

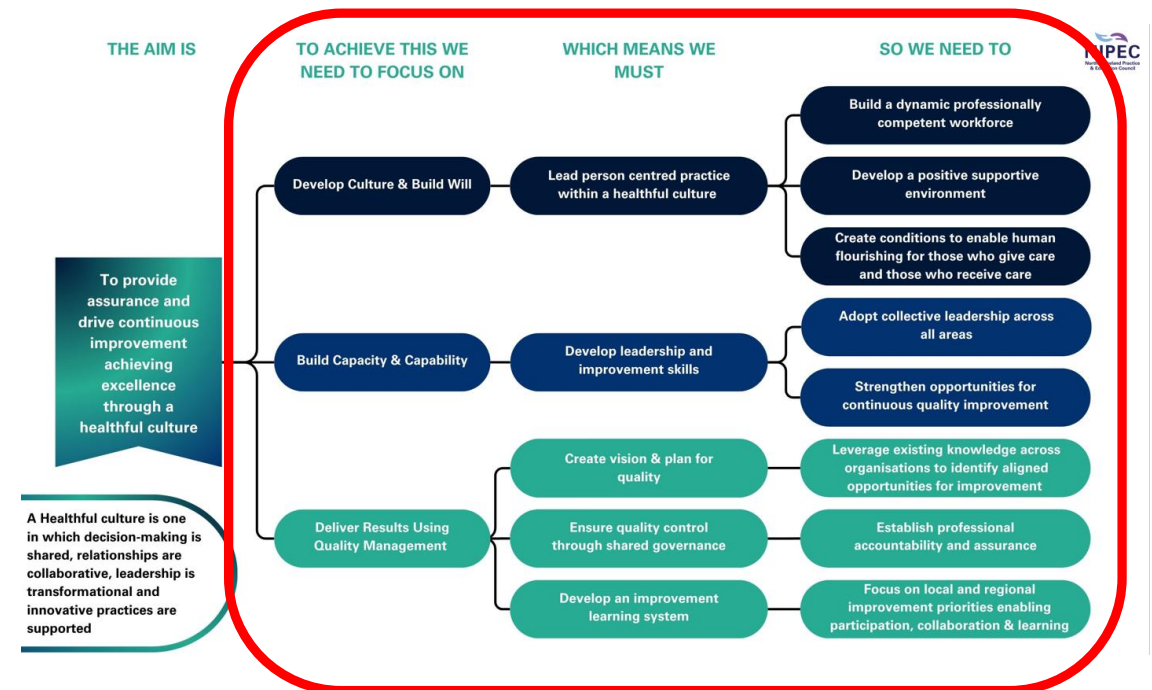


Quality
Excellence
FRAMEWORK

Quality Excellence Framework Maturity Matrix How to Guide

Introduction

The Quality Excellence Framework Maturity Matrix supports you in assessing your practice, team and organisation against the key drivers set out in the Quality Excellence Framework to ensure clinical and professional assurance fostering good governance. It helps to identify areas of excellence, pinpoint gaps and facilitate learning. It is designed to encourage ownership, discussion and constructive challenge and to enable development of improvement actions.



How to complete:

STEP 1: Within each of the 3 tabs at the bottom best practice guidance is set out against the standards. Please select the level that has been achieved based on the evidence set out in this how to guide.

Levels achieved:

Level	Description
Needs a lot of development	There is limited evidence available against best practice guidance
Needs some development	There is some evidence to support best practice guidance
Well Developed	There is strong evidence to support best practice guidance

