HEKSS Quality Improvement Tool

1. About the Tool

1.1 The Quality Improvement Tool (QIT) was developed by HEKSS in response to stakeholders' requests for a simpler, more robust process for Contract Review that requires fewer requests for information, less duplication of effort and a much less prescriptive method of action planning that allows providers to develop and manage their own improvement processes with regard to education and training in order to meet the desired outcomes.

1.2 The format of the QIT was inspired by the Trust Quality Scorecard developed by Health Education East Midlands, which was used as a starting point for development. Standards 2 to 6 were developed by Health Education South London following an extensive review of a varied range of documents relating to guidance and standards for practice-based learning, and the involvement of a wide range of multi-professional and academic stakeholders across a variety of sectors and organisations.

1.3 The QIT enables providers to be assessed/self-assess against seven standards:

1. Patient Safety

2. The Organisational Culture in Supporting Practice Education

3. Executive Ownership of Practice Education

4. Staff in Place to Effectively Support Practice Education

5. Physical Support for Practice Education

6. Standards of Service

7. Partnership Working

1.4 There is a set of indicators for each standard, together with the criteria for meeting these indicators. The QIT includes examples of the evidence required to demonstrate that the indicators are being met.

1.5 A level of concern is determined, based on assessment of the evidence provided:

0 = No concern.

1 = No concern as area is already being addressed, but improvement is advised.

2 = Slight concern, improvement required before next review.

3 = Concern to be addressed - mandatory.

4 = Serious concern, to be addressed immediately (concerns at this level are rare).

1.6 The QIT includes columns for actions to be taken, person responsible and deliverables. There is also a column for comments. *[The deliverables column will be removed in the next version and LEPs will be asked to provide a timeline for action in the Actions column]*

1.7 The final part of the tool is for providers to describe examples of notable practice, which should include exceptional examples that have the potential for wider dissemination and development, or a new approach that has played a vital role in driving improvement, particularly in challenging circumstances.

2.   How it works

The tool has been in use for several months and is now owned by the LEPs. The process has been revised to take this into account.

2.1   The LEP will

  a. self-assess against the standards

  b. provide evidence for each indicator in the evidence column

  c. identify an appropriate level of concern

  d. provide a narrative on any action to be taken, together with a timeline for delivery

  e. name an individual responsible to take forward any identified action

  f. if appropriate, qualify evidence, level of concern or action through comment

  g. enter details of any areas of notable practice which can be shared with other providers to help them improve their processes.

2.2   The QIT will be submitted to the assigned Quality Manager (QM) at HEKSS.

2.3   The QM will review the submitted QIT and may contact the LEP for clarification if needed.

2.4   The QM will liaise with the Education Leads at the LEP to arrange a meeting to discuss the QIT. It would be beneficial for everyone if all those involved in completing the QIT or providing evidence could attend the meeting.

2.5   The QIT is intended to be a living document and should be updated continually as improvements are made and further notable practice is identified. To this end a cycle of visits and submissions will take place through the year keeping to the following programme. (There may be some slippage on occasion.) You may note that at the time the LEPs are submitting their completed QIT, HEKSS will be reviewing and revising the QIT.

April/May	• HEKSS review QIT and revise as appropriate
June/July	• HEKSS QM/LEP Education Leads meet
August/September	• LEP submits completed QIT • HEKSS review and revise QIT as appropriate
October/November	• HEKSS QM/LEP Education Leads meet
December/January	• LEP submits completed QIT • HEKSS review and revise QIT as appropriate
February/March	• HEKSS QM/LEP Education Leads meet
April/May	• HEKSS review QIT and revise as appropriate

