Improving Healthcare Together

Clinical Engagement Strategy 2014-2017

January 2015
Introduction

The active engagement and involvement of healthcare professionals is essential to the delivery of Driving Improvement in Healthcare.

Clinical engagement and involvement is essential across all of our organisational activities – from scoping new work through to operational delivery. In this way, we can ensure that our work is aligned to local and national clinical priorities and has the greatest impact on improving patient care.

Our Clinical Engagement Strategy will consider the full range of clinical engagement undertaken by Healthcare Improvement Scotland. The aim is to establish two-way communication which reflects the priorities of healthcare professionals, managers, the public, Scottish Government and other stakeholders.

Clinical engagement should not be seen as an additional task, but as a way of helping to inform, shape and deliver our work.

Meaningful clinical engagement takes time: time to build relationships in the first place, and time to sustain them. This commitment to communication and engagement needs to be reflected within our plans and our actions, as well as understood by our staff who work with healthcare professionals.

It is recognised that breakthrough improvements in services and outcomes for patients occur when healthcare professionals and managers work closely together and our clinical engagement approach will aim to further foster these relationships internally and externally.

Our definition of clinical engagement

Clinical engagement is about how we formally and informally interact with and involve healthcare professionals across all of our organisational activities, from scoping through to operational delivery. This includes every discipline and at every level within the system.

Current position and future developments

Key areas of focus for 2014-2017

- Establishing clear, robust and manageable processes to provide clinical assurance across our programmes of work
- Developing our relationships on a multi-professional basis. Strengthening our dialogue with those clinical groups that we do not tend to engage routinely with at present, for example, dentistry and paramedics
- Identifying opportunities to strengthen our engagement with those healthcare professionals directly involved in delivering care to patients
- Strengthening our approach to engaging and involving healthcare professionals in training; or students through collaborative working with universities, deaneries and national clinical groups
- Working with healthcare professionals within remote and rural areas to develop mechanisms to support them to work with us, and better understand how our organisational outputs fit within their local context of healthcare, and
- Supporting the organisation to develop an outcomes-based approach to the evaluation of our work through our dialogue with healthcare professionals about our impact on clinical practice and patient care.

All of these areas of focus will be developed over the next 3 years.
The Clinical Engagement Strategy (2011-2014) was developed in consultation with the clinical community and other key stakeholders. There have been a number of progressive and exciting developments that have been delivered through the implementation of this strategy – strengthening our engagement with healthcare professionals locally, nationally and internationally.

Innovation is at the very centre of our approach and over the last 3 years, we have endeavoured to work collaboratively with healthcare professionals in a creative, efficient and imaginative way.

As the lead healthcare quality improvement organisation within Scotland, it is essential that we continually review and improve our own methodologies. Our Clinical Engagement Strategy (2014-2017) presents an updated and refreshed approach to engaging and involving healthcare professionals in our work. This builds on substantial progress made since 2011 and will prepare us for the ambitious aims of Driving Improvement in Healthcare (2014-2020).

The focus of the strategy during 2011-2014 was on our engagement with NHS boards, professional groups (such as Royal Colleges) and strengthening our mechanisms to support individual healthcare professionals working with us.

Through our engagement with national clinical groups, our approach has naturally progressed into a more focused dialogue with specialist groups, societies and frontline healthcare professionals. Ensuring that we actively engage and involve the multi-professional clinical team in the development of our work is central to our approach, and this strategy for 2014-2017 encompasses this wider engagement.

A key theme that emerged as part of the development and implementation of this strategy was the need to ensure that healthcare professionals working with us felt supported in developing knowledge and skills in quality improvement methodologies and that this learning is delivered in a way that is transferable to their substantive post within their NHS board.

Recognising the constraints on healthcare professionals’ time, and the opportunities available to us through information and communication technology, we established our QI Connect WebEx series which allows healthcare professionals to interact, wherever they are, with international leaders in quality improvement.

