Welcome

Opening remarks from the Health Foundation

Peter Dudgeon
Welcome

Carole Wilkinson
Chair, Healthcare Improvement Scotland

Supporting better quality health and social care for everyone in Scotland
Many parts, one purpose - better quality health and social care for everyone in Scotland.
WiFi Name: COSLA
Password: 5804269531
Please Tweet throughout the day:

@online_his

Using:

#QVisits
#QVisitHIS
Photography

- You may be asked to participate in some filming to share your learning and highlights
- There will also be photography
- If you would prefer not to be in these please let a member of the event team know. They are wearing yellow lanyards.
Refreshment breaks

Tea and coffee will be available at 12:30 during lunch in and at 14:50 (between the breakout sessions).

Fire safety

- There is no fire drill is planned for today.
- The fire assembly point is in the COSLA car park which is located to the left of this building.
• Lunch will be served from 12:30 to 13:15

• There will be an opportunity over lunch on the first floor to meet the teams that participated in our Internal QMS Collaborative

• Following lunch please go straight to your breakout sessions
We have designed the content of today in response to what you told us you wanted to achieve from the visit.

Our objectives for the event are to:

• Provide an overview of work that Healthcare Improvement Scotland undertakes with its partners.

• Share learning and progress on Healthcare Improvement Scotland's work to develop a Quality Management System approach.

• Build the confidence of Q members in the application of QMS in their own organisation, identifying both the opportunities and potential challenges.
HIS Board commitment to QMS

High-level Quality Management System Framework (working draft 2)
Keep in touch

Twitter: @online_his
Email: comments.his@nhs.net
Web: healthcareimprovementscotland.org
Blog: blog.healthcareimprovementscotland.org

Supporting better quality health and social care for everyone in Scotland
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Many parts, one purpose - better quality health and social care for everyone in Scotland.
‘Healthcare Improvement Scotland seeks to [improve quality] through various means including inspection but also by developing evidence-based guidelines and standards, working with frontline clinical staff, empowering patients and the public, and developing and sustaining networks that facilitate the sharing of improvement expertise.

Kings Fund, February 2016
Scotland...
High-level Quality Management System Framework (working draft 2)
Our reputation in the spotlight

Grime, grit and bodily fluids...
£1bn hospital’s hygiene slated

By Alan Shields

A DAMNING report has raised concerns about cleanliness at a flagship hospital where patients died from infections linked to pigeon droppings.

An inspection found some areas of the Queen Elizabeth University Hospital cannot be cleaned properly because they are ‘awash with dirt’.

The report found 800 repair jobs were waiting to be done, but there was no evidence of a plan to complete them.

It also said the emergency department was not always properly cleaned.

A two-year-old boy died in December at the £1 billion hospital in Glasgow after contracting an infection linked to pigeon droppings, and a 78-year-old woman who had been treated with the bug had died in January.

The Crown Office has announced that it would be investigating both deaths linked to the hospital, run by NHS Greater Glasgow and Clyde.

Hidden toll of hospital deaths

A WARNING of ‘high risk’ has been issued about the safety of patients with leukaemia.

A report by the Healthcare Improvement Scotland (HIS) found that 12 per cent of patients with the disease were dead or dying in hospital within 30 days of treatment.

The report highlighted delays in the diagnosis and treatment of leukaemia, as well as poor communication between staff.

It also found that patients were not being offered adequate support and that the hospital was not adequately resourced.

Doctors ‘forced to offer higher chemo doses’

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How ugly side of the beauty industry did THIS to mum

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Speak softly and carry a big stick; you will go far.

(Theodore Roosevelt)
High-level Quality Management System Framework (working draft 2)
Making choices and tough decisions...
Accumulation of knowledge in NHSScotland of serious and long standing difficulties in a particular local NHS system

In 2014, whistleblowing provoked an HIS inspection in response to this ‘alarm signal’ but limited follow up and engagement with wider HIS

Followed by series of ad hoc and unconnected interactions and pieces of intelligence

Provided tailored improvement support to the system in 2017
Choices in practice...now

- Turning point in 2017 – stronger organisational cohesion in starting to think through lens of QMS
- Making choices as a team about which elements of HIS to deploy in to that system
- Agreed as an organisation further inspections in 2017 and in 2018 focused on patient safety
- We are now considering appropriate blend of further ‘interventions’ into the system from a ‘whole organisation’ perspective
Further reflections...

• More **local bespoke support** and interventions means us making choices as a senior team in HIS

• **At a national level**, increasingly thinking about priorities for HIS at a programme level such as mental health and primary care – what is the right mix & balance of our response

• QMS providing a **discipline and focus** for ensuring a more connected offering
Thank you