



**Northern Ireland Practice and Education
Council for Nursing and Midwifery**

**Development of an Attributes Framework
*Supporting the Development of Leaders for
Quality and Safety in Northern Ireland's Health
and Social Care System.***

Project Plan



1.0 Introduction

- 1.1 The Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC) was asked by a co-chair of one of the Quality 2020 Task Groups to project manage the development of an attributes framework to support the implementation of safety and quality in HSC Trusts across Northern Ireland (NI). Dr Gavin Lavery Director of the Northern Ireland Safety Forum was asked to lead the Project and Brendan Carson, from Safety and Quality in South Eastern Health and Social Care (HSC) Trust was nominated to sit on the Project Group.

2.0 Background

- 2.1 In 2011 the Department of Health Social Services and Public Safety published a 10-year quality strategy¹ to facilitate planning to protect and improve the quality of Health and Social Care services. In the strategy quality is defined under three main headings:

- Safety – avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.
- Effectiveness – the degree to which each patient and client receives the right care (according to scientific knowledge and evidence-based assessment), at the right time in the right place, with the best outcome.
- Patient and Client Focus – all patients and clients are entitled to be treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The mission statement within the strategy focused on ensuring that staff are motivated and supported to deliver high quality strong leadership and direction at all levels, along with adequate resources. The strategic goals to achieve the vision within the strategy all have particular relevance to this project, they are: *Strengthening the Workforce, Measuring Achievement and Integrating the Care.*

The key objectives related to these strategic goals are:

- provide the right education, training and support to deliver high quality service
- develop leadership skills at all levels and empower staff to take decisions and make changes
- promote the use of accredited improvement techniques and ensure there is sufficient capacity and capability within HSC to use them effectively
- make better use of multidisciplinary team working and shared opportunities for learning and development in HSC and with external partners.

¹ DHSSPS (2011) *Quality 2020: a 10-year strategy to protect and improve quality in Health and Social Care in Northern Ireland.* Belfast: DHSSPS.

Moreover, the recent Report from the Mid Staffordshire Public Inquiry (2013), led by Robert Francis QC, highlighted significant failings in Health and Social Care. Although this inquiry was in England there are lessons to be learned here in Northern Ireland. It is vital that in NI we take steps to enhance practitioners competence in the delivery of safe and effective person-centred care and that the managers and leaders in organisations ensure this happens.

The Quality 2020 Implementation Steering Group, initially had proposed that this could be achieved by the development of a leadership programme. However the Professional Leadership Task Group held a workshop in early January 2013 involving those responsible for designing and developing leadership and quality improvement learning and development activities. At this workshop it was agreed that a framework to support the development of clinical leaders for quality and safety was more appropriate than the development of another leadership programme.

The Quality 2020 Leadership Task Group has approved that a project is taken forward to develop an attributes framework to facilitate the development of leaders for quality and safety.

3.0 Project Aim and Objectives

3.1 Aim

The aim of the project is to develop an attributes framework to support a common approach to the development of an individual's knowledge, skill and behavior, in relation to leadership for quality and safety. This applies to those who are in training or working in Northern Ireland's health and social care system.

3.2 Objectives

The objectives are as follows, to:

- scope existing frameworks, from the literature, which support the development of leadership for quality and safety
- identify attributes/core competence statements which will support the development of leadership for quality and safety
- develop a framework comprising attributes and relevant learning and development activities of leadership for quality and safety
- Identify requirements and make recommendations to Quality 2020 Implementation Steering Group to ensure sustainability of the framework.

3.3 Scope of the Project

This Project will be completed over a twelve month period in two phases. Phase one will be completed in six months and will be confined to individuals in training or working in Health and Social Care Trusts across NI. Phase Two will involve testing applicability of the framework with those working in the independent sector and HSC Trust health and care professionals not involved in phase one.

