



**NHS**

Essex Partnership University  
NHS Foundation Trust

# QUALITY OF CARE STRATEGY

**PEOPLE TOGETHER CREATING SAFETY,  
EFFECTIVENESS AND EXPERIENCE**



# CONTENTS

<b>Welcome</b>	<b>2</b>
<b>Strategic Context</b>	<b>3</b>
<b>Approach to Strategy Development</b>	<b>6</b>
<b>Quality of Care Strategy Vision at a Glance</b>	<b>8</b>
<b>Safety at EPUT</b>	<b>9</b>
<b>Effectiveness at EPUT</b>	<b>11</b>
<b>Experience at EPUT</b>	<b>13</b>
<b>Putting Principles into Action</b>	<b>16</b>
<b>First Year Quality Senates Topics</b>	<b>17</b>
<b>2024-2026 EPUT Quality of Care Programme Plan</b>	<b>18</b>
<b>Acknowledgements</b>	<b>21</b>

# Welcome

**As we continue our journey to deliver our strategic priorities and vision for Essex Partnership University NHS Foundation Trust (EPUT), it is important to understand our journey so far and our next steps to reaching our ambitions.**

We must ensure the steps we take on this journey are guided by learning from the past, and ensure the care we deliver today and everyday will continue to be guided by actively listening to the people we care for and all of our workforce. We will ensure that we create collaborative partnerships connecting with the people of Essex and beyond to make that journey together, with a commitment to person centred care, tailored to the individual and adopting principles for continuous improvement and sustainability.

It is vital that we always take the opportunity to learn. For our physical health services this means through system partnerships and collaborations supporting population health. For our mental health services this means learning from the Lampard Inquiry to support a continuous journey of improvement. Collaborating with partners at a local, regional and national level will enable us to improve quality of care and sustain high standards reliably and consistently.

We provide a breadth of services which support holistic and empathic care within our local communities and inpatient settings. EPUT services encompass the promotion of healthy life choices, prevention of illness, therapeutic acute care, rehabilitation and end of life care. Our services are available to all people ranging from families and their babies before birth, through childhood and adolescence, throughout adulthood and older age.

Our aspiration is to be innovative and develop best practice guidance through partnership working, collaboration and research that will influence local, regional and national recommendations in the future. The development of this strategy will build an organisational approach for quality of care co-created using what our people have told us quality of care means to them, along with the National Quality of Care Principles.

## Learning from lived experience

“

As a person with living experience of services, one of the things that stands out for me is the quality of care I receive. Also, as a person whose family has used services, the quality provided by our NHS is of paramount importance. It's a real privilege and pleasure to be one of our Trust's Patient Safety Partners. Complementing the 'Safety First, Safety Always' mantra, this strategy becomes the golden thread to keep quality and safety at EPUT's heart.

”

“

As someone with lived experience of using NHS Services and now working in partnership with EPUT, I believe lived experience plays a critical role in ensuring positive outcomes for patients and staff. Quality care prioritises patient safety and implements structures to improve service and support for all. Rather than looking at the past, let's concentrate on what we can do to help the future of patients and the care we provide in a safe and supportive manner. Working together, sharing ideas, listening to differences of opinion, respect, commitment, education and collaboration are key within this strategy. By adopting these key practices, we can deliver the highest standard of care to our patients and hope for our future generation.

”

“

As someone with lived experience, I am pleased to see EPUT is practising what they are preaching in terms of the concept of co-production, involving all parties from the beginning of the Quality of Care Strategy development.

”

# Strategic Context

We are adopting a 'Start with People' approach, we asked people of Essex with lived experience of EPUT services to tell us what quality of care means to them. We've used this to create our vision for Quality of Care for EPUT.

## People will feel in control and hopeful for their future

Treatment with **understanding, compassion, kindness** and without stigma or discrimination.

**Listening and responding, receptive** to people and their comments.

**Actively seeking and valuing feedback** and listening to people and making changes as and when we need to.

**Shared** decision making with **empowered people**, their families, loved ones and supporters.

Consistently timely, **proactive, understandable and accessible communication** with families, loved ones and supporters.

**Reliable** and **consistent** provision of **evidence-based** care.

## Three key components of quality of care

We are adopting the NHS constitution and WHO definition of quality of care. Care is evidence-based to ensure it is safe, effective and provides positive experiences.

### SAFETY

Defining the next phase of our safety journey commencing January 2024, following on from 'Safety First, Safety Always' 2020-2023.

### EFFECTIVENESS

How our services ensure care is evidenced-based and effective, building towards greater consistency, reliability, equity and driving improved outcomes for all.

### EXPERIENCE

Those who we care for, their friends, families and carers' experiences are vital indicators of quality of care. Our workforce's experience is also an essential factor to create a culture of quality.

## QUALITY OF CARE



# The context of this strategy

- This strategy will promote the equal importance of all three components of quality of care. Taking the opportunity to build on the previous Trust Safety and Quality strategies and reflective of our Trust vision and priorities. This strategy includes Safety, along with Experience and Effectiveness.
- This strategy ensures the people we care for, their families, loved ones and supporters are partners in driving quality of care. They will do this through collaboration, sharing experiences, educating, supporting our learning culture and defining what quality of care means to shape our outcome measures.
- This strategy endorses evidence-based models of care and quality outcomes. Enhancing leadership, culture, systems and process improvement principles.
- This strategy provides a foundation of quality to integrate our services with a person-centered and collegiate approach.
- This strategy will endorse our journey of continuous learning by adopting the findings of the Lampard Inquiry and ongoing partnerships within integrated care collaboratives.
- This strategy aligns with key national strategies such as the NHS Long Term Plan, National Quality Board Improving Experience of Care, Culture of Care Standards for mental health inpatient services, CQC Quality statements and NHS National Safety strategy.

**This strategy aligns to the quality strategies of our four local systems:**



Mid and South Essex  
Integrated Care  
System



**EPUT's Quality of Care Strategy contributes to the delivery of the Trust's five year Strategic Plan.**

## Strategic objectives

**We have four strategic objectives to achieve our vision:**

**We will deliver safe, high quality integrated care services.**

**We will work with our partners to make our services better.**

**We will enable each other to be the best we can be.**

**We will help our communities to thrive.**

## OUR VISION

**To be the leading health and wellbeing service in the provision of mental health and community care.**

## OUR VALUES



## OUR PURPOSE

**We care for people every day. What we do together matters.**



# This strategy is part of a streamlined suite of enabling strategies

EPUT's core business is to provide care services. The Quality of Care Strategy **drives** care quality principles as a foundation for other enabling Trust strategies. The interdependencies of these strategies will together deliver our Trust strategic vision.

