# Nursing Strategy

## 2017 – 2021

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Section 1

The Nursing Strategy

Our new TEWV Trust nursing strategy arrives at a key time for the profession, aligning our work to the national framework for nursing and reflecting a number of changes in the developments and regulation of the profession. Nurses play a unique and central role in the delivery of excellent care within the trust. Nurses are the largest professional group (Registered nurses – 2286 Healthcare Assistants – 1267) and are found in almost every clinical service across a range of health and social care settings. Delivery of this strategy will realise our Trust vision to deliver high quality services that exceed people’s expectations. Without excellent nursing characterised by genuine collaboration with service users and carers, the trust cannot achieve its strategic goal to provide excellent services working with the individual users of our services and their carers to promote recovery and well-being. This strategy is also a key enabler to the other strategic goals including the delivery of the strategic goal to recruit, develop and retain a skilled, compassionate and motivated workforce.

Building on the progress achieved from the 2012-2016 nursing strategy, this strategy reflects the direction and key priorities for nursing over the next four years,

The aims of the strategy are:

- To communicate a vision and future direction for the nursing workforce
- To deliver safe, responsive, high quality, compassionate, recovery focused care for service users in every contact by every nurse
- To develop a highly skilled, accountable and effective nursing workforce with the capacity, capability, leadership and flexibility to take on new roles and retain experience and expertise
- To strengthen and maximise nursing’s influence in continuous quality improvement and policy development
- To provide a framework for the development and monitoring of excellent nursing care

Section 2

The Case for change

Why do we need a Nursing Strategy?

- To be clear about the direction and main areas of development for nurses and nursing over the next few years to better meet the needs of service users, their families and carers
- To describe how we will provide satisfying and meaningful experiences at work for nurses themselves
• To be clear on our ambitions to develop and retain a skilled, motivated and compassionate workforce with the right numbers in the right place to meet clinical and service need

This strategy seeks to help our Trust nurses to be well positioned to respond to all the issues outlined below. It is generally recognised that this is one of the more difficult periods financially for the NHS and as a leading mental health trust, there is a real challenge for us to make the best use of the resources we have and continue to make improvements, keeping the people we serve as our central professional focus.

Background and National Context:

Whilst the NHS continues to experience challenges, there are a huge range of issues and opportunities which have influenced our new strategy and reflect the exciting and rewarding time this is for the nursing profession. Areas of key focus are set out below which will impact on professional nursing practice, education and workforce development in the coming years and therefore shape the new nursing strategy.

The Chief Nursing Officers national framework for nursing, “Leading Change, Adding Value” is intended to be an overarching framework to which local Trusts and their nurses can add operational and professional detail, and as such is strongly reflected in our trust nursing strategy. This framework is directly aligned to the 5 year forward view, and the health and wellbeing agenda. It stresses the centrality of nursing involvement in helping to close the three major gaps identified in:

Health and wellbeing:

A greater focus on prevention is needed to enable health improvements and counter pressure on services.

Care and quality:

Health needs will go unmet unless we reshape care, harness technology and address variations in quality and safety.

Funding and efficiency:

Without efficiencies, a shortage of resources will hinder care services and their progress.

Within this overall model, nurses have a central role in leading change. Key to this approach is the focus on reducing unwarranted variation, in which practice or service models vary for historical or individual reasons rather than because of an evidence base or improved outcomes or experience. Alongside this is the concept of “added value”, or focussing on carrying out high value interventions, reducing waste and
missed opportunity (this has particular resonance for our Trust given our approach to continuous lean improvement, QIS).

In order to deliver the 10 commitments outlined in this framework, nurses of the future will work with partners and communities, taking a leading role in promoting prevention, early intervention and building resilience. Meeting the needs of our local population is a key message and will require nurses to take an integrated approach to mental health, disabilities and physical health.

The overarching values and aims of the framework are captured below:

- As shown in the above diagram, the Chief Nursing Officers earlier Nursing Strategy (Culture of Compassionate Care – 6 ‘C’s, 2012) remains a key influence on nursing, and our trust strategy does not seek to replace these timeless values but will ensure they remain embedded in our practice.
- In March 2015 The Nursing and Midwifery Council (NMC) launched the new Code of Practice and professional Revalidation process for nursing. The new code set out the standards and behaviours in 4 key areas central to nursing professional practice whilst ensuring public protection:
  o Prioritise people
  o Practice effectively
  o Preserve safety
  o Promote professionalism and trust

The intention of the strategy is to promote these behaviours and through re-validation processes, to ensure that nurses provide evidence to meet these
standards, remaining professional in their approach as well as fit to practice throughout their careers.

