



Our shared vision for continuous improvement, providing safe, effective and high-quality care for all our service users.



**Excellence in care**



**Workforce**



**Culture and organisation structure**



**Education**




**Communication**



**Research and innovation**





A portrait of Professor David Loughton CBE, a middle-aged man with short grey hair and glasses, wearing a dark suit, light blue shirt, and patterned tie. He is standing in a brightly lit hospital corridor with windows on the right and a door on the left.

## A message from Professor David Loughton CBE Group Chief Executive

Nursing, Midwifery, Allied Health Professional (AHP) and Health Visitor participation and leadership is fundamental to the success of our new and collaborative Integrated Care Services (ICS). This new two-year plan, combined for The Royal Wolverhampton NHS Trust (RWT) and Walsall Healthcare NHS Trust, demonstrates what good planning looks like...

Clear measurable goals with the focus on quality and the patient experience.

**I look forward to seeing the outputs each quarter.**



## Professor Ann-Marie Cannaby

Group Chief Nurse

Each iteration of the framework gets better. With this version, we have changed the name to Quality Framework (QF). It includes an overall milestone plan and five individual plans reflecting the goals of each service area. We have built this plan with input from all levels of the organisation through a series of listening events, surveys and development days. Nurses, Midwives, Health Visitors, and AHPs contributed. I am impressed with the quality of the ideas and aspirations that this plan represents. I am looking forward to seeing the impact on patient care.



## **Lisa Carroll**

Director of Nursing (Walsall Healthcare)

The process of developing this plan included bringing ideas from both organisations together. We can see the common aspirations and some divergence reflecting local priorities for improvement. This is an important step forward as we are finding ways to identify and share best practice across our patch.



## **Debra Hickman**

Director of Nursing (RWT)

Like many large hospital systems, we have regular external reviews, and opportunities for peer review. It is good to see the learning from these reviews reflected in the milestone plan. The plan reflects a commitment to professionalism and a commitment to quality from our Nurses, Midwives, Health Visitors and AHPs.



## **Tracy Palmer**

Director of Midwifery (RWT)

For the midwifery teams, this new format with a midwifery specific milestone plan is just what we require to ensure our focus remains on the priorities for our service. It pulls together important work streams over the next two years, as together we strive to achieve these milestones and measure our progress.



## **Dr. Rosalind Leslie**

Chief Allied Health Professional (RWT)

We have developed an AHPs milestone plan with this version of the Quality Framework, to reflect local and national drivers. And we have focused on stronger integration with our Nursing and Midwifery colleagues as we look for ways to improve our collective research capabilities across the organisations. We are seeing growth in research priorities with each new milestone plan.



## **Jo Wright**

Head of Midwifery, Gynaecology and Sexual Health (Walsall Healthcare)

The Quality Framework sets out clear goals specifically aligned to national maternity strategy that sits within the local context for the community we serve.



## Excellence in care

**Our vision is to deliver exceptional care together to improve the health and wellbeing of our communities. Excelling in the delivery of care is central to everything we do within our organisations. The quality of care we provide continues to be underpinned by best practice that is evidence based and innovative with measurable outcomes.**

### **The QF will continue to:**

- Demonstrate the patient/child and family is at the heart of all we do. Our services are developed and improved through their involvement and co-production of services.
- Learn from the population we serve and our staff, through listening to their experiences of using and providing services across our organisations.
- Prioritise areas of practice we want to improve that are aligned with evidence from research and quality improvement methodologies.
- Utilise results of external reviews of our services or national reports to drive continuous learning and improvement.
- Encourage a culture of 'knowing how we are doing' in relation to key performance indicators with data being easily accessible.

### **We will also:**

- Introduce a clinical accreditation programme using a framework for comprehensive assessment for inpatient adult and paediatric wards and at the same time, driving excellence by going back to basics.
- Promote innovation through digitalisation where possible. Reduce duplication of documentation.
- Promote standardisation of practice between community and acute services, to improve care and reduce waste.
- Promote self-care in the community and acute setting.
- Promote excellence in maternity/neonatal care by implementing the Ockenden, Saving Babies Lives and other external best practice recommendations.