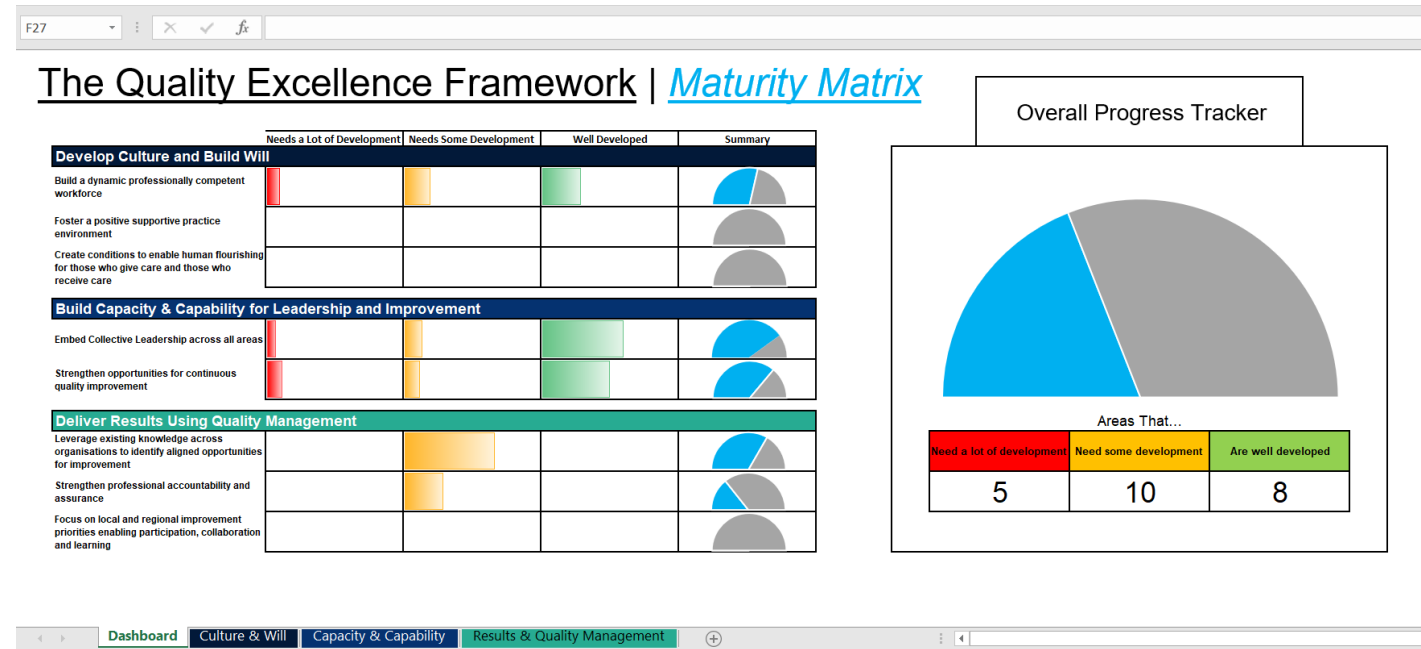
Develop Culture and Build Will

Build a dynamic professionally competent workforce		
Best Practice Guidance	Development Level	What this looks like in Practice (Where are the gaps?)
Mechanisms are in place to support professionalism in practice	Needs a lot of development	
Career development and succession planning is promoted and supported	Needs some development	
A Learning Needs Analysis is carried out in all areas of professional practice	Well developed	
Practitioners are enabled to operate within the upper limits of scope of practice, ensuring right skills, right place, right time	Needs a lot of development	
Skills and knowledge development are supported through an educational commissioning plan	Needs some development	
Fitness to practice policies are in place to support staff	Well developed	
Monitoring of regulator referrals takes place and learning actioned		
Foster a positive supportive practice environment		
Best Practice Guidance	Development Level	What this looks like in Practice (Where are the gaps?)
Workforce plans are developed to respond to population needs and the transformation agenda		
Mechanisms are in place to facilitate safe staffing and appropriate skill mix		
There is a strong reporting culture within the care setting where staff are supported to raise concerns		
Civility is promoted and poor attitudes and behaviours challenged		
Policies, processes and structures are established to challenge poor professional conduct and poor practice		
Shared decision making is facilitated between staff at all levels		
The practice environment facilitates effective multidisciplinary team working		
Create conditions to enable human flourishing for those who give care and those who receive care		
Best Practice Guidance	Development Level	What this looks like in Practice (Where are the gaps?)
Staff work with people who use the service to provide holistic care that reflects people's beliefs and values		
There is evidence of shared decision making within care plans		
Staff demonstrate sympathetic presence in daily practice		
There are opportunities for people who use our services to feedback on their experience and be informed of outcomes		
People's feedback is used to co-produce developments and improvements in services		
The policies, processes and structures employed facilitate public and personal involvement and partnership working in all areas of practice		

