Learning, improvement and innovation

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

What does good look like:

The trust has a systematic approach to improvement. It works to embed a quality improvement method aligned with the NHS improvement approach to support increased productivity and enable improved health outcomes for people.

Improvement capability is enabled across the trust. All teams can access in-house expertise and/or an external partner for support to improve. Staff at the trust work together across teams and services to improve services by:

- facilitating and promoting research

- using research evidence

- offering opportunities to take part in research

- implementing innovations.

Staff are actively encouraged to improve how the trust uses its resources. They can access analytical experts to support specific improvement projects to do this. There is appropriate strategy, governance, oversight, evaluation and accountability to ensure research, innovation and improvement projects are taken forward effectively. This incorporates learning from patient safety events and appropriate data protection requirements. The trust participates effectively in national improvement initiatives. Plans to improve services take into account the resources required to deliver them.

Leaders build a shared purpose and vision that provides the strategic goals for all the trust's improvement activities and alignment of improvements to individual processes. There are clear goals for research, improvement, and innovation in terms of outcomes for people who use services and staff. There is evaluation against these goals.

The trust invests in its people and culture. It gives those closest to the point of care the opportunities to develop skills. This includes through continued professional development and through leaders being role models for research, innovation and improvement. This helps to ensure quality improvement is embedded in the way all staff work. The trust has a culture of research, innovation and improvement and staff feel supported by leaders, with support and reflection if new approaches do not work. The trust invests in delivering digital transformation in line with its digital and data strategy. This empowers staff by giving them the tools, services and skills they need to do their jobs effectively.

There are plans to build capacity and capability for developing the behaviours and skills needed to facilitate and nurture research, innovation and improvement. In doing this, leaders make effective use of data and team coaching to enhance their workplace and practices. There is an active approach to finding out what has worked elsewhere and examples of ideas that have been successfully adopted. The trust uses digital tools to transform pathways, increase productivity and improve services. It works proactively to enable applications for research funding and recruitment to research trials. There are robust processes to ensure the timely adoption of proven innovation and processes to identify promising innovations that align with local health needs working with system partners.

The trust has a structured approach to quality assurance, quality management, quality improvement and quality planning, as recommended by the National Quality Board. Insights gained from responding to patient safety incidents feed into the trust's improvement efforts. The trust's patient safety incident response plan (PSIRP) demonstrates a thorough understanding of ongoing improvement work and demonstrably takes this into consideration as part of patient safety incident response planning.

People and communities, particularly those who are more likely to have poor access, experience and outcomes from care, are involved and empowered to take part in identifying clinical and care needs, research opportunities, and in developing and co-producing improvements and innovations. This aims to actively tackle and reduce health inequalities.

Further detail and context:

Quality improvement

NHS IMPACT is the single shared NHS improvement approach. It provides an aligned focus on improving access, quality and productivity through:

- a focus on building a shared purpose and vision

- building improvement capability

- developing leadership behaviours for improvement

- investing in culture and people, quality management and drivers and enablers such as co-production and digital transformation.

A National Improvement Board underpins the work of NHS Impact in driving national and system-wide improvement across the NHS. A range of [tools, resources and data from NHS England](#) supports improvement work in trusts and systems. Resources for gathering insight from safety events are available to support wider improvement work.

The term 'quality improvement' (QI) refers to 'the systematic use of methods and tools to try to continuously improve quality of care and outcomes for patients'. Lessons from the [evaluation of the NHS-Virginia Mason Institute Partnership](#) highlighted the need for visible and sustained commitment to improvement programmes from trust leaders – without this, performance gains from improvement programmes are restricted to specific care pathways and services.

Innovation

Innovation has the potential to drive transformative change in health care delivery, experience, outcomes and in reducing health inequalities. Outcomes for patients can improve by developing, identifying, evaluating and adopting innovative products (including medicines, medical technologies, diagnostics, digital and artificial intelligence innovations). This happens through preventing ill-health, earlier diagnosis, more effective treatments, and faster recovery. Furthermore, implementing highly effective and cost-effective or cost-saving innovation on a larger scale can relieve financial and workforce pressures on the NHS.