## Excellence in care pillar

<b>Nursing documentation</b>	<ul style="list-style-type: none"> <li>• Launch a Shared Decision-Making Council</li> </ul>
<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>• Develop a clinical accreditation model</li> <li>• Launch a Shared Decision-Making Council</li> <li>• Establish a Clinical Accreditation Board</li> </ul>
<b>Medication safety</b>	<ul style="list-style-type: none"> <li>• Launch a Shared Decision-Making Council</li> </ul>
<b>(A,P,M) Deteriorating patients (DP)</b>	<ul style="list-style-type: none"> <li>• Improve data validation for patient observations and sepsis</li> <li>• Joint Trust Quality Safety Enabling Strategy (JTQSES) launched</li> </ul>
<b>(A,C, AHP) Eat, Drink, Dress, Move to Improve</b>	<ul style="list-style-type: none"> <li>• Launch a Shared Decision-Making Council with patient members across acute and community services</li> <li>• Agree metrics for patient de-conditioning avoidance</li> </ul>
<b>Standardisation of protocols and devices</b>	<ul style="list-style-type: none"> <li>• Launch a Shared Decision-Making Council across acute and community with patient membership</li> </ul>
<b>Tissue viability</b>	<ul style="list-style-type: none"> <li>• Launch a Tissue Viability Shared Decision-Making Council</li> <li>• Launch the Wound Prevention and Healing Ambition Plan</li> <li>• Wound Care Policy and treatment guidance approved</li> </ul>
<b>(A) Emergency Department (ED) and wider urgent and emergency care (UEC) and patient flow</b>	<ul style="list-style-type: none"> <li>• New ED opened (Walsall Healthcare)</li> <li>• UEC and Patient Flow component of Joint Trust Quality Safety Enabling Strategy (JTQSES) actions and success measures launched</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>• Project scope defined with Nursing/AHPs local requirements</li> <li>• Recruit Testing Experts within Nursing and AHP staff</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>• Clinical narrative planning commenced Documentation Shared Decision Making Council prioritise 'Digital ready' documents and pathways</li> </ul>
<b>(M) Baby Friendly Initiative</b>	<ul style="list-style-type: none"> <li>• Review baseline data for three areas; skin to skin contact, breast feeding, bottle feeding</li> </ul>
<b>(M) Fetal monitoring</b>	<ul style="list-style-type: none"> <li>• Improve compliance with hourly Fresh Eyes assessments for antenatal and intrapartum CTGs</li> </ul>
<b>(M) Saving Babies Lives Care Bundles</b>	<ul style="list-style-type: none"> <li>• Audit and create improvement plan for six elements of care (RWT)</li> </ul>
<b>(M) Implementation of Badgernet - England wide Single Pregnancy Record (SPR)</b>	<ul style="list-style-type: none"> <li>• Badgernet Single Pregnancy Record implemented</li> </ul>
<b>(P) Patient flow</b>	<ul style="list-style-type: none"> <li>• Publish a patient flow map to help families understand patient journey</li> </ul>
<b>(C) Self management for patients</b>	<ul style="list-style-type: none"> <li>• Launch a Shared Decision Making Council with patient membership established</li> </ul>
<b>(C) Escalation protocols</b>	<ul style="list-style-type: none"> <li>• Review and update pathway following assessment of developmentally delayed children</li> </ul>

Q1

Q2

<b>Nursing documentation</b>	<ul style="list-style-type: none"> <li>• Integrated Care Pathways (ICP) and same day care documentation revision</li> </ul>
<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>• Accreditation model approved and communicated</li> </ul>
<b>Medication safety</b>	<ul style="list-style-type: none"> <li>• Nursing and midwifery medication audits and competencies reviewed and relaunched</li> </ul>
<b>(A,P,M) Deteriorating patients (DP)</b>	<ul style="list-style-type: none"> <li>• Share the (DP) dashboard across both Trusts with the view of adopting at Walsall Healthcare</li> </ul>
<b>(A,C, AHP) Eat, Drink, Dress, Move to improve</b>	<ul style="list-style-type: none"> <li>• Pilot community team (RWT) Pilot one ward and community team (Walsall Healthcare)</li> </ul>
<b>Tissue viability</b>	<ul style="list-style-type: none"> <li>• Launch formulary for wound care products and Wound Buddy App</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>• Recruit digital nurses and AHPs</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>• Review patient status at a glance boards</li> <li>• Develop clinical communication plan for new software rollout</li> </ul>
<b>(M) Baby Friendly Initiative</b>	<ul style="list-style-type: none"> <li>• Action plan developed and implemented</li> <li>• 20% improvement rate until 80% national target is reached</li> </ul>
<b>(M) Fetal monitoring</b>	<ul style="list-style-type: none"> <li>• 95% compliance reached</li> </ul>
<b>(P) Patient flow</b>	<ul style="list-style-type: none"> <li>• Implement "what's important to me" boards at each bedside</li> </ul>
<b>(P) Mental health</b>	<ul style="list-style-type: none"> <li>• Engagement with stakeholders for the development of Joint Children and Young People (CYP) and mental health strategy</li> </ul>
<b>(C) Self management for patients</b>	<ul style="list-style-type: none"> <li>• Develop Standard Operating Procedure (SOP) for anticoagulation therapy. Develop staff and patient education plan for rollout</li> </ul>
<b>(C) Use digital platform to drive improvements</b>	<ul style="list-style-type: none"> <li>• Revise digital referral form</li> </ul>
<b>(C) Escalation protocols</b>	<ul style="list-style-type: none"> <li>• Monitor compliance to pathway and make improvements as needed</li> </ul>

<b>Nursing documentation</b>	<ul style="list-style-type: none"> <li>• Emergency care pathway documentation revision</li> </ul>
<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>• Commence clinical accreditation visits – two wards per week (one at each Trust)</li> <li>• Commence planning for implementing clinical accreditation in emergency portal areas</li> </ul>
<b>Medication safety</b>	<ul style="list-style-type: none"> <li>• 50% improvement in medication standards compliance within Nursing and Midwifery</li> </ul>
<b>(A,C, AHP) Eat, Drink, Dress, Move to Improve</b>	<ul style="list-style-type: none"> <li>• Roll out to 50% of inpatient wards at both Trusts</li> </ul>
<b>Standardisation of protocols and devices</b>	<ul style="list-style-type: none"> <li>• Define integrated protocols, devices and procedures across community and acute services, with inclusion of IPC standards</li> </ul>
<b>Tissue Viability</b>	<ul style="list-style-type: none"> <li>• Pilot and implement electronic wound care product prescription ordering system for the acute setting</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>• Set up working groups to support the rollout</li> </ul>
<b>(P) Patient flow</b>	<ul style="list-style-type: none"> <li>• Evaluate need for flow coordinators</li> </ul>
<b>(C) Use digital platform to drive improvements</b>	<ul style="list-style-type: none"> <li>• Develop patient digital literacy assessment as part of initial assessment</li> </ul>