## TRUST STRATEGIC VISION

### Our Care Unit delivery strategies

to ensure that our care unit operational delivery plans are achieved with place based and service need prioritisation.

### Our professional strategies

to ensure that professional strategies such as medical, psychological, Pharmacy and collaboration of care, which brings nursing and allied health professional practice together.

### Our Estates strategies

to ensure that our physical environments are conducive to high quality care and we achieve our Green Plan.

### Our clinical model strategies

to ensure that clinical excellence is built with the core principles of quality, including our Pharmacy strategy which provides medicine optimisation for EPUT.

### Our Data strategies

to ensure quality interventions are directed to areas of greatest need.

### Our Workforce, People and Culture and Education strategies

to ensure we are empowering staff to achieve their potential, and ensuring our strategy for Working in Partnership with People and Communities is achieved.

## QUALITY OF CARE STRATEGY

### SAFETY

### EFFECTIVENESS

### EXPERIENCE

### The aims of the Quality of Care Strategy

- Put **people** first: the people we care for, their families, loved ones and supporters and all of our workforce.
- Ensure the three components of quality - **Safety, Effectiveness and Experience** - collectively underpin how care is designed and delivered.
- Create collaborative, equitable **partnerships** to listen, learn and improve.
- Improve our approach to delivering current, **evidence based**, best practice care.
- Support the development of collegiate, professional, caring, **high performing teams**.
- Move from providing reassurance to **assurance** through the introduction of a Quality Assurance Framework.
- Develop a **suite of quality outcome measures** that align with EPUT and Integrated Care Systems' Quality of Care priorities.
- Ensure EPUT's safety agenda is **aligned with national strategies** and builds on the safety journey to date, with continuous improvement and safety systems and cultures.
- Ensure safety at EPUT through a sustained **culture of learning**, using thematic review, data intelligence, collaboration and partnership.

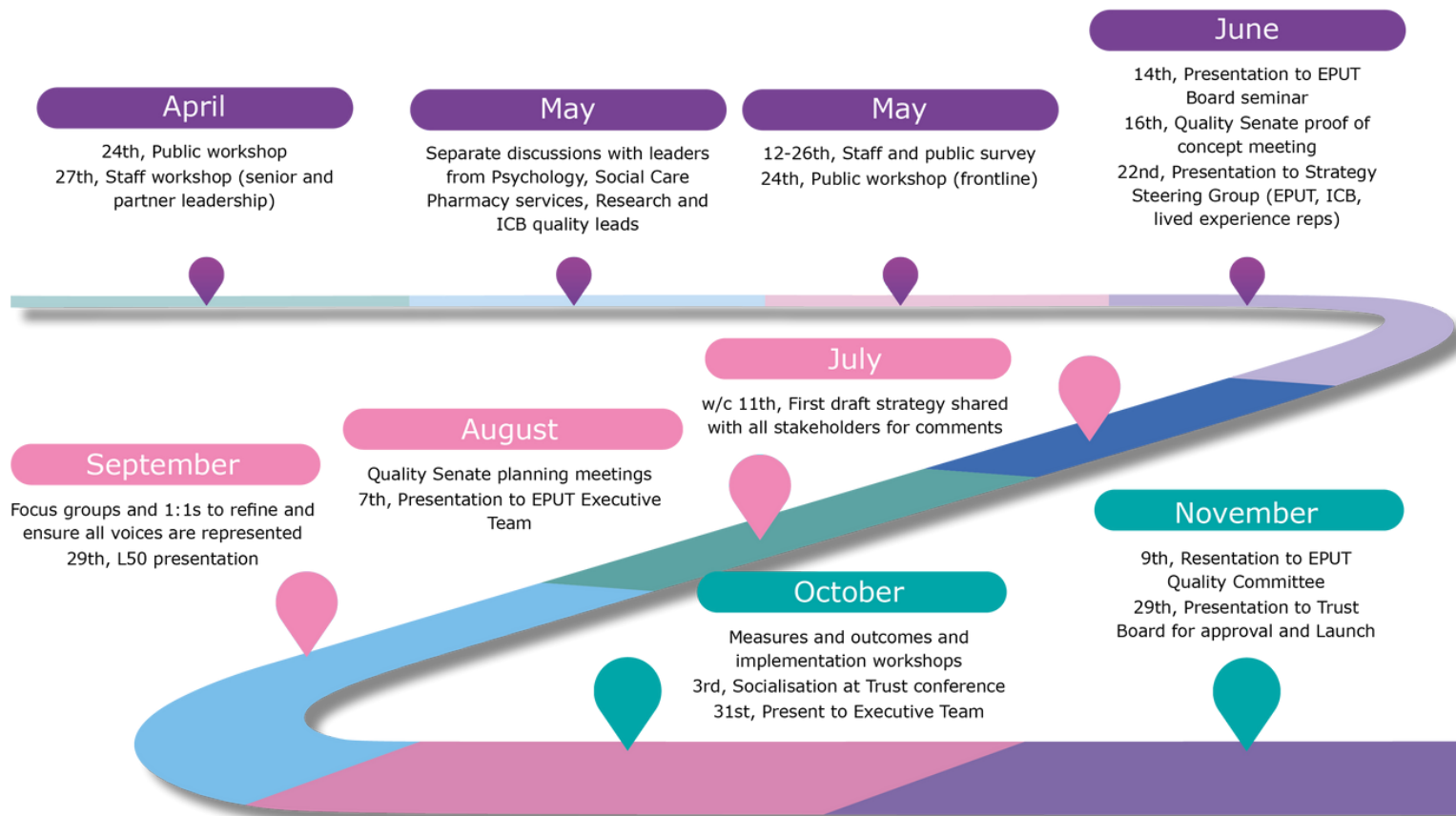
# Approach to Strategy Development

This strategy has been shaped by listening to a range of important voices.

Representatives bringing their experiences of physical and mental health services begun the strategy development and their views and wishes then guided the approach taken thereafter.

This included:

- Workshops for people with lived experience, carers, governors, volunteers, Patient Safety Partners and Healthwatch. We also ran two multi-disciplinary staff workshops including a diverse range of colleagues from a variety of different professions, roles and experience from across all our care units. The workshops covered a wide range of services and quality leads from all of our Integrated Care Systems and our regional specialist collaborative.
- Survey responses from EPUT staff and people with lived experience who weren't able to attend workshops in person
- Voices of our Patient Safety Partners who share the experiences of our patients through their visits and involvement
- Presentation at Board development, and subsequent EPUT governance approval forums
- Nominated directors as senior responsible officers for the three components of Quality of Care
- 1:1s and small focus groups, with many key stakeholders to co-create the final strategy.



