Compassion in Practice

Implementation plans
2014/15

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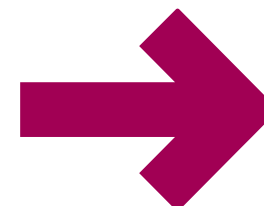
Introduction

The Compassion in Practice strategy was launched in December 2012 by Jane Cummings, Chief Nursing Officer for England.

The aim of the strategy is to re-energise what great care means and put changes in place that translate into real improvements for patients and staff.

The launch followed engagement with over 9,000 nurses, midwives, care staff and patients.

The strategy is supported by six Action Areas.

Action Area 1: Helping people to stay independent, maximising well-being and improving health outcomes

Action Area 2: Working with people to provide a positive experience of care

Action Area 3: Delivering high quality care and measuring impact

Action Area 4: Building and Strengthening Leadership

Action Area 5: Ensuring the right staff with the right skills in the right place

Action Area 6: Supporting a positive staff experience

The priorities and activities of each Action Area are detailed in the implementation plans. The completed plans for 2013/14 and the plans for 2014/15 have now been published online here.

Achievements in 2013/14 include:

- Developed the dementia vision and strategy for the nursing contribution to dementia care, along with e-learning sessions on dementia;
- Issued guidance requiring commissioners to demonstrate how they assess the quality of care experienced by vulnerable groups of patients;
- Recruited a cohort of Trusts to publish and discuss quality metrics and outcomes at each Board meeting

- Launched a network for nurse leaders in commissioning, which focuses on building leadership and capability to commission for compassion
- Working with the National Institute for Health and Care Excellence (NICE) to publish National Quality Board guidance on safe and effective staffing and held events to share this
- Conducted research with a number of NHS trusts to identify good practice in embedding the staff pledges from the NHS Constitution.

Aims for 2014/15 include:

- Work with wider community services to identify the public health nurse role, including support for an a work stream for supporting carers
- Use the 6CsLive! case studies and patient stories as a source of information to demonstrate the 6Cs in action
- Lead work to reduce still births aligned with Open and Honest Care
- Continue to roll out leadership programmes across all disciplines ensuring BME uptake
- Commission the development of a tool for staffing levels for community nursing
- Deliver an agreed national opportunity to recognise implementation of the 6Cs.

If you have a question about Compassion in Practice or the Act please contact: england.sixcslive@nhs.net

6 Action Areas

Action Area 1:
Helping people to stay independent, maximising well-being and improving health

Action Area 2:
Working with people to provide a positive experience of care

Action Area 6:
Supporting positive staff experience

Action Area 3:
Delivering high quality care and measuring impact

Action Area 5:
Ensuring we have the right staff, with the right skills, in the right place

Action Area 4:
Building and strengthening leadership

Care   Compassion   Competence   Communication   Courage   Commitment

care

is our business

NHS England

Helping people stay independent, maximising wellbeing and improving health outcomes.

Senior Responsible Officer (SRO) Dr David Foster, Department of Health

	Objective			National/local/call to action	Owner	Expected completion date
				National Actions		
1	Applying Compassion in Practice in Social Care Settings: working effectively across sectors to help integrate health, care and support services		1a	Develop the narrative that explains person-centred care.	Deputy Director of Nursing and Midwifery	Dec-14
			1b	Promote Compassion in Practice in social care settings.	Deputy Director of Nursing and Midwifery	Dec-15
			1c	Produce guidance for nurse executives and leaders working across health and social care sectors to deliver and hold others to account for improvement to experiences of care.	Deputy Director of Nursing and Midwifery	Jan-15
			1d	Develop tools to equip nurses to support the health and well-being of carers, including: • a professional pathway/guidance for district nurses and General Practice nurses, • e-learning package • roll out of the Carers Champion Programme.	Professional Officer for School and Community Nursing	Dec-15

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Action Area 1
Helping people stay independent, maximising wellbeing and improving health outcomes.

