

# Quality Substrategy 2022 - 2025





# Contents

<b>Introduction</b>	<b>1</b>
<b>What quality means to The Walton Centre</b>	<b>2</b>
<b>What is patient and family centred care?</b>	<b>3</b>
<b>Building capability to deliver the substrategy</b>	<b>4</b>
<b>Our quality achievements and highlights 2022/2023</b>	<b>5</b>
<b>Strategic ambitions</b>	<b>6</b>
<b>Priorities</b>	<b>7</b>
<b>Implementation and conclusion</b>	<b>11</b>

# Introduction

The Walton Centre is the only standalone specialist neurosciences NHS Trust providing a high-quality, integrated, and multidisciplinary service to Merseyside, Cheshire, North Wales, the Isle of Man and parts of Lancashire and Greater Manchester – serving a population of 3.5 million people.

The Walton Centre provides comprehensive neurology, neurosurgery, spinal, pain management and rehabilitation services, and our three-year strategy sets out how we will continue to deliver excellent clinical outcomes and patient experience with our team of dedicated, specialist staff. We recognise the specific exceptional additional risk and challenges that Central Nervous System disorders pose to patients and families and this recognition is inbuilt within the culture of the trust and within all the staff do.

At The Walton Centre, we place our patients and their families at the heart of everything we do, with a primary focus on patient and family centred care. We are a national leader, providing a world-class service in diagnosing and treating injuries and illnesses affecting the brain, spine and peripheral nerves and muscles.

The Trust aims to innovate, build, and standardise to deliver high quality, safe and effective care that provides patients, families, and carers with the best experience. Our 'hub and spoke' clinical model means we have satellite clinics in multiple sites across our region, enabling patients to be seen closer to home by the most appropriate specialist.

This substrategy outlines our goals for the following three years and our commitment to continuously improve quality for the patients, families and communities we serve.

Quality encompasses a wide variety of care delivery, and this substrategy clearly sets out our ambitions. We believe it is important to be open and transparent about our plans and recognise quality in all its facets, for patients, their families and our staff.

Our patients expect a quality service and so should their family members and carers. We see ourselves as visitors in a patient's journey and we endeavour to deliver quality healthcare and encourage a high level of engagement and communication with families and carers.

We believe that staff must be supported to deliver outstanding care. Our values and behaviours are set out in the 'Walton Way' and underpin our strategy. This substrategy is aligned to the Trust quality accounts, quality improvements (QI) and the five CQC domains: Safe, Caring, Responsive, Effective and Well Led – key indicators that enable us to measure our success.

All Trust employees have a responsibility to deliver "Excellence in Neuroscience" which is continually monitored and documented as part of annual appraisals. Implementation of this substrategy is supported by the Executive Directors and Divisional Triumvirates (comprising Divisional Director, Divisional Nurse Director and Divisional Clinical Director), including clinical and operational leaders as well as the Transformation Team, Finance, HR and IT support.

**“ At The Walton Centre, we place our patients and their families at the heart of everything we do, with a primary focus on patient and family centred care.**

# What quality means to The Walton Centre

The Walton Centre defines quality as “Excellence in Neuroscience” within the context of its mission. This superiority is incorporated into the patient and family-centred care we provide, ensuring that we achieve and surpass our clinical goals for the benefit of patients. Although we have metrics for quality indicators, we think it is equally critical to collect patient and family feedback regarding their experiences so this can be used to drive improvements.

Patient and Family Centred Care (PFCC) and feedback regarding experience is very important to us. This substrategy will focus on PFCC feedback, as research shows that by achieving PFCC, quality care and satisfaction increases.

Governance is a key part of how quality is managed. The NHS Patient Safety incident response framework has been published and the implementation plan will ensure we will focus on continuously improving the safety culture. The Walton Centre has incorporated the points from this document into the substrategy.

We plan to continue evaluating and analysing decisions made in the interests of patients, and continue to engage with patients, families, our staff and external stakeholders to ensure we are meeting the needs of all.

The Trust is committed to delivering outstanding care for patients and monitors quality and safety daily. Safety is reviewed each morning at the Trust safety huddle meeting, which allows all staff (regardless of role and seniority) to escalate any concerns relating to patient, visitor or staff safety. This forum allows staff to act swiftly, address issues and reduce risks.

To ensure compliance with the Care Quality Commission (CQC) registration regulations, each regulation is part of a planned schedule of reviews, which works alongside internal quality inspections. The clinical area accreditation scheme, CARES (communicate, assess, respect, experience and safety) Quality Review is an example of how standards of care can be assessed.