- The 5 year forward view for mental health set out the start of a ten year journey to reflect changing public attitudes to mental health and the growing commitment among communities, workplaces, schools and government to change the way we think about mental health, shifting towards prevention and transformation of NHS care. For nursing staff this will mean:
  
  o Ensuring physical health needs have equal importance to mental health needs
  o Championing the needs of people with mental health needs to reduce stigma and discrimination
  o Influencing and participating in the reshaping of the way care is delivered
  o Increasing access to the right care at the right time
  o Driving down variations in the quality of care ensuring the improvement of outcomes for service users

Meeting this ambition will require nurses to continue to prioritise the physical health and wellbeing of all of those that use our services.

- The increasing demand for mental health services and health care overall (for example we know there are around 1.9 million people with 3 or more long term conditions, will require nurses to work across different settings and with individuals in new ways. Reducing the need for hospital admissions is a key aim of the local Sustainability and Transformation plans.
- Growing recognition of the importance of human factors, openness and transparency around patient safety, and the Duty of Candour
- The Strategy is also informed and influenced by key mental health strategies such as ‘No Health Without Mental Health’, 2010 and ‘Closing the Gap’, 2014 with the overall aim of achieving parity and integration between physical and mental health. One of the key strands of work is to address current inequalities experienced by patients with a mental health condition or learning disability in the prevention, assessment, diagnosis and treatment of physical health problems.
- The Safe Staffing agenda, ensuring we have the ‘right staff, with the right skills in the right place at the right time’. Local and national challenges around recruitment, retention, and workforce development, including new models of nurse education and recent changes to the funding of registered nurse training means there will need to be continued effort to support this huge agenda.
- The increased recognition of the need to ‘grow our own workforce’ including further development of the Health Care Assistant role and the pilot of new roles such as the Nursing Associate role, which has scope to work across all fields of nursing and will be regulated by the Nursing and Midwifery Council. This role will supplement, augment and compliment care delivered by registered nurses however there is a need to define the scope of practice across a range of settings as well as building capacity and equipping the workforce with appropriate skills.
• The inspection and regulation regime has a far higher profile than at the time of our last nursing strategy. Nursing staff will continue to play an integral role in inspections under the new CQC regime and to ensure the delivery of safe, recovery focussed, collaborative and personalised care as set out in the MHA Code of Practice and CQC Fundamental Standards.

• This strategy reflects the need for nurses to be ‘Carer Aware’ in our approach and welcome the valuable contribution carers can make, being also mindful of carers’ own needs. The Triangle of Care provides a framework to guide three-way partnership between service users, carers and clinical staff with all voices being heard and influencing care and treatment decisions which collectively give the service user the best chance for recovery.

Section 3

The Vision

Our nursing vision for the future

To be a first choice employer with highly skilled, accountable and effective nursing staff delivering high quality, compassionate care, enabling positive experiences and outcomes throughout a service user’s recovery journey.

Section 4

Objectives

In order to inform the nursing strategy themes and objectives it was important all our nurses had input and we held a number of workshops and engagement events as well as inviting comments and suggestions from a range of professionals and experts by experience. The outcomes of this process informed 4 key themes which we feel reflect the priorities for nursing across the trust over the next four years and will support us to provide a compassionate, effective, forward thinking response to the challenges ahead. These in turn shaped the 6 strategy objectives and associated areas of action outlined below. The timeframe for implementing each objective is September 2020.

The 4 key themes are:

• Personalisation, recovery and collaborative nursing practice
• Safe staffing (including recruitment and retention, enhanced knowledge, skills and career opportunities)
• Evidence based practice
• Increased productivity
Within this section, we outline the key things we are going to do to deliver these themes in line with the 10 national commitments outlined below which are set out in the national nursing framework.