Originally aimed at healthcare professionals working with us, our QI Connect series now has a global reach with over 40 countries taking part. Whilst this is a key achievement for our organisation, we are keen to widen our presence even further with a goal of 50 countries by the end of March 2015.

Combined with our commitment to supporting healthcare professionals in publishing their work with us in national and international trade press, this will strengthen Healthcare Improvement Scotland’s reputation as an international leader in the field of quality improvement. We have set a goal of six clinically authored publications each year.

These stimulating initiatives are just part of a suite of benefits that healthcare professionals can expect to receive working with us. Our Clinical Compact sets out the development opportunities that individual healthcare professionals will receive, the benefits to their NHS board in releasing them to work with us – and how this strengthened engagement translates into improved care for patients. Our Clinical Compact now forms part of the established on-boarding and induction process for healthcare professionals joining our organisation ensuring that they feel professionally supported and their efforts are valued and acknowledged.

As a result of this strategy, every meeting of Healthcare Improvement Scotland’s Board now includes a presentation from one of our National Clinical Leads to share how their work with us is impacting on clinical practice locally and ultimately making a difference to the patient.
In 2013, we established our Clinical Forum. This brings together healthcare professionals within the organisation to ensure a more co-ordinated approach to clinical activities across our programmes of work. By offering a mechanism for sharing clinical intelligence, the Clinical Forum also informs strategic decision-making.

Providing clinical assurance across the organisation has been, and will continue to be, a key focus within this strategy. To do this, all programmes of work now have an identified and aligned clinical professional lead from the Clinical Directorate. This both supports the programme teams and provides assurance that we are engaging and involving the most appropriate healthcare professionals in our work.

We will continue to ensure that our areas of focus are clinically relevant and that our outputs and support for their implementation are fit-for-purpose. This will be achieved through our dialogue with national clinical strategic groups including: Academy of Medical Royal Colleges and Faculties in Scotland, Royal College of Nursing, Royal College of Midwives, medical directors, executive nurse directors, directors of pharmacy, lead midwives, allied health professional directors and leads in addition to expanding our work with professional and representatives for dentists, paramedics and others; and, over time, consider the engagement with staff working in independent and social care sectors.

In light of progress made during 2011-2014, we have refreshed the detail of how we will deliver this strategy and, through a series of goals we will become even more ambitious in our approach. Our key aims will continue to focus on creating and maintaining:

- a culture where healthcare professionals view collaboration with Healthcare Improvement Scotland as a necessary, valuable and worthwhile endeavour
- a respectful partnership between Healthcare Improvement Scotland, the clinical community and key stakeholders
- a sustainable infrastructure
- an efficient and cost-effective approach to clinical engagement, and
- a continual review and flexing of our approaches.

Our approach and evidence base

We will publish the findings from the evidence gathered through the development of our Clinical Engagement Strategy. This will build on the presentations and publications we have produced during 2013-2014 and will add to internationally accessible literature on engaging healthcare professionals in quality improvement.

Desired outcome

Our Clinical Engagement Strategy will ensure that all Healthcare Improvement Scotland activities, from scoping to operational delivery, are influenced by clinical communities. Our aim is to embed a progressive and sustainable approach to engaging and involving healthcare professionals in our work.
Best use of our resources

When NHS staff are released to work with us, it has an impact on their service provision locally. We recognise this as part of our ongoing engagement with healthcare professionals, managers and NHS boards.

A key focus for this strategy will be to continue this dialogue with local NHS providers. We seek to maximise input from healthcare professionals and actively involve NHS boards in identifying the most efficient and cost-effective approach. However, we need to articulate the benefits to the healthcare professional and to the NHS board engaging with us. To support this process, we need robust HR and finance mechanisms.

Innovation and an engaging and enthusiastic style will be central to our approach. We will continue to explore opportunities to use information and communication technology to help healthcare professionals to input to our work using virtual systems – such as WebEx, video and tele-conferencing.

