



Royal College
of Physicians

IQILS

The Accreditation Journey

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Improving Quality in Liver Services (IQILS)



The North Bristol Liver Unit experience

IQILS sign up - 2018
Level 1 accreditation – April 2021
Level 2 accreditation – Nov 2021



Outline



Why do IQILS?



IQILS – how to work towards accreditation?

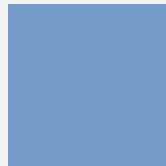


IQILS accreditation – what does it mean?

Outline

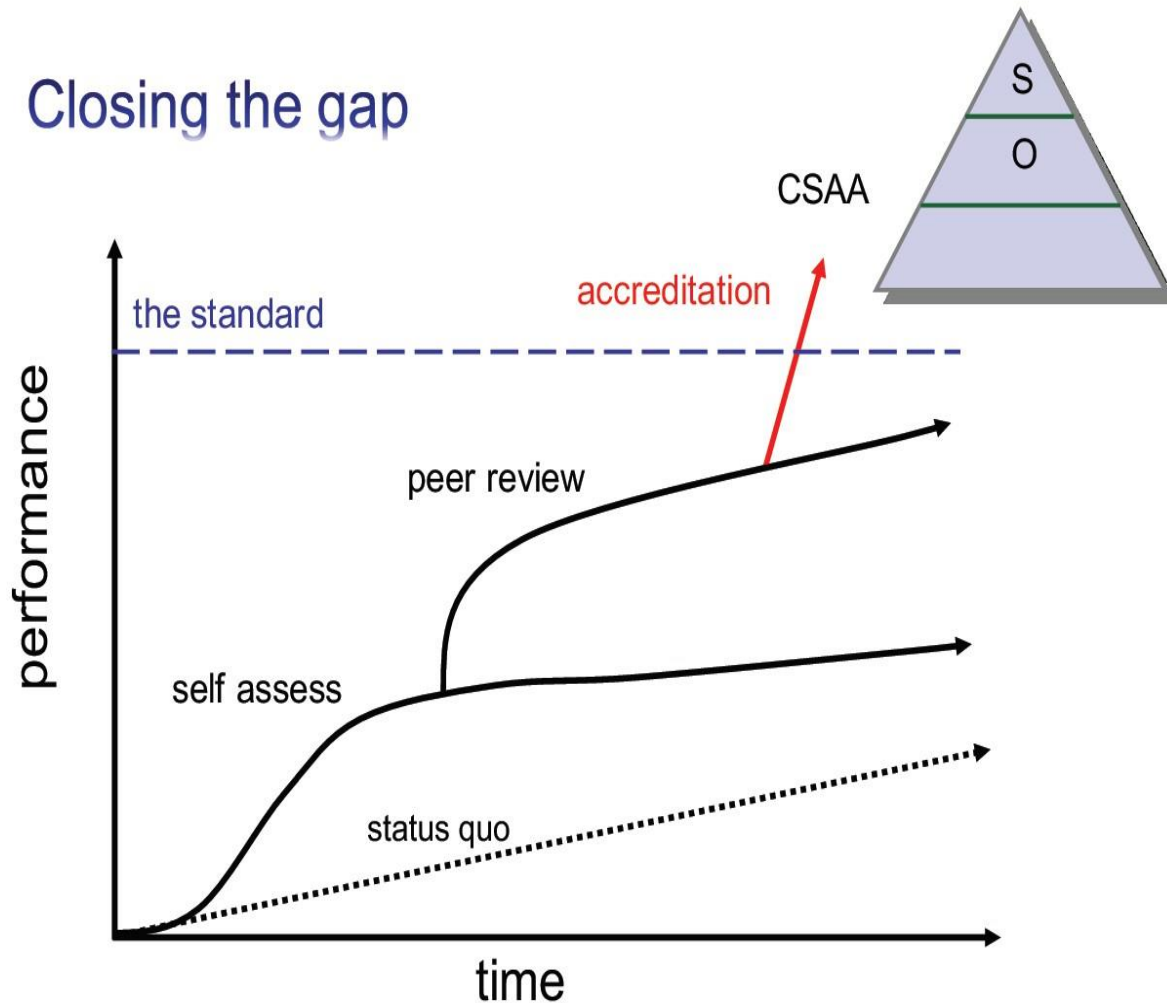


Why do IQILS?



