

Our Quality Promise 2024-2029





Our Foundations for Quality



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1. Introduction



Our Quality Promise to you is:

'Safe, Kind and Outstanding Care for Everyone'

Our Quality Promise describes our commitment to children, young people and families. It supports the Trust's Caring Together strategy and our shared purpose of 'providing a healthier future for children and young people'.

Our Quality Promise describes what children, young people and families should expect from us – whenever and however they receive care.

We are guided by our We CARE values: Compassion, Accountability, Respect and Excellence. This is *how* we do things at Sheffield Children's.

Every one of our nearly 4000 colleagues, and those that work closely with us, whether in a patient-facing, support or corporate role, plays an important part in delivering our Quality Promise. We asked colleagues to describe what their role is in delivering our Quality Promise. Their responses are captured in this document.

We have engaged with hundreds of children, young people, families, colleagues, and partner organisations who have helped develop our Quality Promise to you. We have listened carefully to personal stories and feedback to ensure our Quality Promise feels personal to you, and really captures what matters to children, young people, and families.

This Quality Promise will guide us from 2024 to 2029. We will be on a journey of quality improvement to ensure we consistently deliver this promise. We will review its content in 2029 and refresh our Quality Promise at that point.

We know that there will be times when we make mistakes and we have listened to some heart-breaking experiences from children, young people, and families. At the centre of this promise is a commitment to listen, to be open and transparent in our learning, to take action and to continuously improve.

We know that we can only deliver our Quality Promise through a culture where everyone feels safe and with a workforce that represents the rich diversity of the populations we serve. Our People and Culture work is therefore essential to our Quality Promise.

Thank you to everyone who shared their experiences to guide the development of our Quality Promise. We look forward to working together with patients, families, colleagues, and all stakeholders to actively seek feedback on how we are doing in our promise to be safe, kind and outstanding to all.

Ruth Brown
Chief Executive Officer
Sheffield Children's NHS Foundation Trust

2. Our approach

Our Quality Promise sets out what children, young people and families should expect whenever and however they receive care. This document describes the actions to deliver our Quality Promise.

Throughout our engagement we asked children, young people, and colleagues what good or poor quality meant to them when they, or their loved ones, had received care. The answers were wide-ranging and personal.

Many families described the kindness, compassion and shared purpose of our people, and the trust they have in us at moments of great challenge and vulnerability. We also heard feedback from families, colleagues and partners about areas where we need to improve.

We also looked at how 'quality' is defined nationally and internationally and what outstanding quality looks like:

The NHS National Quality Board defines quality as "high-quality person-centred care for all, now and into the future" (2021). It describes quality care as that which is safe, effective, delivers a positive experience and is well led, sustainably resourced and equitable.

The World Health Organisation defines quality as care which is effective, safe and person centred, timely, equitable, integrated, and efficient.

The Institute for Healthcare Improvement describes six dimensions of quality: safe, effective, timely, patient centred, efficient and equitable.

All these dimensions were reflected in what we heard from people's experiences. However, they were described in more personal terms, with people expressing what mattered to them. We used this language to develop our Quality Promise.

We then reviewed our complaints, incidents, feedback, data, system-wide engagements and reports to define where we are now in terms of quality and how we can improve. All of this has informed the detail of our promise.

We wanted our Quality Promise to capture the personal, whilst reflecting the evidence base, and be simple and accessible to all. Hence, our Quality Promise is:

'Safe, Kind and Outstanding Care for Everyone'

The national evidence base and themes from our engagement are summarised in the Appendix.

3. Our context

Our Quality Promise is launching in 2023-24, at a challenging time. 328,000 children and young people live in South Yorkshire and – even prior to the Covid-19 pandemic – we had some of the highest deprivation rates, health inequalities and worst health outcomes in the country.

Covid-19 has worsened this and driven up waiting lists for children across our services. We know the cost-of-living crisis is compounding the problem for our families, alongside a challenging financial context for the NHS over coming years. The national workforce challenges are also stark: vacancies in the NHS and Social Care stand at more than 10%.

The Health and Social Care Act 2022 has redrawn relationships between NHS organisations and their partners, at local, regional and national level, meaning partnership working is more important than ever. All these pressures shape the environment in which our Quality Promise must be delivered.

