Agenda

• Logging/ Signing in
• Welcome
• Housekeeping
• Presentation
• Questions & Discussion
Housekeeping

• Mute phone: Background noise/mobile phone
• Questions: unmute phone
  – raise hand
  – chat room
  – talking mention name and Service work at
• Participants – introductions
• Evaluation
National Standards Assessment Program
Improving quality in palliative care

Quality Improvement and Research Standard 11

CQI webinar 23rd October 2014

Presenter:
Helen Vaz
NSAP Quality Manager
Purpose of session

- Explore what is a quality improvement framework
- Tips on how to integrate quality improvement framework into the Service that get results at point of care
Quality Frameworks

All have the same basics in common:
1. Method – use PDSA cycle
2. Tools – use common set et process mapping
3. Leadership – organisational commitment
4. Front line staff – their engagement
What is it all about?

• What do you want everyone of your patients to experience every time?
• What do you want your Service to be known for?
• What do you *not* want to be known for?
Standard 11

The service is committed to quality improvement and research in clinical and management practices.
The Quality Culture Assessment Tool

Explores the quality culture within the service

- Priority within organisation
- Management support and positive engagement
- Clinical audit review
- QI processes
### Health Service Organisation Quality System maturity scale

<table>
<thead>
<tr>
<th>Maturity level</th>
<th>Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informal</td>
<td>No systematic approach</td>
</tr>
<tr>
<td>Compliance</td>
<td>Reactive</td>
</tr>
<tr>
<td></td>
<td>Completing audits with no follow up</td>
</tr>
<tr>
<td>Reactive Risk</td>
<td>Focus on risk management and compliance</td>
</tr>
<tr>
<td></td>
<td>No Improvement model</td>
</tr>
<tr>
<td>Proactive Continuous</td>
<td>Data analysed and reported with effective systems improvement</td>
</tr>
<tr>
<td>Improvement</td>
<td></td>
</tr>
<tr>
<td>Strategic</td>
<td>A model for change and improvement is in use.</td>
</tr>
</tbody>
</table>

Ref: Balding 2013
Experience from a Service – what was put in place

1. What changes were implemented between your Service’s cycle 1 and cycle 2
2. What was the desired outcome of making this change for the patient/carer?
3. What was the desired outcome of making this change for the Service?
4. What was the key result of the change? And how is this measured and what is the evidence of the impact of change?
5. What are the outcome benefits for the Service and patient/carer
Patient and Carers feedback

Tools supported by NSAP are:
• Patient Interview*
• Family Evaluation of Palliative Care* (Interview/postal Tool)

These tools are available via the individual NSAP Service Webpage for those Services registered with NSAP.

* Teno and Connor Brown University
Experience from a Service – what is in place

- Priority within organisation
- Management support and positive engagement
- Clinical audit review
- QI processes
Summary

Provision of care

• Leadership
• Structure for projects
• clinical audits schedule and review for action
Resource – from NSAP

Included in the kits for KIA Standard 11 and available on NSAP website

• **Standard 11: Quality improvement and research**
References

• Balding, C. (2013) Create a great quality system in 6 months. Cathy Balding Qualityworks PL

These books are available through Cathy’s website [www.cathybalding.com](http://www.cathybalding.com)
Questions

Evaluation survey