	Objective			National/Local/Call to Action	Owner	Expected delivery date
				National Actions		
2	**Developing the public health role for nursing, midwifery**	2a		Development of a Framework for Personalised Care and Population health for nurses, midwives and allied health professionals as a web-based interactive tool.	Professional Officer for Nursing, Midwifery and Care	Apr-15
		2b		Gather an evidence base to support contemporary public health practice in nursing and midwifery.	Professional Officer for Nursing, Midwifery and Care	Apr-15
		2c		Scope and conduct a needs analysis that maps current public health activities of midwives and maternity support workers to guide workforce planning and educational requirements.	Deputy Director of Nursing and Midwifery	Nov-15
3	**Supporting nurses and midwives to maximise their contribution to *The Dementia Challenge***	3a		Develop *Good Practice Guides - Improving Care for People with Dementia*.	Deputy Director of Nursing and Midwifery	Dec-14
		3b		Develop the public health role of specialist dementia nurses to improve outcomes and experiences of people with dementia.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15
		3c		Develop a pathway document on scoping the needs of people following initial diagnosis of dementia.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15

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Action Area 1
Helping people stay independent, maximising wellbeing and improving health outcomes.

	Objective			National/Local/Call to Action	Owner	Expected delivery date
			National Actions			
4	Develop the nursing contribution to No Health without Mental Health continued		4a	Use feedback from initial clinical testing to develop and refine the *Therapeutic Engagement Questionnaire* and database facilities.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15
			4b	Develop and publish an on-line compendium of good practice examples on improving physical health and care for people with mental health problems.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Dec-14
			4c	Provide professional advice for the development and roll-out of *Positive and Proactive Care*: reducing the need for minimising restrictive interventions in NHS and social care settings.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-16
			4d	Develop an online interactive map of England in conjunction with relevant stakeholders that highlight all services, charities and helplines for suicide prevention.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15

Action Area 1 Helping people stay independent, maximising wellbeing and improving health outcomes.

	Objective		National/Local/Call to Action	Owner	Expected delivery date
		National Actions			
5	Develop a programme of work to reduce the impact of health inequalities for people with learning disabilities	5a	Continue the roll-out of the Health Equalities Framework (HEF) for adults with learning disabilities.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15
		5b	Develop a National Health and Social Care Passport for people with learning disabilities going into acute care.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15
		5c	Improve the public health role of learning disabilities nurses in response to recommendations in Strengthening the Commitment.	Professional Officer for Mental Health, Learning Disabilities and Dementia Care	Mar-15

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Action Area 1
Helping people stay independent, maximising wellbeing and improving health outcomes.

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
6	Giving children and families the best start.	6a	Contribute to the delivery of the Health Visitor implementation plan 2011-15.	Professional Officer for Health Visiting and Public Health Nursing	Mar-15
	Health Visitor Implementation Plan	6b	Support Best Beginnings to implement Small Wonders (a change programme to support families of sick and premature babies to be at the centre of their baby's care) and Bump to Breastfeeding (to increase breastfeeding rates by empowering parents).	Deputy Director of Nursing and Midwifery	Mar-15

Action Area 1
Helping people stay independent, maximising wellbeing and improving health outcomes.

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
7	Giving children and families the best start.	7a	Publish new pathways and a service specification for school nursing services.	Professional Officer for School and Community Nursing	May-14 (Complete)
	School Nursing Development Programme.	7b	Commission a review of the impact of school nursing on improving health outcomes, as outlined in the service specification and pathways.	Professional Officer for School and Community Nursing	Dec-14
		7c	Continue to support implementation of the School Nursing Development Programme.	Professional Officer for School and Community Nursing	Mar-15
		7d	Develop training and tools for district nurses, school nurses and general practice nurses to support young carers.	Professional Officer for School and Community Nursing	Mar-15
		7e	Review existing school nursing pathways.	Professional Officer for School and Community Nursing	Dec-15
8	Maximise the leadership role of specialist community practitioners and public health nurses.	8a	Develop and test leadership and continuing professional development programmes.	Professional Officer for School and Community Nursing	Dec-15
9	Developing skills as 'health promoting practitioners' through Making Every Contact Count (MECC).	9a	Develop a national framework and narrative to support Making Every Contact Count (MECC) for all branches of nursing and midwifery, tailored for each group.	Policy Lead - Making Every Contact Count	Dec-15
10	Ensure practice is supported by appropriate technology.	10a	Technology and social media workshops and support for school nurses, district nurses and general practice nurses.	Professional Officer for School and Community Nursing	Oct-14

Action Area 2
Working with people top provide a positive experience of care.

Senior Responsible Officer (SRO) Neil Churchill, NHS England

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
1	Use feedback from patients to build a rich picture of the 6Cs in action.	1a	Develop and implement ways of gathering good practice examples of using the Friends and Family Test for improving patient experience.	SRO	Dec-14
		1b	Work with stakeholders to look at their sources of feedback and use to influence change and improvements for patients and share best practice.		Feb-15
		1c	Develop access, both direct and through signposting, to key data sources and sources of good practice examples through 6Cs Live, aligned with other information available nationally.		Mar-15

Action Area 2
Working with people top provide a positive experience of care.

