

# Development of Strategy for Nursing and Midwifery in The Whittington Hospital- Update Report January 2011

## Introduction

The Government focus for the delivery of health services in the coming years will be a challenging one. Whilst there is a clear priority on improving the quality of care across the NHS this will be balanced against a backdrop of national financial constraint. The Trust's Nursing and Midwifery strategy will respond to this challenge, putting patients at the heart of our business and our services, with the central aim of improving the patient experience and outcome with the resources we have and the opportunities that await us.

Nursing and Midwifery at the Whittington is exciting and challenging and we understand the contribution to healthcare that we provide. The Whittington employs over 800 nurses and midwives amongst a body of over 2,000 staff. From an organisational perspective we have considerable power to influence health improvements and with such close proximity to service users, we are also in a position of privilege that allows us to understand what is important for the public and to deliver agendas of improvement that drive up standards of care.

The purpose of this strategy is to set the direction for the delivery of high quality nursing and midwifery care for the next few years from this position of privilege and challenge. The finished product will set out our priorities, describe what we will achieve, and provides an overview of how we will achieve it. It will require an ambitious work programme that will incorporate government drives for improvements such as Essence of Care and high impact actions but will also take into account the views of our workforce and those who use our services.

This will be a dynamic process achieved within a work plan over several months that began in early December 2010, with the data gathering phase due to be completed by the end of January. Through the completed and published strategy we will hold ourselves and others to account for the delivery of the highest standards of care.

Without the leadership and commitment of nurses and midwives throughout the Trust, innovation and change will not take place. Nurses and midwives must take responsibility for action, ensuring that the care patients receive is competent, safe, kind and dignified.

## Methodology

### The Approach:

The development of the strategy is being led by Senga Steel, Assistant Director of Nursing and has been widely supported by Carrie Graham, the organisational development lead for the trust, the professional development nurses and Maggie Thompson, consultant midwife who have all led focus groups. We have sought an inclusive approach in the development of the methodology in order to secure professional ownership of the finished product. The consultation so far has included practitioners who are seen as professional leaders of practice improvement as well as those whose voices are not always easily heard; such as care assistants.

A focus group methodology was adopted to ensure that a mixture of grades and roles of those providing nursing and midwifery services within the trust had the opportunity to contribute to the priority setting for the new strategy . Four out of five focus groups have now taken place. At the beginning of the session the purpose of the group was explained. It was emphasised that the emerging strategy would reflect the participant views and the end result would be a professional manifesto that the professional nursing and midwifery workforce would work towards.

The groups have consisted of a variety of grades of staff from health care assistants to ward sisters and senior midwives. In each group the same session plan for the discussion was adopted to ensure that the quality of information gathered was consistent. We asked staff the following questions:

- What should the trust be focused on in terms of patient care?
- What do you think is important to patients?
- How does nursing/midwifery care make a difference to patients/women?
- What developments in practice would make the biggest difference to patients/women?
- What should we stop doing?
- Continue doing?
- Start doing?
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## **Analysis: Emerging themes**

Participants comments were taken verbatim and entered into a spread sheet. The comments were then coded and analysed for emerging themes. The interim analysis is currently showing a prominence of the following themes: Quality, safety, Innovation and Leadership. Below these themes are listed with the emerging subthemes and some quotes from staff taken from the focus group sessions:

### **Quality**

- Patient experience: Listening and learning
- Physical and psychological care

What staff told us:

*'introduce comfort checks-trust wide'*

*'back to basics bedside manner'*

*'better nutrition'*

*'Improve the quality of information regarding hospital admission'*

*'patient experience-Introduce a portable satisfaction survey'*

*'better customer care'*

*'Nurses and Midwives matter because they are constantly sorting the little things'*

*'remember the power of being a small hospital delivering excellent care to all'*

### **Safety**

- Workforce development
- Improved outcomes

*'Work towards a high level of safety'*

*'infection control'*

*'Nurses and midwives are the constant eyes of the organisation-increased confidence, increased safety'*

*'Focus on falls prevention/stroke management'*

*'CQUINS-commissioning for quality innovation payment framework ie VTE risk assessment'*

## Innovation

- Strengthening the practice development contribution
- Enhancing professionalism
- Working differently-Working efficiently

*'Improve skill transit across discipline and department'*

*'working well in the MDT to provide seamless care'*

*'Improve expertise-clinical'*

*'We need to enhance our knowledge through nurse education'*

*'Introduce computerised care plan based on problem they have-select appropriate nursing interventions'*

*'link study days to further development CPD'*

*'the reluctant patient who is fit for discharge should be charged if they refuse to leave the hospital. This*

*'might save money hopefully'*

*'More research'*

*'clinical supervision'*

*'applying care using EBP'*

## Leadership

- Clinical leadership and development of ward leaders
- Professional ownership

*'Introduce daily ward sister rounds'*

*'Develop the ward managers role'*

*'nurses to regain control of patient care'*

*'nurse led discharge'*

*'for ward managers to be out of care delivery numbers'*

*'to facilitate care for all patients'*

*'to support staff and to be at the core of running the ward'*

## Next steps:

The final analysis will be completed following the last planned focus group of senior nurses, scheduled for 27<sup>th</sup> January . The purpose of this group is to validate the existing themes and ensure that the finished article is commensurate with the strategic objectives of the organisation, the changes occurring within the wider health agendas of the DOH and the SHA and that the strategy reflects the shift in quality measurement from one that is process focused to one that is outcome focused. The strategy will then be written up in a first draft and will be fed back to those who took part. The introduction of the finished strategy once approved by the Executive Committee and the Trust Board will be implemented through a

series of road shows and workshops. Additionally Senga Steel plans to use the strategy to shape a corporate work plan for the practice development nurses for the coming year, helping to foster a 'board to bedside approach' to practice development and care delivery. Nursing and Midwifery care is vital to patient experience at the Whittington. The delivery of this strategy will be a reflection of core professional values, measureable improvements and crystallise the aspirations and ambition of Whittington nurses and midwives, ensuring we remain the hospital of choice for local people.