**The ten commitments outlined are:**

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<td>1</td>
<td>We will promote a culture where improving the population's health is a core component of the practice of all nursing, midwifery and care staff</td>
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<td>2</td>
<td>We will increase the visibility of nursing and midwifery leadership and input in prevention</td>
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<td>3</td>
<td>We will work with individuals, families and communities to equip them to make informed choices and manage their own health</td>
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<td>We will be centred on individuals experiencing high value care</td>
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<td>5</td>
<td>We will work in partnership with individuals, their families, carers and others important to them</td>
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<td>6</td>
<td>We will actively respond to what matters most to our staff and colleagues</td>
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<td>7</td>
<td>We will lead and drive research to evidence the impact of what we do</td>
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<td>8</td>
<td>We will have the right education, training and development to enhance our skills, knowledge and understanding</td>
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<td>9</td>
<td>We will have the right staff in the right places and at the right time</td>
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<td>10</td>
<td>We will champion the use of technology and informatics to improve practice, address unwarranted variations and enhance outcome</td>
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Objective 1: To further embed the values and approaches of recovery, personalisation and collaboration into the delivery of our nursing care and processes

Key messages – national
(This addresses the National Nursing Strategy Commitments 2, 3, 4, 5)

Ensure that service user and carer experience and feedback shape, influence and are at the heart of nursing practice.

Always value and integrate into our work the crucial roles of carers, family members, volunteers and the local community in maximising the health and wellbeing of those in our care.

Always recognise that those in receipt of care are experts by experience.

Truly put people receiving care, their families and carers, at the centre of all we do when developing and delivering all aspects of their care; so that what matters to them always informs our actions and judgement.

Truly get to the core of what matters to individuals by the use of ‘I-Statements’ for example - “I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me.

Actions we will take to achieve this:

- We will adopt a person-centred, Recovery based approach in line with phase two of the Trust Recovery strategy, recognising the importance of evidence-based symptom management and nursing interventions blended with a goal centred approach, which enable people to do the things they want to do and live meaningful and purposeful lives.
- We will work jointly with our service users who may display behaviours that are described as challenging, on a personal Positive Behavioural Plan to reduce the need for physical interventions or medication, and will offer training and support to staff in these approaches. We will link the individual plans to the early phase of people’s recovery journey.
- We will continue to embed ‘Safe-Ward’ developments to help create safe and therapeutic environments.
- We will work in partnership with service users, carers and other stakeholders to co-produce clinical records and care documents which place recovery at their heart, as set out in the Trust Recovery Strategy.
- We will ensure that individuals are always supported to influence and direct their own health care decisions, so that they are confident that ‘no decision is taken about me without me.’
- We will review the format and guidance for care planning in each specialty with experts by experience to support the delivery of recovery focussed, collaborative care.
- We will deliver care in a way that service users feel that their views and aspirations are taken fully into account in care-planning.
- We will listen to and act upon patient and carer feedback to improve the care
experience, for example from PALS information and FFT feedback

• We will review the Trust-wide Physical Healthcare Policy to incorporate a wellbeing section to reflect the Trust’s Recovery Principles (CHIME) in partnership with the Experts by Experience Group

• We will ensure the principles of the Triangle of Care are embedded into all our services.

• We will seek to reach a shared understanding with service users when judging potential risks and how these should be managed, in line with our Harm Minimisation policy. This will involve shared decision making and supporting service users in taking positive risks when it is safe and appropriate for them to do so.

• We will provide a rolling programme of training for our nurses and other colleagues in these principles.

• We will, in line with recovery and person-centred principles, provide the support that people need to access opportunities they value, providing evidence based support and offering choice. For example, in making broader life choices around education, employment and other social roles which will support their overall health and well-being

• We will ensure that all staff are able to address any safeguarding concerns, working within the ‘think family’ approach to prevent further harm

• We will ensure our nurses understand the health promotion / prevention priorities within their specialist clinical areas and act as health promotion champions for these potentially vulnerable groups

• We will continue to work in partnership with the Recovery Colleges, for example in conjunction with the Physical Healthcare Project Team to deliver a co-produced workshop 'Improving Your Physical Health', and consider other methods for taking this work forward in collaboration with Peer Support Workers.

• We will continue to develop new person-centred models of care and support for people with a learning disability, in-line with latest national guidance and working with people with a learning disability, their families and other agencies.

Objective 2: To ensure we have a co-ordinated and integrated approach to the delivery of safe staffing

Key messages – national
(This addresses the National Nursing Strategy Commitment 4, 8, 9)

Evidence-based tools are used to inform nursing, midwifery and care staffing capacity and capability.

To make sure community and inpatient teams are safely staffed and that staffing is optimised to deliver high quality care.