Q3

Q4

<b>Nursing Documentation</b>	<ul style="list-style-type: none"> <li>• Elective care pathway documentation revision</li> </ul>
<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>• Roll out to all inpatient wards and Emergency Portals at both Trusts (approx. 51 in total)</li> <li>• Commence planning for implementing clinical accreditation in specialist areas</li> </ul>
<b>(A,P,M) Deteriorating patients (DP)</b>	<ul style="list-style-type: none"> <li>• Achieve patient observations on time target of 80%</li> <li>• DP milestones within the joint Trust Quality and Safety Enabling Strategy achieved</li> </ul>
<b>Standardisation of protocols and devices</b>	<ul style="list-style-type: none"> <li>• Standardise urinary catheters</li> </ul>
<b>Tissue viability</b>	<ul style="list-style-type: none"> <li>• Shared Decision Making Council (SDMC) reviewed and education resources updated</li> <li>• Milestones within the Wound Prevention and Healing Ambition plan achieved</li> </ul>
<b>(A) Emergency Department (ED) and wider urgent and emergency care (UEC) and patient flow</b>	<ul style="list-style-type: none"> <li>• Achieve upper quartile against PLACE audit standards</li> <li>• UEC and Patient Flow milestones from Joint Trust Quality Safety Enabling Strategy (JTQSES) achieved</li> <li>• 4% increase in nursing staff satisfaction</li> <li>• 30% reduction of negative comments from national patient experience survey for emergency care</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>• Go Live with clinical narrative software</li> </ul>
<b>(M) Fetal monitoring</b>	<ul style="list-style-type: none"> <li>• Maintain 95% compliance</li> </ul>
<b>(M) Saving Babies Lives Care Bundles</b>	<ul style="list-style-type: none"> <li>• 95% compliance with CO2 monitoring at 36 weeks</li> </ul>
<b>(P) Mental health</b>	<ul style="list-style-type: none"> <li>• Joint CYP and mental health strategy launched</li> </ul>
<b>(C) Self management for patients</b>	<ul style="list-style-type: none"> <li>• Develop SOP for self management of diabetes</li> <li>• Develop staff and patient education plan for rollout</li> </ul>
<b>(C) Escalation protocols</b>	<ul style="list-style-type: none"> <li>• Identify second escalation pathway to review and update</li> </ul>

# Excellence in care pillar

<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>Accreditation completed for 15 inpatients wards/emergency portals</li> </ul>
<b>(A,P,M) Deteriorating patients (DP)</b>	<ul style="list-style-type: none"> <li>Evidence of DP dashboard utilised by both Trusts</li> </ul>
<b>(A,C, AHP) Eat, Drink, Dress, Move to Improve</b>	<ul style="list-style-type: none"> <li>Roll out to the remaining 50% of inpatient wards at both Trusts</li> </ul>
<b>Tissue viability</b>	<ul style="list-style-type: none"> <li>Collaborative review of foot health process completed – AHP to lead</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>Nurses and AHP super users complete training</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>Review and evaluate priorities of Shared Decision Making Council from quarter one</li> <li>Address any gaps with revised plan</li> </ul>

<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>10 more inpatient wards/emergency portals accredited</li> <li>Five specialist areas accredited</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>Documentation Shared Decision-Making Council to prioritise documents and pathways for digitalisation</li> <li>Implement clinical narrative module (digitalisation of documents)</li> </ul>



<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>15 more inpatient wards/ Emergency Portals accredited</li> <li>Launch clinical accreditation in specialist areas</li> </ul>
<b>Medication safety</b>	<ul style="list-style-type: none"> <li>50% improvement in medication standards compliance within nursing and midwifery</li> </ul>
<b>Standardisation of protocols and devices</b>	<ul style="list-style-type: none"> <li>Standardise additional devices</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>Go Live for Careflow PAS in Acute and community services supported by super users, floor walkers and trainers</li> </ul>
<b>(C) Self management for patients</b>	<ul style="list-style-type: none"> <li>Evaluate impact of self management protocols</li> </ul>
<b>(C) Escalation protocols</b>	<ul style="list-style-type: none"> <li>Identify third escalation pathway to review and update</li> </ul>

<b>Ward accreditation 'Back to Basics'</b>	<ul style="list-style-type: none"> <li>11 more inpatient wards/emergency portals accredited</li> <li>Five specialist areas accredited</li> </ul>
<b>(A,P,M) Deteriorating patients (DP)</b>	<ul style="list-style-type: none"> <li>Achieve patient observations on time target of 95%</li> <li>DP milestones within the joint Trust Quality and Safety Enabling Strategy achieved</li> </ul>
<b>Tissue viability</b>	<ul style="list-style-type: none"> <li>Milestones within the Wound Prevention and Healing Ambition plan achieved</li> </ul>
<b>(A) Emergency Department (ED) and wider urgent and emergency care (UEC) and patient flow</b>	<ul style="list-style-type: none"> <li>ED metrics:</li> <li>Evidence of Q4 2023/24 position having been sustained or further improvements made</li> <li>Milestones from Joint Trust Quality Safety Enabling Strategy (JTQSES) focusing on UEC and patient flow achieved</li> </ul>
<b>Electronic Medical Record (EMR) (RWT)</b>	<ul style="list-style-type: none"> <li>Evaluate completed EMR programme</li> </ul>
<b>EMR (Walsall Healthcare)</b>	<ul style="list-style-type: none"> <li>Evaluate completed EMR</li> </ul>
<b>(M) Fetal monitoring</b>	<ul style="list-style-type: none"> <li>Maintain 95% compliance</li> </ul>
<b>(M) Saving Babies Lives Care Bundles</b>	<ul style="list-style-type: none"> <li>Reduce smoking rates by 6%</li> <li>95% compliance with CO2 monitoring at 36 weeks</li> </ul>





## Culture and organisation structure

**Nurses, Midwives, Health Visitors and Allied Health Professionals are an integral part of multidisciplinary teams and leadership structures within the organisations. Teamwork, shared visions and goals are essential to deliver good quality and excellent care.**

### **The QF will continue to:**

- Set our organisational goals and aspirations high and align them with national and international benchmarks and standards.
- Expand the use of shared decision making structures (councils) at local levels.
- Build strategies, improvement initiatives and pathways with input from our patients and staff at all levels of the organisations.
- Ensure that the voice of the Nurse/ Midwife/AHP/Health Visitor is well represented on organisation-wide committees and groups.