	Objective			National/Local/Call to Action	Owner	Expected delivery date
				National Actions		
2	Encourage and support local services and commissioners to seek and act on the views of the most vulnerable patients.		2a	Promote good practice in assessing and improving the experience of care by vulnerable groups of patients through identifying what commissioners and providers are capturing and how they use the information for improvement.	SRO	Oct-14
			2b	Work with stakeholder networks to identify good practice in assessing and improving the experience of care by vulnerable groups of patients, agree effective ways of sharing what works and supporting NHS organisations as appropriate.		Mar-15

NHS England is undertaking a wider programme of work on improving patient experience which is linked with and supports the work of this Action Area. For details see Annex A pages 22-23 http://www.england.nhs.uk/wp-content/uploads/2014/04/ppf-1415-1617-wa.pdf

Action Area 3
Delivering high quality care and measuring impact.

Senior Responsible Officer (SRO) Gill Harris, NHS England

	Objective			National/Local/Call to Action	Owner	Expected delivery date
			National Actions			
1	In-line with national indicators, lead the development and implementation of Open and Honest Care.	1a	Acute: further develop the information set for publication and implement national.		Action Area Lead and Regional Leads	By end of Q4 2015
		1b	Maternity: further develop the information set for publication; scale up regionally then nationally.		Debby Gould	By end of Q4 2015
		1c	Community: further develop the information set for publication; scale up regionally then nationally.		Alison Shaw	By end of Q4 2015
		1d	Mental Health: develop an information set, test and scale up nationally.		Catherine Wardle	During Q2 to Q4 2015
		1e	Research evaluation of the programme to date.		Hazel Richards	During Q2 to Q4 2015
		1f	Draw together the evidence underpinning compassionate practice and how this can be demonstrated.		Compassion in Practice Team	By end of Q4 2015
		1g	Continue to support the 'safety thermometer' development.		Debby Gould	By end of Q4 2015

Action Area 3
Delivering high quality care and measuring impact.

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			Regional Actions		
2	National Programme Management of AA3.		Establish the full PMO for AA3.	Hazel Richards	During Q2 to Q4 2015
3	Stakeholder engagement and patient and public involvement.	3a	Further develop stakeholder map and plan.	Debby Gould	By end of Q3 2015
		3b	Patient and public engagement in the development of each specialty information set.	Debby Gould	By end of Q3 2015
4	Regional Implementation of all Action Areas of CiP.	4a	Programme Board for Compassion in Practice will oversee the regional plans for 6Cs implementation.	Hazel Richards	By end of Q4 2015
		4b	Examples of spread and good practice will be systematically collected and collated through to the national repository.	Hazel Richards	By end of Q4 2015
5	Lead improvement collaborative aligned with Open and Honest Care.	5a	Stop the Pressure.	Debby Gould	By end of Q4 2015
		5b	Reducing Still Births.	Debby Gould	
		5c	A Mental Health programme.	Emma Nunez	
		5d	Human Factors and Investing in Behaviours.	Teresa Fenech	
6	Recruit and realise the potential of Care Makers as catalysts for change.	6	Ensure our Care Maker Recruitment Strategy is realised. Engage regularly and harness their willingness and commitment to implement Compassion in Practice.	Debby Gould	By end of Q4 2015

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Action Area 4
Building and strengthening leadership.

Senior Responsible Officer (SRO) Caroline Alexander, NHS England

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
1	Complete the development of and launch the Care Cultural Barometer	1a	Complete the development of the 'Cultural Barometer' (a tool to measure the culture of an organisation through staff reflection, with a view to improving care) - and launch it for organisations to assess aspects of their culture through conversations with their staff.	Caroline Alexander (SRO)	Mar-15
2	Identify the culture, environment, and conditions required for effective compassionate leadership to develop and flourish	2a	Commission an in-depth review of national and international literature internal to and outside of the NHS to explore and understand the qualities inherent in compassionate leaders and to identify the characteristics required to underpin the environment which enables staff and patient experiences to be optimised through compassionate leadership.	SRO	Completed
		2b	Identify international and national best practice models of compassionate leadership and models for developing compassionate leaders.	SRO	Completed

Action Area 4
Building and strengthening leadership.