Reflects how a good department should work

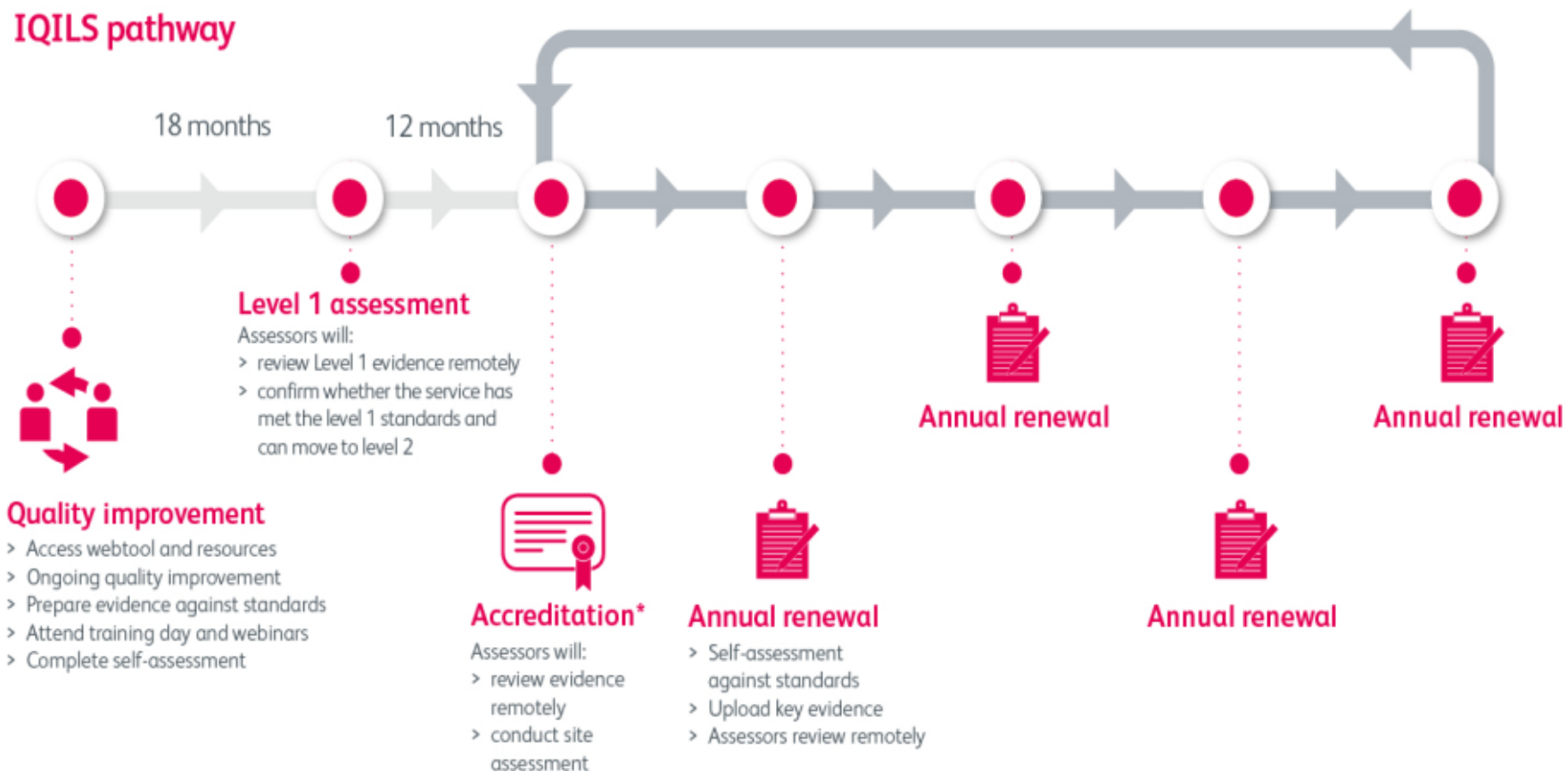
Closing the gap



- **Improvement first**
- **Then accreditation**

Logical approach

IQILS pathway

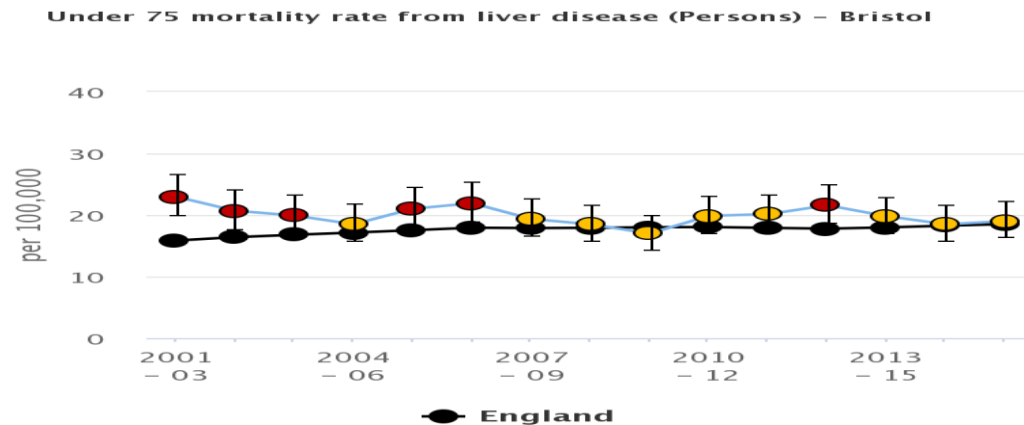


* Services which don't meet or maintain accreditation standards may be granted a period of deferral to resolve some matters.

Why should we participate in IQILS?

■ Aims

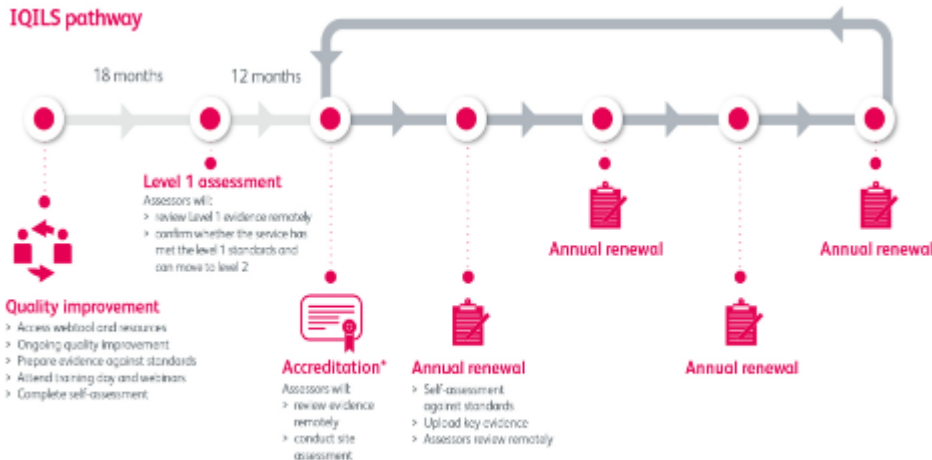
- Assess the quality of care we are delivering
- Showcase what we do already
- Benchmark against care nationally
- Improve standard of care for our patients