### **We will also:**

- Promote opportunities to share our learning and successes across both Trusts.
- Foster opportunities to promote multidisciplinary teamwork.
- Strengthen the leadership and management capabilities for each level of leaders.



# Culture and organisation structure pillar

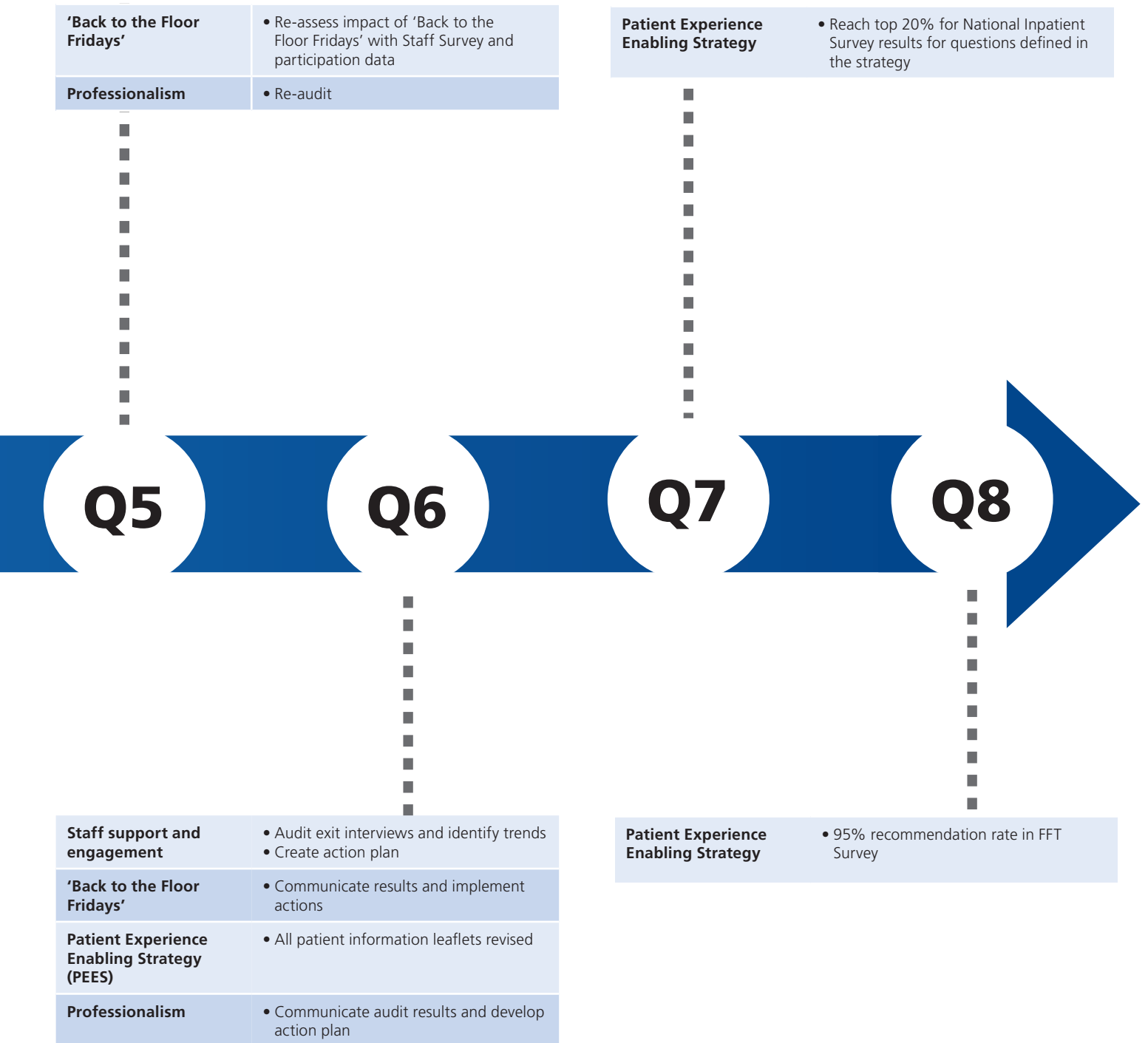
<b>Staff support and engagement</b>	<ul style="list-style-type: none"> <li>Audit line manager/newly recruited staff one-one meetings with initial objective setting taking place (IPR)</li> <li>Review feedback from Supervision Together All Year Event (STAY)</li> </ul>
<b>Voice in Digital Technology Committees for Nurses /Health Visitors/AHPs/ Midwives</b>	<ul style="list-style-type: none"> <li>Identify key stakeholders and groups that need additional representation (Baseline)</li> </ul>
<b>Back to the Floor Fridays</b>	<ul style="list-style-type: none"> <li>Assess impact of 'Back to the Floor Fridays' with Staff Survey and participation data</li> </ul>
<b>Patient Experience Enabling Strategy (PEES)</b>	<ul style="list-style-type: none"> <li>Develop Divisional based plans to implement the strategy</li> </ul>
<b>Professionalism</b>	<ul style="list-style-type: none"> <li>Audit of culture and respect using NHS England civility and respect framework</li> </ul>