## Principles

**Building trust through empowerment, collaboration and partnership.**

**Staff workshops identified how the strategy could support learning and the continuous improvement of quality of care.**

Streamline policies and guidelines and ensure ease of use.

Promote working partnerships.

Foster a culture of learning and continuous improvement.

Create the opportunities for evidence-based care delivery.

Focused systems and processes in place to be more effective.

Support empathy, respect and connection in our culture and behaviours.

Prioritise the experience of people we care for, their families and supporters.

Opportunity to build the pride of our workforce.

Enable completion of meaningful quality and equality impact assessments.

**Implementing this strategy will take EPUT on a journey from providing reassurance to assurance.**

Assurance to our local population, people with lived experience, their families, loved ones and supporters.

Assurance to our Board.

Assurance to system partners.

Assurance to our workforce.

Assurance to regulators.

**Across all EPUT services we will be able to provide**

**Assurance that quality of care is:**

Current; based on best practice / clinical evidence.

Co-designed in partnership with our patients, their families, loved ones and supporters.

Multi-professionally agreed, in partnership with our patients, their families, loved ones and supporters.

Suitably integrated.

Aware of the context of existing concerns.

Positively influencing EPUT's culture.

Co-designed with equity, with equality and quality impact assessments.

# Quality of Care Strategy Vision at a Glance



People will feel in control and hopeful for their future.



People will work together to support listening, learning and continuous improvement.

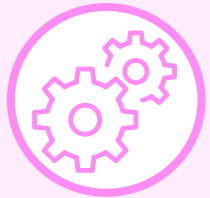


Trust, consistency, reliability and pride will be our building blocks.

**PEOPLE TOGETHER CREATING SAFETY, EFFECTIVENESS AND EXPERIENCE**



We will consistently improve patient safety through involvement and insight.



Culture and systems will be our key foundations to improve patient safety.



We will enhance care by understanding people's experiences and collaborating with them and their loved ones.



The care we provide will be beneficial, evidence-based, and effective.



Care will be provided by staff that are confident, competent, and knowledgeable.



We'll start with people, ensuring valuable processes for care, celebrating achievements, and facilitating improvement.



# Safety at EPUT

## Senior Responsible Officer

Moriam Adekunle, Director of Safety, Patient Safety Specialist

## Executive Sponsor

Ann Sheridan, Executive Chief Nurse

Our vision is to continuously improve patient safety, built on two foundations set out in the NHS National Patient Safety Strategy: A patient safety culture and a patient safety system.

There are three strategic principles that will support our development.

**Our ambition is to have no avoidable patient harm within the organisation by the end of 2026.**

### Continuously improving patient safety



## 1 Insight

Improving understanding of safety by drawing intelligence from multiple sources of patient safety information.

## 2 Involvement

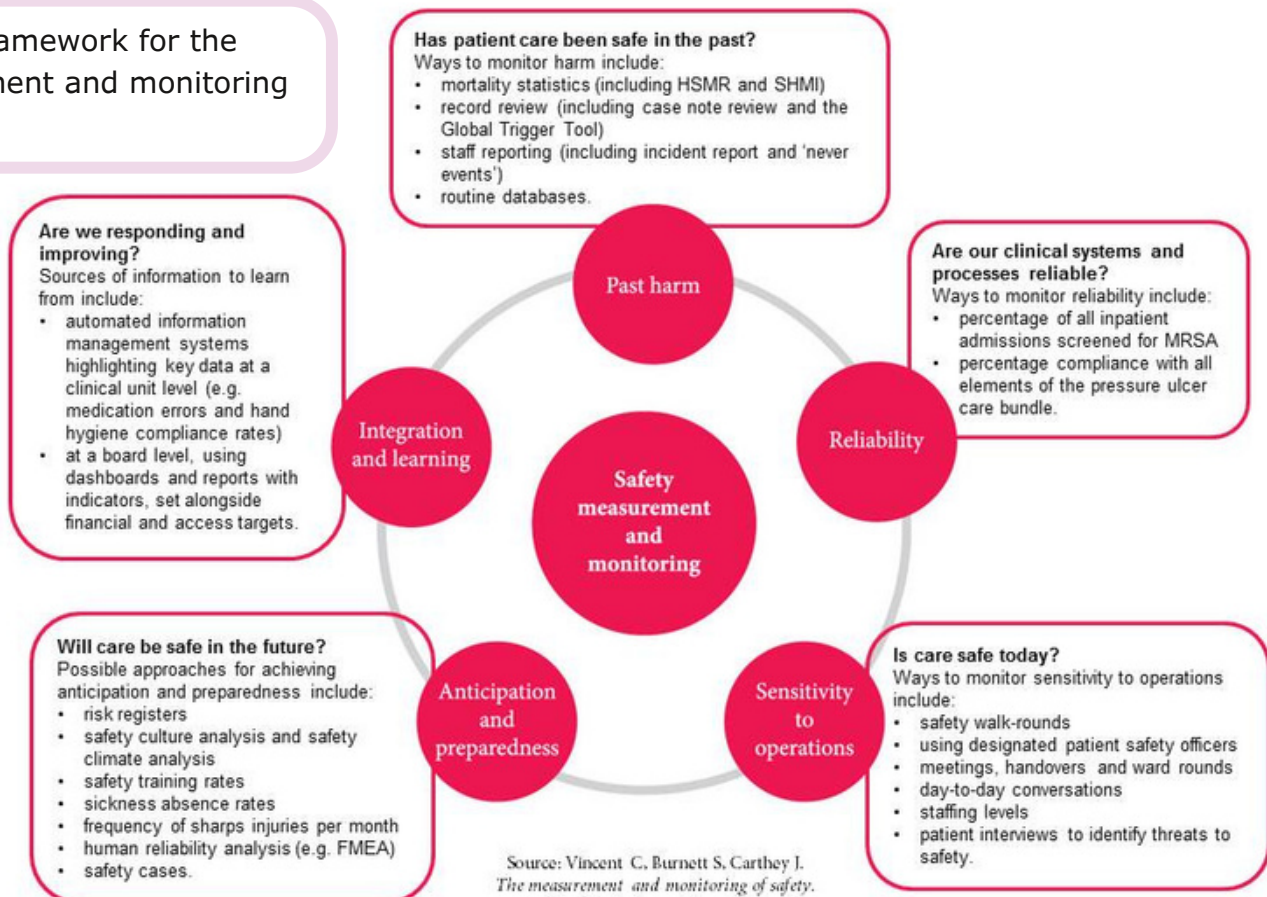
Equipping patients, staff and partners with the skills and opportunities to improve patient safety throughout the whole system.

## 3 Improvement

Designing and supporting programmes that deliver effective and sustainable change in the most important areas.



