

Using the NHS Change Model to support the 6 C's of Nursing

Introduction

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| 6 C's of Nursing: | A vision & strategy for nursing to make a difference |
| NHS Change Model: | An approach to change |
| Energise for Excellence: | An on-line community to make it happen |

Between these 3 initiatives, there is a potentially powerful alignment.

The following slides represent initial thinking on how the NHS Change Model and the 6C's of Nursing could be aligned.

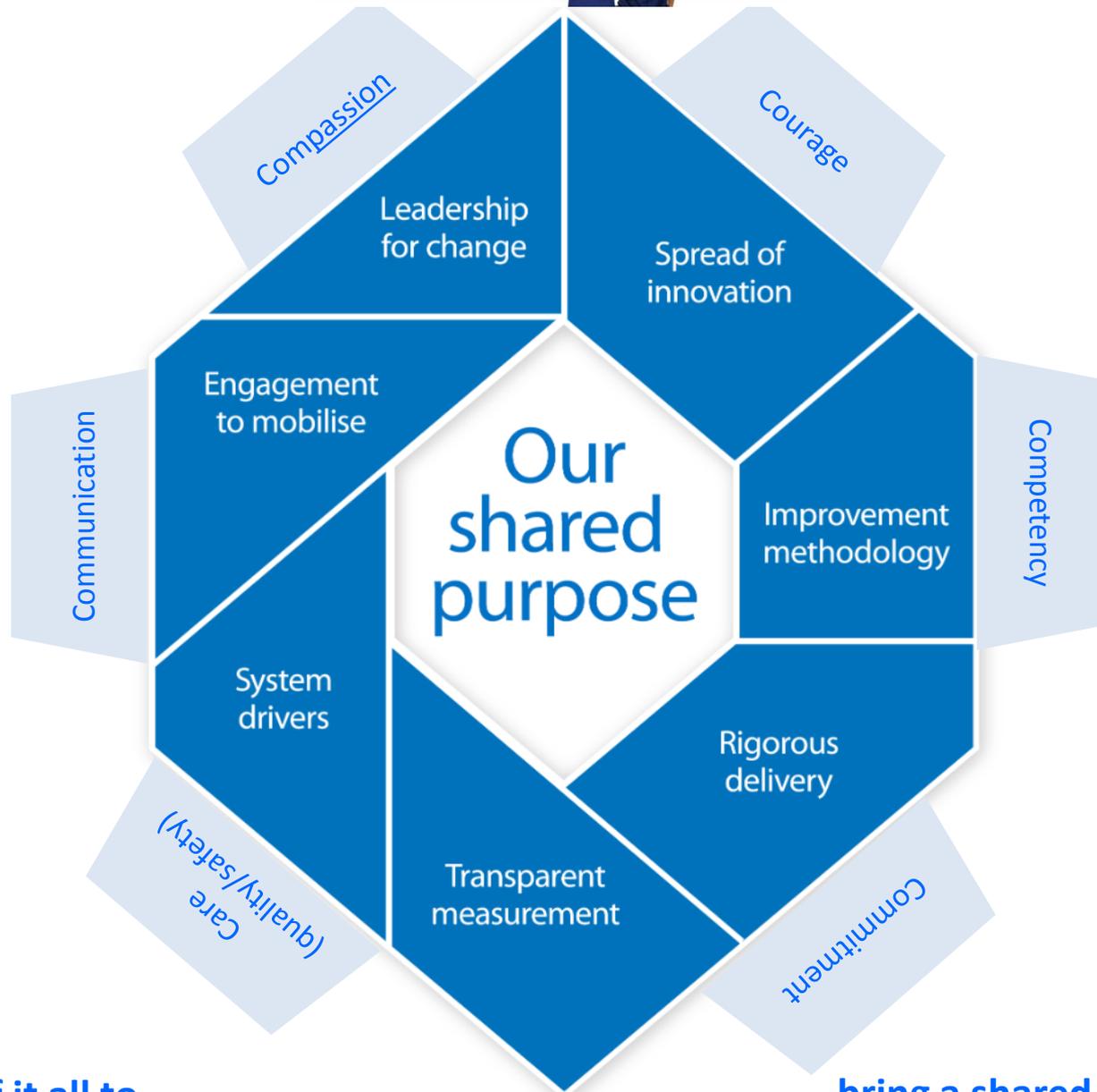
Jane Cummins, CNO
6 'C's of Nursing

Energise for
Excellence:
a call to action



NHS

NHS Change Model



Compassion

Courage

Leadership
for change

Spread of
innovation

Engagement
to mobilise

Improvement
methodology

Our
shared
purpose

System
drivers

Rigorous
delivery

Transparent
measurement

Care
(quality/safety)

Commitment

Communication

Competency

Making sense of it all to

bring a shared purpose to life



To secure clinical commitment to delivering and maintaining the best possible care we must align current system drivers and processes to quality improvement.