<b>Staff support and engagement</b>	<ul style="list-style-type: none"> <li>Audit exit interviews and identify trends</li> </ul>
<b>Patient Experience Enabling Strategy</b>	<ul style="list-style-type: none"> <li>Open Interactive patient/carer hub (Walsall Healthcare)</li> </ul>
<b>Professionalism</b>	<ul style="list-style-type: none"> <li>Launch staff civility and respect charter</li> </ul>



<b>Staff support and engagement</b>	<ul style="list-style-type: none"> <li>Audit of newly qualified staff 30,60,90 day meetings with line manager</li> </ul>
<b>Voice in Digital Technology Committees for Nurses /Health Visitors/AHPs/ Midwives</b>	<ul style="list-style-type: none"> <li>Identify and mitigate barriers to broader representation</li> <li>Identify enabling methodologies to encourage participation</li> </ul>
<b>'Back to the Floor Fridays'</b>	<ul style="list-style-type: none"> <li>Communicate results and implement actions</li> </ul>
<b>Patient Experience Enabling Strategy</b>	<ul style="list-style-type: none"> <li>Implement local system to track actions taken from results of national patient survey</li> </ul>
<b>Professionalism</b>	<ul style="list-style-type: none"> <li>Communicate audit results and develop action plan</li> </ul>

<b>Staff support and engagement</b>	<ul style="list-style-type: none"> <li>100% of NQ staff have 30,60,90 day meeting with line manager</li> </ul>
<b>Voice in Digital Technology Committees for Nurses /Health Visitors/AHPs/ Midwives</b>	<ul style="list-style-type: none"> <li>Review committee representation and adjust as needed</li> </ul>
<b>Patient Experience Enabling Strategy</b>	<ul style="list-style-type: none"> <li>92% recommendation rate in FFT Survey</li> </ul>





## Communication

The QF will continue to be a tool to plan and measure our performance as a team through agreed objectives and milestones. Communication is key to ensure the ongoing success of the QF and to share its progress. Engagement, ownership and knowing where we are going is critical to our success.

### The QF will continue to:

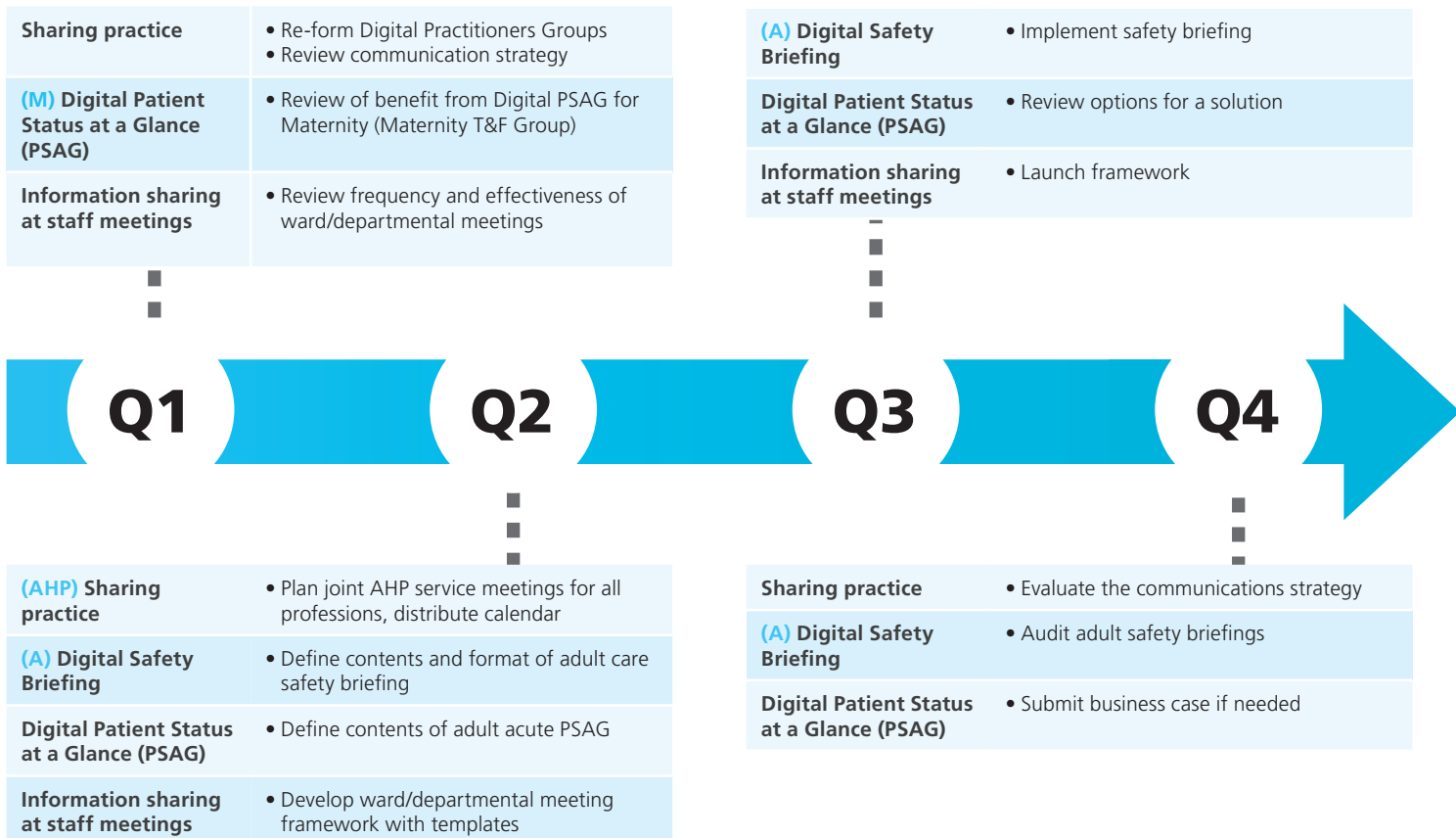
- Further develop the collaborative ways of communicating for both of our Trusts.
- Use social media, intranet web pages, global communication emails, newsletters and blogs.
- Utilise blended methods of delivery: forums, digital bite-size recordings, podcasts, debates and talks.

