# Our journey to excellence

# Welcome to the Moorfields Eye Hospital quality strategy 2017-2022

We are delighted to endorse Moorfields’ quality strategy, which sets out our ambitions to deliver outstanding patient care and follows our vision of excellence 2017-2022. Quality drives all our strategic objectives and our Moorfields Way commitments.

We are incredibly proud of all Moorfields’ achievements, and of the dedication and professionalism of our people. It is evident that we all want to provide the best quality care, and we are recognised nationally and internationally for the quality, safety and effectiveness of our services. However, we know we can do more to continually reflect and improve.

The launch of this quality strategy marks a point in a longer journey for Moorfields and for all our staff. A journey in which we continually challenge ourselves and each other to think in a different way. This quality strategy is a call to action, for each and every one of us to make a difference and to be a part of the Moorfields journey from good to outstanding.

David Probert chief executive, Declan Flanagan medical director, Tracy Luckett director of nursing and allied health professions

# Introduction

At Moorfields our core belief is ‘people’s sight matters’ and our purpose is ‘working together to discover, develop and deliver the best eye care’. We define quality as’ providing safe care, outstanding outcomes, and positive experience involvement for all our patients’.

We want quality to be our core philosophy, and to be at the heart of every decision that we make. In a time of rapid technological advances, Moorfields’ expertise, reputation and network places us in a unique position to lead the way in delivering quality eye care. We want to harness all of your skills and enthusiasm for learning and sharing to deliver excellent clinical care and world-leading research, so that we deliver the outstanding quality our patients deserve, and to truly live up to our name as a world-leading organisation.

# How do we know we need to do more?

In January 2017, we were awarded a ‘good’ CQC rating, placing us in the top third of acute trusts. We are proud of our services and we know that overall, we are delivering great care and getting positive feedback from our patients. But we could be better. In particular, we know we need to do more to match the quality of our patients’ experiences with their clinical outcomes. **We want to be outstanding.**

Our subspecialty based network delivers accessible high quality ophthalmic services to patients who would otherwise have difficulty getting such care. However, delivering care in this way brings its own challenges. Our work as an NHS Vanguard has helped us better understand how our network can also be a powerful tool for improvement. We need consistent standards across all our sites and disciplines. We need to share all our learning, our successes and where we can do better, across our whole organisation. **We want to develop as a learning organisation.**

Staff tell us that they can struggle to make changes for many reasons, from not knowing how to bring about change, to lack of autonomy, to not being listened to, or not feeling they can always speak up. We need to empower all of our people so that everyone has the confidence and capability to make a difference. We need transparent and consistent processes which everyone can use to make change. We need to develop our culture so that people are supported to bring about improvement. **We want everyone to play their part in improving the quality and safety of the care we deliver every day to patients.**

# Our quality ambition

We will pioneer patient-centred care with exceptional clinical outcomes and excellent patient experience.

Our services will deliver eye care with outstanding:

* **Patient experience and involvement:** care characterised by compassion, dignity and respect, and services developed for and with patients
* **Patient safety**: doing no harm to patients
* **Effectiveness of care**: using clear, consistent processes and standards to deliver successful treatment assessed by clinical measures and the patient’s perspective.

# What will we do?

We have developed this quality strategy based on what patients, staff, governors and the CQC have told us, as well as learning from our Vanguard work. We are already working on qualityinitiatives through our vision of excellence 2017-2022, and the service improvement and sustainability (SIS) programme. We will make sure that these complement each other. Our ambition for quality is deliberately far-reaching and there are key areas we need to focus on to be successful.

## We will enable people to feel “I can make a difference”

We need to ensure all staff believe that quality is everybody’s business, and that whatever job you do, wherever you work in Moorfields, every interaction and reflection counts. We also need people to be empowered and supported to speak up when they feel patients don’t get the service they deserve, or they see something which could be unsafe. Finally, we need staff to feel they can act and make changes. Quality should be led by local clinical and non-clinical staff throughout Moorfields supported by a central quality team.

We will:

* recognise that every member of every team can make a difference
* establish training for everyone at Moorfields about:
	+ quality and safety culture and behaviours and why it matters
	+ delivering excellent patient experience
	+ identifying and implementing quality improvement actions locally
	+ empowerment to speak up if there are issues
* establish methods to share learning and successes with staff on where actions have led to change locally and across Moorfields
* create and train quality champions in all local teams to work with quality partners to identify and implement improvements
* create a suite of training, tools and support from the central quality team for staff to learn about and deliver improvement
* introduce local change boards.

