6Cs – National Update
The Amazing Journey so far....

Professor Juliet Beal
Director of Nursing: Quality Improvement and Care
22nd November 2013
EMPATHY

Wrightington, Wigan and Leigh NHS FT

http://www.youtube.com/watch?v=rbxb3DaohU&feature=em-share_video_user
• “The NHS belongs to us all. It is there to improve our health and well-being, support us to keep mentally and physically well, to get better when we are ill and, when we cannot fully recover, to stay as well as we can to the end of our lives.

• It works at the limits of science - bringing the highest levels of human knowledge and skill to save lives and improve health.

• It touches our lives at times of basic human need, when care and compassion are what matter most.”

Source: Ipsos Mori 2013
Care is our core business and that of our organisations; and the care we deliver helps the individual person and improves the health of the whole community.

Compassion is how care is given through relationships based on empathy, respect and dignity.

Competence means that all those caring roles must have the ability to understand an individual’s health and social needs.

Communication is central to successful caring relationships and to effective team working. Listening is as important as what we say. It is essential for “No decision without me”.

Courage enables us to do the right thing for people we care for, to speak when we have concerns.

A Commitment to our patients and populations is the cornerstone of what we do. We need to build on our commitment to improve the care and experience of our patients.
Compassion in Practice Supporting Policy

- Everyone Counts: Planning for Patients 2013/14
- Treating patients and service users with respect, dignity and compassion
- Francis Report and Hard Truths
- Winterbourne View
- The Keogh Review
- Don Berwick Report
- The Cavendish Review
- Clwyd-Hart Review
Six Action Areas

- **Action Area 1:** Helping people to stay independent, maximising well-being and improving health

- **Action Area 2:** Working with people to provide a positive experience of care

- **Action Area 3:** Delivering high quality care and measuring impact

- **Action Area 4:** Building and strengthening leadership

- **Action Area 5:** Ensuring we have the right staff, with the right skills, in the right place

- **Action Area 6:** Supporting positive staff experience
Nursing measures for the 6Cs

We will build measures for the 6Cs at different levels of the system across the health economy:

- National measures
- Organisational measures
- Ward / team measures

We will draw on the data we already have wherever possible but we will be aspirational and strive to get the best possible measures in order to understand the care we deliver and demonstrate improvement.

We are committed to transparency. We will ensure that all data are transparent and presented in a way that is meaningful to patients, frontline healthcare professionals and NHS leaders.
Action Area 1: Helping people to stay independent, maximising well-being and improving health outcomes

- Develop nursing contribution to 'no health without mental health'
- Promote Compassion in Practice in social care setting
- Work effectively across sectors to integrate health, care and support services
- Develop a programme of work to reduce the impact of health inequalities for people with learning disabilities
- Use NICE guidance to develop an accessible evidence base for midwifery in public health practice
- Maximise the leadership role of specialist community practitioners and public health nurses
- Develop a new model for the public health role of midwives
- Give children and families the best start through a national Health Visiting Plan
- Improve health and wellbeing for children and young people through developing school nursing
- Support nurses and midwives to maximise their contribution to the 'Dementia Challenge'
- Ensure practice is supported by appropriate technology
- Develop our skills as 'health promoting practitioners' making 'every contact count'
Commitment: Every contact counts

‘For myself and my profession, I care enough… to demonstrate commitment… taking personal responsibility for leading improvements in care with my team’

Measuring improvement overtime in outcome measures

- Domain 1: Preventing people from dying prematurely
- Domain 2: Enhancing quality of life for people with long-term conditions
- Domain 3: Helping people to recover from episodes of ill health or following injury
- Domain 4: Ensuring people have a positive experience of care
- Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm
Action Area 2: Working with people to provide a positive experience of care

- Embed the 6Cs into daily tasks and use these to evaluate the standards of care and support received
- Identify strong patient experience measures that can be used between settings and sectors
- Maximise opportunities to capture feedback, incorporate this into discussions and work to improve quality
- Support the roll out of the Friends and Family Test
- Support local services to seek the views of the most vulnerable
- Use feedback to improve the reported experiences of patients
- Provide rapid feedback from patients to build a rich picture of the 6Cs in action
- Listen to, seek out and act on patient and carer feedback, ensuring the patient and carer voice is heard
- Rollout the public reporting of key patient experience measures

KEY
- National
- Local
- Call to action
Compassion: national measures

‘For all of my patients, every time, I care enough … to be compassionate’

Patient experience

CQC inpatient survey

<table>
<thead>
<tr>
<th>Inpatient survey - National scores</th>
<th>2007-08</th>
<th>2008-09</th>
<th>2009-10</th>
<th>2010-11</th>
<th>2011-12</th>
<th>2011-12 95% confidence interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access &amp; waiting</td>
<td>85.9</td>
<td>92.8</td>
<td>95.6</td>
<td>94.2</td>
<td>83.7</td>
<td>80.6</td>
</tr>
<tr>
<td>Safe, high quality, coordinated care</td>
<td>64.3</td>
<td>65.3</td>
<td>64.4</td>
<td>63.6</td>
<td>64.3</td>
<td>62.2</td>
</tr>
<tr>
<td>Better information, more choice</td>
<td>67.5</td>
<td>67.7</td>
<td>66.6</td>
<td>65.7</td>
<td>67.2</td>
<td>64.0</td>
</tr>
<tr>
<td>Building closer relationships</td>
<td>83.6</td>
<td>83.5</td>
<td>83.5</td>
<td>83.7</td>
<td>83.5</td>
<td>82.9</td>
</tr>
<tr>
<td>Clean, friendly, comfortable place to be</td>
<td>78.1</td>
<td>79.2</td>
<td>79.1</td>
<td>79.3</td>
<td>79.4</td>
<td>78.5</td>
</tr>
<tr>
<td>Overall</td>
<td>75.3</td>
<td>76.0</td>
<td>75.6</td>
<td>75.7</td>
<td>75.8</td>
<td>0.15</td>
</tr>
</tbody>
</table>