### We will also:

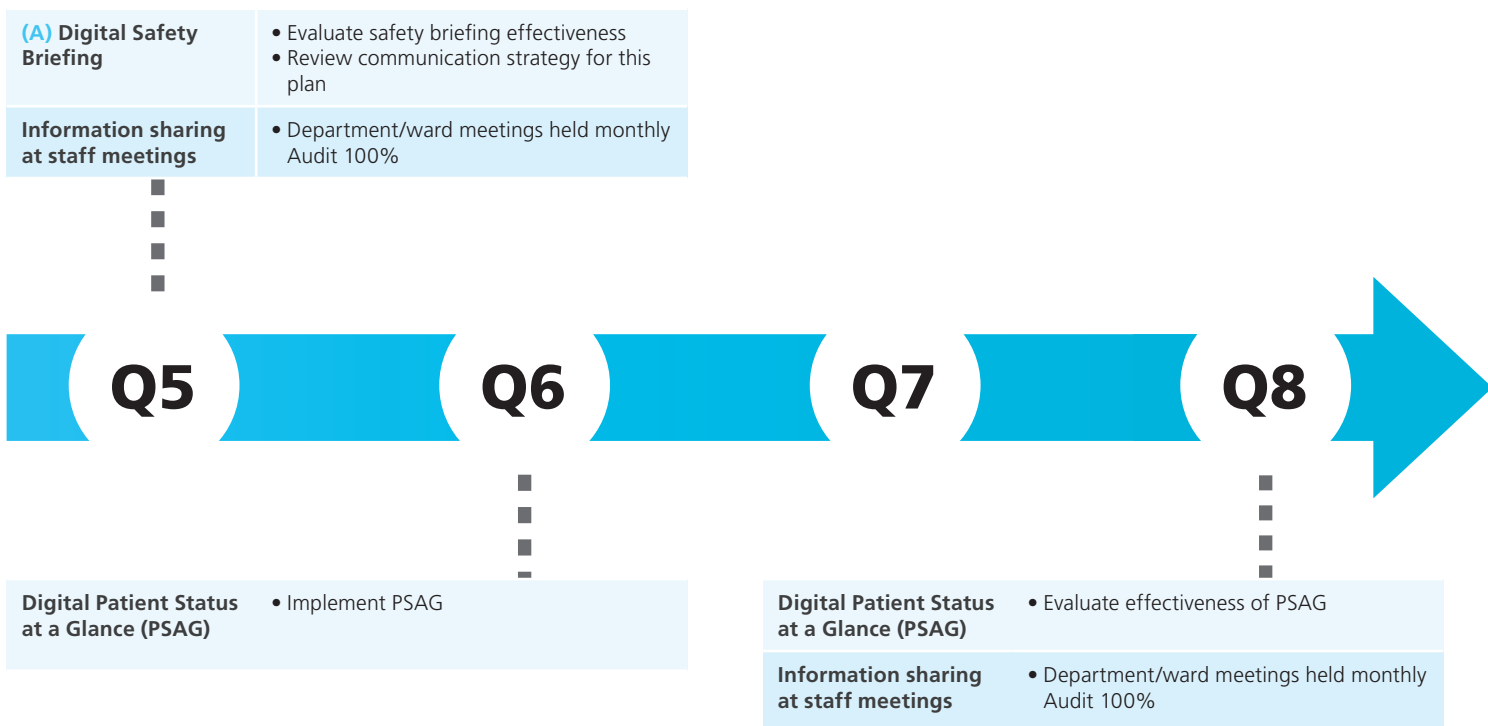
- Create and revitalise forums to share practice and solve problems (ex Digital Practitioners Groups).
- Improve internal department communication with the development of a service specific standardised digital patient safety briefing and a digital patient status at a glance.



# Communication pillar



# Year 2





## Workforce

One of the core components of a good quality service is ensuring that the right staff are in the right place at the right time. This requires constant oversight, planning and resource for development.

### The QF will continue to:

- Implement and deliver an evidenced based workforce plan which focuses on the recruitment and retention of Nursing, Midwifery, Health Visitors and AHP staff groups.
- Explore advancement opportunities for staff to benefit our evolving patient care needs.
- Encourage the culture of learning, evolving and learning from each other.

### We will also:

- Deliver a plan to improve recruitment, retention and promotion of those in under-represented groups.
- Focus on succession planning of our workforce.
- Make it easier for staff to work, and transfer between organisations and between departments by joining bank functions across the two Trusts.