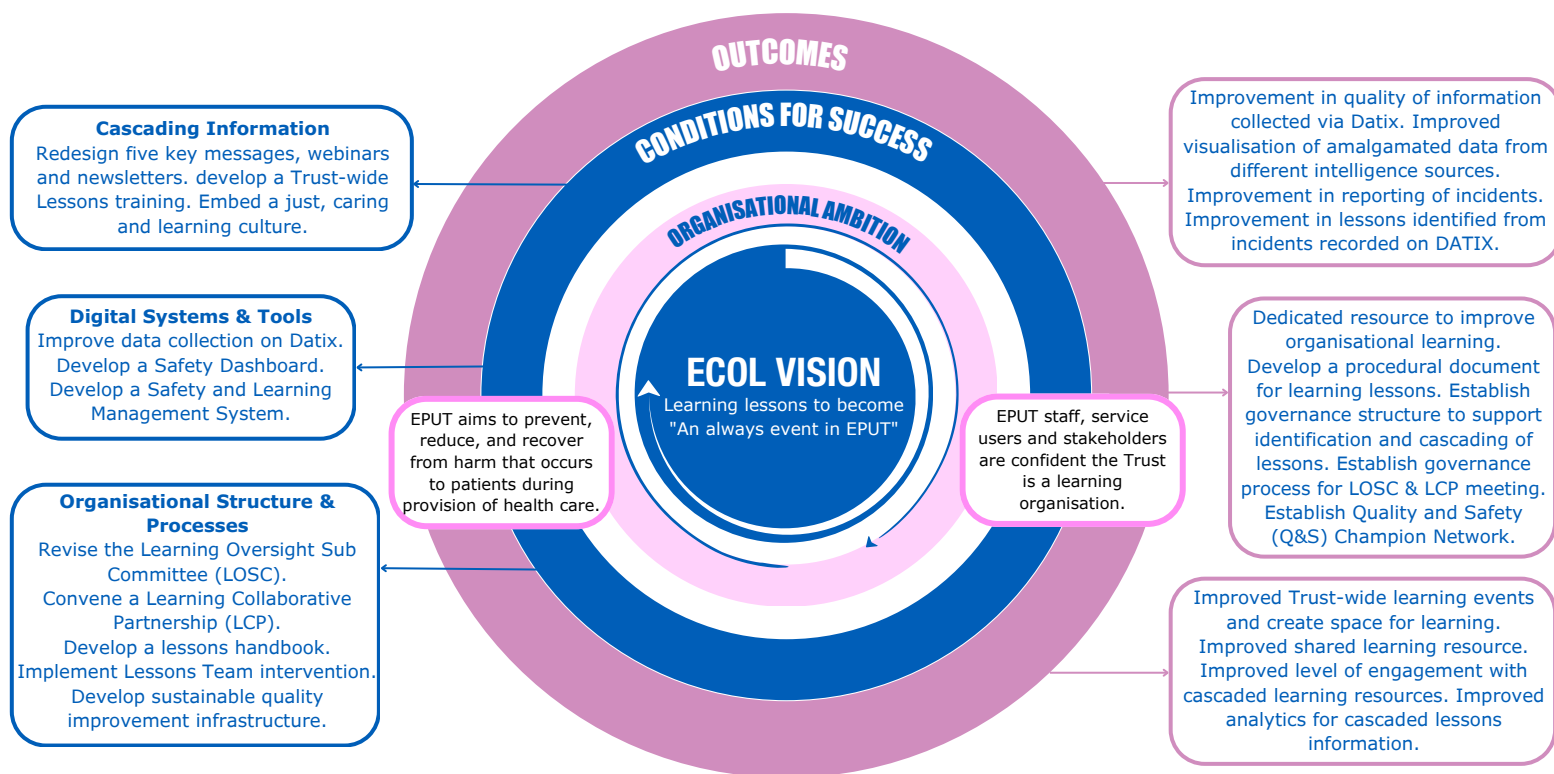
Using a framework for the measurement and monitoring of safety.



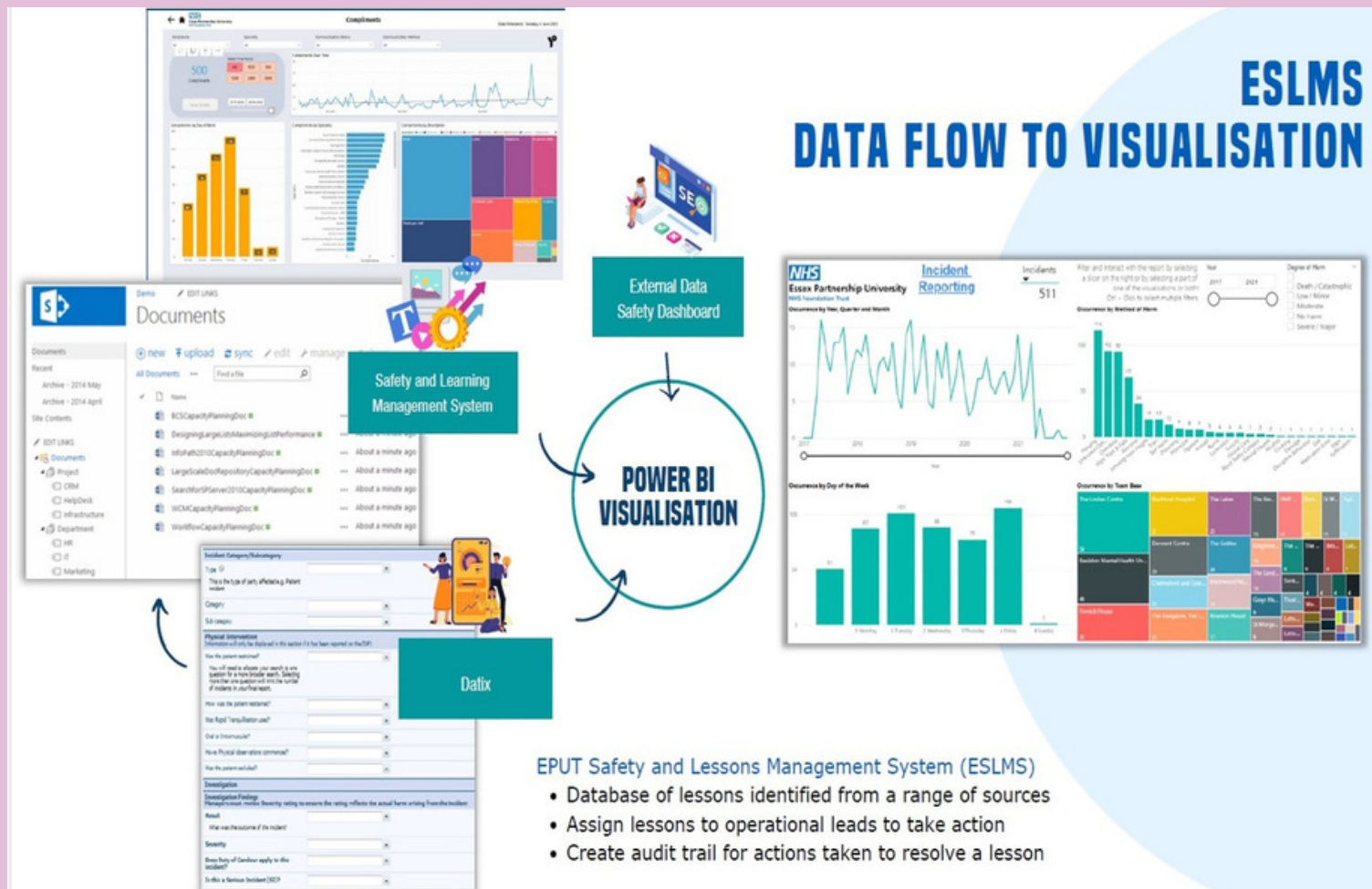
Source: Vincent C, Burnett S, Carthey J.  
The measurement and monitoring of safety.  
The Health Foundation, 2013

