

HQIP Operational Plan – Executive Summary

2017/18

HQIP: Our vision:

HQIP aims to improve health outcomes for patients by empowering those who commission, deliver and receive healthcare to measure and improve our healthcare services.

This Operational Plan

In order to deliver this vision a set of strategic objectives has been developed. The description of the planned work identified later in this document demonstrates how we aim to deliver on these objectives. By this we ensure that we are working in the right areas and providing the right services. We will ensure that our staff and key stakeholders have a clear line of sight between the work we are doing and the vision of the organisation.

Strategic Objectives

- 1. HQIP commissions, manages, supports and promotes national and local programmes of quality improvement. This includes the National and Local clinical audit programmes, the Clinical Outcome Review Programmes and the National Joint Registry on behalf of NHS England and other healthcare departments and organisations. HQIP uses best management and procurement practice to ensure robust results and actionable recommendations
- 2. HQIP ensures patients and carers remain at the heart of our work through continued, strategic involvement in all relevant processes and projects
- 3. HQIP supports healthcare professionals to review and improve their practice by providing opportunities to share best practice, through education and training programmes, as part of promoting an integrated approach to quality improvement
- 4. HQIP works to inform and influence national healthcare policy by effectively communicating its work and that of its partners
- 5. HQIP encourages wide use of robust data for quality improvement of care, offering patient choice, promoting patient safety, supporting revalidation and service accreditation, commissioning, service redesign, and research
- 6. HQIP is committed to be an efficient, well run organisation, which supports staff development and welfare

Team goals

Key themes and targeting for 2017/18:

Below are the five themes considered by SMT in December 2016 as those key for HQIP in 2017/18. They are listed here and underpin the detailed operational plans included in the appendices.

- Increasing our impact
- National Clinical audit for local quality improvement
- Data quality
- Maximising the use of Technology
- Intelligent transparency

Organisational Summary of 2017/18 Operational Plan				
Strategic objective	Description of work	Lead and Team		
HQIP commissions, manages, supports	Commissioning, Procurement and Communications: We will:			
and promotes national and local programmes of quality improvement. This includes the National and Local clinical audit programmes, the Clinical Outcome Review Programmes	 Commission and potentially award 13 contracts and 2 de-commissions across 40 work-streams and ensure procurement legislation compliant Conduct 156 contract review meetings to ensure the delivery of high quality outputs Ensure NHSE-HQIP monthly and quarterly accountability meetings demonstrate compliance with contract, quality and timelines Develop: 	NCAPOP		
and the National Joint Registry on behalf of NHS England and other healthcare	 Sustainability processes in conjunction with NHSE and the Welsh Government (key developmental theme 1 – see NCAPOP operational plan) 	Procurement		
departments and organisations. HQIP uses best management and procurement practice to ensure robust results and actionable recommendations	 Topic prioritisation processes with NHSE and the WAG. 	Communications		
	Information governance We will:			
	Continue work on the development of HQIP Information Governance Policies. We will use the expertise of our independent Information Governance Advisory Group to ensure that we have a data sharing framework contract in place with NHS Digital and that we maintain registration with the Information Commissioner's Office	Core NCAPOP		
	Audit subscription funding	NCAROR		
	 We will: Manage the audit annual subscription funding process to achieve 90% compliance 	NCAPOP Finance		
	Developing our Patient and Public Involvement approach We will: work via NCAPOP to provide support to audit providers to ensure PPI in their project boards and governance structures as appropriate	NCAPOP and PPI		