Safe staffing and deployment of staff will be in line with Carter recommendations and the triple aim of the National Nursing Strategy, achieving better outcomes, better experience and better use of resources.

Clinical and managerial leaders foster a culture of professionalism and responsiveness, where staff feel able to raise concerns.
Actions we will take to achieve this:

- We will deliver the vision and benefits set out in the Safe Staffing programme as one of the trusts strategic priorities.
- We will undertake an annual review of the baseline staffing establishment across our services, using a combination of evidence based tools and structured professional judgment discussions.
- We will expand this work into community teams.
- We will implement the service specific safe staffing guidance for mental health and learning disability services into our approach.
- We will implement an escalation framework to facilitate staff raising concerns about staffing levels.
- The safe staffing report to trust Board will be simplified in order to highlight our key issues.
- We will improve recruitment from the local Higher Education institutes, and establish a trust-wide approach to recruitment and retention, including workforce planning.
- We will develop a flexible pool of nursing staff to supplement the existing staffing establishments at the various sites.
- We will improve out of hours clinical support to ward nursing staff.
- We will work jointly with Human Resources colleagues to ensure we are well-placed to lead on developing approaches such as the potential Apprenticeship scheme for graduate nurses and the new Associate Nurse roles. We will take part in the regional pilot to test out such schemes, and be proactive in supporting other local developments, such as the potential for these to become apprenticeships.
- We will develop standard work for Modern Matrons, Ward Managers and other nurse leaders which lead to high visibility within services, maximising use of their skills and responsibilities.
- We will ensure that nurses, midwives and care staff have sufficient time to fulfil responsibilities that are additional to their direct caring duties e.g. mentorship and supervision.
- We will further embed the National Quality Board Safe Staffing guidance.

Objective 3: To increase the recruitment and retention of nursing staff

Key messages - national (This addresses the National Nursing Strategy Commitments 4, 6, 8, 9)

The NHS in 2020 will look after more patients that the NHS of today. We are therefore going to need to continue to improve productivity and grow our frontline workforce.

There is a need to support new Advanced Clinical Practice (ACP) nurse roles.

Recognise the importance of consistent compassionate leadership as the cornerstone of a people-centred approach, in a shared ambition to achieve excellence, which includes recognition of the contribution of all nursing staff across all services.

Recognise the need to foster improved staff engagement, commitment and morale.
through more positive, strengths based approaches.

To attract new staff to health and care roles, flexible routes into education at pre-degree and post-registration levels, and develop post-registration education standards transferable across teams and sectors.

**Actions we will take to achieve this:**

- We will build on peoples existing skills, experience and qualifications to promote their entry into the nursing profession. As part of this we will set a target for number of new recruits based on workforce planning information, and monitor their progress on the Nursing Scorecard.
- We will use our workforce planning information pro-actively, to influence the commissioning numbers, and types of professional registration training with education providers.
- We will work with the Higher Education Institutes in light of the changes to post-graduate funding and flexible models of provision, to make relevant professional development opportunities available for our registered nurses.
- We will undertake debrief meetings with colleagues after episodes/incidents, including examples of infection outbreak, or the management of violence and aggression to learn lessons and celebrate good practice.
- We will hold a developmental event for Wards and Community teams each year to ensure all colleagues have access to an opportunity for communication and team building away from the immediate workplace.
- We will deliver programmes specifically designed to provide newly qualified staff the opportunity to engage with colleagues across the localities. The programme will provide nurses with the opportunity to have a greater understanding of the role of a band 5 nursing staff member and the leadership role they have in relation to service delivery, with a personal action plan and support them.
- We will support the roll out of the Organisational Compassion programme across the organisation as nurse leaders, jointly with our colleagues from other disciplines including the Clinical Psychology lead department. Within this, as individual nurses we will set our own Compassionate Leadership personal objectives.
- We will act on the findings for nurses of the national and local staff surveys including the Staff Friends and Family test, and the systems within the trust for raising concerns.
- We will continue our programme to support Registered Nurses with their revalidation requirements, both to comply with the NMC processes and Code of Conduct and to use the opportunity revalidation gives us to develop our practice further.
- We will contribute to and support the development of the Trust Talent Management programme to assist nurses in their career development including into advanced nursing roles.
Objective 4: To enhance the skills, knowledge and career opportunities for nurses in line with clinical pathways and service user and carer feedback

**Key messages - national**
(This addresses the National Nursing Strategy Commitments 2, 5, 9, 10)

Recognise the importance of building up the future workforce and, through talent spotting, building future leadership capability at local, regional and national level.