But there are days



IQILS pathway

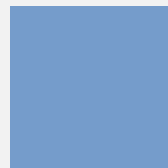


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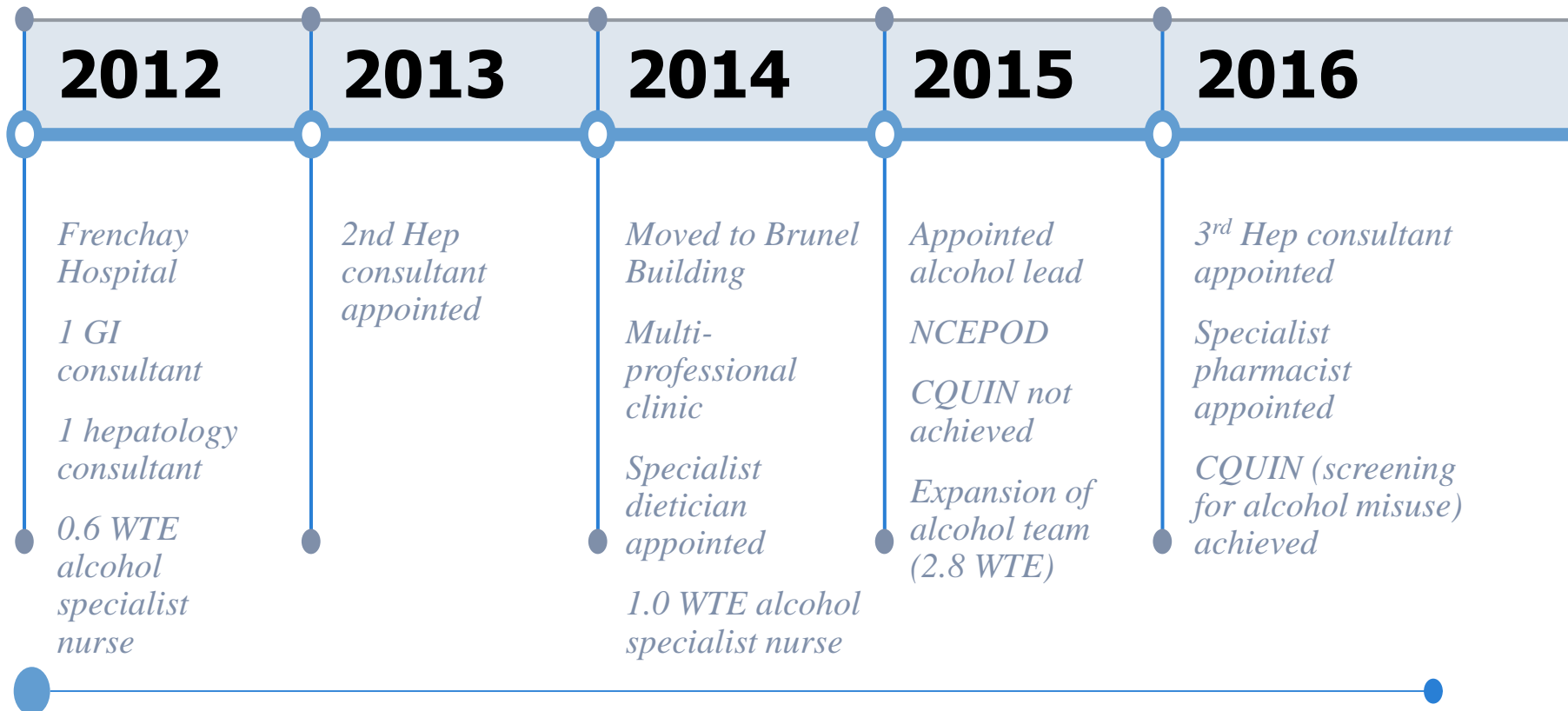


IQILS – how to work
towards
accreditation?