At Sheffield Children’s, we launched our five-year Clinical Strategy in 2022, one of our three ‘guiding strategies’, along with our People Plan and our Quality Promise. Together these three strategies deliver the shared purpose of our organisational strategy, Caring Together:

‘Providing a healthier future for children and young people’

Caring Together has three aims which deliver that purpose:

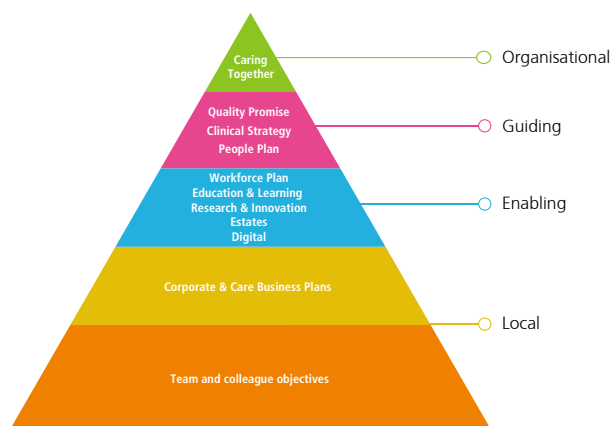
1. Outstanding Patient Care
2. Brilliant Place to Work
3. Leader in Children’s Health

Our We CARE values are Compassion, Accountability, Respect and Excellence. This is *how* we do things at Sheffield Children’s.

The diagram in the next column outlines how our strategies fit together to deliver Caring Together:

At **city level** in Sheffield *A Great Start in Life (2019-2022)* provides the partnership strategy for children and young people. Alongside our health and care partners, our collaboration with the voluntary, education, community and faith sectors is more important than ever, to support healthier lives and to capitalise on the trusted relationships they have with local communities.

The **South Yorkshire Integrated Care Partnership**



published its strategy in March 2023. One of four key outcomes is ‘Best start in life for Children and Young People’. We will increasingly be working in partnership to improve quality, guided by the following principles:

- Continuous quality improvement
- Voice and involvement
- Development of shared standards to define high-quality care and outcomes
- Embedding system-wide quality management arrangements to reduce risk
- Reducing health inequalities and minimising variation in care
- Standardised approach to measuring quality and safety
- Celebrating and sharing learning and good practice
- Adopting innovation, embedding research, and monitoring care and outcomes

Our partnerships in South Yorkshire include the Children and Young People’s Alliance; the Acute Federation; the Mental Health, Learning Disability and Autism Provider Collaborative; Primary Care Networks and GP Federations; alongside well-established Operational Delivery Networks.

At **national level** the Children’s Hospital Alliance (CHA) brings together specialist and large children’s hospitals across the UK. The CHA uses its voice as a group of expert children’s providers, collaborating:

- to learn from each other and innovate
- to lead on service transformation and elective recovery, tackling health inequalities
- to advocate for children and young people

We need to work with children, young people, families and communities alongside all our partners, to help to deliver ‘a healthier future for children and young people’.





ALL I NEED IN LIFE



FOOD



SLEEP



WIFI

4. Where are we now?

What we do well

- We are currently rated as 'Good' overall by the CQC, with areas of outstanding practice (November 2019).
- 93% of our families have described their experience as either 'good' or 'very good' Our friendliness, approachability, and compassion are specifically praised. (Friends and Family Test, 2020-23).
- Overall, our colleagues feel safe to raise their concerns, and that our Trust is responsive to concerns raised by children, young people, and families.
- We have the second-highest colleague engagement score within the North East and Yorkshire region (NHS Staff Survey, 2022).
- We use benchmarking tools such as Get It Right First Time (GIRFT) to compare our care and continuously improve.
- We have a thriving Youth Forum that uses their voices and lived experiences to inform how we provide care, and we work closely with CHILYPEP and our community to improve our care.
- We are an influential voice in city, system, regional and national partnership bodies, amplifying the voices of children and young people to ensure the best possible experiences and outcomes.