# Workforce pillar

<b>Recruitment and retention</b>	<ul style="list-style-type: none"> <li>Align Walsall Healthcare and RWT Career Framework</li> <li>Develop new manager induction re: the Walsall Healthcare/RWT ways of working</li> <li>Need to add establish baseline data for interview to start date time.</li> </ul>
<b>Workforce plan</b>	<ul style="list-style-type: none"> <li><b>(C)</b> Develop Community Health Visitor and Advance Practice Plan</li> <li><b>(M)</b> Workforce plan revised to meet Ockenden and BAPM requirements</li> <li>Submit and Implement business case related recruitment</li> </ul>
<b>(AHP) Data Driven AHP Workforce Standards</b>	<ul style="list-style-type: none"> <li>Develop Speech and Language Therapy (SLT) job planning. Partner with national groups to test methodology.</li> <li>Use job planning to inform business cases.</li> </ul>
<b>Promote flexible working</b>	<ul style="list-style-type: none"> <li>Scope best practice metrics; develop metrics with HR team</li> </ul>
<b>New Roles/ Advancing Clinical Practice (ACP)</b>	<ul style="list-style-type: none"> <li>Launch the ACP and Advanced/extended Practice Roles governance framework across both sites</li> </ul>

<b>Recruitment and retention</b>	<ul style="list-style-type: none"> <li>Monitor retention rate monthly</li> <li><b>(AHP)</b> Assess work place locations for adequate work space for staff. Create action plan to correct</li> </ul>
<b>Workforce plan</b>	<ul style="list-style-type: none"> <li>Submit business case for new posts if needed</li> <li><b>(M)</b> Recruit three maternity support workers</li> <li>Secure four return to practice midwives per annum</li> </ul>
<b>(AHP) Data Driven AHP Workforce Standards</b>	<ul style="list-style-type: none"> <li>Develop Speech and Language Therapy (SLT) job planning. Partner with national groups to test methodology.</li> <li>Use job planning to inform business cases.</li> </ul>



<b>Recruitment and retention</b>	<ul style="list-style-type: none"> <li>Develop lead AHP support worker role</li> <li>Streamline new hire process for all including bank staff to reduce the time from interview to start date by 50%</li> <li>Six AHP apprentices start level 6 education</li> </ul>
<b>Workforce plan</b>	<ul style="list-style-type: none"> <li>Apply National Staffing Standards to all areas</li> <li>Identify gaps</li> </ul>
<b>Promote flexible working</b>	<ul style="list-style-type: none"> <li>Collect baseline data and develop action plan with improvement targets</li> </ul>

<b>Recruitment and retention</b>	<ul style="list-style-type: none"> <li><b>(AHP)</b> Submit capital request if needed to address work place needs.</li> <li><b>(P)</b> Secure 2 Return to practice nurses per annum</li> </ul>
<b>Workforce plan</b>	<ul style="list-style-type: none"> <li><b>(M)</b> Recruit 10 (Walsall Healthcare) and seven (RWT) international Midwives</li> <li>Increase student midwives and nurses (Walsall Healthcare) by 10% and (RWT) to 40</li> </ul>
<b>Promote flexible working</b>	<ul style="list-style-type: none"> <li>Improvement over baseline</li> </ul>
<b>New Roles/ Advancing Clinical Practice (ACP)</b>	<ul style="list-style-type: none"> <li>ACP Steering group to Evaluate ACP framework</li> </ul>

# Year 2

<b>(AHP) Data Driven AHP Workforce Standards</b>	<ul style="list-style-type: none"> <li>5% increase in international recruitment</li> <li>Develop work standard for third specialist</li> <li>Partner with national groups to test these standards</li> <li>Use standards to inform business cases</li> </ul>
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<b>Workforce plan</b>	<ul style="list-style-type: none"> <li><b>(M)</b> Recruit three Maternity Support Workers</li> <li>Secure four return to practice midwives per annum</li> </ul>
<b>(AHP) Data Driven AHP Workforce Standards</b>	<ul style="list-style-type: none"> <li>Develop work standard for fourth speciality. Partner with national groups to test these standards</li> <li>Use standards to inform business cases</li> </ul>



<b>Recruitment and retention</b>	<ul style="list-style-type: none"> <li>Two AHPs recruited through return to practice process</li> </ul>
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<b>(P) Recruitment and retention</b>	<ul style="list-style-type: none"> <li>Secure two Return to practice Nurses per annum</li> </ul>
<b>Promote flexible working</b>	<ul style="list-style-type: none"> <li>Improvement over baseline</li> </ul>



# Education

**Another core component of care is the need for education. The QF supports the continual drive to improve skill sets, develop our teams and prepare our workforce based on patient needs and requirements.**

### The QF will continue to:

- Work with our partners to increase our student numbers to invest in our future workforce and their professional development.
- Provide and tailor the staff induction package to reflect our diverse services.
- Seek, offer, develop and innovate educator roles at all levels. We will continue to embrace appropriate technologies and innovations to support our activities.
- Develop blended learning approaches to enable wider access.
- Standardise the Practice Education Facilitator (PEF) role across both Trusts.

### We will also:

- Further develop the Professional Nurse Advocate and Preceptorship roles and competencies.
- Support the need for protected education time for all levels of staff.
- Digitalise resources for students and staff.
- Develop shared paediatric competencies across both Trusts.
- Develop apprenticeship pathway with educational support for the Health Care Support Worker roles.