4.0 Methodology

- Establish a Project Steering Group made up of representatives from the following organisations: HSC Trusts, CEC, LC, QUB, Ulster, PHA, RQIA, General Practice, NIMDTA, NISCC, RCN, RCM, Staff Side Forum and DHSSPS. HSC Trusts will be asked to provide nominees from the disciplines of nursing, midwifery, medicine, AHPs, with an interest in or experience in quality improvement. The Chair of the Steering Group with the Project Lead will ensure that the Trust nominations will enable effective representation on the Steering Group across the range of professions, stages of career/leadership and areas practice (acute, community and primary care).
- Establish an sub-group to develop the attributes relevant to support the development of knowledge, skills and behaviours. The group may also be supported by sub-sets of particular groups to influence the development of the attributes and framework. For example it is envisaged there may be the following subsets: Patient Client Council, RQIA, Social Workers, possibly Pharmacy in order to provide a degree of future proofing for other disciplines. NIPEC will service meetings which will be held in NIPEC, where possible. The Attributes Framework will be published by NIPEC (© NIPEC) with the logos of: NIPEC, NI Safety Forum, HSC and Quality 2020. The framework will be available to view and download from www.nipec.hscni.net and other relevant websites.
- Evaluation of project management processes will be completed by NIPEC at the end of the Project.

5.0 Resources

- 5.1 NIPEC will provide project management and administrative support to service the Project Group meetings.
- 5.2 Any additional support required will be discussed and agreed by NIPEC's business team.

6.0 Dissemination and Implementation

- 6.1 Communication and consultation processes will be ongoing throughout the project using various mechanisms including the NIPEC website and news bulletin, along with utilisation of key stakeholders' communication processes. This will reflect the progress of the project and encourage individuals' to contribute to and participate in the project at various stages.
- 6.2 On completion of the project, the project will be summarised in a Final Report which will be available on NIPEC's website.

7.0 Project Screening Assessment

- 7.1 To ensure NIPEC and its stakeholders are meeting its legal obligations in relation to Equality, Personal and Public Involvement and Governance, the project plan, its aims, objectives and proposed outcomes have been screened for any issues relating to the following areas:
- Risk Management
 - Equality and Human Rights
 - Privacy Impact Assessment
 - Personal Public Involvement
- 7.2 A summary of these considerations and any action required is documented in Appendix Two.

8.0 Evaluation

- 8.1 Ongoing evaluation of the management of the project will be conducted through NIPEC and will ultimately feed into the progress and outcomes of the project. This evaluation will address the achievements of the objectives outlined in the project plan and the project management process.