"Fantastic care, both on the medical and human side"
Friends and Family Feedback

"We have an open and honest culture around safety, and people speak up"
Colleague



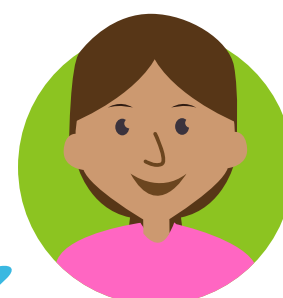
Where we can improve:

- We need to ensure that safeguarding is everybody's business, and empower and inform all colleagues so they can ensure the welfare of children and young people.
- We can further strengthen our systems and processes to ensure safe, effective, and responsive care provision.
- We can develop our approaches to learning, collaboration, and reflection to continuously improve the quality of care we provide across the organisation.
- We identify a particular need to work in partnership with children, young people, and families with additional needs to truly personalise their care.
- We can do more to listen to, involve and value the contributions and experiences of children, young people, families and communities.



"It's important that the needs of my child and family are understood - ask 'how can I help, and take time to explain what has been treated or assessed'" parent and member of the Sheffield Down Syndrome Support Group

"Sometimes I feel that the flow of communication from the hospital is too one way"
representative from ISRAAC community group



5. Our Quality Promise



Safe care

Our promise:

"You can trust us to keep you safe"

What people said:



"I feel safe here and listened to"

Child or young person

"Safety is knowing the professionals you are dealing with have read the notes"

Parent or carer

"Safety is complete trust in those delivering care"

Colleague

What we will do:

1. We will **listen and learn** from our children, young people, parents and carers. We will work in partnership with them, understand and act on their needs, and work with them to deliver safe care.
2. We will **deliver safe care everywhere** – in people's homes, in the community and on our hospital sites. We will have:
 - The right levels of staffing, with the right skills
 - High levels of cleanliness and hygiene
 - Equipment that always works well
 - Up-to-date clinical guidelines
 - Accurate and timely clinical record keeping
 - Digital tools to keep you safe
 - Safe and proper use of medicines
3. We will learn lessons from outstanding care, and when things could have been better. A first step is implementing the national **Patient Safety Incident Response Framework**.
4. We will protect all children, young people and adults through refreshing our **safeguarding** arrangements.
5. Our care will meet all **legislative requirements** and our colleagues will be trained in their legal responsibilities.

Kind care

Our promise:

"Kindness is at the centre of everything we do. We will focus on what matters to you"

What people said:



"It can be really exhausting sometimes getting professionals to understand what I am saying and how I am feeling"

Child or young person

"Staff are lovely, caring and kind"

Parent or carer

*"We deliver care with **the child at the centre**, we have caring staff, we listen to children"*

Colleague

What we will do:

1. We will ask 'What matters to you?' to make sure we **personalise** care for children, young people and families and **make decisions** in partnership with you.
2. We will extend our use of **hospital passports** for people with learning disabilities or complex needs. These tell us about your healthcare, how you like to communicate and how to make things easier for you to receive care.
3. We will be **kind and compassionate**. We will do everything we can to put your needs first and learn from your experience.
4. We will **reduce the barriers** in accessing care for children and families who experience health inequalities to ensure the best outcomes.
5. We will **communicate well** with you, making sure that all our colleagues are able to develop **good verbal and written communication skills**. We will make sure our communication is timely, accessible and provides you with the right information to support your care.

Outstanding care

Our promise:

"We will deliver outstanding care, treatment and support to achieve best outcomes for all"

What people said:



"Sometimes I feel like being health literate is essential for getting things to work. It's not fair for people to have to be competent in medical terms to get the best care for them"

Child or young person

"Being moved from the neuro ward to the surgical ward caused unnecessary discomfort due to sensory issues with lights and noise"

Parent or carer

"Good quality is about delivering outcomes that are measured, benchmarked and improving"

Colleague

What we will do:

1. We promise to deliver outstanding care that:
 - Uses the **best available evidence** and standards.
 - Delivers the **best outcomes** for all children and young people from all communities and those with complex needs.
 - Is supported by **education and training** for our colleagues, wider communities, children and young people and their families.
2. We will ensure colleagues have access to **accurate, timely, reliable information about their services**.
3. We will answer families' **questions and complaints** quickly and honestly.
4. We will work to ensure parity of access, outcomes, and experience, with a particular focus on groups **who experience health inequalities or are at risk of receiving fragmented care**.
5. We will deliver the highest standard of **play, education, the environment and green spaces** to support wellbeing and recovery of our patients and families.
6. We know that outstanding care is underpinned by **outstanding systems, facilities and corporate services**. Our corporate colleagues are central to the delivery of our Quality Promise.