Source: National Patient Survey Programme - Further details of the methodology can be found in the accompanying methodological issues paper. Results marked with an * show a statistically significant change from 2010-11 to 2011-12

Patient stories

Do we need to measure compassion more directly?

Compassion evaluation scale for staff from Derby University

‘I will ask my patients everyday… ‘what matters to you’…’
‘For all of my patients, every time, I care enough… to communicate effectively’

‘I will measure this by providing safe transitions in partnership with patients’

‘I will ensure my communication facilitates safe clinical care’

Checklist compliance (WHO) Human factors

Reliable observations

Estimated Date of Discharge

Complaints
Action Area 3: Delivering high quality care and measuring impact

- Incorporate values of compassionate care into NICE guidelines and other key indicators used to measure quality of care
- Identify metrics and indicators reflecting compassion and effective care
- Publish “High Quality Care Metrics for Nursing” by the National Nursing Research Unit
- Develop the Safety Thermometer in mental health, learning disability, children and young people
- Publish information to identify the quality of care and inform patients
- Use measures of care to help us learn, improve and highlight the positive impact on the people we care for
- Ensure measurement and data collection is effective and simple
- Enable staff to gain knowledge and skills to interpret data
- Boards publish and discuss quality metrics and outcomes at each Board meeting
Care: national measures

‘I measure this by reviewing the safety of my patients’

MRSA  C.Difficile  MSSA

NHS Safety Thermometer

Pressure ulcers

Mortality

Falls

Catheters and UTIs

‘Harm free’ care
Action Area 4: Building and strengthening leadership

- Develop a set of tools that enable organisations to measure their culture
- Implement and embed the Leadership Qualities Framework for adult social care
- Establish a forum for Directors of Nursing from all care and support settings to provide a means of co-ordinating the leadership of nursing and care professions
- Put ourselves in our patients' shoes and ensure our actions are always in their best interests
- Organisations will review their culture, based on the views of patients and staff and will publish the results
- Implement a new leadership programme for ward managers, team leaders and nursing directors based on values and behaviours of the 6Cs
- Organisations evaluate options to introduce ward/unit managers and team leaders, with supervisory status and responsibility, into their staffing structure
Competence: national measures

‘For myself and my profession, I care enough… to improve my competence’
‘Learning something new everyday and sharing it’
Action Area 5: Ensuring we have the right staff, with the right skills, in the right place

- Develop evidence-based staffing levels for mental health, community, learning disability services and care and support
- Embed the 6Cs in all nursing and midwifery university education and training
- Establish effective recruitment, induction and training of support workers based on the 6Cs
- Ensure each patient is allocated to a named key nurse or midwife responsible for co-ordinating their care
- Incorporate values and behaviours of Compassion in Practice into recruitment and appraisal systems
- Providers to review Supervisory status for ward managers and team leaders
- Deploy staff effectively and efficiently; identify the impact this has on quality of care and the experience of people in our care
- Boards sign off and publish evidence-based staffing levels at least every 6 months, linked to quality of care and patient experience
Courage: national measures

Incident reporting

Chart 1: Incidents reported from Oct 2003 - Jun 2012, and average proportion of organisations submitting per month

‘For myself and my profession, I care enough… to have the courage to speak out’

‘Reporting when things go wrong and taking action’

Transparency audit

Data available

Pledge to make a difference by doing your part to eliminate pressure ulcers

#notonmywatch
A guide to nursing, midwifery and care staffing capacity and capability

Action Area 6: Supporting Positive Staff Experience

- Strengthen delivery of the NHS Constitution Pledges to Staff
- Commit to working with local employers to improve experience in the workplace
- Establish a national scheme to recognise excellence in the implementation of the 6Cs
- Plan to support care staff in the workplace
- Demonstrate the link between positive staff experience and the standard of care experienced by patients
- Collect, share and further review evidence based good practice for clinical placements of students, preceptorship and supervision
- Strengthen staff awareness and practice of escalating clinical concerns appropriately
- Review the image of nursing work and develop actions to raise the profile of nursing
- Ensure contracts with local care providers include a requirement for delivering high quality appraisals for staff
Culture devours strategy…

6Cs Live! Communication Hub

- Introduction to 6Cs Live!
- Make your 6Cs Live! Pledge
- Become 6Cs Live! Champion and join the 6Cs Live! online Network
October 6Cs Live!
Story of the Month

The Day Therapy Unit team at St Catherine’s Hospice in Preston
You Can Change the World

http://www.youtube.com/watch?v=UjmGHtcat6I