STEP 2: Use the columns to briefly indicate what this looks like in practice and where there are gaps

The Dashboard

The dashboard in the first tab will automatically pull the information from the other tabs and provide a visual of areas for development



Step 3: Identify annual priorities to strengthen compliance against the Quality Excellence Framework

Step 4: This information should be used as part of supervision, appraisal and accountability processes within each organisation. The information will also be used to provide assurance to the Chief Nursing Officer (CNO)

Best Practice Guidance and supporting evidence

The following pages provide the detail of best practice guidance and how you can evidence this to support the assessment.

Tab 1 - Develop culture and build will

Build a dynamic professionally competent workforce

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none">➤ Mechanisms are in place to support professionalism in practice➤ Career development and succession planning is promoted and supported➤ A Learning Needs Analysis is carried out in all areas of professional practice➤ Practitioners are enabled to operate within the upper limits of scope of practice, ensuring right skills, right place, right time➤ Skills and knowledge development are supported through an educational commissioning plan➤ Fitness to practice policies are in place to support staff➤ Monitoring of regulator referrals takes place and learning actioned	<ul style="list-style-type: none">✓ All staff are supported through their appraisals and this is measured across all areas✓ There is evidence of a timely process for planning of learning needs across all areas✓ Mandatory training compliance is monitored✓ Continuous data is available to measure workforce indicators at a local level e.g skill mix, absence rates✓ Registration and Revalidation monitoring records and escalation processes with fitness to practice outcomes measured.✓ Staffing and skill mix reviews clearly documented and regularly reviewed

Foster a positive supportive practice environment

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none">➤ Workforce plans are developed to respond to population needs and the transformation agenda➤ Mechanisms are in place to facilitate safe staffing and appropriate skill mix➤ There is a strong reporting culture within the care setting where staff are supported to raise concerns➤ Civility is promoted and poor attitudes and behaviours challenged➤ Policies, processes and structures are established to challenge poor professional conduct and poor practice➤ Shared decision making is facilitated between staff at all levels➤ The practice environment facilitates effective multidisciplinary team working	<ul style="list-style-type: none">✓ Workforce monitoring data is available and used to inform future planning activity✓ Workplace survey to include staff psychological safety✓ Upheld complaints regarding attitude and behaviour of staff✓ Frontline practitioners participate in governance committees and meetings✓ There is evidence of active reporting of issues and incidents across all areas✓ Staff experience data✓ liP staff feedback✓ Student learning environment feedback

Create conditions to enable human flourishing for those who give care and those who receive care

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none">➤ Staff work with people who use the service to provide holistic care that reflects people's beliefs and values➤ There is evidence of shared decision making within care plans➤ Staff demonstrate sympathetic presence in daily practice➤ There are opportunities for people who use our services to feedback on their experience and be informed of outcomes➤ People's feedback is used to co-produce developments and improvements in services➤ The policies, processes and structures employed facilitate public and personal involvement and partnership working in all areas of practice	<ul style="list-style-type: none">✓ Patient/Client feedback surveys✓ Care Opinion✓ Examples of improvement projects with evidence of patient/client involvement✓ Patient/client voices are heard

Tab 2 - Build Capacity & Capability for Leadership and Improvement

Embed Collective Leadership across all areas

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none"> • The Collective Leadership Strategy is implemented (The Collective Leadership Framework for nurses and midwives) • Boards incorporate the Collective Leadership Strategy principles into strategic vision and direction and policies • There are clear accountability and responsibility processes and structures for oversight of leadership development • The Collective Leadership Strategy approach is included in recruitment processes, including assessments and job descriptions • Preceptorship, supervision and appraisals are carried out with a focus on collective leadership components 	<ul style="list-style-type: none"> • Staff survey results • Learning and development records • Appraisal conversations • No of staff undertaking leadership development programmes (to include ethnicity) • Career progression and succession planning (to include ethnicity)