# EPUT culture of learning quality benefit realisation

Ensuring our culture of learning creates conditions for success and realises safety benefits.



Develop EPUT's Safety and Lessons Management System to ensure all care providing teams can access data to support learning.



# Effectiveness at EPUT

**Senior Responsible Officer**

Angela Wade, Director of Nursing, Infection Prevention and Control

**Executive Sponsor**

Dr Milind Karale, Executive Medical Director

## There will be five main approaches to support our effectiveness ambition

Our vision is to ensure that everyone receives the care they need which is beneficial, evidence-based and effective. Provided by teams who are confident, competent and knowledgeable within a culture of quality care. Our aim: To build consistency, reliability, equity and driving improved outcomes for all.

Evidence-based sources	Quality Senate	Quality Assurance Framework	Quality outcome measures	Work in partnership with peers
<ul style="list-style-type: none"><li>• National publications.</li><li>• Professional publications and guidance.</li><li>• Structured literature review of published research.</li><li>• Historic Trust learning.</li><li>• Expert presentation.</li><li>• Local and system learning and audit.</li><li>• Regulatory quality statements.</li></ul>	<ul style="list-style-type: none"><li>• Collaboration and partnership.</li><li>• Provide expert and trusted advice for agreed priority topics.</li><li>• Accountable for clinical guidelines.</li><li>• Create a space for professional curiosity.</li><li>• Promote quality and equality impact assessments.</li></ul>	<ul style="list-style-type: none"><li>• Create a robust methodology for quality planning, controls, assurance and improvement.</li><li>• Drives Trust quality priorities.</li></ul>	<ul style="list-style-type: none"><li>• Create a suite of measures in partnership with our people.</li><li>• Reflect national and system tools to measure agreed outcomes.</li><li>• Data dashboard.</li><li>• Report into the Executive Effectiveness Sub-Committee.</li></ul>	<ul style="list-style-type: none"><li>• Always consider experience and safety.</li><li>• Governance structures to provide assurance and evidence from ward to Board.</li></ul>

## Quality Senate

### Creation of a Quality Senate designed to:

- Enable the care we provide to be best practice and evidenced-based
- Create space for collaboration and partnership
- Create a trusted reputation of supportive advice to guide and enable care delivery across our organisation and Integrated Care Systems
- Build on National Quality board principles
- Provide expert advice to the organisation for agreed priority topics
- Be accountable for clinical guidelines
- Create a space for professional curiosity, shared ownership and psychological safety where collaborative partners want to be
- Promote quality and equality impact assessments.

The Quality Senate will provide the Trust with a new process to enable, support and endorse effectiveness through collaborative partnerships. It will review current evidence in priority areas and undertake a gap analysis of current practice, providing recommendations and clinical advice to the Trust Board. The quality senate process will result in the formulation of topic advice templates which will be received into the relevant sub-committees and operational care unit accountability framework meetings to influence care service change. The Trust Board will also be advised of all senate decisions to provide them with assurance EPUT care services have the most current evidence-based recommendations available to drive improvement.



**We will replace the Clinical Governance & Quality Sub-Committee and be the new source of multi-professional and collaborative partnership recommendations and clinical advice to the Trust.**

**The senate Terms of Reference have been agreed.**

**The senate membership and minimum quoracy confirmed.**

**Processes to ensure the effectiveness of the senate meetings developed.**

**The creation of evidence evaluation and Trust advisory templates designed.**

**The frequency of senate has been agreed at eight per year with clear rationale.**

**Through facilitated discussion the senate members have proposed the first eight topics.**

**Recognition of working within the financial context and available NHS provision.**

**Agreed what needs to stop as no evidence of effectiveness and could be more harmful.**

**To have the “golden thread” of person centeredness.**

**Recognises the importance of co-production and partnerships, informed choices, honesty and openness.**

**Trust-wide collegiate approach of clinical support and reduce custom and practice due to fear and resulting risk aversion.**

#### **1. Quality Planning – how Trust-level quality is measured and cascaded and what the requirements of annual quality planning are.**

Defining what quality means at Trust level, its key areas (e.g. Patient Safety) and corresponding measures in alignment with best practice and regulatory guidelines. There needs to be in place a clear plan for annual activities to ensure quality governance, assurance and improvement as well as a clear reporting structure to track progress against priorities in the annual Quality Plan.

#### **4. Quality Assurance – how our ICBs, Board, staff and people we care for are assured of high-quality standards through the provision of evidence.**

Based on the outputs from workshops and task and finish groups, a high-level plan is provided for the Trust’s key quality assurance processes such as joint ICB / EPUT quality visits, evidence gathering standards, team accreditation, CQC compliance and response processes, and the quality governance structure to provide assurance to all parties.



**People we care for at the heart of quality**

Our patients and population of Essex, Luton, Bedfordshire, and Suffolk are at the heart of each element of the QAF.



**2. Quality Improvement - how our teams are supported and empowered to continuously improve quality of care.** A system of QI tools, routines and behaviours that enable teams to identify quality improvement areas, address these with sustainable countermeasures and be supported and coached by their leadership and Trust’s QI experts in this journey.

**3. Quality Control – how all staff within EPUT take responsibility for the daily checks required to ensure quality is maintained.** The checks and responsibilities for each team or service have been defined in alignment with annual quality planning to ensure that daily processes comply with standards and guidelines using team and peer audits, quality control checks and standard operating procedures.