	Involving Patients and carers	NCAPOP and PPI
	We will:	
	Actively work to embed patient and public	
	involvement in the NCAPOP commissioning pathway.	
	The NUD management to an will.	NID
	The NJR management team will:	NJR
	 Ensure robust performance monitoring of all NJR contracts 	
	 Support the NJR Steering Committee (NJRSC) and 	
	sub committees to meet agreed objectives and	
	monitor performance through strategic and annual	NJR/Finance
	planning , financial planning, risk monitoring, action	,
	plan, work schedules	
	 Manage the subscription funding process to achieve 	
	95% compliance	
2. HQIP ensures patients	Developing our Patient & Public Involvement approach	
and carers remain at	We will:	
the heart of our work	Work with staff to ensure best practice PPI in all	
through continued, strategic involvement	work	
in all relevant	Update the PPI e-learning resource Work closely with the HOLD Service Hear Nativerly	PPI
processes and projects	 Work closely with the HQIP Service User Network and support their engagement across the HQIP work 	
processes and projects	programme and organisational development	
	 Review and update the HQIP PPI strategy 	
	 Manage the update and review of the SUN Terms of 	
	Reference and appointment of a new Chair	
	Ensure open lines of communication between SUN,	
	HQIP Board and staff	
	Ensure the resources that HQIP provide consistently	
	address the role and focus of PPI	
	Communicating	Communications
	We will:	
	Ensure patient-friendly reports and resources are	
	produced and compliant with Information Standard	
	National Isint Desistant	NUD
	National Joint Registry We will:	NJR
	Continue to work closely with the 2 patient	
	representative members of the NJR Steering	
	Committee consulting and involving them in NJR	
	committees and work streams	
	Continue to develop and engage with NJR Patient	
	Network through the annual Network meeting,	
	provision of information updates and consultation	
	on NJR work streams, publications, and processes	
	Ensure the patient perspective is profiled in NJR	
	presentations, and regional and national events	
	Explore development of a model to optimise public	
	facing communication of unit level data	

3. HQIP supports healthcare professionals to review and improve their practice by providing opportunities to share best practice, through education and training programmes, as part of promoting an integrated approach to quality improvement

Improving practice

Through our commissioning processes we will:

- Encourage healthcare professionals to review and improve their practice through shared QI initiatives such as the NCAPOP workshops and accessing examples of best practice on the HQIP website
- Continue to evolve the NCAPOP 'Reporting for Impact' guidance, 'Standard Reporting Procedure '(SRP) and reporting micro-processes and their implementation
- Hold 2 NCAPOP workshops.
- Hold a clinical leadership seminar

NCAPOP

Core and Medical Director and Clinical Leads

Offering Support

As part of working directly with key projects we will:

 Share HQIP's work to support local quality improvement including National Clinical Audit Benchmarking (NCAB) and Clinical Outcomes Programme (COP) through attendance at key conferences, and NCAPOP and clinical leadership seminars NCAPOP, Medical Directors and Clinical Leads

Core /PPI

As part of our work to develop education and training programmes we will:

- Investigate the support required in relation to data interpretation skills amongst NCAPOP providers raised as part of our quality improvement survey.
 We will develop support in line with requirements and capacity
- Use the NCAPOP seminars to provide workshops on using national data to drive local improvement using case studies from the NCAPOP programme
- Support NQICAN activity in year as appropriate
- Run an external masterclass to describe effective PPI

Accreditation

We will:

- Support the governance of the Clinical Service Accreditation (CSA)sponsor group
- Develop tools that support the delivery of the Clinical Service Accreditation Alliance (CSAA) good practice guide for accreditation
- Work with UKAS in piloting the application of the 'Requirements and guidance for the accreditation of Certification Bodies providing clinical service certification schemes'