Strengthen opportunities for continuous quality improvement

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none"> • There is a clear strategic vision and culture of quality improvement • Mechanisms are in place to ensure evidence based practice is incorporated into daily work/service provision • There is clear action plan to reach desired capacity for improvement expertise • Staff and people with lived experience have access to quality improvement training and development opportunities • There are staff at all levels who have the skills to interpret data using a range of tools and charts • There is the ability to evaluate the impact of improvement initiatives and support scale and spread 	<ul style="list-style-type: none"> • A local Quality Strategy is in place setting direction for staff • No of staff trained across the levels of the attributes framework • No of staff coaching/mentoring others in improvement • Evidence of training access/support for people with lived experience • Support and engagement in scale up projects locally and regionally

Tab 3 - Deliver results using Quality Management

Leverage existing knowledge across organisations to identify aligned opportunities for improvement

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none">• Professional fora leverage intelligence to agree quality metrics based on:<ul style="list-style-type: none">➤ patient outcome intelligence/data➤ morbidity and mortality Reviews➤ inspection reports,➤ incidents,➤ surveys,➤ audits,➤ Professional KPI's➤ Patients and service user feedback➤ Staff feedback➤ Retrospective safe staffing data➤ Professional reviews➤ Best practice frameworks➤ Others• Professional Leaders agree core quality indicators for local and regional measurement and monitoring• Professional leaders agree specialty specific improvement priorities	<ul style="list-style-type: none">• There is evidence of quality data sets across every care and service setting• Patients, staff and service users have access to real time experience feedback tools• Staffing and skill mix reviews are clearly documented and regularly reviewed• Outcome of review of appropriate professional behaviours, action plans and progress reports• There is regular analysis and reporting to EDON's• Themes are identified and shared locally and regionally to inform improvement priorities• Professional priorities are included in operational planning business and plans

Best Practice Guidance

- There are visible professional accountability structures within and across teams
- Shared governance approaches provide a collective voice for shared decision making
- Data should be accessible and visible across all areas
- Accountability processes outline responsibility for analyzing and reporting data
 - At frontline
 - Senior professionals
 - Board
 - Regional Professional and Accountability Fora
- Escalation systems are established to share information internally and externally through professional fora
- Digital tools are maximised to support real-time data and inform decision making
- Time-series charts are used (where applicable) to enable an understanding of variation in care and processes

How to evidence this

- Nurses, midwives and AHP's are represented on all decision making fora where practice and workforce issues are discussed e.g. service reconfiguration, HR policies, service developments
- Staff at all levels are included in internal Trust accountability and governance processes
- There are clear decision making processes within local integrated governance frameworks
- Data is accessible and analysed using time series charts across all areas
- Staff have an understanding of how to interpret time series charts

Focus on local and regional improvement priorities enabling participation, collaboration and learning

Best Practice Guidance	How to evidence this
<ul style="list-style-type: none">• Improvement priorities are identified based on data relating to outcomes and standards of care• Improvement work is sponsored and aligned to regional and organisational priorities• Frontline staff and people with lived experience are leading improvement together• Staff actively engage in regional networked collaborative approaches to support the learning system• Mechanisms are in place to connect professionals within and across organisations• Support is in place to scale up improvement• Processes are in place to recognise and reward local improvement building momentum and encouraging continuous learning• Staff are encouraged and supported to share their work regionally, nationally and internationally	<ul style="list-style-type: none">• Professional improvement priorities are identified as part of the annual planning cycle• There is evidence of partnership with people with lived experience on all suitable improvement initiatives• Staff actively participate in regional improvement collaboratives• Staff at all levels are supported to engage in local, regional and national networks/communities of practice• Improvement coaching support is readily available for all staff• Staff are encouraged to present their work at conferences and events• Staff are supported to write up their initiatives in preparation for publication• Local awards and other forms of recognition are developed and supported within and across the professions