2.6   Between visits the QIT will be reviewed as a tool to ensure it meets the quality requirements set by HEE, other external bodies, and the objectives for HEKSS. Any revisions made to the QIT will be clearly identified in the new version of the tool and appropriate instructions will be circulated with the revised QIT.
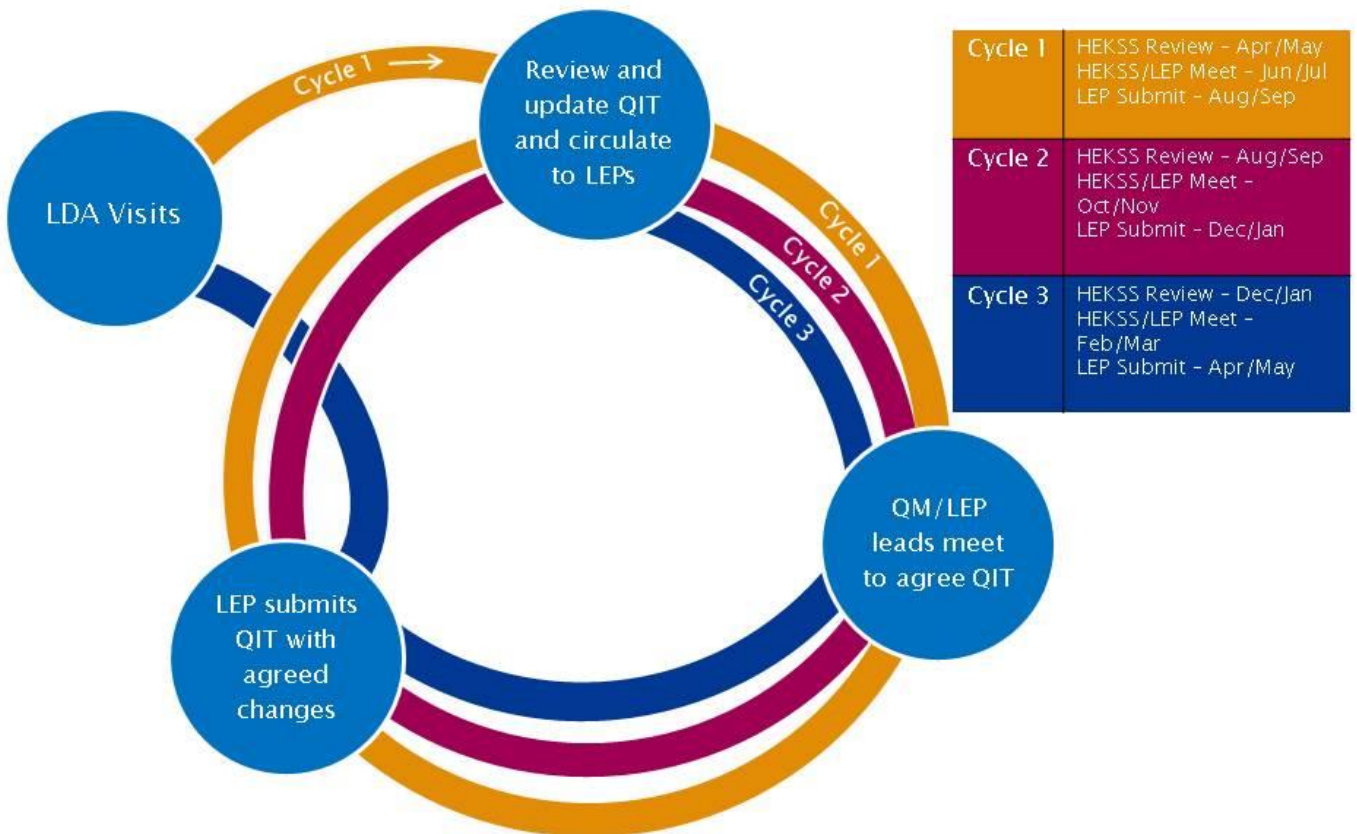
2.7   The annual cycle will allow for a completed QIT to be used to inform the annual LDA meeting between the LEP and HEKSS.

2.8   The Quality Team will review all QIT submissions and provide regular reports to the Quality Management Group.

2.9   The QM will summarise key points from the relevant QIT to include in a briefing document for the LDA meeting. The QIT will be signed off, together with the LDA, at this meeting.

2.10   The Quality Managers will be on hand to support the LEP education teams with their action plans throughout the process.

Figure 1 shows the annual cycle for the on-going process.

Fig. 1

Quality Improvement Review Process – Annual Cycle

Cycle 1	HEKSS Review – Apr/May HEKSS/LEP Meet – Jun/Jul LEP Submit – Aug/Sep
Cycle 2	HEKSS Review – Aug/Sep HEKSS/LEP Meet – Oct/Nov LEP Submit – Dec/Jan
Cycle 3	HEKSS Review – Dec/Jan HEKSS/LEP Meet – Feb/Mar LEP Submit – Apr/May

Document Control

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Change Log

Version	Date	Revisions
0.1	15 May 2014	First draft written by Karen Gibson, Quality Manager.
1.0	30 July 2014	Document approved by Quality Improvement Tool Review Meeting.
2.0	15 Dec 2014	Section 2 revised by Maggie Patching, Quality Manager, to reflect the fact that the QIT has been in use for several months and is now owned by the LEPs.
2.1	13 Feb 2015	Flowchart developed by Maggie Patching, Quality Manager, added to document as Diagram 1.