Accreditation and Communications

Accreditation (continued) We will:	
 Work with two specialities as a pilot to prepare the development of an accreditation scheme utilising the resources provided by the CSAA on a consultancy basis Provide leadership for the positioning of Accreditation as a quality improvement methodology with key stakeholders (e.g. CQC) Develop a bespoke communications campaign for HQIP's Clinical Service Accreditation work 	
Communicating:	Communications
We will:	
 Run separate, bespoke communications campaigns for doctors, nurses, commissioners and Boards designed to drive awareness and value of HQIP's work to these groups, engage them meaningfully and maintain that engagement Undertake a review and re-design of the best practice pages of the HQIP website in partnership with key stakeholders Promote local improvement following national audit/review programmes at 4 national conferences (NHS Expo; International Society for Quality in Health Care (ISQua); Faculty of Medical Leadership and Management (FMLM); Patient First) Ensure specific professional groups are targeted with relevant HQIP work via strategic partnership with NHS England media and communications teams as part of a wider national campaign to make clear the value of national clinical audit and outcome review programmes. This will include commissioning a 'What is clinical audit?' animation to make clear power and use of Clinical Audit (CA) to support all of HQIP's key audiences Support local clinical audit teams through Clinical Audit Awareness Week in November, offering them marketing support, promoting their events, and 	
celebrating 'Clinical Audit Heroes'	
National Joint Registry	NJR
We will:	
 Continue to develop NJR Clinician Feedback system Collaborate with the orthopaedic specialist societies and through the NJR MAC Publish the NJR Annual Report Share best practice through the NJR Regional Clinical Coordinators Network 	
 Continue with a programme of NJR Regional Training events Continue with Research Publications 	

 HQIP works to inform and influence national healthcare policy by effectively communicating its work and that of its partners

Informing and Influencing

We will:

- Raise the profile of the HQIP QI work undertaken as part of the NCAPOP and the Lot 1 activity
- Meta synthesise recommendations from recent NCAPOP publications and share learning.
- Use the NCAB programme to seek opportunities to maximise and influence its broadest use
- Promote the role of national clinical audit in improving patient outcomes with key stakeholder audiences, audit providers and audit staff (largely by representing the HQIP patient voice at key events)
- Support SUN to become advocates of HQIP's work
- Use SUN as part of any HQIP contribution when responding to national consultations
- Build effective relations with key stakeholder communications teams to support delivery of HQIP's objectives and provide a firm basis for prompt problem resolution
- Form a strategic partnership with NHS England media and communications teams to ensure ongoing awareness, promotion, clarity and support

NCAPOP QI PPI Communications

Communicating and promoting

We will:

- Promote HQIP and its work at 4 national conferences (NHS Expo; ISQua; FMLM; Patient First)and via bespoke communications strategies
- Review HQIP web content to maximise access to key information for local clinical audit staff based on feedback from the regional networks
- Develop two animations to inform a national campaign promoting National Clinical Audit (NCA) and the HQIP contribution and capability: firstly about HQIP's role, governance and remit and secondly 'what is clinical audit?'.
- Website replication: potentially rebuilding the existing site on an intuitive, well known, well used and well supported platform such as WordPress to allow for more content and quicker updates (subject to separate business case proposal)

Communications QI

	 National Joint Registry We will: Pursue development and implementation of the proposed NJR Accountability and Transparency model in collaboration with professional societies, regulator and NHSI and report progress to NHSE Evidence variations in surgical and implant outcomes to inform best practice Use NJR data to support research and outcome studies and publications Represent and present at national and international events Ensure active NJR membership of ISAR and ICOR Facilitate NJR specialist studies through NJR 	NJR
5. HQIP encourages wide	fellowship scheme Using our data widely	
use of the data from the programmes we manage for purposes such as patient choice, patient safety, revalidation, professional accreditation, commissioning, service redesign and research	 We will: Work with related healthcare organisations to understand how NCAPOP outputs can drive quality improvement Engage with relevant national level stakeholders to continue to influence the positioning of NCAs within the QI agenda Explore effective working arrangements with Getting 	NCAPOP QI Communications CEO and Medical Director
	 As part of the current programme of work We will: Incorporate COP and Clinical Service Quality Measures (CSQM) into NCAPOP business as usual processes Support the compilation of the annual NHSE Quality Accounts List Continue to liaise with NHSE to maximise the opportunities to use audit data across other national initiatives 	NCAPOP NCAPOP Core
	 Information Governance We will: Maintain an efficient Data Access Request approvals process to ensure maximum use of NCAPOP data to external researchers/service evaluators. Ensure the integrity of the HQIP data protection and Information Governance requirements and NCAPOP Data Controller remit via effective DARG processes (supported by guidance from IGAG); Ensure we adhere to the HQIP System level Security Policy (SLSP) requirements and undertake staff training for example, HQIP training on the Data Protection Act 	

