Supporting better quality health and social care for everyone in Scotland
Session Objectives

• An overview of the Quality of Care Approach including how we approach Quality Assurance across Scotland.
• Learn about our internal Quality Assurance methodologies including the interface with Quality Control.
• Explore the relationship between Quality Assurance and Quality Improvement.
• Reflect on how Quality Assurance relates to the QMS framework.
• Learn about the practical application of this through the work of HIS.
Overview of Content

• The QMS framework
• Control and Assurance
• Assurance feeds planning & improvement
• Quality of Care Approach
• External quality assurance activity
• Discussion.
The Quality Management System

High-level Quality Management System Framework (working draft 2)
Quality Control & Quality Assurance

Quality Control

• operational
• at the point of care
• maintain quality and know when it slips.

Quality Assurance

• planned and systematic
• looking at the process
• independently check the quality
• provides confidence.
Quality Assurance activity

Inspection
Review
Peer review
Audit

Confident of the quality

Will be internal
May be external as well
How this relates to QMS and the framework

- Policies
- Procedures
- Records
- QC output

QA activity

Quality planning

Quality Improvement
• How we design our inspection and review frameworks and provide external assurance of the quality of healthcare provided in Scotland. The approach is designed to deliver quality assurance activity that drives improvement.

• The new approach will use a consistent core methodology, based on an overarching Quality Framework and a set of tools that can adapt to the scale and topic of a review. The approach places a much stronger emphasis on supporting continuous quality improvement and building supportive improvement-focused relationships.
Quality Framework

Outcomes and Impact
- What key outcomes have we achieved?
- How well do we meet people’s needs?

Service Delivery
- How good are our key processes?
- How good is our management?

Vision and Leadership
- How good is our leadership?

Domains and quality indicators

1. Key organisational outcomes
   1.1. Improvements in quality, outcomes and impact
   1.2. Fulfilment of statutory duties and adherence to national guidelines

2. Impact on people experiencing care, carers and families
   2.1. People’s experience of care and the involvement of carers and families

3. Impact on staff
   3.1. The involvement of staff in the work of the organisation

4. Impact on the community
   4.1. The organisation’s success in working with and engaging the local community

5. Delivery of safe, effective, compassionate and person-centred care
   5.1. Safe delivery of care
   5.2. Assessment and management of people experiencing care
   5.3. Continuity of care
   5.4. Clinical Excellence
   5.5. Data for improvement and evidence-based learning
   5.6. Quality improvement processes, systems and programmes

6. Policies, planning and governance
   6.1. Policies and procedures
   6.2. Risk management and audit
   6.3. Assurance framework and governance committees
   6.4. Planning

7. Workforce management and support
   7.1. Staff recruitment, training and development
   7.2. Workforce planning, monitoring and deployment
   7.3. Communication and team working

8. Partnerships and resources
   8.1. Collaborating and influencing
   8.2. Cost effectiveness and efficiency
   8.3. Sharing intelligence

9. Quality improvement-focused leadership
   9.1. Vision and strategic direction
   9.2. Motivating and inspiring leadership
   9.3. Developing people
   9.4. Leadership of improvement and change

Capacity for improvement – Global Judgement based on evidence of all key areas in particular, outcomes, impacts and leadership.
Quality of care approach

Using the approach:

- regulation of independent healthcare
- inspection of healthcare for prisoners, and
- review of Regional Cancer Networks.

In development:

- hospital inspections
- board reviews.
For major service change: Quality assurance role on the engagement and consultation undertaken by the NHS Board to involve people during service change (Ministerial Approval required).

Our quality assurance seeks to identify that:

• people have been engaged at the outset of service review
• engagement has been inclusive and transparent
• engagement process is robust, and
• approach has been proportionate to the level of service change proposed.
Issues identified

- Communicate advice to colleagues in a variety of different positions/levels within NHS Boards and HSCPs.
- Not always clear who has corporate responsibility for participation and what governance structures are in place.
- Therefore, hard to ascertain how our advice has been used or shared within the board/HSCP.
### Journey - how are we going to get there?

**Aim:** To gain a greater understanding of current processes and governance arrangements across NHS Boards and Integration Authorities in relation to advice on service change to ascertain similarities and variation across Scotland.

| Plan | Development of access database with updated postholder contacts  
|      | Analysis of narrative information on governance and gaps  
|      | Engagement with Public Partners on findings/next steps |
| Do   | ‘Deeper dive’ with boards/HSCPs to understand how our advice is acted on/not acted on and what changes we could make to improve this |
| Study| Consider the tools and techniques covered in the QMS i.e. small tests of change  
|      | Review results with team and Public Partners |
| Act  | Agree new approaches for sharing and recording advice with board and HSCPs.  
|      | Test and refine |
Discussion

• Reflections on what you’ve heard
• Lessons from your own work in this area
• How might you apply this in your own organisation?
• What can we learn from you?