“The biggest challenge for staff engaging effectively with HIS is protected time. We are all busy people and to engage properly with HIS needs time and pressures of work sometimes make that very difficult.”

Interviewee, 2014
Implementation

This strategy will be supported by a clear delivery plan with responsible officers, deadlines and resource planning to ensure timely delivery against our objectives.

We will monitor our progress and regularly report on performance against our delivery plan to the Evidence, Improvement and Scrutiny Committee on an annual basis. A risk register has been established, and will be refreshed and monitored on a monthly basis by the Clinical Directorate – with clear contingency plans in place.

We will regularly review our work in partnership to identify areas for improvement and carry out a number of small, focused evaluations for individual projects and programmes. Our approach to evaluation will ensure that we learn and improve as we move this strategy forward as well as looking back to learn from what we have done.

Specific objectives

We have identified the key themes contributing to excellence in clinical engagement and the corresponding priority areas for action in our refreshed Clinical Engagement Strategy Driver Diagram – see Appendix 1. The driver diagram also sets out the specific improvement interventions we will focus on to enable us to achieve our aim.

Further actions will be developed and outlined in our 2014-2017 Clinical Engagement Implementation Plan.

Driver 1: A culture where healthcare professionals view collaboration with Healthcare Improvement Scotland as a necessary, valuable and worthwhile endeavour

- Key communications activities focused on building an understanding with the clinical community about Healthcare Improvement Scotland’s model of quality improvement and Local Delivery Plan (LDP). We will seek opportunities to share examples of our organisational outputs with the clinical community to demonstrate how our work results in improved patient care.

- Through our dialogue with clinical multi-professional groups, we will identify opportunities to strengthen our engagement with those healthcare professionals directly involved in delivering care to patients.

- Explore the theory of collaboration, and how this specifically supports clinical engagement, learning from approaches in place nationally and internationally, and seek to work in partnership with the Royal Colleges, NHS boards, social care sector and the third sector on bringing together healthcare professionals and other practitioners to discuss key clinical issues and how these translate to improved care for patients.

- We will refresh our Clinical Compact to ensure that it is fit-for-purpose and captures the impact of our work, clearly articulating the benefits to people accessing healthcare across all aspects of the service.

- Working closely with our Healthcare Improvement Scotland National Clinical Leads, we will continue to improve our approach to clinical leadership across our programmes of…
work. The aim is to ensure that healthcare professionals undertaking this role feel valued whilst working with us, and have opportunities for personal and professional growth through active learning and development support – and this learning can be applied when they return to their substantive post within their NHS board. This is particularly important in relation to quality improvement methodologies and how they can be implemented – empowering our clinical leaders to take forward improvements to patient care.

- Nurture our relationship with the Scottish Patient Safety Programme (SPSP) Fellows and create opportunities for ongoing networking and support for the alumni.

- Explore opportunities to further strengthen our engagement with the clinical community in relation to annual LDP planning as we broaden our reach into primary care, independent healthcare and the wider integration of health and social care.

- Ensure that our QI Connect 2014 monthly WebEx series is delivered efficiently and effectively and further innovative international engagement opportunities are explored.

**Driver 2: A respectful partnership between Healthcare Improvement Scotland, the clinical community and key stakeholders**

- Develop our relationships with clinical professional groups at a multidisciplinary level. Identify specific actions to take forward with those groups that we do not tend to engage routinely with at present, for example, dentistry and paramedics.

- Ensure that all key clinical strategic groups receive a formal update on specific areas of interest and impact across our programmes of work – and there is a clear mechanism for capturing this information back into the organisation at both programme and executive level.

- Develop a culture across the organisation of ensuring that we provide formal acknowledgement of clinical input to our work, for example, thank you letters, certificates of attendance and Continuing Professional Development accreditation.

- Ensure that a process for identifying healthcare professionals to work with us through our dialogue with national clinical groups and specialty specific groups and networks is firmly embedded across the organisation.