Edward and Megan

In 2021, when he was just 11 months old, Edward became one of the first patients in the UK to receive the potentially life-saving gene therapy, Zolgensma, at Sheffield Children's.

Now nearly three, Edward is "doing amazingly well," said his mum, Megan. "He's at nursery. He can talk fluently, he's learning to walk, he sits unaided, eats everything. He's sweet, kind, and funny; he's literally the perfect kid."

Passing all of these milestones originally looked unlikely for Edward before he received treatment, as he has Type One Spinal Muscular Atrophy (SMA). This is a rare and often fatal genetic disease that causes paralysis, muscle weakness and progressive loss of movement.

Megan said: "He was diagnosed at 11 weeks old and by that time he had lost nearly all his movement and was like a rag doll. Learning about SMA doesn't make for good reading, and we were told the prognosis was that he wouldn't live very long."

In 2021 Sheffield Children's Hospital was selected as one of only four sites in the UK to provide Zolgensma, which can prevent paralysis and prolong the lives of children with SMA. The Trust has been at the forefront of treating children with SMA since 2017 and was recognised as a national Neuromuscular Centre of Excellence by Muscular Dystrophy UK in 2019 due to its commitment to diagnostic and medical excellence and research.

For Megan, the opportunity for Edward to receive this treatment was a lifeline.

She said: "Although Edward was receiving Spinraza (another drug used for the treatment of SMA), he had no energy – you could see the effect wear off between doses like he was running out of battery. We had seen some of the amazing results from Zolgensma in the US and it was a light for us in the following ten months because the wait was painstaking, and we needed to be in isolation.

"When we got the call from Sheffield Children's and made the trek up it was surreal. It was like I got my baby back – a week later he was babbling, putting his feet in his mouth, sitting up – it was all of a sudden. And his voice! When he cried, it was like 'Where did that come from!'. He just went up, and up, and up."

Edward now has physiotherapy sessions closer to home in Essex. His physiotherapist has said that in the future he will be able to walk unaided, a goal which Megan thought she would never see him achieve.

"We are so grateful for the care we've received – this one-time infusion of Zolgensma is a drug which has given Edward his future," said Megan. "The nurses treated us like family – it wasn't just a job to them. We had to leave each night and I had to trust them to look after Edward with my whole heart, and I did.

"All successful things start with an idea, and, especially in medicine and diseases, it's incredibly important. This drug has given Edward a life."





6. Our Foundations for Quality

Our Foundations for Quality



Listen and involve

Our promise:

"We will listen to and involve our children, young people, families and wider communities more"

What people said:



"I want to be included, I want to be valued and I want to be heard"
Communities

"It's great that we have a Youth Forum who feel confident to share our lived experiences, but all communities need to feel they have safe spaces to talk about their care"
Child or young person

"Go to schools and engage with children from a young age"
Parent or carer

"We should use lived experiences from children, young people, families and colleagues"
Colleague

What we will do:

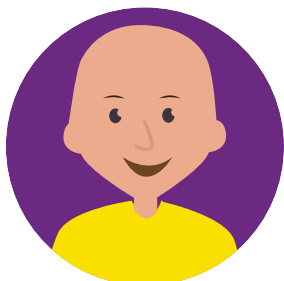
1. We will foster a **learning culture**, by developing our colleagues' cultural awareness and engagement skills. This will improve how we involve, listen and act on the voices of children, young people, and families throughout our organisation.
2. We will listen to the **different communities** we serve and develop our services together. We will link with voluntary, faith and community groups and have a focus on understanding the needs of communities that experience health inequalities.
3. We will reach out to children within **educational settings** and find out what matters to them.
4. We will develop our **Youth Forum** network to connect with a diverse range of children and young people in their own communities.
5. We will **amplify the voices** of our children and families, and will influence on their behalf at local, South Yorkshire, regional and national level.

