Putting quality at the top of the agenda in Nottingham

Accreditation for radiology services at Nottingham University Hospitals NHS Trust

“Our people, their skills, capacity and commitment have been the key to delivering and improving our services, and achieving QSI has given staff the recognition they deserve,” said Chantel Brooks, radiology accreditation and quality manager at Nottingham University Hospitals NHS Trust.

“Gaining accreditation has enhanced our reputation across the trust and it has been extremely satisfying to receive the recognition of how far we have come under the challenging times that all radiology departments face,” she continued.

“QSI provides a robust benchmark for imaging services aligned with our professional body standards, which in turn provides assurance to service users that care is consistently delivered by competent staff in safe environments.”

The accreditation journey
The staff began their QSI journey approximately three years ago to reinforce their belief that their services were delivered at the highest standards.

“As the QSI is aligned with the CQC standards and being recognised in their inspection...
methodology, it made perfect sense to achieve the standard and address quality as a whole," said Chantel. “The department needed processes in place to be confident that areas for improvement were identified, that staff were being supported to develop, areas of excellence and learning were being shared and that staff are able to effectively manage and monitor what we do in a joined up, consistent way."

Various approaches were tried including setting up an accreditation group, with volunteers from modalities; QSI drop-in workshops to inform and discuss requirements; a senior leadership team as the steering group for accreditation; presentations at staff meetings; and department quality improvement events.

“There have been many approaches to developing and implementing a quality management system across the department over the past three years, with approaches changing and evolving as we have learnt and grown with the programme,” Chantel commented.

The accreditation process

- The radiology management team was restructured, enabling a quality and accreditation manager post to be funded.
- A Quality Group was formed with medical representation (a massive asset to the process).
- The group worked through the standard and identified actions - all logged and managed via an action plan.
- Overarching structures and processes which support the service were developed and documented, producing a Quality Manual.
- Key Quality Objectives were developed from the departmental annual plan, then shared and displayed within the department.
- Each operational management team now has a monthly highlight report which details all their service aspects and is updated to reflect current performance and any required actions.
- The Quality Group develop and manage the agreed departmental quality programme.

A Patient Experience Group (known as PEG) was also set up to oversee the Patient Experience Domain. This group now incorporates all aspects of the service to ensure the department is patient focused and the patient is at the heart of all the department does. The group also has patient representation.

The Imaging Services Accreditation Scheme – QSI

The Royal College of Radiologists and College of Radiographers have developed the Imaging Services accreditation Scheme (QSI) to support diagnostic imaging services to manage the quality of their services and make continuous improvements; ensuring that their patients consistently receive high quality services delivered by competent staff working in safe environments.

Accreditation to Professional Standards is supported by the CQC, NHS England, NHS Northern Ireland and NHS Wales.
“We focused on quality and service improvement rather than accreditation, to promote a continuous process and not a tick box exercise. It is essential to develop evidence and processes that will benefit the service – not just do something for ‘QSI’,” commented Chantel.

“I am proud of the hard work and dedication of the team, who worked tirelessly to achieve a quality service. Our continued commitment will ensure that the quality of services we provide is both sustained and continually encouraged to develop.

“Patients will not only have a better and safer experience of our service but assurance that this will be consistently delivered as they benefit from the quality standard and improvements of an accredited service.

“Staff will experience the benefits of a quality system and feel empowered and supported in their roles, thus encouraging them to identify and become involved with service improvements.”

What next?
The department plans to further develop and improve its document control and quality management system as well as governance processes; to continue with the quality programme and embedding of processes; and promoting the benefits of accreditation to staff and service users and including them in further improvements.

“As part of the EMRAD Consortium (an Acute Care Collaboration Vanguard) there is massive potential to develop and participate in a wider QSI/accredited services collaboration to share and promote best practice/quality between organisations,” Chantel said.