**The Quality Assurance Framework will provide a Trust-wide cyclical methodology to support the Trust’s quality of care principles.**

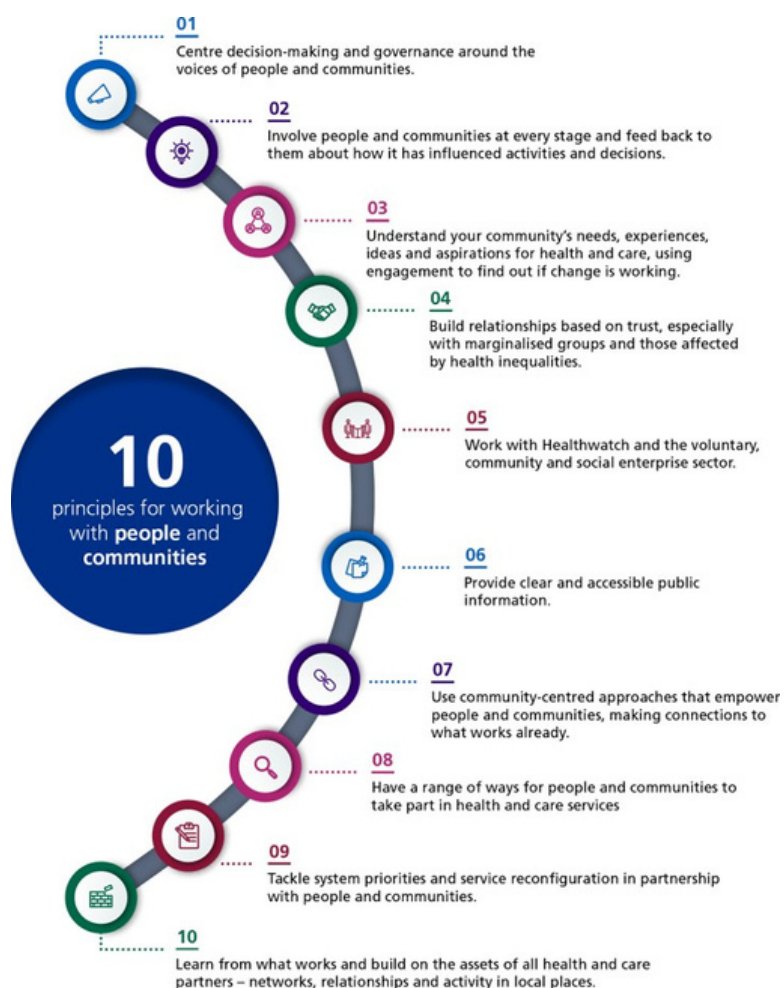
# Experience at EPUT

## Senior Responsible Officer

Matt Sisto, Director of Patient Experience, People Participation and Lived Experience

## Executive Sponsor

Zephany Trent, Executive Director of Strategy, Digital and Transformation



Our vision is to fully understand people's experience of care in order to improve. Working in partnership with the people we care for, their loved ones and their supporters. To do this, we are committed to adopting the 10 principles as set out in the national statutory guidance from NHS England and the Department for Health and Social Care.

Starting with people is key to the successful delivery of the Trust's Strategic Plan and, as a guiding principle, we will adopt national best practice in accordance with statutory guidance, taking a co-production first approach.

It is also important to recognise, however, that engagement, consulting and informing people are still value-adding activities which we will continue to do.

## We will adopt learning from principles of "what it feels like..."

It feels like being listened to.

It feels like someone's thinking of me and looking out for me.

It feels like being seen.

It feels like knowing support is there for me.

It feels like I can be myself.

It feels like it is about my problems, not their problems.

It feels like I have support.

It feels like everyone is being honest.

It feels like I am being helped in the way I want to be helped.

It feels like we're working together.

It feels like instead of being shown the door, that they are holding the door open for me to walk through.

It feels like they are going beyond signposting.

**We will adopt the National Dignity Council's 10 Dignity Do's to support our culture of respect: [www.dignityincare.org.uk](http://www.dignityincare.org.uk)**

**1** Have a zero tolerance of all forms of abuse.

**2** Support people with the same respect you would want for yourself or your family.

**3** Treat each person as an individual by offering a personalised service.

**4** Enable people to maintain the maximum level of independence, choice and control.

**5** Listen and support people to express their needs and wants.

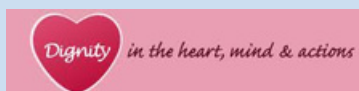
**6** Respect people's right to privacy.