Quality improvement

Our promise:

"We will learn and continuously improve together with CARE"

What people said:



"I worry about coming to my appointments at the hospital and at CAMHS. It makes it worse when the clinic is running late and I have to wait for a long time and I don't know what is happening"

Child or young person

"Sam finds blood tests difficult, but the sensory equipment, extra time, preparation and calm demeanour of staff really helped"

Parent or carer

"We need a consistent approach to quality improvement"

Colleague

What we will do:

1. We will promote our **quality improvement methodology** and approach so that all colleagues are engaged, trained and able to access support.
2. We will **innovate and improve** by:
 - Developing colleagues to use **quality improvement principles and tools**, with a focus on engagement, test of change, measurement and learning.
 - Supporting all teams and services to embed continuous quality improvement into their **day-to-day work**.
 - Developing the **Quality Improvement Hub** with resources, training, and a support network.
 - Developing the **skills and capacity** of colleagues to do improvement work well.
 - Increasing our understanding of **how to support people** through change to help improvement be sustained.
 - Developing more **ambassadors and clinical leaders** for quality improvement.
 - Involving **children, young people, and families** in our improvement work.
3. We will identify **opportunities for improvement** through our quality governance and use quality improvement techniques to address them. We will always be curious and look to proactively improve, from the many sources of experience, data, and feedback we hold.
4. We will connect our quality improvement with our organisational development approach to create a culture of continuous improvement. A first step will be launching our **"Improve with CARE"** framework to guide how we use our values when doing improvement work.
5. We will recognise colleagues doing **quality improvement** as part of our reward and recognition approach.

Culture for quality

Our promise:

"We will create a culture where colleagues can speak up, learn together and improve how we care for children and young people"

What people said:



"We need to make sure that we talk about how we can create physical and mental spaces where people feel safe to be vulnerable together"

Child or young person

"Treatment between two trusts – better information sharing was needed and transport was poor"

Parent or carer

"It's having the courage to be honest about things when they go wrong"

Colleague

What we will do:

1. We will foster a **learning culture**, learning from lived experience, feedback and data, continuously reflecting on, and improving, our care.
2. We will support each other to **reflect and process** emotionally challenging events through forums such as Schwartz Rounds.
3. We will implement our **In This Together Framework** to develop our culture to:

Feel safe

- We are able to talk openly and honestly about our concerns.
- We are able to ask for help when we need it.
- We ensure conversations about safety, quality and care are a priority.

Team up

- We build better relationships in and across the organisation.
- We better understand each other's roles and services.
- We reflect together and improve joint working.

Keep learning

- We share and hear more when things go well.
- We learn from our mistakes so we can continually improve.
- We take ownership for our actions.
- We try new and creative approaches to encourage others to adapt and improve.

To do this we ALL need to:

Lead collectively

- We want everyone to feel they can contribute to change.
- We want everyone to take responsibility for their behaviour. We want to use more inquiring, listening, facilitating, and enabling.

Systems and processes

Our promise:

"We will ensure our processes keep children and young people safe"

What people said:



"There needs to be a level of accountability for the hospital – patients need to be given expectations for how long they're likely to wait, and they need communication whilst they're waiting"

Child or young person

"[My clinician] was easy to talk to and gave me useful tips and information. The follow-up care has been great. She advocated for us with the GP"

Parent or carer

"I feel there is a gap around the sharing learning – has the investigation made a difference, more systematically across the organisation?"

Colleague

What we will do:

1. We will focus on listening, learning and accountability to refine systems and processes based on the experiences of **children, young people, families, and colleagues**.
2. We will **measure our outcomes** to help us continuously improve. We will develop our use of **patient reported outcome measures** to identify areas for improvement and celebration.
3. We will **communicate clearly**. We will answer children and families' questions promptly and send clinic and discharge letters on time.
4. We aim to see and treat children and families as soon as possible. We will keep children and young people **safe and informed whilst they wait**.

Amarah and Anisa

Amarah is a well-known face at Sheffield Children's. The four-year-old has been cared for by a variety of specialist services during her time in hospital.

Amarah has been in and out of Sheffield Children's for most of her life. As well as living with Down's syndrome, she has had problems with her bowels. This has meant she has needed surgery several times, including having a percutaneous endoscopic jejunostomy (PEJ) tube put in place to help her to take in food.

