

# Northamptonshire End of Life Care Practice Development Team (PDT)

## Quality Improvement Policy

Updated: March 2017      Next revision date: March 2018

### 1. Objective

1.1 To be an outstanding provider of support, education and training in the local and wider community.

### 2. Scope

2.1 To cover all activities carried out by the PDT and will involve all members of the PDT.

### 3. Key principles

3.1 That all education is developed based on: national and local priorities, evidence and policy development, and using feedback from local providers.

3.2 That course specifications are aligned to local and national priorities, national occupational standards, and competences and principles for end of life care.

3.3 To ensure every element of the PDT's work is evaluated and reviewed; with the aim of striving to improve at every level.

3.4 To ensure that the PDT policies are implemented and adhered to.

3.5 To ensure individual feedback and team evaluations are reviewed honestly.

3.6 To ensure our team members are supported to be, and take personal responsibility to be, outstanding providers of support, education and training.

3.7 Integrity is a core principle and value that underpins individual practice and the team.

#### 4. Course development

4.1 The production of the PDT annual report requires input from the whole team. During this time each course is reviewed in line with evaluations, national and local priorities and evidence and policy development.

4.2 This feeds into the production of the annual prospectus.

4.3 The development of new courses is prompted by national and local priorities, demand from local care providers and evidence and policy developments.

4.4 The PDT “Guiding Principles for Facilitators” will be used as a guiding document for all course delivery and development.

#### 5. Ongoing quality assurance

5.1 Prior to the delivery of each course the facilitator/s will:

- Review the course specification; particular attention will be given to policy and evidence development.
- Review and adapt the session and resources to meet the anticipated needs of the delegates, in view of their role and work place.

#### 6. Evaluation

6.1 Each course is evaluated by individual learners at the end of each session.

6.2 Facilitators will review these evaluations at the end of each session.

6.3 If there are immediate concerns raised the facilitator will take immediate action, by raising concerns with the PDT leader. These concerns will be discussed and adaptations made as required.

6.4 Each course evaluations are collated by administrator in specific format.

6.5 All commissioned course evaluations are formally collated and reported upon, with the report sent to the commissioner.

6.6 At monthly team meetings evaluations and all feedback to the team are considered and adaptations made if required.

## 7. Quality assurance of our staff

7.1 Due to the sensitive nature of the courses delivered by the PDT, sessions are generally delivered by two facilitators.

7.2 At the end of each session the facilitators will review the learner evaluations, give personal reflections and offer informal peer review.

7.3 Annually each facilitator will be peer reviewed by an external, relevant reviewer.

7.4 This peer review will feed into annual appraisal.

7.5 Each PDT member will participate in the NHFT appraisal process.

7.6 Continual professional development will be in most part guided by the appraisal system in line with the NHFT study policy [HR025].

7.7 Each member of the PDT will participate in supervision as per the NHFT Supervision policy [HR033].

7.8 Each new team member will have opportunity to use the 'End of Life Care Facilitators Competency' to guide their development.

7.9 At all times staff will work within their professional Code of Conduct and adhere to NHFT and PDT policies, procedures and guidelines.