The evaluation is structured around 15 standards, and the results are examined and shared with the Trust Board. The objective is to further improve patient experiences and care, and the results will be shared outside each clinical area.

## What our staff said about quality

“Quality is the right treatment, in the right place at the right time”

“Safe and efficient care to our patients and community”

“Care that is safe and as personalised as possible”

“Support and develop our staff to deliver high quality personalised care”

“Providing a high level of care that I would expect myself or my family to receive”

“A safe environment to deliver safe and effective care”

**“ The Trust is committed to delivering outstanding care for patients and monitors quality and safety daily.**

# What is Patient and Family Centred Care?

Patients and families are at the heart of everything we do at The Walton Centre. Our aim is that all patients and families receive outstanding care and have an excellent experience when they require our services. Their voice is central to how we monitor performance and identify ways in which we can improve.

PFCC is an approach to the planning, delivering and monitoring care that is based on mutually beneficial relationships between staff, patients and families. The central focus is on staff working in partnership with patients and families in all aspects of care.

Research by the Institute for PFCC has shown that this approach leads to better health outcomes, improved experience of care, better staff satisfaction and a more effective use of resources. Our staff are proud of the care they provide and PFCC provides a valuable way in which we can align excellent patient and family experience with excellent staff experience.

At The Walton Centre, we have adopted a structured approach to implementing PFCC. It will be incorporated into our governance structure and a PFCC Champions Group comprising clinical and non-clinical staff from across the organisation will be introduced.

The Group will identify and monitor ways in which we can improve patient and family experience and will be a sub-group of the Patient Experience Group, which in turn reports to the Quality Committee. The aim of this group of staff is to take forward work identified by the Patient Experience Group in addition to discussing ideas with patients and their families.

An essential element of our approach is embedding methods that enable us to understand what it is like for patients and families to use our services. We do this through 'soft' indicators such as engagement events with patients and families, patient and family stories, patient and family shadowing and Executive 'walkabouts' in wards and departments.

Through feedback, the Trust developed a shared vision for the ideal patient and family experience at The Walton Centre. The 'Six WALTON Steps' highlight our vision of an excellent Patient and Family Journey at The Walton Centre.



## The Walton Centre Patient and Family Journey

The six key stages of the patient and family experience at The Walton Centre.



# Building capability to deliver the substrategy

We recognise that our people are key to delivering quality throughout the Trust. We therefore must make sure that we are training and supporting our people to make improvements continuously as well as carrying out their day-to-day roles.

Together with the Transformation Team we want to implement new ways of working, systems, and services with transparent measurement to track progress. We have therefore decided to adopt a standardised approach to quality improvement (QI) to make this possible.

The 6'I's of Improvement is designed to encourage and support our people by providing them with the tools they need to make sustained improvements.

We believe this will be one of the long-term drivers to delivery of this substrategy. We want this to stimulate energy for learning and development in improvement methodology and ensure that change becomes the way of doing things at the Trust.

As well as defined workstreams, we will identify individual QI projects through a robust process of clinical service reviews, thematic reviews, self-referral by staff and patient and family feedback.

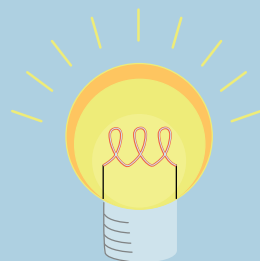
Using the 6'I's of Improvement, our teams will be empowered to plan, test, implement and share best practice, underpinning the 'Six WALTON Steps'.

Recognising the importance of culture on the implementation of successful QI programmes, we will embed training programmes grown out of our values and behaviours, we will develop a culture of sharing ideas and learning, celebrating success and developing new perspectives.

All quality initiatives or projects will demonstrate how they will support delivery of the substrategy before being initiated.



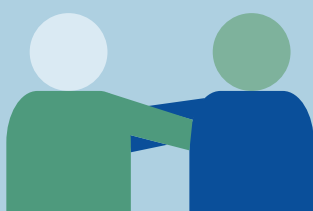
**1. Identify**



**2. Idea**



**3. Information**



**4. Involve**



**5. Introduce**



**6. Implement**



- Restructured research department and increased clinical trials
- Improvement in NEWS
- Increased ambulatory clinics at partner hospitals
- Increased malnutrition universal screening compliance
- Endoscopic spinal surgery
- Increased Friends and Family Test response rate
- Rapid Access Neurology Assessment (RANA)
- Brain tumour pathway
- Improved environment for hyper-acute rehabilitation ward
- Cheshire and Merseyside spinal service development
- National service for MRI guided focused ultrasound for tremor
- Introduction of robotic spinal surgery
- Patient initiated follow up initiative (PIFU)
- Bed repurposing project
- Intermediate Life Support training now delivered in-house for internal and external staff
- No category 3 or 4 pressure ulcers