Her mum, Anisa, said: "Amarah is like a little angel – she's so special and so loved by the staff at Sheffield Children's. She's had lots of hospital admissions with the Gastroenterology team, the Nephrology team, the Orthoptic team and Surgical teams, alongside regular blood and growth checks in Outpatients.

"Because we've been in and out of the hospital so much, our stays feel like we're coming home to our family – it's lovely because we feel so comfortable with everyone. I don't leave her side when I'm here, but if I did need to, I'd know she's in the best hands."

To help make sure that every service involved in Amarah's complex care journey knows how best to look after her she has a hospital passport, which Anisa brings with her during appointments and inpatient stays. This document helps Anisa to communicate with colleagues about Amarah's health and wellbeing, which then means that reasonable adjustments can be organised to meet her needs.

Anisa feels that good communication between families and services is key when caring for children with complex health issues.

She said: "I'm really big on communication. Talk to me, and ask me what I think Amarah needs. I like it when people come back to me with answers as soon as they know, rather than waiting for me to ask."

Anisa also feels that having the right colleagues, skills and approaches is essential for providing high-quality care.

"For me, quality care means making sure that everyone is doing their best for Amarah. Providing the best care is about knowing what she needs to get better, attending to her needs, and observing her regularly to keep her safe."



7. What does the Quality Promise mean to us?

Every one of our nearly 4000 colleagues and those that work closely with us, whether in a patient facing, or support or corporate role, plays an important part in delivering our Quality Promise. We asked colleagues to describe what their role was in implementing our Quality Promise, with some of those responses captured here:

What the Quality Promise means to me

"The Quality Promise sets out the Board's commitment to deliver the care we would want our loved ones to receive. A promise is a promise and we want to ensure a really close connection between the Board and the care your family receives, through improving how we continuously listen and learn as an organisation." Sarah, Trust Chair.

"The Quality Promise signals our intent to develop a culture of kindness, and ensure the voices of children, young people and their families are heard. The Quality Promise is also a commitment to our colleagues to provide the space, support, and culture to care" - Jeff, Medical Director.

"Our Quality Promise is an active commitment to deliver the fundamentals of care, to be safe, kind, and outstanding. We always will listen and ensure our culture and processes help us learn." - Yvonne, Chief Nurse.

"I see the quality promise as a way to take action to ensure quality on a face-to-face level, and my leadership promise is to model this across all teams" - Stacey, Inpatient CAMHS Service Manager.

"The Quality Promise means thinking more holistically as the child or young person comes for support. I want to be sure we join up the care they require from acute, through to community and between services." - Katie, Allied Health Professional Support Worker.

We will listen to the family's requirements and make reasonable adjustments to provide the best care for that family, and for that child - Sivakumar, Consultant Anaesthetist.



"However clinically safe our care is, it will not feel safe until people are heard. This means we all have to work on our blind spots, unconscious biases, and assumptions that we bring to situations. It's a big issue for those already marginalised by our society, whether because of the colour of their skin, the money in their pocket, their educational abilities, disability and more." - Sarah, Health Inequalities Management Lead.

"I am committed to providing an equitable service so that all children and families coming to us for elective surgeries feel involved, heard and valued within their care planning. I also commit to listening and acting with compassion towards my patients, their families and my colleagues" - Rachel, Preoperative Care Lead Nurse.

"I will continue to focus on delivering a high standard of service to the best of my ability and keep treating colleagues and families with kindness and compassion". - Sharlene, Support Secretary.

"For me it's about being person/patient centred and making them feel listened to and valued. It's also about committing to treating others how we would want our families to be treated, and having the processes in place to ensure that this happens at all levels in the organisation" - Jenny, Deputy Director of Nursing.

"As an anchor organisation, we have a duty to support the wider community. Responsibility does not just end at the four walls of the hospital. I'm committed to making sure that children and young people receive high-quality sustainable care." - Jenny, Environmental & Sustainability Apprentice.

8. Approach to delivery

Delivery

Everyone has **a role to play** in keeping our Quality Promise. We will:

- Ask everyone at Sheffield Children's and our partners to consider their role in keeping our Quality Promise.
- Strengthen clinical and managerial leadership roles for quality.
- Continuously strive to develop our culture through our We Care values and our In This Together Framework.
- Strengthen how we measure quality so we can demonstrate we are keeping our Quality Promise and can continuously improve.