**7** Ensure people feel able to complain without fear of retribution.

**8** Engage with family members and carers as care partners.

**9** Assist people to maintain confidence and a positive self-esteem.

**10** Act to alleviate people's loneliness and isolation.



## Staff experience of care



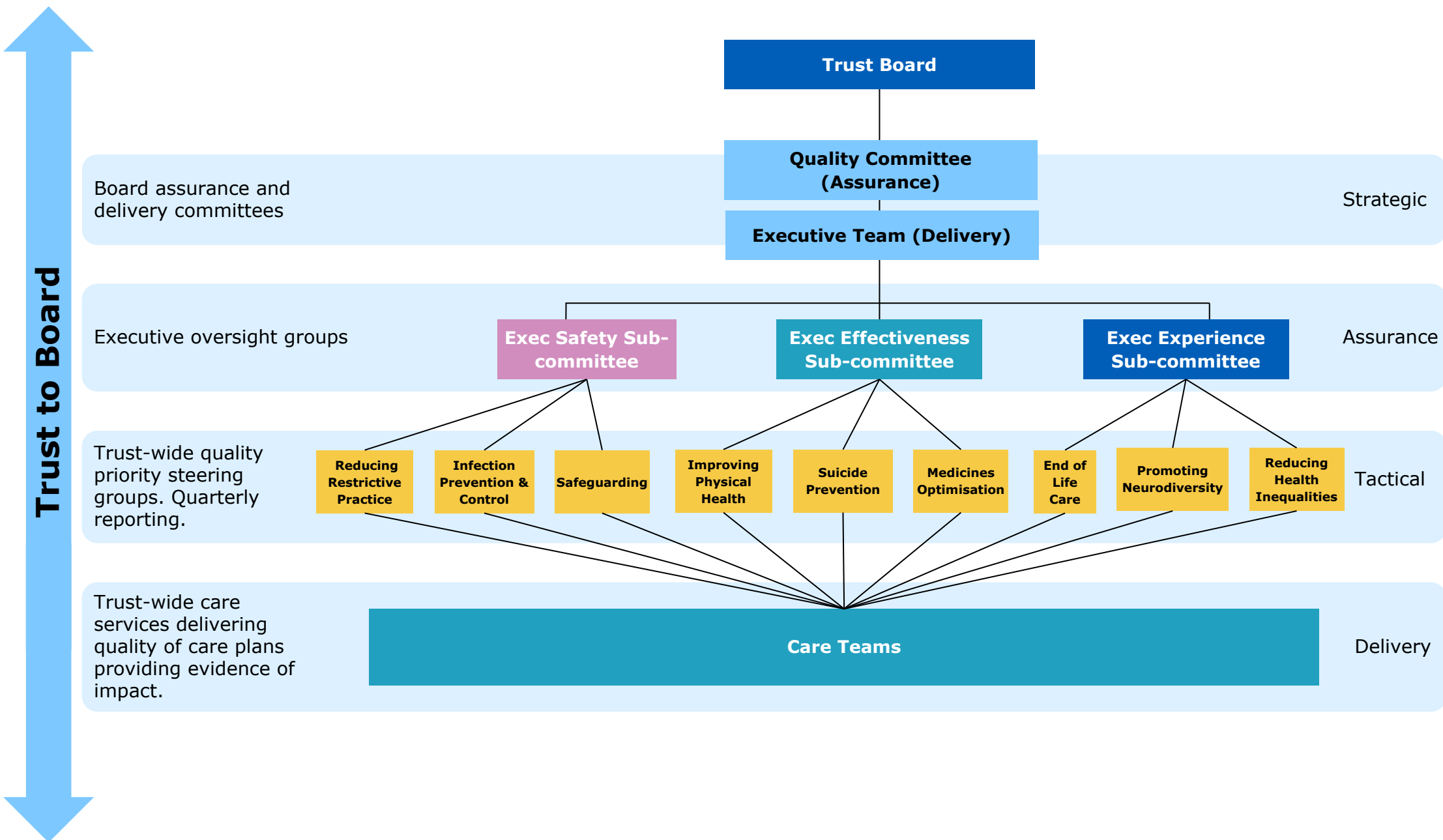
We will improve staff experiences of the care they deliver by listening, supporting, learning, and developing a confidence, competence and pride through role development.

- Restorative supervision
- Team forums
- Professional forums
- Education and training
- You said, we did opportunities
- Pulse surveys
- Annual surveys
- Freedom to Speak Up
- Celebration and recognition.



# The proposed governance structure for Quality of Care

Reporting lines to Quality Committee of the Board



# Putting Principles into Action

EPUT will utilise the NHS England principles of delivering quality care when developing our delivery plan.



1	<b>Setting clear direction and priorities</b> To deliver a new service model for the 21st century, which delivers better services in response to local needs, invests in keeping people healthy and out of hospital, and is based on clear priorities, including a commitment to reducing health inequalities.
2	<b>Bringing clarity to quality</b> setting clear standards for what high quality care and outcomes look like, based on what matters to people and communities.
3	<b>Measuring and publishing quality</b> Measuring what matters to people using services, monitoring quality and safety consistently, sharing information in a timely and transparent way, using data effectively to inform improvement and decision-making.
4	<b>Recognising and rewarding quality and learning</b> Recognising, celebrating and sharing outstanding health and care, learning from others and helping others learn, recognising when things have not gone well.
5	<b>Maintaining and improving quality</b> Working together to maintain quality, reduce risk and drive improvement.
6	<b>Building capability for improvement</b> Providing multi-professional leadership for quality; building learning and improvement cultures; supporting staff and people using services to engage in coproduction; supporting staff development and wellbeing.
7	<b>Staying ahead</b> By adopting innovation, embedding research and monitoring care and outcomes to provide progressive, high-quality health and care policy.

## Over the next three years, EPUT will implement a plan to deliver against the strategy:

Follow Quality Care seven Step Model as delivery plan stages.

Establish leadership roles: Executive Sponsor and SRO for Safety, Effectiveness and Experience.

Agree methodology for communication, socialisation and readiness for strategy implementation.

Ensure quality governance structures are robustly in place, rationalising meetings and providing assurance and delivery to Quality Committee and Executive team.

Set EPUT's quality of care expected outcomes, key deliverables and measures for Safety, Effectiveness and Experience with our local people through the governance structures.

Deliver an end of year benefits realisation report for Board.

Ensure financial impact assurance through business planning and budget setting.

Ensure we are clear on the potential barriers to success, so that we can consider these when developing our implementation plans, creating risk logs with mitigations for monitoring.

Provides safety systems through Patient Safety Incident Response Framework (PSIRF) and the updated Trust Patient Safety Instant Response Plan (PSIRP) delivery.

Culture of learning and digital safety platform supporting safety culture.

Review and design quality outcome measure suite using coproduced approach.

Develop staff competence training and develop the reset of a quality of care culture through confidence, competence and leadership.

Adopt the national Dignity Council's Dignity Do's.

Establish EPUT's Quality Senate with an annual programme of eight predefined quality focus topics and stand up capabilities.

# First Year Quality Senate Topics

Quality Senate members considered the first year priority topics. There were many suggestions, it was agreed that there opportunities for alignment and grouping to achieve eight main proposed topics.

Population health

Virtual services

Trauma-informed  
Care

Safety planning

Neurodiversity

Move away from Care  
Programme Approach  
(CPA)

Personalised care

Dementia and mild  
cognitive  
impairment

**Carers' experience** was suggested as a topic. This will require consideration under every topic and therefore requires both the Senate members with lived experience and literature searches to ensure carers' experience is always available to inform the Senate's work

**AI was also felt to be a consideration** across all topics, with close alignment to any Senate support of the Digital Strategy and clinical leads' requests.