## We will work with patients as our partners

We need to improve patient experience, engage patients in their care and work in partnership to develop our services…

We need to talk with patients about their health needs during consultations, understand the impact that their eye condition has on their lives, and make sure that they know how to access information and support, and that they are cared for. Listening to patient feedback will help us improve our services. We need to consistently co-design our services and facilities with patients and based on their needs across the whole organisation.

We will:

* promote patient engagement and support patients to self-manage their eye conditions
* host involvement forums with patients, carers and patient representative organisations so that our plans reflect patients’ needs and expectations
* move from an engagement approach, to an involvement and co-design approach, which places patients and carers at the heart of improvements and redesign and gives them a role in quality improvement groups and projects. Project Oriel will be a lead example.

## We will create a quality governance framework

We need to ensure that our processes for quality and safety are consistent, clearly understood, and applicable to the whole organisation. The quality governance framework will detail guidance on how to deliver consistently high-quality care every day at every site. It will include information on how to implement local improvements, essential policies and protocols, how information on quality is shared across organisational structure as well as how we use this information to improve the quality and safety of the care we provide to patients.

We will create a quality governance framework which will:

* outline a set of consistent processes and procedures for quality work and an overall structure for safety and quality
* ensure our staff understand quality decision making, processes and policies
* describe our methods for consistent quality data and reporting and escalation
* set out a relevant common set of mandatory quality and clinical indicators for all sites and services, with guidance around how these can be used for comparison between areas and for taking action where standards are not met
* develop our quality dashboard to monitor the indicators and inform decisions and operations.

## We will become a learning and sharing organisation

Our size and network offers huge potential for learning and for trialling innovations in care, but we need to get better at sharing information and our learning between sites and areas consistently, and in a planned way. This means communicating when things go wrong, and any remedial actions so we can avoid repeating adverse events. It also means rolling out improvements and ideas consistently so that we move from pockets of good practice to a spread of excellence. We need to ensure that standards at our sites are consistent and faithful to our policies.

We will:

* continue our planned programme of quality walkabouts, including multi-disciplinary staff and board visits
* establish a regular programme of peer to peer team visits for assessments, learning and observation, for example theatre teams to visit other sites
* establish a system for clinical, administrative and managerial staff to visit other sites for work or shadowing or idea sharing as part of their personal development plans
* review and plan regular visits of key central teams to all relevant areas for on-site observational audit and teaching, for example infection control, quality, risk, pharmacy, equipment and devices
* identify methods to share information on issues and learning or innovation consistently between sites and teams and build this information into all team meetings and clinical governance sessions
* explore cross cutting quality improvement meetings with medical, nursing, allied health professions and managerial representation from divisions, for example theatres and outpatients.

## We will bring together teams across Moorfields and the quality improvement team to work on these quality enablers

## Improving patient pathways

* We will improve our information technology to provide timing information.
* We will redesign specific pathways, such as the glaucoma pathway.
* We will conduct site walk-throughs to identify opportunities for quality improvement.

## Fit for purpose estates, physical environment and safe equipment

* We will review the use of our clinical areas ahead of building our new centre of clinical care, research and education in St Pancras.
* We will improve processes to monitor the status and location of equipment.

## Taking advantage of technological developments

* We will work with partners such as the RNIB to identify the best solutions.
* We will pilot technological innovations to support patients.
* We will make the best use of information technology for meetings and teaching.

## Consistent language and processes

* We will standardise operational language and processes for example clinic, and staff titles, pathways, clinic booking and waiting list management.
* We will develop and publish operational protocols and policies which detail consistent organisational and site-specific processes.
* We will improve and communicate consistent descriptions of our sites, services, facilities and processes.
* We will meet accessible information standards.

# Making our quality strategy a reality

The quality strategy launches our quality ambitions for the next five years and is a call to action for each and every person at Moorfields to play their part.

The next steps are:

1. We will listen to, engage and involve staff to understand what needs to change and improve

2. We will design a quality improvement programme setting out the objectives and measures we will use, and work with local areas to help them design their local plan.

3. We will launch our quality improvement programme and communicate progress regularly with staff, patients and carers.

4. Our trust-wide and local quality plans will be a core part of our annual business planning.