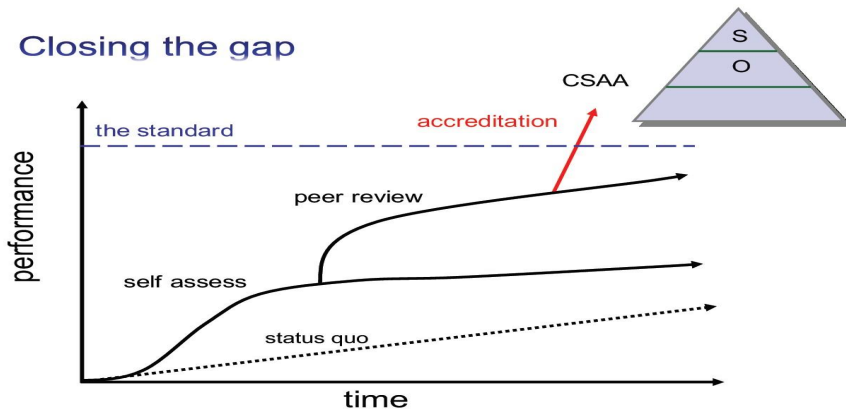


The North Bristol Liver Unit Journey

2012-2016

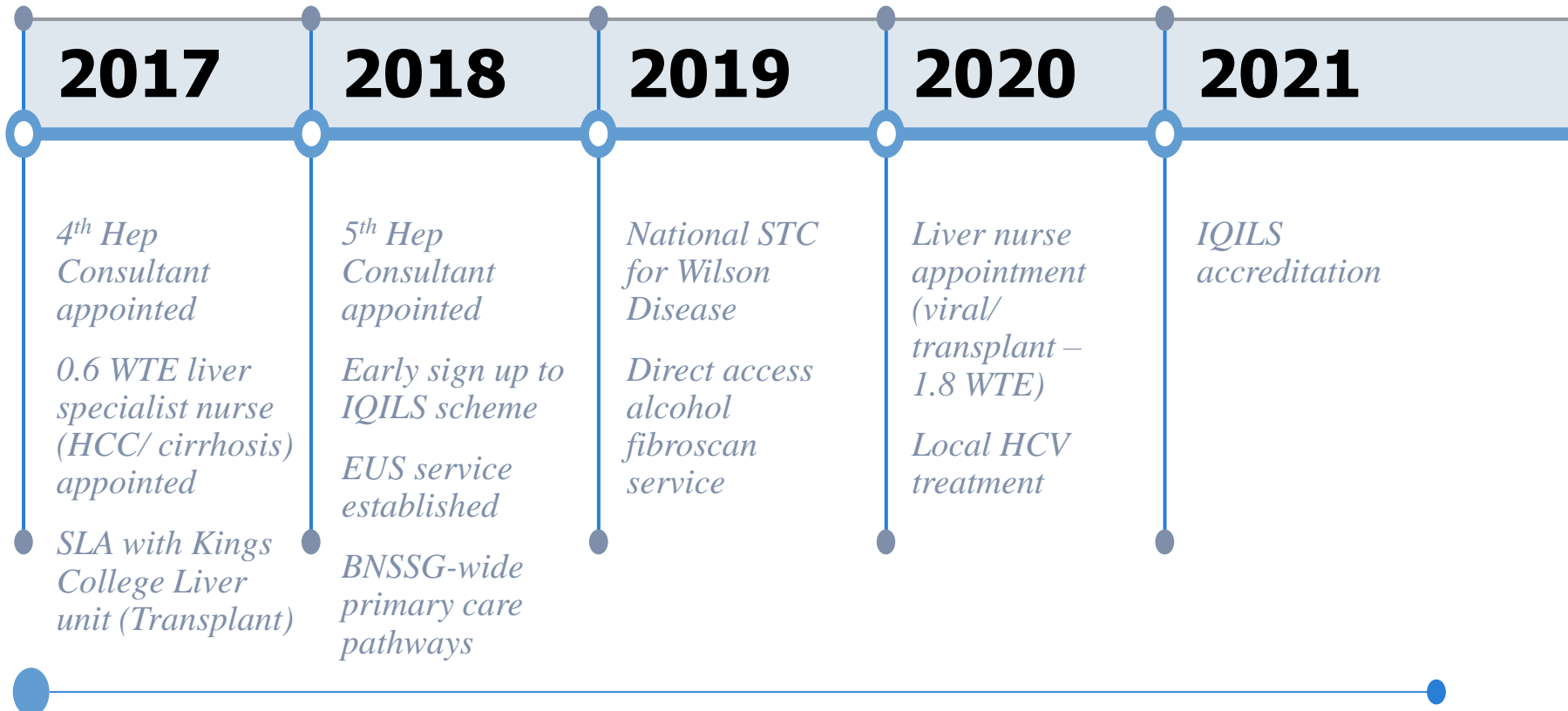


Closing the gap



The North Bristol Liver Unit Journey

2017-2021



STEP 1 – self assessment

Self assessment

- Work through the accreditation standards online
- Develop supporting evidence and improvement plan
- Report achievements and identify areas for action
- Innovate change, promote improved care
- Continue improvement and aim for accreditation

How do you succeed in a project (achieve IQILS accreditation?)



- How do you set –up your service?
- How do you improve your service?

How do you achieve IQILS accreditation?

1. SET UP A EXECUTIVE GROUP

- IQILS working group:
 - Medical lead
 - Nursing lead
 - Management lead
- Other considerations
 - Junior doctor representation
 - Patient representation

IQILS working group - North Bristol Trust

Ankur Srivastava (Consultant)

Kate Mann (Ward Manager)

Katharine Caddick (Specialist nurse)

Fiona Jones (Specialist nurse)

Holly Shahin (Divisional Governance Lead)

Charlie Molden (Divisional patient experience lead)

Graham Bartlett (General Manager)

Christina Fletcher (Speciality Manager)

Megan Hopes (Support Manager)



How do you achieve IQILS accreditation?