# 2024-2026 EPUT Quality of Care Programme Plan



Pre approval		Year 1		Year 2		Year 2	
Review and align system partner and national strategies and plans. Evaluate Safety First, Safety Always 2023.	Evaluate		Evaluate Year 1, check alignment with corporate strategy. Sustainability Check.		Evaluate Year 2, check alignment with corporate strategy. Sustainability Check.		Evaluate Year 3, check alignment with corporate strategy. Benefits Plan Review & Sustain Plan.
Lived Exp. Staff and public workshops and Survey for engagement and co production. Focus Gps. Board seminar, ET, Quality Committee.	Engage	Launch socialisation programme trust and system wide: key focus of quality reset, creating a cultural 'people together' movement of change. Establish Team forums, Professional forum, You said, we did opportunities, align interdependencies, Freedom to speak up, celebration and recognition events. Establish quality of care programme of events annually.					
		Review quality account and complete new quality account priorities. Propose and agree trust wide corporate lead quality priorities with engagement and governance steering groups.		Review Quality account and complete new Quality account priorities. Propose and agree trust wide corporate lead quality priorities with engagement and governance steering groups.		Review Quality account and complete new Quality account priorities. Propose and agree trust wide corporate lead quality priorities with engagement and governance steering groups.	
Workshop with Lived Experience Ambassador (LEA) to agree approach for quality outcomes measurement which evidence achievement of ELA developed vision.	Outcomes	Review and design Quality outcome measure suite using coproduced approach with Digital team.	Launch new Care Plan with GBOs and GAS OMs.  Develop support and education systems and processes for use of Quality outcome data and the outputs from outcome measures including a full review of expected clinical outcomes against NICE and other guidance.	Launch digital PROMS, REQOL, DIALOG+, POEM, GBO's, CORE 10, LEA QOC, standardised across all quality governance.		Review Quality outcome suite for Impact and refinement.	Build contracting and service specification model based on outcome commission and provision and launch formally in contract.
Review safety governance structure. Set vision, aims and deliverables. Continue which existing work programme for 2023.	Safety	Launch new PSIRF policy and New PSIRP. Continue with ECOL structure. Hold Annual Safety Conference.  Launch new Governance meeting structure. Socialise safety annual work plan and safety framework.  Complete development and launch Safety and Lessons management system.		Operationalise three strategic principles of Insight, involvement and improvement Hold Annual Safety Conference.		Hold Annual Safety Conference Launch new safety and learning Research & Innovation systems and process for care staff.	
Review and Propose Effectiveness governance structure. Set vision, aims and deliverables. Establish TOR, quorum and 1st year topics for senate.	Effectiveness	Board approve 8 topics. Hold 8 Quality Senates with Gap analysis and recommendations. Develop new EQIA. Establish process for clinical guideline review.  Launch QAF trust wide Design Effectiveness element of BI dashboard. Launch new governance meeting structure. Socialise effectiveness annual work plan. Hold annual effectiveness grand round.		Board approve 8 topics. Hold 8 Quality Senates with Gap analysis and recommendations.  Review effectiveness of QAF for Continuous Improvement against quality outcome data analysis complete build and then launch Interactive effectiveness dashboards – Power BI. Hold effectiveness grand round.		Board approve 8 topics. Hold 8 Quality Senates with Gap analysis and recommendations.  Demonstrate 360 Cycle of Improvement to deliver effective care following QAF principles. Hold effectiveness grand round. Evaluate impact of quality senate and review.	
Review experience governance structure. Set vision, aims and deliverables. Continue which existing work programme for 2023.	Experience	Launch new Governance meeting structure. Socialise experience annual work plan. Hold coproduction event.  Launch the National Dignity Council's 10 Do's. Update IWGC to include feels like and dignity.		Deliver a trauma informed care service trust wide. Ensure LEA care unit leadership partners. Hold experience conference.  Launch restorative supervision through PNA programme and psychologies services.		Demonstrate culture based people first experience across care units and monitor impact. Hold experience event.  Launch care accreditation process for all care unit services which are led by LEAs.	
		Review and redesign T&D programme.	Coproduced and delivered T&D programme rollout across care roles. Leadership and culture OD programme and evaluation review. Re Launch Schwartz rounds. Develop process for recruitment for care roles with LEAs.				

18

# Strategic delivery success measures

**Adopting a quality measurement system approach will support our ability to evidence success.**



1. **Design**
2. **Build**
3. **Deploy**
4. **Control**
5. **Measure**
6. **Review**
7. **Improve**

**Year 1 will focus on elements 1 to 3.**

**Years 2 and 3 will focus on elements 4 to 7.**

**Year 1 - Establish baseline data** in order to demonstrate future impact of the strategy. Year 1 will focus on a quality reset with a socialisation programme to drive a movement of change through people partnership, competence, leadership and evidence base and creating the methodologies to measure quality outcomes for our people. Utilise the NHS Improving Patient Care Together (IMPACT) self assessment baseline data as a systematic approach to evidence continuous improvement into years 2 and 3.

**Year 2 Benchmark against ourselves and incrementally** improve on year 1 baseline setting. Set board-approved incremental % improvement trajectory. Commence measurement of people reported quality outcome sets using the overarching strategy vision and its principles. Commence staff experience measures and developmental evaluation that is adopted and used to continually assess implementation.

**Year 3 Benchmark against ourselves and incrementally improve** on year 2 baseline setting. Set board-approved incremental % improvement trajectory. Measure incremental improvement of people reported quality outcomes and staff experience measures baselined in year 2 using the overarching strategy vision and its principles.

**Qualitative evaluation** - Review vision statements for Safety, Effectiveness and Experience for end of year 3 to demonstrate strategic impact. Has the vision been realised? Evaluate using a five stage maturity matrix.



### **Safety - Past safety evidence baseline from 2023**

- Mortality data
- PSIRF activity
- Staff and patient Datix themes and avoidable harm level
- Safety dashboard utilisation

### **Care processes reliable**

- What care processes are in place for 2023
- What are missing – gap analysis

### **Care safety today**

- Patient safety partner thematic review and activity 2023
- Patient-led safety huddle evidence
- Safety walk rounds
- Safe staffing

### **Care being safe in the future**

- Move from Safety 1 to Safety 2 measures for 2023
- Current risk register status
- Safety culture and climate analysis results for 2023
- Safety training rates for 2023

### **Response and improvement**

- Learning information management systems in place for care units 2023
- Safety and learning dashboard utilisation to assure board 2023
- Hierarchy of Effectiveness SEIPS transition from weaker to stronger actions for 2023

### **Effectiveness - Past effectiveness evidence baseline from 2023**

- Quality Senate gap analysis for each topic
- Current evidenced-based competency provision and evaluation
- QAF team unitisation baseline
- Current quality outcome data to baseline PROM, CROM, GAS
- Current QIA utilisation and risk
- Current service delivery and accessibility data

### **Experience - Past effectiveness evidence baseline from 2023**

- LEA partnerships in place
- Complaint themes
- IWGC activity indicators
- Restorative supervision activity and evaluation
- Forums established and evaluation 2023
- Staff survey results 2023
- Freedom to speak up thematic review 2023
- Design and development of staff experience evaluation





# Acknowledgements

Over the past six months we have heard voices, ideas and experiences from people of Essex; those with lived experience, their supporters and a wide range of EPUT's staff and partner stakeholders have come together to create a vision of quality of care: the foundation to build our care services upon.

This strategy and delivery plan will bring people together to create Safety, Effectiveness and Experience so that people will feel in control and hopeful for their future.

Thank you to everyone who has contributed to the development of this strategy and all those who will work in collaborative partnerships to achieve our quality of care vision.