- Explore opportunities to support research, publication, career development for healthcare professionals working with us (with a goal of six clinically-led publications each year).

- Establish meaningful dialogue with NHS board chief executives, executive medical, nursing and pharmacy directors in relation to 'value-based healthcare'. This model will enable a move towards a more focused, non-financial commissioning approach in accessing clinical time to input to national quality improvement work.

- Explore holding a joint seminar with the Institute of Healthcare Management and the QI Hub to consider how we actively support healthcare professionals and managers in addressing their quality improvement agenda.

- Dovetail with and support clinical engagement approaches undertaken by, for example, Scottish Government, NHS boards and professional bodies.
• Further explore how to take forward the concept of professionalism for healthcare professionals working across the organisation, building on recommendations from previous work undertaken in 2012/2013.

• Provide a formal invitation to relevant clinical professional leadership organisations to invite them each to attend and observe a meeting of the Healthcare Improvement Scotland Board (planned according to relevance of clinical presentation).

• Strengthen our approach to engaging and involving healthcare professionals in training; or students through collaborative working with universities, deaneries and national clinical groups, for example, Scottish Academy Trainee Doctors Group.

• Work with healthcare professionals within remote and rural areas to develop mechanisms to support them to work with us, and to get a better understanding about how our organisational outputs fit within their local context of healthcare.

• Engage with healthcare professionals and staff working in the independent and social care sectors to ensure they have access to the same support, resources and learning as their NHS counterparts.

Driver 3: A sustainable infrastructure is developed and maintained

• Ensure a clear, robust and manageable process is in place to provide clinical assurance across our LDP.

• Regularly review and report on risks and issues and their management in relation to this strategy.

• Develop the role of Healthcare Improvement Scotland’s Clinical Forum in sharing clinical intelligence and influencing strategic decision-making.

• HR processes in place to support the recruitment and ‘on-boarding’ process.

• Ensure alignment with Healthcare Improvement Scotland’s Business Intelligence Strategy in order to access up-to-date and relevant information when engaging with clinical communities.

• Finance processes in place to identify the overall Healthcare Improvement Scotland spend on clinical input to its work.

Driver 4: An efficient and cost-effective approach to clinical engagement

• Review staff and non-staff resources to support the implementation of the Clinical Engagement Strategy as part of organisational workforce and operational planning.

• Continue to maximise the use of information and communication technologies to enable collaboration and communication.
Driver 5: A continual review of our approaches

- Ongoing scanning of best practice – mechanisms will be established to schedule review and further evolution of our Clinical Engagement Strategy.

- At least annual review of implementation of this strategy and progress – the Evidence, Improvement and Scrutiny Committee will receive an annual update of the Clinical Engagement Strategy and corresponding annual implementation plan.

- Create a network of networks in this field. Recognising the international interest in the process of engaging healthcare professionals, we will ensure that we create connections nationally and internationally to ensure Healthcare Improvement Scotland learning from leaders in the field of clinical engagement.

- Regularly review and develop our processes for supporting professional registration and revalidation to provide assurance that they are transparent and fit-for-purpose in supporting clinical staff working in and with Healthcare Improvement Scotland.

- Develop a set of goals for this strategy incorporating clinical feedback, user experience measures, communications and activities measures.

“Healthcare Improvement Scotland must strengthen their links into Managed Clinical Networks and other local clinical diagnostic networks – in order to have greater visibility with front line clinicians.”

Focus group participant
Appendix 1: Clinical Engagement Strategy Driver Diagram

A driver diagram is used to conceptualise an issue and to determine its system components which will then create a pathway to achieve the goal.