2. DETAILED DOCUMENTS ABOUT YOUR SERVICE

Standard 1.1

Standard 1.2

Standard 1.3

Standard 1.4

Level 1

1.1 The service has an operating plan which is reviewed annually

Must include

- > Measurable objectives and key performance indicators for the service for that year
- > Service organogram
- > Roles and responsibilities of staff in the service
- > Plans for service development depending on local need
- > Plans for disease prevention across the clinical pathway
- > Training and workforce development plan which includes succession planning to meet the needs of the service
- > Detailed pathways outlining how referrals are managed across different specialities and across other liver centres

Evidence

- > Annual operating plan
 - > Minutes of service management meetings where this is discussed
 - > Evidence of how key plans are shared with the wider team
-

How do you achieve IQILS accreditation?

3. STRONG AND ENGAGING LEADERSHIP TEAM

Standard 1.1

Standard 1.2

Standard 1.3

Standard 1.4

Level 1

1.3 The service has a leadership team that is visible, approachable and communicates regularly with all staff members

- > Clearly defined roles and responsibilities including a lead liver doctor, lead nurse and manager
- > Regular meetings take place (at least quarterly) meetings to discuss service management issues
- > changes to the delivery of the service should be communicated with staff, ie changes on quality, safety and clinical governance
- > Communication about any changes to the delivery of the service may also be important to share with other teams (eg diagnostics, companion specialties, referrers, GPs etc)
- > The service should have feedback systems in place to ensure leaders are effective (eg 360 tools or equivalent)

Evidence

- > Minutes of regular service meetings
- > Evidence of collating feedback about the effectiveness of the liver leadership team from staff members
- > Examples of notices, bulletins or other communications to staff

How do you achieve IQILS accreditation?

4. Responsive service

Standard 2.1

Standard 2.2

Standard 2.3

Standard 2.4

Standard 2.5

Standard 2.6

Standard 2.7

Level 2

2.3 The service strives to improve as a result of feedback, complaints and concerns.

- The service should capture and investigate and act on concerns and complaints.
- Any action taken and improvements made in response to service users' views should be shared with users who provided feedback or raised concerns.

Evidence

- Evidence of improvements made to the service as a result of patient/carer feedback.
- Examples of how issues arising from feedback have been addressed and shared with patients (for example, 'you said/we did' poster).
- Evidence of communicating to staff about feedback from patients/carers.

How do you achieve IQILS accreditation?

Leadership and operational delivery	Person centred care	Systems to support clinical service delivery
<p>1.1 The service has an operating plan which is reviewed annually.</p> <p>1.2 There is a comprehensive service description available on the organisation's website</p> <p>1.3 The service has a leadership team that is visible, approachable and communicates regularly with all staff members.</p> <p>1.4 The service works collaboratively across health and social care boundaries</p>	<p>2.1 The service embeds principles of shared decision-making with patients.</p> <p>2.2 Patients/carers are encouraged to feedback on their experience.</p> <p>2.3 The service strives to improve as a result of feedback, complaints and concerns.</p> <p>2.4 The service supports person-centred care.</p> <p>2.5 The service has a documented procedure for patient scheduling.</p> <p>2.6 The service reviews and acts on did not attend (DNA) rates.</p>	<p>6.1 The service assesses its facilities and equipment.</p> <p>6.2 There is a process for document management and control.</p>

How do you achieve IQILS accreditation?