Make the education, learning and training of staff a priority.

Act as mentors, teachers, coaches and role models; ensuring that this becomes a predominant and consistent style of care, help and support.

Recognise the need to evaluate improvements, so that we can evidence the impact of investment in staff on outcomes and experiences for patients and on reducing unwarranted variation.

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**Actions we will take to achieve this:**

- We will develop flexible career pathways across a range of settings so that nurses working within the trust will be able to develop their clinical, academic, teaching, research and managerial skills and have increased opportunities to be at the forefront of continuous quality improvement in order to provide excellent care for service users.
- We will create clearly identified roles for nurses within pathways related to service user and carer feedback, interventions and extended scope of practice and develop nursing competencies to undertake these roles.
- We will increase, widen and diversify the range of training opportunities available for our HCA colleagues to undertake nurse training, including the increased use of the Open University, and the development of sponsorship programmes to support Learning Disability training as a key pressure area.
- We will ensure there is a strong nursing contribution to the development of the Trust Training Needs Analysis and the subsequent training plan, with a lead role for the Heads of Nursing.
- Further to this we will implement the Talent for Care strategy which is focussed around encouraging entry to the NHS and then subsequent development including to the Associate programme or pre-registration access.
- We will roll out and support the new clinical supervision framework across the trust, with an action plan for each locality led by Heads of Nursing to ensure all colleagues have timely access to personal support and reflection.
- We will continue our programme to support Registered Nurses with their revalidation requirements, both to comply with the NMC processes and Code of Conduct and to use the opportunity revalidation gives us to develop our practice further.
- We will deliver developmental programmes that have been specifically designed to create time for multi-professional team leaders including nurses to work together to reflect upon and plan for the leadership challenges in the future.
- Support, training and supervision will be provided to strengthen the delivery of recovery focussed, person centred care. The principles of recovery and harm...
minimisation will be incorporated into Trust-wide training requirements.

- We will engage with the Coaching for Leaders programme and bring this style of communication and development into our teams.
- We will empower staff via the IPC team and Champions, and Modern Matrons, by ensuring relevant education and training, e.g. in ensuring a safe and hygienic environments and managing outbreaks of infection
- We will respond to the needs identified by nurses in the Trust to have guidance and standards regarding physical long term condition management
- We will continue to contribute to the Trust’s Talent Management programme to assist with our future workforce development.

Objective 5: To further embed best and evidence based practice into the delivery of our nursing care and processes

**Key messages – national strategy**
(This addresses the National Nursing Strategy Commitments 1, 2, 4, 5, 7)

Use learning from research to innovate and improve care and define nursing contribution and value.

Recognise the value of collecting data, where possible at the point of care using modern technologies.

Establish partnerships to mutually support learning on best practice, participating in networks that will help drive the uptake of innovation across the sectors such as Academic Health Science Networks.

Mental health and learning disability nurses will use their knowledge, skills and expertise to improve access across the health system and lead improvements in physical health care for people with complex mental health and/or learning disabilities.

**Actions we will take to achieve this:**

- We will continue to support the Trust QIS for leaders and other lean approach based training programmes.
- We will interpret and implement national guidance and standards to support the recognition of patients' physical deterioration, (for example NICE Clinical Guideline (CG50) regarding physical deterioration of patients within a mental health and learning disability Trust)
- We will support both our staff and service users to reduce the harm from smoking with the aim to improve physical health, by implementing the Trust Nicotine Management policy.
- Learning Disability teams will improve health and well-being within their client population, for example by encouraging service users to access annual health checks and supplying easy read literature on health checks within local welcome packs.
- We will engage with Education partners in research which leads to developing new
models of care and interventions, for example within the Mental Health Research Group, and links to the Research Departments at the Universities.

- We will continue to contribute to a number of research studies which will benefit our own service users and beyond to influence national practice.

- We will add value to our nursing care by participating in networks that drive innovation. Two examples we will continue to be involved in include:
  - NHS IQ: Improving the physical health of patients with serious mental illness - a practical toolkit. The Trust added value to the NHS IQ Project by managing the pilot project in TEWV to improve the cardiovascular health outcomes and reduce premature mortality in people with serious mental illness.
  - Department of Health Resource: Improving the physical health of people with mental health problems: Actions for mental health nurses. The resource focuses primarily on adults with common mental illness, severe mental illness (SMI) and personality disorder, with evidence based information in eight key action areas.