# Education pillar

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Publish annual education offering calendar</li> <li>Rollout generic AHP Support worker job descriptions</li> <li>Scope need for AHP dementia care modules</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Establish baseline of numbers of qualified Supervisor and Assessors for Students (S&amp;A)</li> <li>Launch TouchPoint Process for students</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>Publish annual educational offers for registered staff</li> <li>Evaluate Preceptorship pathway against national framework</li> <li>Contribute to Black Country AHP preceptorship programme</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>Scope current position in relation to national standards and expected ratio and plan recruitment to comply</li> <li>Baseline restorative clinical supervision</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Scope current education digital provision for e-pad, e-portfolio, interactive CPD offer and student data collection tool</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Develop competencies for experienced adult nurses to work in paediatric wards and maternity transitional care</li> </ul>
<b>(P, C) Induction</b>	<ul style="list-style-type: none"> <li>Tailor hospital induction programme for community and paediatric staff</li> </ul>
<b>(M) Maternity triage competencies</b>	<ul style="list-style-type: none"> <li>Embed competencies based on Birmingham Symptom-specific Obstetric Triage system (BSOTS)</li> </ul>

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Launch dementia care modules</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Launch Student Shared decision making council</li> <li>95% of AHP students attend Trust induction</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>100% of newly qualified practitioners access preceptorship and clinical skills training within first year (in line with professional requirements).</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>Achieved 75% of national ratio of PNA registrants</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Develop e-portfolio</li> <li>Pilot the preceptorship e-pad</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Evaluation of Prep for practice competency programme (P) (M Transitional care)</li> <li>Develop competencies for Enhanced Maternity care (M)</li> </ul>
<b>(P, C) Induction</b>	<ul style="list-style-type: none"> <li>Launch new induction programmes</li> </ul>



<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Report baseline attainment for numeracy and literacy NVQ and those accessing apprenticeship development pathway</li> <li>Padlet launch for AHP support workers.</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Audit Collaborative Learning in Practice (CLIP) data</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>Standardise PEF role</li> <li><b>(AHP)</b> Address gaps in AHP PEF support with business case</li> <li>PEF priorities agreed and output shared</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>Launch Communications strategy to increase awareness of role</li> <li>Recruit new PNAs</li> <li>Host local PNA conference</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Develop preceptorship e-pad</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Launch competencies</li> </ul>
<b>(M) Maternity triage competencies</b>	<ul style="list-style-type: none"> <li>50% of Delivery suite and triage staff complete competencies</li> </ul>

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Apprenticeship development pathway completed</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Develop (CLiP) into 10% of student placement areas</li> <li>S&amp;A assessors/supervisors increased by 75%.</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>10% increase in Restorative Clinical Supervision uptake in available sessions (from baseline)</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Develop interactive infographic for CPD offer</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Launch enhanced maternity care competencies</li> </ul>
<b>(M) Maternity triage competencies</b>	<ul style="list-style-type: none"> <li>95% Delivery suite and triage staff complete competencies</li> </ul>

# Education pillar

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Publish Annual Education offering calendar</li> <li>10% of support staff access apprenticeship development pathway</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Begin research project to evaluate the benefits of CLiP model for students in preparation for registration</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>Publish annual educational offers for registered staff</li> <li>Apply for preceptorship interim quality mark scheme</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Evaluate the preceptorship e-pad</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Evaluation of Prep for practice competency programme (M enhance maternity care)</li> </ul>
<b>(P, C) Induction</b>	<ul style="list-style-type: none"> <li>Evaluate new induction programmes</li> </ul>

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Dementia module completed by 100 staff</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>CLiP into 20% of student areas</li> <li>Collect data from newly qualified Nurses who have interacted with CLiP model</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>Develop online placement directories and add to website</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>Achieved over 95% of national PNA: Registrant ratio</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Launch e-portfolio</li> </ul>
<b>(P, C) Induction</b>	<ul style="list-style-type: none"> <li>Share findings</li> </ul>



<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Collect data for ongoing research from students in CLiP areas</li> <li>Evaluate touch point events in relation to attrition and recruitment</li> <li>S&amp;A to 85%</li> </ul>
<b>Post reg education support</b>	<ul style="list-style-type: none"> <li>100% of Newly qualified Practitioners access preceptorship and clinical skills training within first year (in line with professional standards).</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Develop student data collection tool</li> </ul>

<b>Health Care Support Worker (CSW) development</b>	<ul style="list-style-type: none"> <li>Staff progression to higher apprenticeship level increased by 5%</li> </ul>
<b>Pre-Registration support</b>	<ul style="list-style-type: none"> <li>Publish/share research findings</li> <li>95% compliance with S&amp;A</li> <li>100% AHP students attend Trust induction</li> </ul>
<b>Professional Nurse Advocate (PNA) role</b>	<ul style="list-style-type: none"> <li>15% increase in restorative clinical supervision sessions (from baseline)</li> </ul>
<b>Digitalisation of resources</b>	<ul style="list-style-type: none"> <li>Evaluation of e-pad, e-portfolio, interactive CPD offer and student data collection tool</li> </ul>
<b>(P, M) Prep for Practice Competencies</b>	<ul style="list-style-type: none"> <li>Evaluate programmes and publish</li> </ul>



## Research and Innovation

**Continual improvement requires that our care is underpinned by evidence, trustworthy research and validated best practices.**

### The QF will continue to:

- Enable further development of a research culture across both Trusts which is embedded within clinical practice and teams.
- Encourage, enable and communicate about research outputs and achievements.
- Invest in the latest technologies to collate, store and report activities in the form of publications, abstracts, posters presentations and seminars.
- Explore, adopt, invest, plan and communicate about digital innovation and technologies. Use evidence to support business planning and changes in practice.
- Communicate, disseminate, evaluate and change based on evidence and a clear rationale.

### We will also:

- Actively participate in the development, planning and implementation of the new Electronic Medical Record across both Trusts.



# Research and Innovation pillar