Standard 1: Leadership & operational delivery

Standard 2: Person-centered care

Standard 3: Risk and patient safety

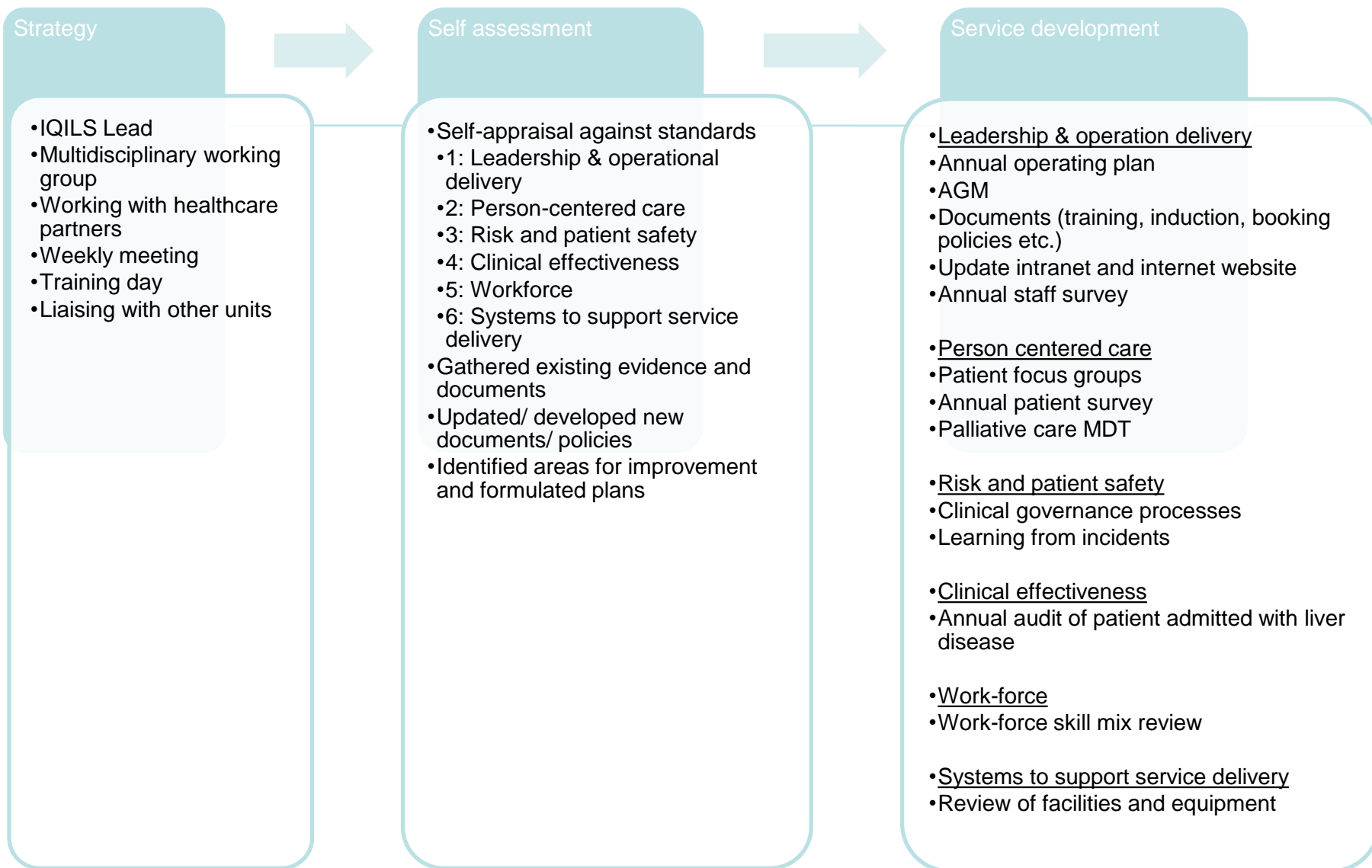
Standard 4: Clinical effectiveness

Standard 5: Workforce

Standard 6: Systems to support service delivery

In what areas does your service need improvement

NOT what changes do we need to make
to 'pass' IQILS



IQILS 2019- 2021

Exceptional healthcare, personally delivered

Service development

- Standard 1
- Leadership & operation delivery
- Annual operating plan
- AGM
- Documents (training, induction, booking policies etc.)
- Update intranet and internet website
- Annual staff survey

Gastroenterology & Liver Medicine (Hepatology)

Our Services

[Major Specialties](#)

[A-Z of Services](#)

[Gastroenterology & Hepatology](#)

[Gastroenterology & Hepatology Outpatients](#)

[Gastroenterology & Hepatology Inpatients](#)

[Gastroenterology &](#)



[Accessibility tools](#)

The Department of Gastroenterology and North Bristol Liver Unit (NBLU) are based in Southmead Hospital. We treat a wide range of conditions of the gastrointestinal tract and liver.

The department consists of ten consultants with complementary interests, including:

- Inflammatory bowel disease (IBD)
- GI bleeding of obscure origin
- Hepatobiliary medicine including biliary manometry and endoscopic ultrasound
- Hepatology including liver transplantation (via links with King's College Hospital) care
- Short bowel
- Bowel cancer screening

Referrals from other hospitals are received for endoscopic retrograde cholangiopancreatography (ERCP), small bowel endoscopy and complex portal hypertension.

The work is supported by nurse specialists in IBD and hepatology, alcohol specialists, specialist pharmacists and specialist dietitians.

Day unit facilities exist for the administration of biologic medications, intravenous iron and

Website redesign and update

IQILS 2019- 2021

Exceptional healthcare, personally delivered

Service development

- Standard 2
- Person centered care
- Patient focus groups
- Annual patient survey
- Palliative care MDT



Patient focus groups

- Redesign of appointment invitation letters
- Adaptation of feedback surveys
- Adaptation of patient information
- Development of transplant peer support

Service development

- Standard 3
- Risk and patient safety
- Clinical governance processes
- Learning from incidents
- Dissemination of information



Service development

- Standard 4
- Clinical effectiveness
- Annual audit of patient admitted with liver disease
- Training programme
- Research portfolio
- Review of facilities and equipment

Standard 4.1

The Liver Service shall create a list of quality metrics that are monitored on a continuous basis.

- Quality metrics (these should align with NICE/BSG guidance and HCV/ODN metrics).

For all liver services:

- Antibiotic prescription in acute variceal bleeding 24 hrs either side of the procedure (Draft NICE guidance).
- Ascitic tap in emergency admissions with ascites.
- Albumin and Antibiotic prescription in patients diagnosed with SBP within 12 hours of diagnosis.
- %of acute admissions with decompensated liver disease seen by a gastroenterologist/Hepatologist within 24 hours of admission.