The NHS is facing unprecedented challenges and change. In order to deliver the best possible care to every patient, we need to manage the changes ahead, making sure that our processes and systems are aligned, this means making sure that the quality improvement intent is always clearly aligned to any change. Developing a culture of driving towards improved outcomes is what will enable and sustain change.

Throughout any change, we must ensure that ‘the best possible care’ we give is:

- Person centred
- Safe
- Evidence based (the right thing delivered at the right time)
- Documented clearly, accurately and timely

But it’s not just delivering care in the traditional sense, it’s about supporting people to take responsibility for their own health. Modern technology is changing the way people look for health information and the demands being placed upon healthcare systems, we need to help people to know where to find the right information – ‘care as an enabler’.





Leadership that role models behaviours, skills and attributes to deliver compassionate excellence

It isn't just about the care we give, but the way we give it. It's about how we listen, what we say, what we do and more importantly, how we do this.

To show compassion we need to understand the impact of what we say and do.

We need to understand the patient experience and listen to the feedback. We need to see the person in every patient. This means showing compassion in a way that is professional but yet human, respecting boundaries but not being afraid to care.

Strong leadership at every level is required. Everyone has a responsibility for the delivery of high quality, compassionate care.



To commit is to be accountable for the rigorous delivery of change and to transparent measurement and evaluation for continuous improvement

We need to commit to innovate for improvement, exploiting modern technology and tools to:

- Change the way we communicate - with each other, with our patients, their carers, the public
- Support evidence based practice and...
- Ensure contemporaneous record keeping that is clear and supports...
- The delivery of the right care to the right person at the right time (first time)

We can only improve when we understand the impact of what we do and of course, of what we don't do.

Being transparent means sharing with others and being open to feedback.

Without such commitment and accountability, we will fail to deliver sustainable improvements to healthcare delivery, health improvement and health promotion.





We need to build networks & relationships to engage and mobilise for improvement, to do this, we must communicate

Engagement relies on communication. Real communication, not just talking, but observing and hearing. Sharing ideas and evaluating them with a wide range of people, including:

- Each other
- Our leaders
- Our patients
- Carers and relatives

This is what will nurture a shared purpose and mobilise people to work together to deliver continuous and consistent quality improvement.

This is essential if we are to understand the impact of what we do and ensure we deliver truly compassionate care.

We need to do this using a wide range of communication skills and tools, we need to innovate and exploit technology to help us do this effectively and meaningfully.





To innovate and improve requires not just commitment, but the courage to challenge sceptics and overcome barriers

If we are to really commit to making changes and to quality improvement, then we need to dig deep in difficult times to:

- Do the right thing
- Speak up and challenge when things are wrong
- Challenge and influence sceptics
- Challenge and influence those in more senior positions to you
- Be open to being challenged ourselves
- Overcome barriers to make things happen
- Be unafraid of leading by example, adopting innovations and change
- Be unafraid to make suggestions
- Don't give up!





In a modern NHS, competency is not just required in the fundamentals of care, but also in quality improvement and emerging technologies

We all recognise that clinical competency means being knowledgeable and safe in all aspects of physical care delivery.

We all know that we should *document* the assessments we make and the care we give clearly, accurately and contemporaneously. We all understand the importance of this to the safe delivery of care by other care professionals involved in a person's care.

We also need to be competent in a constantly evolving range of tools that impact directly on care and/or how we *identify* and *communicate* the care that is needed or has been given.

We need to develop competency in measuring the effectiveness of what we do, developing and using evidence based practice and improvement methods in order to delivery the best possible care at the right time and in the right place.

We need to be able to deliver and measure improvements in a structured, planned and proven way, which means we need to have competency in involving our patients and the public.

For competency to be maintained and flourish, we need *confidence*. Confidence in what we are doing and in those around us. We need those we are leading to have confidence in us and we need those who delegate to us, to support and develop our confidence as we undertake new roles.

Most importantly we need our patients and the public to have confidence in us, in our confidence and competence to involve them and to deliver safe, high quality care.





Our shared purpose:

Staff who are engaged in discussions, are professionally accountable, share core values, are proud of their profession and who feel they have a rewarding and worthwhile job

Behaviour that reflects shared values in the delivery and management of care

Patients who are informed and involved in real-time monitoring and improvement as well as their own health and well-being

A healthcare system that provides for basic human needs with care and compassion, when it matters most and in the most appropriate place

Knowing the problems we need to solve, why it matters and having a clear direction towards something we see as worthwhile

Feeling part of a team and valued for our contribution.