 re will: Promote and evaluate activities of the NCAB project with national, STP and local level stakeholders to support local quality improvement initiatives. Roll out and monitor activity on the NCAB web platform to maximise engagement with key stakeholders Oversee the production and maintenance of the National Clinical Audit Benchmarks web portal Develop a bespoke communications campaign for the NCAB programme launch/rollout Explore further applications of this data (Phase 2)	NCAB Clinical Lead and Communications
 inical Outcomes Publication (COP) Ye will Expand the programme of publications by adding an additional 4 specialties, with a particular focus on adding a number of non surgical specialties including dementia and intensive care. Support clinician engagement with COP through communicating its role in appraisal and revalidation. Develop communication materials aimed at responsible officers and clinical directors in partnership with national and local revalidation support teams. Continue with the integration of COP participation as part of the NCAPOP delivery Work with the relevant societies and their members to encourage them to share a wider range of information about clinicians and their practice on their own websites by evidencing the benefits of this approach. Work with the HQIP Methodology Advisory Group (MAG) to explore and make recommendation on Issues related to the display of and public understanding of data	COP
 Form a strategic partnership with NHS England media, communications and policy teams to ensure ongoing awareness, promotion, clarity and support The above will support a specific communications campaign to increase profile of NCA Programme demonstrating value to HQIP key audiences Promote NCAPOP programme at a series of national conferences and via bespoke communications	Communications

strategies to doctors, nurses and commissioners

	National Joint Registry	NJR
	We will:	
	 Provide data and indicators for COP and publication on NHS Choices 	
	Contribute data for use in development of HQIP/CQC dashboards	
	Use data for update and enhancement of NJR dashboards	
	Provide data and pricing information to support national programme GIRFT	
	 Use of analysed data to support individual surgeon, unit and implant performance monitoring 	
	 Provide outlier surgeon, unit, implant performance information to regulators i.e. MHRA CQC and NHSI to support inspection/regulation/improvement/action Provide data to commissioners to support BPT 	
	 assessment/payment Provide data through NJR Clinician Feedback system to support individual surgeon review and validation and NJR Consultant level reports providing surgeon activity and outcome results for peer review, revalidation and appraisal 	
	 Provide implant data through NJR Supplier Feedback system to facilitate patient safety through provision of standardised product summary reports to device manufacturers and the MHRA, to support post market surveillance of devices and implant regulation 	
	Provide data through NJR Management Feedback system and publication of NJR Annual Clinical Reports supporting Trust level clinical governance and national benchmarking	
	Implement an NJR data access portal to facilitate the secure use of NJR data for research and study	
	Continue to develop and update NJR on line annual report providing interactive analysis and reports and multi year comparison providing insight into trends	
6. HQIP is committed to	Supporting Staff	
ensure an efficient,	We will be an engaged and stable workforce by:	NCAPOP, Core,
well run organisation, which supports staff development and welfare and effectively communicates its work	Continuing monthly 1:1 meetings, provide & receive regular feedback, conducting annual performance appraisals and agreeing learning and development needs	Finance, Communications, QI, PPI, Procurement, NJR, Medical Director
and that of those it partners with	 Continue development of staff engagement activities Develop an action plan following the staff 	and Clinical leads
partifets with	 engagement survey Communicating frequently with staff via information cascades and regular all staff meetings Providing opportunities for development via 	PPI
	masterclasses	

<u>Supporting patient and public involvement</u> We will:

Work with staff to support PPI in their work via induction and guidance

NCAPOP

NCAPOP team:

We will:

- Ensure regular team meetings to discuss project related concerns, share learning, explore tips and pitfalls, further co-create and develop the programme as a team, monitor Gantt work allocation & redistributing topics as necessary
- Ensure a fully configured team (See NCAPOP operational plan – appendix 1).