# Strategic ambitions

The Quality Substrategy is one of the seven enabling strategies underpinning the Trust's three-year strategy, based on the Trust's five strategic ambitions. The Trust's five strategic ambitions and seven enabling strategies are represented in the diagram below:



# Priorities

## Priority 1: SAFE

We will reduce mortality and harm by:

Focusing on our safety culture is central to ensuring we provide high quality care. We believe unlocking the knowledge, experience and ideas of our staff will be key to achieving the aims set out within this strategy.

It takes genuine dedication from every member of our team, all the way up to our board, to create a culture where openness, transparency, and a true patient-centred approach is visible. We want a culture of open learning because it is necessary for sharing safety-related discoveries and for embedding and maintaining change that enhances care.

## Priority 2: Effectiveness

We will improve the clinical outcomes for all patients presenting with neurological symptoms and for those with long term conditions.

We strive for excellence in outcomes for our patients at all times. We strongly believe that we can always learn and improve by collecting clinical outcome data for all interventions, learning from audit and utilising research and innovation to enhance our services.

### What are our key aims?

We will achieve a year-on-year reduction in patient harm "Safe and efficient care to our patients and community"

We will work collaboratively to provide the best environment to support delivery of safe care.

We will embed the new Patient Safety Incident Response Framework "Providing a high level of care that I would expect myself or my family to receive"

We will continue to evolve effective risk management and robust governance throughout the organisation by embedding a culture of learning.

We will provide access to appropriate skills, equipment and resource.

We will use clinical evidence and best practice standards to achieve and drive improvements.

### What are our key aims?

We will improve access to the most appropriate clinician at the right time

We will work collaboratively to improve the patient outcomes

We will increase our focus on audit and research to enable continuous learning and improvement

As a centre of excellence, we will actively share information locally, nationally, and internationally to enhance patient outcomes

# Priorities

## Priority 3: Caring - patient, carer and family experience

We will support, listen, respect and involve patients, carers and families in striving for the best quality services.

At The Walton Centre everyone prioritises safety, and leaders cultivate an environment that is open to collaboration to enhance our patients, carers, and families experience.

We will make sure that every patient and carer has easy access to provide feedback about their experience receiving treatment, that they feel heard, and that it is easy to see that the feedback has resulted in action.

Care and treatment will be received in a safe environment, and we will continuously strive to improve what our patients can see, do, hear and feel during their stay or visit.

## Priority 4: Responsive through continuous improvement

We will reduce variation in care for our patients in the region by adopting a culture of continuous improvement

Patient and carer experience is positive when staff listen, give care that is compassionate, involves patients in decision making and provides them with good emotional support.

We will make sure that every patient and carer has easy access to provide feedback about their experience receiving treatment, that they feel heard, and that it is easy to see that the feedback has resulted in action.

### What are our key aims?

We will increase shared decision making with patients, carers and families.

We will increase patient representation at Trust groups.

We will provide patients, families and carers with the optimum digital healthcare information to suit their needs.

We will focus on the delivery of Patient and Family Centred Care agenda resulting in improved patient experience.

We will ensure that we provide an equitable service for all our patients.

### What are our key aims?

We will embed evidence-based practice and nationally recognised benchmarking information to support continuous innovation.

We will deliver our transformation and innovation agenda

We will provide a culture that facilitates continuous improvement, through learning

We will continue to deliver all access targets

We will improve training and education in neurological conditions to health care provision across the region.

# Implementation and conclusion

## Implementation and monitoring

This substrategy will be approved by the Quality Committee. The Chief Nurse and Medical Director, as the executive leads for quality, will monitor the requirements and progress of this substrategy. A quarterly report will be presented to Quality Committee on progress and achievement of goals as set out in the objectives above.

Each Division will have a comprehensive divisional delivery workplan, which will be formally reviewed through the Divisional Governance Meetings. At these meetings, the Divisions will be expected to report on progress and position of their quality delivery workplan.


## Conclusion

The Quality Substrategy builds on the processes already in place for supporting and delivering quality. It ensures a positive focus is maintained and considers the Trust Strategy, underpinning strategies and frameworks, in turn supporting the achievement of the Trust's ambitions.





**The Walton Centre**  
NHS Foundation Trust

*Excellence in Neuroscience* 

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