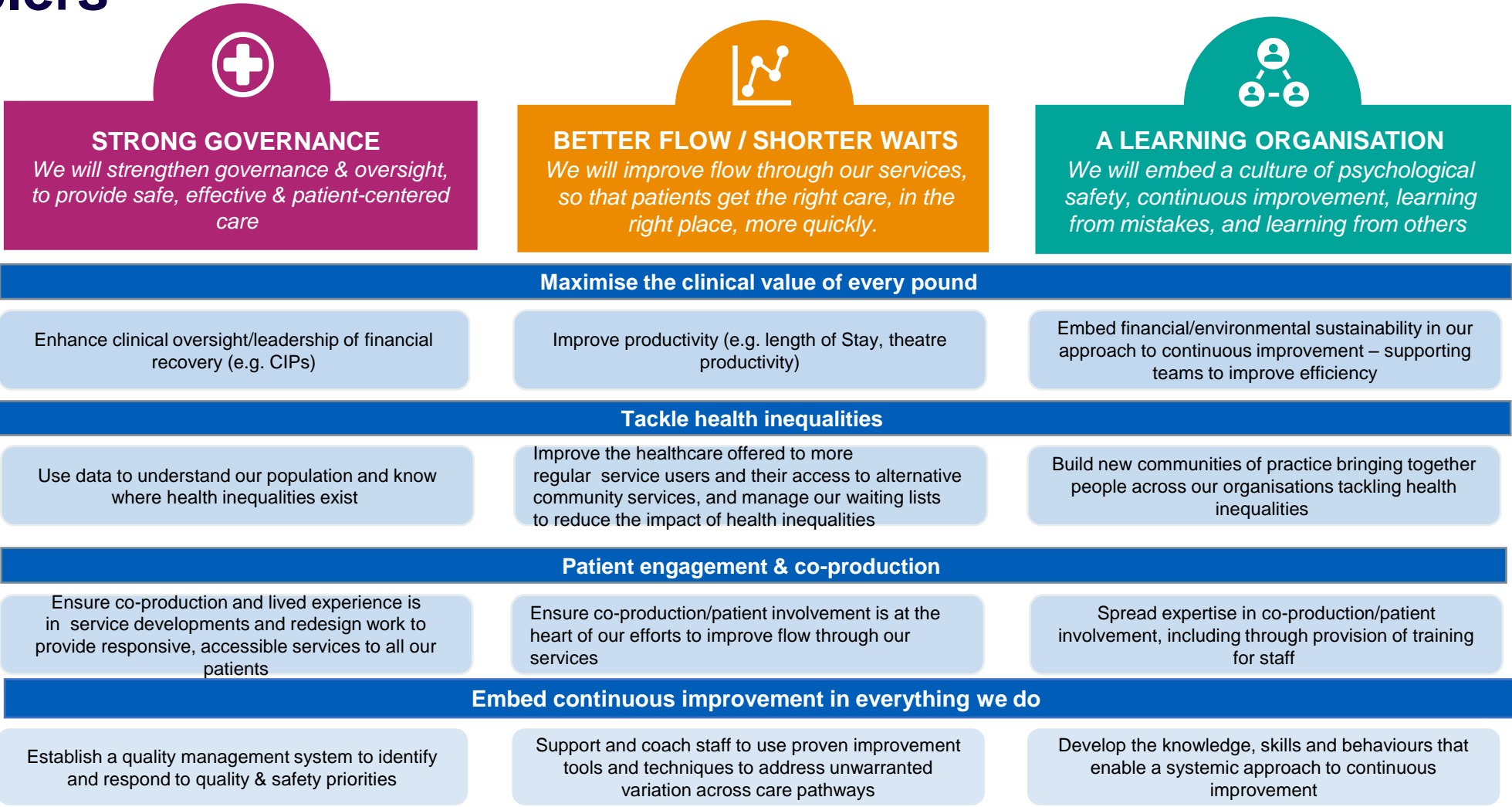
## A LEARNING ORGANISATION

*We will embed a culture of psychological safety, continuous improvement, learning from mistakes to improve patient outcomes/experience*

#	Strategic Objectives for 2024-2028	Actions 2024-2028	In year quality priorities 2024/25
4	Develop an outstanding patient safety culture in which all our staff feel psychologically safe to speak up and confident the organisation will act in response.	<ul style="list-style-type: none"> <li>Through a multidisciplinary Raising Concerns Group, led by the CCAO and supported by the CNO/CMO, make it easier for staff to raise concerns on patient safety, improve how staff are supported through the process of raising concerns, and ensure staff see the positive impact from doing so</li> </ul>	<ul style="list-style-type: none"> <li>We will integrate our Quality Improvement resources across the Group to maximise service improvement activity and actively encourage psychological safety in all improvement activity</li> </ul>
5	Embed a new Group-wide approach to clinical effectiveness, incorporating better use of data and intelligence, and greater use of peer learning/review across our services.	<ul style="list-style-type: none"> <li>Develop a new Group-wide approach to clinical effectiveness and audit, led by a single Group-wide team</li> <li>Strengthen use of data by our services, supporting them to learn from best practice across the Group</li> <li>Determine minimum standards for addressing variation in how data is used by services and explore options for implementation.</li> </ul>	<ul style="list-style-type: none"> <li>We will get the basics right every time and consistently complete risk assessments in line with expected standards of performance</li> </ul>



# Enablers



# How do we get there?

---

## Implementation



We will develop a roadmap of the high-level milestones for achieving the strategy phased over the four years of delivery



Implementation will then be delivered through annual action plans with agreed owners and timelines


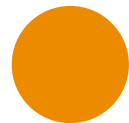



We will make sure our quality priorities are affordable and our strategic objectives can be delivered within existing resource.

# How do we get there?

---

## Governance

-  The implementation of the Strategy will be over seen by the Group Chief Medical Officer and Group Chief Nursing Officer as the Senior Responsible Officers.
-  The programme will report into the gesh Quality group. That group should be accountable to the Group Executive and then on to Quality Committee.
-  The Strategy's implementation will be evaluated every 6 months.