- We will use these resources to inform work programmes, working closely with external stakeholders and using information from external organisations to promote best practice and patient safety e.g. MHRA, Back Care Exchange, NICE.

- Learning Disability services will continue to work in Partnership with the North East and Cumbria Learning Disability Network through The GAPS (Good Access to Primary Care Services) Network and Access to Acute Network looking at improving access to primary and hospital care, access to screening, and reviewing deaths.

- We will utilise the best available evidence when developing services and delivering nursing interventions.

- We will support access to higher and PhD level programmes of study in line with service requirements, and will seek to co-ordinate and implement findings from Masters and Doctorate level research.

- We will continue to learn lessons from patient safety incidents, complaints, safeguarding issues, service user and carer feedback and implement recommendations emerging from these. Within this we will contribute to and lead on national patient safety initiatives and thematic reviews.

- We will provide people with the information they require, in a suitable format to help them make choices about the treatment and support they receive.

- We will promote health and wellbeing to all patients, carers and staff that come into contact with our services. We will continue to embed the Duty of Candour principles within our services and our approaches to learning lessons from incidents.

- We will support and develop retention initiatives.
Objective 6: To increase nursing productivity through the reduction of waste and further embedding of technology and informatics to improve practice, address unwarranted variation and outcomes

Key messages – national
(This addresses the National Nursing Strategy Commitments 9 and 10)

Nurses are custodians of the precious resource within the NHS. Nursing staff have a responsibility to deliver excellent care whilst working in an effective, productive, sustainable and efficient way.

Ensure that the needs and ambitions of nursing staff are reflected in Local Digital Roadmaps, and help build a national picture of IT capability.

Actions we will take to achieve this:

- We will contribute as nurses to the development of QIS and lean approaches, including the PPCS programme within our Community and interlinked services, and the Model Wards developments, and implement the standardised approaches which emerge from this. The programme includes the aim of reducing unwarranted variation and standardising evidence-based lean approaches, in line with the aims of the national nursing framework.
- All Nursing and Governance Directorate teams will have dedicated in touch pages regularly monitored and updated to highlight relevant information, professional issues and good practice for colleagues across the Trust.
- We will continue the Implementation of the Royal Marsden Manual Online (RMMO) of clinical nursing procedures therefore being assured that the procedures we use will reflect the latest in evidence based practice.
- We will make use of the information available on our Trust systems, including e-roster performance indicators and IIC, and the forthcoming integrated approach to patient feedback for various sources, to inform our decision making and maintain safety and effectiveness in our services.
- We will make use of evolving technology to enhance our clinical decision making, providing access to the relevant information at the point of care.
- We will make effective and safe use of social media, in line with the NMC Code of Conduct, to help professional development and networking.
- We will continue to be involved in and influence Trust-wide technology–based projects making sure they support nurses to deliver effective and efficient nursing care.
- We will test and implement current technology and medical devices which enable maximum time to be freed up for care, enhance collaboration with service users and safety.
Section Five

Putting it into Practice, Metrics

Within the Trust, we will implement the new strategy by taking the objectives and actions outlined in the previous section and develop locality based implementation plans led by each of the Heads of Nursing. The Locality Professional Nursing Advisory Groups (PNAG’s) will be the key forum for agreeing upon and monitoring the implementation of the strategy within their related services. An Executive Nursing Forum will be established to oversee progress of the strategy, this will seek to ensure there is standardisation and cross-learning where appropriate with other programmes (such as Recovery and Workforce), and to monitor trust-wide progress. We will ensure that nurses working in our wards and teams are given opportunities to comment on the implementation plans and provide feedback and evaluation of our progress as an organisation.

We will evaluate the success of our strategy using two main methods;

- Monitoring of progress against the locality implementation plans in the PNAGs and at the Head of Nursing meetings. Building on this there will be an annual review of progress against the strategy led by the Director of Nursing and Governance, with reporting of key issues to the Trust Board.
- The development of a strategy scorecard consisting of a short set of key metrics for nursing linked to the strategy main topics, which is envisaged will link to the IIC system and enable areas to view their progress on professional nursing issues within a simple scorecard, aggregating up to a trust-wide position.
- EMT will review the scorecard and escalate to the Board issues as appropriate.