The NHS Long Term Plan highlighted research and innovation as integral to improving outcomes for patients. The joint CQC and NHS England publication '[Enabling innovation and adoption in health and social care: developing a shared view](#)' identified 6 principles for enabling innovation that any health or social care provider, including trusts and trust leaders, can commit to. It includes case studies from across different health and care settings that are intended to illustrate how these principles can be applied in practice.

Research

Organisations that actively engage in research demonstrate better patient outcomes, including for those not directly involved in research. They also have improved staff recruitment and retention. Research can provide early access to new treatments and technologies, and commercial research brings direct economic benefits for trusts. Research leads to evidence-based practice which, in turn, enables the development and implementation of local and national clinical guidelines, for example through NICE reviews and recommendations. Individual trusts adopt varying methods to implement changes in practice in response to research evidence.

Promoting, conducting and using research is explicitly mentioned in the Health and Care Act 2022 and the NHS Constitution. It is an essential component of providing high-quality care. The NHS Long Term Plan and NHS Operational Planning Guidance include commitments around research. To fulfil the rights of patients, the NHS also commits to inform patients about research studies in which they may be eligible to participate.

Having proactive healthcare knowledge and library services is vital to improve education, lifelong learning, research, the spread and adoption of innovation and evidence-based practice. These resources supply the evidence base to the NHS workforce to make decisions on treatment options, patient care and safety, service delivery and policy.

Learning from deaths

Learning from the deaths of people in their care can help trusts improve the quality of care for patients and their families and identify where they could do more.

CQC's 'Learning, candour and accountability' found some providers did not prioritise learning from deaths and so were missing valuable opportunities to identify and make improvements to care.

The National Quality Board (NQB) guidance details how NHS providers should learn from the deaths of people in their care. All healthcare providers need to have mechanisms to receive and act on intelligence and information from medical examiner offices. New methodology under the Patient Safety Incident Response Framework (PSIRF) enables organisations to take a systems approach to investigating deaths as well as a more proactive approach to risk management.

Best practice / guidance

Quality improvement resources

NHS England: NHS IMPACT

NHS England: Operational Delivery Networks

NHS England: Always Events

NHS England: Patient safety learning response toolkit

NHS England: Patient Safety Incident Response Framework

NHS England: PSIRF Oversight roles and responsibilities specification

Quality and Improvement Outcomes Framework for NHS Funded Library and Knowledge Services in England

Innovation and research resources

CQC: Enabling innovation and adoption in health and social care: Developing a shared view

NHS England: Maximising the benefits of research: Guidance for Integrated Care Systems

[NICE: Cost-saving guidance](#)

[NHS Providers: Digital Board Development Programme](#)

[National Institute for Health and Care Research: Clinical Research Network Performance](#)

[DHSC: The Future of UK Clinical Research Delivery](#)

[NHS England: Increasing Diversity in Research Participation: a good practice guide for engaging with underrepresented groups](#)

[GOV.UK (2021) Saving and Improving Lives: the Future of UK Clinical Research Delivery.](#)

Knowledge and evidence resources

[Knowledge for Healthcare strategy: Mobilising evidence; sharing knowledge; improving outcomes](#)

[Policies for NHS funded Knowledge and Library Services in England](#)

[NHS Knowledge and Library Hub](#)

[Clinical Decision Support tool](#)

[The NHS Education contract](#)

Learning from deaths resources

[CQC: Learning, candour and accountability](#): a review of the way trusts review and investigate the deaths of patients in England

[NHS England: Medical Examiner System](#)

[National Quality Board: Learning from deaths: Guidance for NHS trusts on working with bereaved families and carers](#)

Link to regulations

[Regulation 17: Good governance](#)