# HQIP guide for NCAPOP providers:

# Writing a healthcare quality improvement plan

## Introduction

National clinical audit can be a powerful tool to promote better healthcare outcomes. However, this is not a passive process. Fulfilling the improvement potential of national clinical audit requires a pro-active plan based on best practice and evidence-based quality improvement methods.

This guide summarises best practice for promoting quality improvement and provides a suggested structure for your quality improvement plan.

## About healthcare quality improvement

* Clinical quality refers to the delivery of safe, effective and patient-centred care.
* Quality improvement requires a systematic approach that uses specific techniques.
* Improvement requires both local action and central co-ordination and resources.
* Measurement is key but should be focused with specific intent
* Data should be provided in the right format at the right time to the right hands.
* Patient and public involvement is critical.

## A plan to promote healthcare quality improvement

The principles outlined above can be used to create a coherent and credible plan to promote the use of your national clinical audit data to improve clinical quality. The plan should be co-produced with key stakeholders, including patients, and should build on the improvement intent outlined in your contract specification and tender submission.

Progress against your improvement plan should be communicated via your project outputs, reported to your programme board and to HQIP.

A proposed structure for your plan is shown below, with hyperlinks to relevant resources. The expectation is that your plan should be no longer than 4 pages.

## Suggested structure for your quality improvement plan

### Introduction

A brief description of the aims of the audit and the importance of a quality improvement plan.

### Improvement goals

* Clearly describe the healthcare problems that the audit aims to improve.
  + What are your audit data telling you about the current quality of care?
  + Do you know what good looks like? Explain what good looks like by giving concrete examples
  + What are your stakeholders telling you are the priorities for improvement?
* Set targets for your improvement goals e.g., by April 2020 95% of patients admitted with sepsis will receive all components of the care bundle.
* Ensure the audit performance metrics align to your improvement goals by including a driver diagram ([appendix I](#_Appendix_I)).

### Improvement methods

The methods will vary according to your improvement goals and should be shaped accordingly to ensure maximum ownership and engagement. Consider subdividing this section into:

#### National

Describe how you will align, collaborate and provide outputs to:

* Improvement initiatives e.g. [Getting it Right First Time](https://gettingitrightfirsttime.co.uk/).
* NHS England e.g. via National Clinical Directors, the National Quality Board, Specialised Commissioning.
* Devolved nations via the relevant organisations.
* Other stakeholders e.g. professional societies and patient charities.
* Break down reporting outputs for monthly, quarterly and annual reporting

#### Regional

Describe how you will align, collaborate and provide outputs to:

* Improvement initiatives e.g. [Health Innovation Networks](https://thehealthinnovationnetwork.co.uk/), [NHS England » Strategic clinical networks](https://www.england.nhs.uk/2012/07/strat-clin-networks/)
* Healthcare systems e.g. [Integrated Care Systems](https://www.england.nhs.uk/integratedcare/integrated-care-systems/), Integrated Care Boards, [Primary Care Networks](https://www.england.nhs.uk/gp/gpfv/redesign/primary-care-networks/)

#### Local

##### Feedback on performance

Describe how you will optimise the feedback of results to healthcare providers to ensure maximum impact. Examples include:

* Online run charts for key measures e.g. [National Hip Fracture Database](https://www.nhfd.co.uk/20/nhfdcharts.nsf/vwCharts/BestPractice)
* Quarterly reporting of performance against expected standard.
* Quality improvement tools for use at a local level

##### Quality improvement tools

Describe the tools that you will make available to healthcare providers, how they will access them and what support they may expect. Examples include:

* “How to” guides e.g. [Run Charts](http://www.ihi.org/resources/Pages/Tools/RunChart.aspx) , [Model for Improvement](http://www.ihi.org/resources/Pages/HowtoImprove/default.aspx) , [NHS England » Making data count](https://www.england.nhs.uk/publication/making-data-count/) , [Driver Diagrams](https://www.england.nhs.uk/wp-content/uploads/2021/03/qsir-driver-diagrams.pdf)
* Links to existing resources e.g. [Institute for Healthcare Improvement](http://www.ihi.org/resources/Pages/Tools/Quality-Improvement-Essentials-Toolkit.aspx), [ELFT QI tools](https://qi.elft.nhs.uk/resources/improvement-tools/)
* Links to training courses for quality improvement e.g. [ELFT QI training](https://qi.elft.nhs.uk/qi-training/), [Home | QI Ready Learning Network (rcgp.org.uk)](https://qiready.rcgp.org.uk/)
* Good practice repository with contact information where possible.

##### Improvement workshops & collaboratives

Describe how you will engage audit users in quality improvement via workshops and collaboratives.

The workshops should be supported by individuals with expertise in healthcare quality improvement. Discussion of local data by teams should be encouraged with support to develop quality improvement plans. Provision should be made for feedback, follow up and sharing of good practice. See [QI workshop guide](https://www.hqip.org.uk/wp-content/uploads/2018/02/effective-events-for-local-quality-improvement-following-national-clinical-audit.pdf)

Ongoing support and feedback may be best facilitated by formal [Improvement Collaboratives](http://www.ihi.org/resources/Pages/IHIWhitePapers/TheBreakthroughSeriesIHIsCollaborativeModelforAchievingBreakthroughImprovement.aspx). The audit provider is not necessarily expected to fund or deliver these collaboratives but should describe how they might link with organisations that can e.g. Health Innovation Networks.

#### Patient and public involvement

Describe how you will involve patients and the public in your quality improvement plan. Examples include:

* Engaging your patient panel to co-produce the quality improvement plan.
* Producing a “what you should expect” leaflet to facilitate your patients and carers seeking care in line with expected standards.
* Co-producing outputs for patients and the public including infographics and easy read versions of reports

#### Communications

Describe how you will communicate your quality improvement plan to stakeholders, providers, patients and the public. Examples include:

* Regular improvement bulletins.
* Patient leaflets on how to seek high quality care.

## Evaluation

Describe how you will evaluate the impact of your quality improvement plan. Examples include reporting progress against improvement goals:

* To the programme board.
* To HQIP at contract review meetings.

## Appendix I

Example driver diagram showing how to link healthcare quality improvement goals to clinical drivers and audit performance metrics