Appendix One

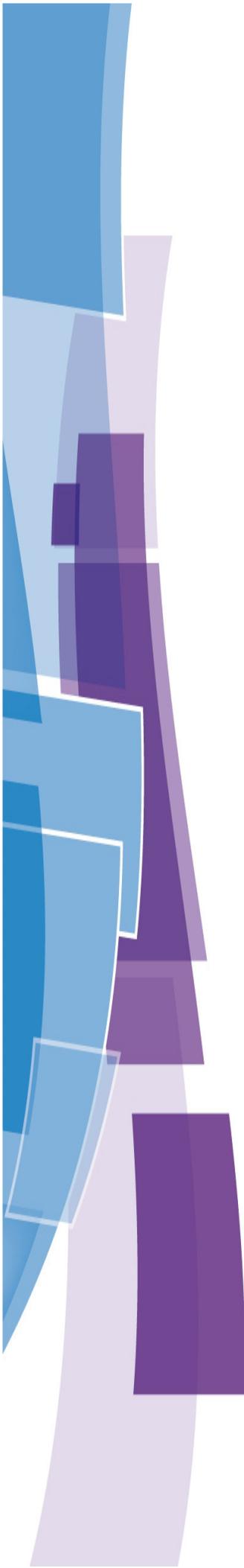
Membership of Project Steering Group

Dr Gavin Lavery (Chair)	Clinical Director	NI Safety Forum
Margaret Rogan	Consultant Midwife	BHSCT
David Robinson	Co Director of Nursing: Standards Governance and Performance	BHSCT
Dr Gerry Lynch	Consultant Psychiatrist /Clinical Director Mental Health & Disability	NHSCT
Avril Redmond	Professional Lead for Nursing Medicine/Unscheduled Care & Clinical Service Lead for Renal & Neurology	NHSCT
Dr David Hill	Consultant Anaesthetist (in Pain)	SEHSCT
Brenda Carson	Head of Patient Safety and Improvement	SEHSCT
Carmel Harney	Assistant Director AHP Governance, Workforce Development & Training	SHSCT
Prof. Vivien Coates	Professor of Nursing Research	WHSCT
Anne Witherow	Assistant Director of Nursing	WHSCT
Dr Sandra McNeill	Consultant Obstetrician & Gynaecologist & Deputy Head of School for Obs &Gynae, NIMDTA	WHSCT
Dr Keith McCollum	GP	General Practice
Rita Devlin	Senior Professional Development Officer	RCN
Prof. Keith Gardiner	Chief Executive	NIMDTA
Dr Claire Loughrey	Director for Post-Graduate General Practice Education	NIMDTA
Maurice Devine	Assistant Head	Clinical Education Centre
Will Young	Principal Consultant	Leadership Centre
Prof. Tanya McCance	Co-Director Nursing Research & Development School of Nursing	University of Ulster
Leontia Hoy	Programme Co-ordinator Specialist Practice	QUB
Kathy Fodey	Director of Regulation & Nursing	RQIA
Marian O'Rourke	Professional Adviser	NISCC
Maura McKenna	Joint Chair Regional KSF Group	Trade Union Forum
Catherine Shannon	Joint Chair Regional KSF Group	Trade Union Forum
Charlotte McArdle	Chief Nursing Officer	DHSSPS
Cathy McCusker (Project Lead)	Senior Professional Officer	NIPEC

Appendix Two

Outcome of Screening Assessment

Screening Assessment	Comments
Risk Management questions	
<ul style="list-style-type: none"> • Have any risks been identified? <p>If no - no further action is required. If yes then,</p> <ul style="list-style-type: none"> • What is the potential impact of these? • How can these be mitigated or have alternatives options been identified which would have a lower risk outcome? • Where negative impacts are unavoidable, has clarity been given to the business need that justifies them? 	<p>Yes</p> <ul style="list-style-type: none"> • The Framework must complement the effective implementation of the Knowledge and Skills Framework, for those employees it is relevant to. <p>Seek representation from regional Staff Side Forum to sit on the Project Steering Group</p>
Equality and Human Rights questions	
<ul style="list-style-type: none"> • Has any negative impact to Equality and Human Rights been identified? <p>If no - no further action is required. If yes then,</p> <ul style="list-style-type: none"> • What is the likely impact on equality of opportunity for those affected by this policy for each of the Section 75 equality categories (minor/major/none)? • Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories? • To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group (minor/major/none)? • Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group? <p>NB – please refer to NIPEC’s Equality Screening Policy and Screening Templates to assist in considering equality and human rights</p>	<p>No</p>
Privacy Impact Assessment questions	
<ul style="list-style-type: none"> • Will the project/initiative use personal information and/or pose genuine risks to the privacy of the individual? • Will the project/initiative result in a change of law, the use of new and intrusive technology or the use of private or sensitive information, originally collected for a limited purpose, to be reused in a new and unexpected way? 	<p>No</p>
Personal and Public Involvement questions	
<ul style="list-style-type: none"> • Will the project/initiative require input from patients/clients? <p>If no - no further action is required. If yes - please apply NIPEC’s Personal and Public Involvement Policy.</p>	<p>The draft attributes framework will be sent to Patient Client Council for feedback.</p>



For further Information, please contact

NIPEC

Centre House
79 Chichester Street
BELFAST, BT1 4JE

Tel: 028 9023 8152

Fax: 028 9033 3298

This document can be downloaded from the NIPEC website
www.nipec.hscni.net

Updated September 2013