Core (and Finance)

Running the organisation:

We will:

- Roll out a competency framework for the annual personal performance development review
- Utilise HR support service to undertake comprehensive review of HQIP HR policies
- Consider Organisational Development needs to shape future activities for example by the establishment of an Organisational Development Group (to include exploration of key activities prioritised at SMT/Senior Staff away day in November 2016)
- Develop and implement an HQIP organisational policy review schedule
- Work to ensure HQIP receives a clean financial audit in 2017 that complies with the new charity SORP
- Facilitate impact reporting for the HQIP Board of Trustees and NHSE
- Develop a high impact HQIP Annual Report, following 2016's first move into something more narrative and engaging than a traditional report and accounts
- Review the current Service Level Agreement for HR support in operation with the Royal College of Nursing and shape future support requirements in light of the review

(<u>Communications</u>	Communications/
١	Ve will:	Core
	communications queries they have or support they need where possible, including media handling, online work, social media, events and editing Continue training on specific topics, such as the planned social media workshop	
1	National Joint Registry	NJR
١	Ve will:	
ŀ	IQIP headline contract retendering	HQIP Executive
	Ve will:	Leadership team
•	Engage with key stakeholder and our Board to understand the key headline offer we wish to include in any re-tender documentation	·
•	 Deliver: a bid writing process and team the scope of retendering work, evaluating the risks and benefits submit a rigorous and viable bid in line with procurement processes and timelines provided. 	

Executive Leadership Team objectives

Objectives for 2017/18

1	Lead the development and delivery of an NCAPOP retender that captures the expertise and learning from the delivery to date whilst maintaining a strong professional and patient focus.	 Engage key external and internal stakeholders to gather information to support bid development and positioning Develop timelines for all activities to meet deadlines whilst ensuring ample time for consultation with staff and Board Maintain regular communication across HQIP on progress
2	Support the delivery of all HQIP work streams with a focus on ensuring cross organisational alignment i.e. business as usual.	 Develop the senior sponsor role for NCAPOP and consider extending to other workstreams Support high level conversations around programme management eg accountability meetings and problem solving
3	Lead the exploration of initiatives to maximise HQIPs potential	 Build a development capacity to enhance the role of HQIP to deliver Create an opportunity to develop a shared vision on the future IT pathway to access and share data by exploring with key stakeholders the impact of digital progress (e.g. electronic patient records; NHS Directions) Give consideration to consultancy services – in the UK or outside.
4	Ensure that HQIP has established relationships with national NHS related bodies, professional and patient groups to support the delivery of our strategic objectives	 Regular meeting schedule with key bodies Ad hoc meetings to explore new initiatives
5	Support HQIP to be an open positive place to work for its staff and partners	 Be open and collaborative in working style Be accessible Model the behaviours to support the effective performance of HQIP in pursuit of our vision values (HQIP competency framework)

Key Performance Indicators

Work Stream(s)	Senior Responsi ble Officer(s)	Key Performance Measure	Strategic Objective mapped	Key Performance Indicator	Indicator measure
Procurement	Selina Eaton	Legal Compliance	1	% of tenders fulfilled within prescribed timelines	%
Information governance	Jane Ingham	Legal Compliance	1	% Data access requests processed within one month	%
			1	No IG breaches	number
		Budget Variance	6	Quarterly under or overspend	number
		Income	6	Subscription income above 80% compliance	%
		Expenditure	6	% of suppliers paid within 30 days	%
Financial Management	Joan Shearma n	Quarterly Management Accounts	6	Delivered per quarter to Budget holders	description
		Reserves	6	Number of months of operating costs retained	number
		Cost Improvement	6	Review of core office support costs	description
		Overall turnover of employees	6	% of Employees that leave	%
		Sickness and absence	6	Average working days lost per employee	number
Human	Suo	Staff Profiles	6	Staff Diversity Reporting	description
Human Resources	Sue - Latchem	Development & Training	6	number of staff not undertaking approved training opportunities	number
		Employee satisfaction	6	Overall, are employees happy & committed to be working for HQIP	description