Service development

- Standard 5
- Work-force
- Work-force skill mix review

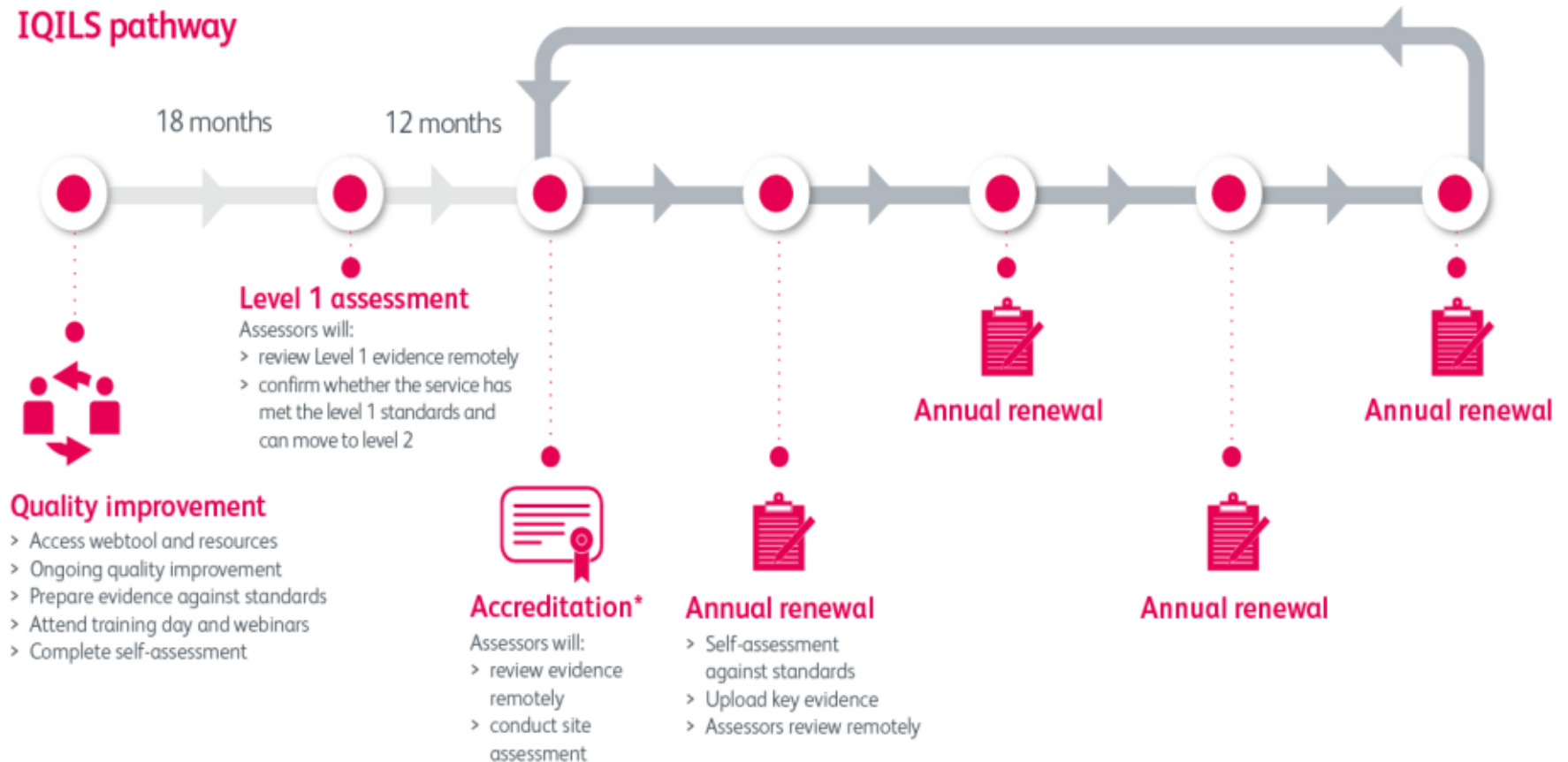


Service development

- Standard 6
- Systems to support service delivery
- Review of facilities and equipment



IQILS pathway



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IQILS accreditation - NBLU

60 centres registered

Ninth unit in the country to achieve Level 1 accreditation (28.04.21)

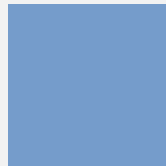
Second unit in the country to achieve full accreditation (25.11.21)

Accredited services

Country	Sector	Accredited	Assessed: Improvements required	Not awarded	Not assessed / undergoing assessment	Total
England	Acute / large	3	0	0	35	45
	Inpatient	0	0	0	7	8
	All	3	0	0	42	53
Wales	Inpatient	0	0	0	6	6
	All	0	0	0	6	6
Northern Ireland	Inpatient	0	0	0	1	1
	All	0	0	0	1	1
Total	All	3	0	0	49	60

Search Enter an address to search nearby

Country	Organisation	Sites	Status
England	Guys And St. Thomas' NHS Foundation Trust	St. Thomas'	Accredited
England	North Bristol NHS Trust	Southmead Hospital	Accredited
England	University Hospital Southampton NHS Foundation Trust	Southampton General Hospital	Accredited



IQILS – what does it mean?

November 2021 – 2nd unit in country to achieve accreditation

- *“I think you've got a strapline somewhere ‘exceptional care, personally delivered’. Well you have certainly lived up to that from my perspective, I've run out of superlatives.”*
 - *“fabulous, fabulous effort from everybody. It's been really fantastic and you should be very, very proud of everything that you have done, so well done”*
 - *“None of the patients could think of anything that could have been improved. They thought they'd received brilliant care. They felt that all the doctors and nurses and admin staff work together as a team and everyone really cared about the quality and standard of the service they were providing. The patients felt they were treated as an individual and everyone was very understanding, kind and caring.”*
 - *“The patients thought the team was really, really good and superb they felt they're in excellent hands and a couple said that they couldn't think of anywhere in the country where they could be receiving better care”*
-