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<tr>
<th>Outcome</th>
<th>Primary Drivers</th>
<th>Secondary Drivers</th>
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<td>(Primary Drivers are system components which will contribute to moving the primary outcome)</td>
<td>(Secondary drivers are elements of the associated primary driver. They contain change concepts that can be used to create projects that will affect the primary driver)</td>
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**Clinicians view collaboration with Healthcare Improvement Scotland as a necessary, valuable and worthwhile endeavour**

- Key communications activities focused on building an understanding with the clinical community about our model of quality improvement and LDP.
- Identify opportunities to strengthen engagement with healthcare professionals directly involved in delivering care to patients through our dialogue with multi-professional groups.
- Explore the theory of collaboration, and how this specifically supports clinical engagement, learning from approaches in place nationally and internationally.
- Refresh our Clinical Compact to ensure it is fit-for-purpose and captures the impact of our work.
- Ensure that National Clinical Leads have opportunities for personal and professional growth through active learning and development.
- Nurture our relationship with SPSP Fellows and create opportunities for ongoing networking and alumni support.
- Explore opportunities to further strengthen our engagement with the clinical community in relation to annual LDP planning as we broaden our reach, for example, primary care, independent healthcare and health and social care.
- Ensure that our QI Connect series is delivered efficiently and effectively and further innovative opportunities are explored.

**A respectful partnership is created and maintained between Healthcare Improvement Scotland, the clinical community and key stakeholders**

- Develop our relationships with clinical professional groups at a multidisciplinary level.
- Ensure all key clinical strategic groups receive a formal update on specific areas of interest and impact across our programmes of work.
- Develop a culture across the organisation, ensuring we provide formal acknowledgement of clinical input to our work.
- Ensure that a process for identifying clinicians to work with us through our dialogue with national clinical groups is firmly embedded across the organisation.
- Explore opportunities to support research, publication and career development for healthcare professionals working with us.
- Establish meaningful engagement with NHS board chief executives and executive clinical directors in relation to ‘value based healthcare’.
- Explore holding a joint seminar with the Institute of Healthcare Management and the QI Hub to consider how we actively support clinicians and managers in the QI agenda.
- Dovetail with, and support clinical engagement approaches by Scottish Government, NHS boards and professional bodies.
- Further explore how to take forward the concept of professionalism across the organisation.
- Provide a formal invitation to relevant clinical leadership organisations inviting them each to attend and observe a meeting of Healthcare Improvement Scotland’s Board.
- Strengthen our approach to engaging and involving healthcare professionals and students through collaborative working with universities, deaneries and national clinical groups.
- Work with healthcare professionals within remote and rural areas to develop mechanisms to support them to work with us.
- Engage with healthcare professionals and staff working in the independent and social care sectors to ensure they have access to the same support, resource and learning as their NHS counterparts.

**A sustainable infrastructure is developed and maintained**

- Ensure a clear, robust and manageable process is in place to provide clinical assurance across our LDP.
- Regularly review and report on risks and issues in relation to this strategy.
- Develop the role of Healthcare Improvement Scotland’s Clinical Forum in sharing clinical intelligence and influencing strategic decision-making.
- HR process in place to support the recruitment and ‘on-boarding’ process.
- Ensure alignment with Healthcare Improvement Scotland’s Business Intelligence Strategy in order to access up-to-date and relevant information when engaging with clinical communities.
- Finance processes in place to identify overall spend on clinical input.

**An efficient and cost-effective approach to clinical engagement is created**

- A review of staff resources to support the implementation of the Clinical Engagement Strategy is undertaken as part of organisational workforce planning.
- Continue to maximise the use of information and technology to enable collaboration and communication.

**We continually review our approaches to clinical engagement**

- Ongoing scanning of best practice – mechanisms will be established to schedule review of our Clinical Engagement Strategy.
- At least annual review of the implementation of this strategy and process.
- We will ensure that we create connections nationally and internationally to ensure Healthcare Improvement Scotland learning.
- Regularly review and develop our processes for supporting professional registration and revalidation.
- Develop a set of goals for this strategy incorporating clinical feedback, user experience measures, communications and activities measures.