

Quality and Safety (1/2)

Vision

To work in partnership to drive high quality care and patient safety across our ICS to promote a culture of continuous learning and improvement.

We aspire to build a seamless, collaborative and productive way of working with all our partners that will further improve patient outcomes and experiences whilst reducing health inequalities across our population.

Deliverables / Improvements since 2023/24

- Robust data sharing agreements and access for GPs and Medical Examiners to allow for review of information as and when required
- Roll out of the statutory legislation for medical examiner scrutiny of all death – law introduced on 9/9/2024
- Cross system patient safety learning investigations have identified key system learning and actions
- After Action Review training for all in the quality directorate has allowed for learning from AAR to be integrated into pathway improvements
- Quality Impact Assessment policy and tool for the ICB developed
- Improved learning from child death processes through the CDOS group
- Facilitation of stakeholder workshops to communicate the patient safety strategy in secondary care
- Introduction of the Patient Safety Strategy to General Practice
- Collaborating with the HiN and several GP practices to pilot the Patient Safety Incident Response Framework
- Development of key data sets to support quality oversight and early identification quality failure
- Introduction of the Learning from Deaths group and Themes and Concerns group to triangulate patient safety insight and improvement across SEL.

Key Challenges / Opportunities Remaining

Challenges

- Data collection and quality
- LfPSE functionality for ICB Oversight
- Changing behaviours, ways of working that have been in place for a considerable amount of time
- Availability, sharing and lack of standardisation of data collection and collation
- Competent interrogation, analysis and interpretation of data
- Embedding a robust safety culture across SEL
- Ensuring learning is shared and embedded across SEL to effect change and encourage quality improvement and patient outcomes and experience
- Large number of primary care providers to engage with
- Delegation of some specialist services to the ICB in April 2025
- Workforce challenges across health and social care with high vacancy rates and turnover
- Communication and information flow regarding quality, safety and safeguarding

Opportunities

- To continue to improve quality and safety oversight
- To continue to build on relationships with community and voluntary organisations
- Continue to build relationships with place colleagues
- Development of quality pathways for the delegated specialist commissioned services

Quality and Safety (2/2)

Please describe any other key priorities for your area in 2025/26

- Continued training and support for staff across the ICS to ensure knowledge and familiarity with the patient safety strategy and implementation, including PSIRF, LfPSE and quality improvement
- Training and support for staff across the ICB to ensure compliance with statutory guidance and safeguarding strategies.
- Development of joint quality priorities and quality improvements across the system which reflect and are informed by the patient voice through Patient Safety Partners across the ICS
- Integration of systems where possible to reduce repetition of input and human error inputting data
- Roll out and embedding of Quality Impact Assurance processes
- Facilitation of implementation of the Patient Safety Incident Response Framework in General Practice
- Use further the AAR processes to improve quality pathways

Learning and Development: Working with Health & Social Care Partners to embed learning using triangulation of key quality measures/indicators and professional insight to inform improvements and monitor progress. Work with our system and statutory partners through the ICS System Quality Group and borough based Safeguarding Boards.

Communication and Engagement: Through various networks and collaborations increase the knowledge of stakeholders to support the delivery of quality at Place with engagement with communities and their representatives to enable them to embed and sustain the implementation of the National Patient Safety Strategy, reduce the spread of preventable infectious diseases and ensure the patient voice is heard.

How will this contribute to population health and inequalities?

- QIA will identify quality issues on changes in services that may impact on inequalities.
- Identification of patient safety events that adversely impact our population from disadvantaged groups with a cross system focus on improving safety outcomes across SEL
- Involving the patient voice through Patient Safety Partners in safety initiatives builds trust and engagement with our population in healthcare services
- Embedding the principles of the Patient Safety Strategy in everyday healthcare practice will lead to higher quality, safer care for all populations.

How will this contribute to system sustainability?

- Learning from safety incidents by implementing and monitoring improvements to reduce safety events and impact of harm.
- Reduction in avoidable harm and associated costs.
- Work to reduce unwarranted variation that result in safety incidents.
- Embedding an open and learning culture with a focus on continuous, sustainable improvement across SEL
- System learning will improve and strengthen integration across health and care services