

We Commit to Developing Our Capacity to Deliver High Quality

We have developed a robust Quality Framework

We have established a Governing Body sub-committee, Quality and Clinical Governance, dedicating time to detailed scrutiny of information and generating key summary information about quality.

We are enhancing the Governing Body oversight of quality performance by the Quality and Clinical Governance Committee being chaired by our lay Vice Chair and membership from people with quality and clinical expertise, such as GPs, Executive Nurse, management and Governing Body lay members.

We will aim to bring the energy and flavour of the sub-committee to the Governing Body so everyone is fully engaged in quality.

The CCG has appointed an Executive Nurse, Director of Quality and Safeguarding; Associate Director for Quality and Improvement; and Senior Quality and Performance Analyst.

We will triangulate information we receive with regard to quality from providers and regulators to challenge proportionately; driving up standards of care.

We will proactively collaborate and share information with regulatory and local commissioning bodies of any concerns we have about our providers.

NHS Guildford and Waverley CCG has read the Francis report and we have considered the findings and recommendations made. We accept the report in its entirety and the recommendations in principle.

- **We are committed to serving our local population and will ensure they receive safe, committed, compassionate and caring services.**
- **We will reaffirm the core values and beliefs set out in the newly revised NHS Constitution.**

Three practical actions we will take in the short term:

- 1. We will set up our Quality Portal by the end of May 2014 so we can start receiving soft intelligence about quality of services received by our patients from our GPs and by the end of July 2014 all our providers will also have the opportunity to adopt this system to feed us information they receive.**
- 2. Our Governing Body will sign off our Quality Strategy, which demonstrates our vision for quality and the action which is being taken in response to Francis, by the end of July 2014.**
- 3. We will formally receive from our providers their response to the Francis report by February 2014 and monitor their progress against their action plans. We will formally report progress to our Quality and Clinical Governance Committee in May 2014.**

We Commit to Providing System Leadership

We will regularly challenge our providers to demonstrate how they are creating a culture of compassion, how are they incorporating the 6Cs Live! into their nursing strategies. 6 Cs are: Care, Compassion, Competence, Communication, Courage and Commitment.

We will scrutinise patient experience feedback and surveys and drive our providers to aspire to be top providers of healthcare.

We will expect them to regularly report how they are engaging with their workforce to genuinely change their culture and enabling staff to raise their concerns freely.

We will scrutinise our provider's staff surveys and will not allow poor results to remain unattended to.

We will push our providers to aspire to be the best employers in the country, supporting and developing the whole workforce, both qualified and unqualified staff.

Our providers will be held to account on their contractual duty of candour.

Providers will be required to assure us that staff have been fully involved in developing and owning their organisation's core values and standards, demonstrating they are acting to embed them.

We Commit to Developing our Governing Body

The Executive Nurse, Director of Quality and Safeguarding and Medical Director will stimulate discussion about what types of information our Governing Body wants and needs to know in order to assure themselves of the quality of clinical care being provided by the services we commission.

Quality will be central to all we do, we will review the information received about clinical quality and question the extent to which it provides the assurances needed.

We will develop and support our lay Governing Body members to challenge colleagues, interrogate data, request information where it is lacking and focus on their assurance role.

We will seek to develop lay members' understanding of the processes and issues around the quality of clinical care; describing the clinical impact of any failings.

Our First and Most Important Commitment is to Listen to Patients

We will proactively seek the views of patients through a number of methods.

We will publish our Communications & Engagement Strategy on our website.

We will plan regular visits by Governing Board members to all our services and public places during the year, so people can meet us and speak to us personally; Board to the ward.

We will put patients and how they experience healthcare at the heart of our meetings and reports by regularly using patient case studies describing how they have reported to us their experience of the services we commission.

We Commit to Reviewing our Culture, Ensuring We are Putting Patients First

We will publish a Quality Strategy which demonstrates our vision and the action to be taken in response to the Francis report; driving improvements in standards of care throughout the health economy.

As the leaders of the local health economy, we will ensure we model the correct behaviours, create an empowering culture and have the right skills and values to successfully deliver what is required of us.

We will provide clinical leadership and challenge to the local health economy.

We will ensure we apply the values of transparency, honesty and candour within our own organisation and how we operate.

We will provide leadership to the local health economy and require all service providers to assure us that they apply the values of transparency, honesty and candour.

Once developed, we will promote and encourage the use of the culture of care barometer.

We Commit to Preventing Problems

We will ensure the patient is the priority in everything we do.

We fully accept our responsibility for setting and monitoring standards.

We will contribute to the national programme of setting fundamental standards.

We will continue to support NHS England in developing enhanced quality standards and will monitor local services against these standards.

We will lead the local health economy by defining developmental standards setting our long term goals required of our local service providers.

Local clinicians are in positions of leadership for commissioning and this represents a fundamental change which will drive better alignment with the safety and effectiveness of patient care.

We Commit to Working Together with our Providers

The CCG Executive Nurse, Director of Quality and Safeguarding and Medical Director will meet regularly (at least bi-monthly) with the Medical and Nursing Directors of each provider organisation.

The Executive Nurse, Director of Quality and Safeguarding will meet regularly with the Senior Nursing leads, to share good practice and to drive the embedding of the 6Cs into local nursing practice.

Senior CCG management and clinical quality leads will be present at every provider contract meeting (including independent providers) providing senior leadership and challenge.

We Commit to Taking Action Promptly

We are developing our Quality Portal and proactively seeking out and acting on feedback; positive and negative of all providers of healthcare (including primary care).

We will ensure providers of services clearly advertise to patients how to complain and that they respond in a timely manner to any complaint made.

Service providers will be asked to provide more detail on their reports to us about the complaints and compliments they receive and the action they have taken.