			4	Audience: Total	number
			4	Number of Users	
		HQIP Website	4	Audience: Total Number of visits	number
			4	Audience Sessions: New Visitors	%
Communications	James Thornton		4	Audience Sessions: Returning visitor	%
			4	Number of subscribers	number
		Goal Conversion tracking: e-	4	Recipients viewing or opened bulletin	%
		bulletin	4	'click-through' i.e. accessing one item	%
National Clinical Audit & Patient Outcomes Programme	Jill Stoddart	Contract management	1	%of required contract review meetings held in quarter	%
	Jill Commissioning		1	Commissioning activities completed to time (excludes minor changes to the schedule that do not have a net effect on final completion date)	%
		1	Deployment of all modules / functionality of new e-procurement system	%	
			1	Delivery of functional e-procurement programme management system and implementation	description

Jane		Patient & Public Involvement	2	Improved internal PPI processes and launch of new/updated resources	description
QI	Ingham/ Sue Latchem	Resource Guides	3	Resource Review products revised and updated and/or new guides produced	description
	Care Audit Manuals	Care Audit Manuals	3	Revise & publish	description
		Movement in reserves	6	Quarterly reserves position	number
NJR	Elaine Young	Performance monitoring against implementation progress with the NJR Annual Plan	6	NJR objectives and RAG ratings	description

HQIP Operational Plan 2017-18 – Financial Summary

This section summarises the income HQIP expects to receive in 2017-18 and our expenditure plans for the year. The preceding sections describe our work plans for 2017-18 in detail and how these meet HQIP's objectives.

The Operational Plan for 2017-18, including the financial component, was agreed by HQIP's Board of Trustees at their meeting on 23rd March 2017. We will review income and expenditure plans at the half year stage and make adjustments to the Operational Plan if necessary.

There are two classes of funds described in this Summary:

General Funds – Also known as "Unrestricted Funds" can be used to support the work of HQIP without any restriction. These are used to meet HQIP's day to day **running costs**. An example of this is HQIP's Management Fee from NHS England.

Programme Funds – Also referred to as "Restricted Funds" which can only be used for specific purposes. These are used to finance programmes and cannot be used for other purposes. An example of this is income provided by NHS England to finance the National Diabetes Audit.

Brought Forward Funds – These are funds remaining at the end of the previous financial year, in this case at March 2017. General Funds and Programme Funds are shown separately. The figures may change as further adjustments may be made during the audit of HQIP's financial statements.

Surplus/(Deficit) or (Profit/(Loss) for the Year – This is income less expenditure in 2017-18.

Projected Balances at March 2018 – This adds the Surplus/(Deficit) or (Profit/(Loss) to the funds brought forward from the previous year to show total funds at March 2018.

A reduction in accumulated Programme Funds at the end of the year means that we are spending these funds as intended.

At March 2018, HQIP's General Fund will amount to just under 6 months' running costs.

	Total
HQIP Operational Plan Financial Summary 2017-18	£
Provents Ferriand at 4 st April 2047	
Brought Forward at 1 st April 2017	
Programme Funds	17,677,380
General Funds	1,549,666
Income 2017-18	
Programmes	18,011,899
Running Costs	2,748,340
Total Income	20,760,239
Expenditure 2017-18	
Programmes	20,120,048
1108.41.111103	20,120,040
Running Costs	2,765,193
Total Expenditure	22,885,241
Surplus/Deficit for the Year	-2,125,002
Projected Fund Balances at 31 March 2018	
ojestea i ana balances at 31 March 2010	
Programme Funds	15,569,231
General Funds	1,550,273
Date: 11.04.2017	