Voice and involvement

We will:

- Place the stories of children, young people, family and colleagues at the heart of our governance.
- Focus on listening and involving those who experience health inequalities.
- Partner with the Youth Forum and involve them in decision making.
- Collaborate with Healthwatch and the voluntary sector to gain from their expertise and trusted relationships with community groups.
- Listen to the learning of wider city, system and regional consultations to continuously improve what we do.

Leadership and organisational development – 'In This Together'

We will:

- Create a learning culture that helps people to speak up, thrive and continuously improve quality in line with our We Care values.
- Support colleagues to lead and team up both within our organisation and across systems to deliver the Quality Promise.
- Understand how individual roles and behaviours contribute to the Quality Promise, and embed this into our appraisal structures and personal objectives.

Education, learning and quality improvement

We will:

- Support our Quality Promise through education and learning, equipping people with the necessary behaviours, training and skills.

- Embed quality improvement capability and capacity throughout the organisation.
- Develop an aligned approach between quality improvement and our people and culture work.

Structure and implementation

We have refreshed our governance for quality.

- Our Quality Sub-Board Committee will provide assurance to the Board on the implementation of our Quality Promise, supported through an operationally-focused group.
- Our Clinical Experience and Engagement Group has relaunched and will oversee our work on voice and involvement.
- Our Year 1 priorities from our Quality Promise are to implement the Patient Safety Incident Response Framework and strengthen how we listen and involve. Our Year 2-5 implementation roadmap will be developed later in 2023/24.
- Care Group and Corporate Annual Plans will align with our Quality Promise.
- The Annual Trust Board Quality Account Priorities for 2023/24 reflect our Quality Promise and will align with our Quality Promise roadmap.

Working with our charity

We have an excellent partnership with The Children's Hospital Charity. We will work together to ensure our charitable funding priorities and investments are aligned to our Quality Promise.

Partnership

Our place, system and regional partnerships will increasingly shape models of care. Our Quality Promise will be delivered in collaboration with patients, families, colleagues and partners.

- At different times we will be a leader, influencer, advocator or partner for improving quality.
- We will develop 'purposeful partnerships' and hold ourselves and partners to account on behalf of children and young people.

Communication

- Our Quality Promise will be shared with both families and colleagues through our website.
- We will provide regular updates and offer opportunities to get involved.
- Our Quality Promise will be highly visible to children, young people and families, whenever and however they receive care.

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10. Appendix: Our evidence base

The evidence base for our Quality Promise and our supporting foundations can be found here.

Our Quality Promise

Safe care	
National evidence	Message from our engagement
<ul style="list-style-type: none"> • The NHS Patient Safety Strategy defines patient safety as the maximisation of the things which go right and the minimisation of the things which go wrong for people experiencing care (NHS England, 2017). • Effective safeguarding can only be achieved by consistently applying safeguarding principles and duties every time a child receives care (NHS England, 2022). • Coordinated and data-driven approaches are essential to patient safety. 	<ul style="list-style-type: none"> • Families emphasised trust in care professionals as a foundation of safe care. • The safe fundamentals of care – staffing, processes, training, environment, resources and meeting legal requirements – was emphasised by colleagues. • Colleagues described the need to improve the timeliness of investigations. • The Patient Safety Incident Response Framework was seen as an opportunity to improve processes.
Kind care	
National evidence	Message from our engagement
<ul style="list-style-type: none"> • Clear, accessible, and respectful communication ensures families are fully informed during care (NICE 2021). • Actively involving children and families in decisions around their healthcare is integral to patient experience (NICE, 2021). • Understanding and acknowledging the individual needs and preferences of children and families is key to patient experience. • The importance of play and wider aspects that support recovery and wellbeing is emphasised (ie NICE G024, 2021). 	<ul style="list-style-type: none"> • Children, young people and families stressed the importance of good communication and feeling listened to. They emphasised the importance of a caring, kind attitude. • Taking a personalised, individual approach was described as important. • The importance of being open and saying sorry when things go wrong was emphasised by colleagues and families. • Our diversity networks described the importance of avoiding assumptions and considering individual perspectives.
Outstanding care	
National evidence	Message from our engagement
<ul style="list-style-type: none"> • Effective care achieves outstanding outcomes, promotes a good quality of life, and is evidence based (CQC, 2022). • The CQC (2022) defines “responsive” care as that which is tailored to meet the needs of individual people. • People who experience health inequalities are at particular risk of poor outcomes (The Kings Fund, 2022). • More equitable access is needed for children with disabilities, or who are neurodiverse (MENCAP, NHS LeDaR Report). • Data and benchmarking are key for understanding and improving services (NHS Benchmarking Network, 2018). 	<ul style="list-style-type: none"> • Families described the importance of timely communication with families and between teams/ organisations. • Equity of outcome for all children was a strong theme. • Both families and colleagues felt long waiting times for care was an area for improvement. • Colleagues emphasised care should be evidence based, benchmarked and use Patient Related Outcomes Measures. • Colleagues felt our data could be improved, alongside improving how we learn lessons and share practice across the Trust.