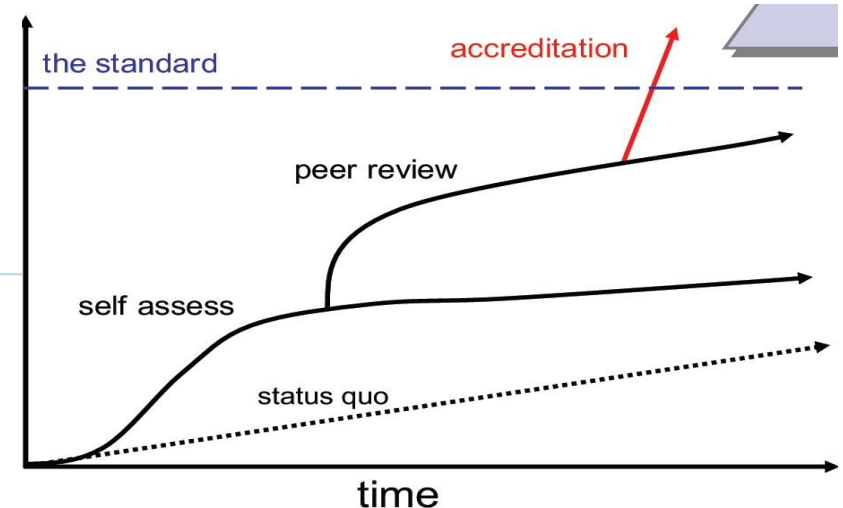
November 2021 – 2nd unit in country to achieve accreditation

- *“regarding the patient focus group, patients able to tell me that the things that they discussed and raised are actually being actioned so they felt it was a really worthwhile group. It wasn't lip service, they were being listened to..... So I think you've got to congratulate yourself there on best practice - it's very, very, very impressive.”*
- *“the standard of evidence that you provided and the narrative was absolutely superb. It's the best I've seen. I've been doing this for five or six years now throughout a number of different specialities and as a lay assessor, it's quite difficult to get some context to some of the evidence that's provided but in this case, the job was really easy for me..... This service is one of the best services I have seen.....”*
- *“really clear pathways with general practice and with acute medicine”*
- *“a very strong leadership team and I think that really comes across throughout the day from lots of people that we spoke to”*
- *“another point we really like to highlight is the focus on training”*

Why did we participate?

- Dedicated to providing exceptional care and improving patient experience
- Document and recognise what we do well
- Actively identify areas for improvement
- Share good practice
- Link to tariff (hepatology tariff for outpatients)
- Link to service provision (e.g. TIPSS/Transplant link services)
- Link to appraisal process/ CQC

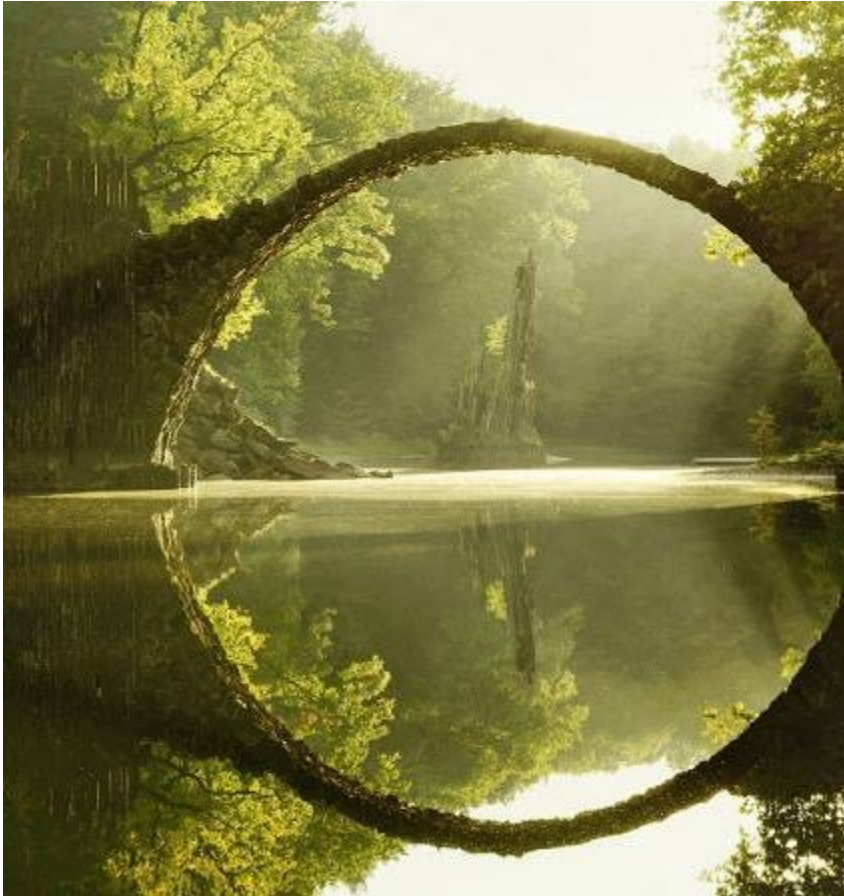
Exceptional healthcare, personally delivered



What does IQILS mean to NBLU?

- Recognises good practice within Trust and CCG
- Pride
- Leading the way.....
- Further motivation to identify gaps and improve
- Attract new staff
- Influences future service delivery plans
 - Develop NASH services
 - Develop regional portal hypertension services
 - Expand research portfolio

Reflections on the IQILS process



- Team effort
- Self-assessment and recognize good practice
- Identify gaps and genuinely improve service
- Pride



Acknowledgments:

- All members of the NBLU team
- IQILS working group
 - Ankur Srivastava (Consultant)
 - Kate Mann (Ward Manager)
 - Katharine Caddick (Specialist nurse)
 - Fiona Jones (Specialist nurse)
 - Holly Shahin (Divisional Governance Lead)
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**Thank you for
listening**

**Any
questions?**