Quality Improvement Strategy

		CURRENT				COMMENTS/PLANS
		FULLY	PARTIALLY	STEPS 1	STEPS 2	
	Signs of a mature quality improvement approach across the organisation					
1.	Quality Strategy available on website and Intranet that explicitly mentions quality improvement goals	Yes				Available to all employees http://neasintranet.neas.northy.nhs.uk/quality-and-safety/quality-safety.aspx
2.	Quality appears to be the priority at the Board from agenda and minutes, with a specific report on quality that is accessible publicly.	Yes				Quality is a regular feature on board agenda and quality dashboard is available monthly
3.	The Board looks at data as time series analysis, and makes decisions based on an understanding of variation.		Yes			Some movement towards time series reporting. Have had NHSI lead to present to informatics teams to progress
4.	Clear and consistent improvement method for the organisation, and demonstrable across all areas/operations of the organisation	Yes				Lean methodology is the method historically used with a number of accredited leaders within the Trust. However other methods are being considered for ease of use by front line staff such as IHI tools
5.	Presence of a central team dedicated to supporting quality improvement, with expertise in the improvement method and tools.	Yes				Transformation team in place
6.	Plan for building improvement skills at all levels of the organisation, with a large proportion of the organisation (at all levels) having developed improvement skills.		Yes			In LEAN yes, however more work to do with front line colleagues
7.	Structures in place to oversee quality improvement work, with multiple executive directors involved in regular provider-level overview.	Yes				All strategic projects have director sponsors
8.	Robust, regular and local support in place across all areas of the organisation to		Partially			Needs further development

	support teams using QI to solve complex quality issues.					
9.	Quality Improvement work across the organisation demonstrates alignment – projects at team level align with strategic objectives for the organisation.		Yes			At project level yes. Further work to ensure front line colleagues activity is aligned
10.	Demonstrate use of measurement on a routine basis to monitor progress of QI work against outcomes and ensure sustained improvement.		Yes			Needs refinement
11.	All Executive team and clinical leaders are able to talk about their role in leading quality improvement, supporting teams in their quality work and developing a context and culture within the organisation for quality improvement to occur.		Yes			Needs further development
12	A majority of staff across multiple areas of the organisation and from a variety of backgrounds are able to talk about the provider's quality improvement approach, how they have been involved and the difference it has made.			No		Requires development through the QI hub
	Signs of a developing approach to quality improvement across the organisation					
1.	A quality strategy that mentions quality improvement.	Yes				
2.	Presence of a central team that leads the provider's quality improvement approach.	Yes				
3.	A small proportion of people across the organisation have been trained in quality improvement methods but there remains a lack of learning options aimed at developing quality improvement skills at scale and pace at all levels of the workforce.	Yes				

4.	Minimal, distant or infrequent support available to teams using QI to solve a quality issue.	Yes			
5.	Evidence of a few teams or projects that have delivered sustainable improvement through the application of quality improvement, but these remain isolated hotspots.	Yes			
6.	A small proportion of people across the organisation are able to describe the provider's quality improvement approach, their involvement in it or the difference it has made.	Yes			
7.	Lack of a single quality improvement method and language across the organisation.			No	