Our Foundations for Quality

Listen and involve	
<p>National evidence</p> <ul style="list-style-type: none"> • Listening to the experiences of children, young people, communities, and families will help us deliver the best possible care, both now and in the future (NHS England, 2021). • Individual perceptions of quality are highly personal and therefore meaningful engagement with colleagues, children and families is important (NHS Providers, 2021). • By working with communities who experience health inequalities we can learn how to provide high-quality care in an inclusive and culturally-appropriate manner. 	<p>Message from our engagement</p> <ul style="list-style-type: none"> • Our Roma and Somali communities, emphasised the importance of better capturing, valuing and acting on the voices of communities. • We have good examples of where we have listened and worked with communities well. However, many colleagues cited the importance of doing this more consistently. • There are examples of where we need to listen more carefully to parental views and work in partnership with them. • Building patient and colleague stories into our governance was felt to be important, and hugely powerful when done well.
Quality improvement	
<p>National evidence</p> <ul style="list-style-type: none"> • Continuous improvement is an essential component of quality and enables us to achieve more consistent, high-quality care (NHS England, 2023). • Quality improvement efforts need to be focused on pressing operational and strategic challenges, with an overall focus on quality across planning, improvement and assurance (NHS England, 2023). • By adopting a consistent quality improvement approach, we can embed a culture for continuous quality improvement (The Health Foundation, 2021). 	<p>Message from our engagement</p> <ul style="list-style-type: none"> • Fostering the right environment for quality, psychological safety and continuous learning was a consistent theme from colleagues. • Colleagues described the opportunity to strengthen the consistency of our approach to quality improvement.
A culture for quality	
<p>National evidence</p> <ul style="list-style-type: none"> • Visible, compassionate leadership, coupled with active engagement foster positive and respectful cultures. The link between high colleague morale and quality of care is well evidenced (West, 2019). • Having protected time for candid discussion and personal reflection creates trust, helps us to process challenges and identify ways to improve our delivery of care (Healthcare Professionals Council, 2023). • Adopting a no-blame culture and 'psychological safety' is proven to promote safe care (NHS England, 2019). 	<p>Message from our engagement</p> <ul style="list-style-type: none"> • Children, young people, families and colleagues described the opportunity to join up care better. • Children, young people, families and colleagues described the strength of shared purpose and commitment of our colleagues. • Colleagues emphasised a need to better share lessons and celebrate good practice, alongside developing research, training, and innovation to support good quality care.
Systems and processes	
<p>National evidence</p> <ul style="list-style-type: none"> • Learning and improvement around patient safety can only be achieved through meaningful involvement from staff, patients, and families (PSIRF Framework, 2022). • Audit and monitoring are essential to the delivery of delivering safe, high-quality care (NHS England, 2022). • NHS England sets out how our governance needs to ensure children and young people are safe whilst they wait, using risk management tools, for example from the Children's Hospital Alliance 	<p>Message from our engagement</p> <ul style="list-style-type: none"> • Greater connection between board colleagues and patient and colleague-facing services was a theme identified through our Well Led Report • From colleagues we heard about the opportunity to be more responsive, for example in relation to complaints. • Colleagues stressed we needed to establish more leadership time for governance. • Colleagues fed back that processes for making decisions could be shortened.



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