	Objective		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
3	Continue to recruit to NHS leadership academy programmes to ensure the target of facilitating 10,000 nurses to participate in leadership courses by 2015	3a	Continue to work with partners to roll out leadership programmes across all disciplines ensuring appropriate representation of black and minority ethnic (BME) staff.	SRO/ D Ashton	Mar-15
		3b	Promote further development of the leadership hub as a resource for the professions and those staff attending leadership programmes.	SRO	Mar-15
4	Implement the programme of work that emanates from the Leadership Think Tank follow up event held in April 2014.		To implement the programme of work that came out of the leadership Think Tank that focuses on: • BME leadership • Compassionate Boards • Leadership to challenge poor practice • Leadership as a good business model.	SRO	Mar-15
5	Organise national and regional leadership events and AA4 week of action.		A series of events throughout 2014/15.	SRO	Mar-15

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Action Area 5a
Ensuring we have the right staff, with the right skills in the right place.

Senior Responsible Officer (SRO) Ruth May, NHS England

		Objectives		National/Local/Call to Action	Owner	Expected delivery date
				National Actions		
1		Work with NICE to establish adequate, and appropriate, staffing levels for all care settings: • Adult in-patients in acute hospitals • Maternity • A&E • Acute wards in mental health inpatient settings • Community nursing teams • Mental health in the community • Learning disability in the community • Learning disability in inpatient settings).	1a	Develop Safer Nursing Care Tool iPad App in partnership with HSCIC. Undertake proof of concept testing on sample of acute hospital sites Investigate implementation options for iPad App and associated reporting system, including cost model and data sharing arrangements.	Ruth May	Mar-15
			. 1b	Develop or commission a nurse staffing tool for use in community mental health settings. Develop a specification for a mental health community tool. Undertake a scoping exercise of available tools across the UK to review functionality and evidence base of existing tools against the specification. Work with a group of key stakeholders to establish pilot sites	SRO/Prof. Janice Stevens/Tim Devanny	Mar-15

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Action Area 5a
Ensuring we have the right staff, with the right skills in the right place.

	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
	Work with NICE to establish adequate, and appropriate, staffing levels for all care settings: • Adult in-patients in acute hospitals • Maternity • A&E • Acute wards in mental health inpatient settings • Community nursing teams • Mental health in the community • Learning disability in the community • Learning disability in inpatient settings).	**1c**	Publish mental health 'staffing in mental health a practical approach' guidance. Promote awareness of guidance through professional nursing press. Work with NICE in relation to NICE accreditation in line with NICE process and timeframes.	SRO	Jan-14 TBC in line with NICE timeframes
		1d	Develop or commission a staffing tool for use in learning disability community settings. Undertake a scoping exercise of available tools across the UK to review functionality and evidence base of existing tools against the agreed specification. Pilot identified tools in range of community settings. Identify suitable tool(s) and if no tool is currently available then undertake a procurement exercise to identify a preferred supplier to develop tool in line with specification with support of key stakeholders.	SRO/ Dr Oliver Shanley/ Programme Lead	Mar-15

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	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
Action Area 5a **Ensuring we have the right staff, with the right skills in the right place.**	Work with NICE to establish adequate, and appropriate, staffing levels for all care settings: • adult in-patients in acute hospitals • maternity • Accident and Emergency (A&E) • acute wards in mental health inpatient settings • community nursing teams • mental health in the community • Learning disability in the community • Learning disability in inpatient settings).	1e	Commission the development of a tool for workforce planning and staffing levels for community nursing, based on population need. Identify the work stream lead. Establish a community tool sub-group, which will report into the steering group. Develop a project and the specification for the development of a community tool. Undertake a scoping exercise of available tools across the UK to review functionality and evidence base of existing tools against a specification.	Hilary Garratt	Mar-15
			Work with a group of key stakeholders to establish pilot sites. Identify suitable tool(s) and if no tool is currently available then undertake a procurement exercise to identify a preferred supplier to develop tool in line with specification with support of key stakeholders. Submit monthly progress reports to Steering Group.		

Action Area 5a
Ensuring we have the right staff, with the right skills in the right place.

Objectives		National/Local/Call to Action	Owner	Expected delivery date
National Actions				
Work with NICE to establish adequate, and appropriate, staffing levels for all care settings: • adult in-patients in acute hospitals • maternity • A&E • acute wards in mental health inpatient settings • community nursing teams • mental health in the community • learning disability in the community • learning disability in inpatient settings).	**1f**	Collate information on existing tools in use across the UK and support the development of tools for specialised areas including: • acute assessment units • children's in-patients • elderly care • accident and emergency	SRO	Mar-15 (Phased development of tools over this period)
	1g	Progress updates to be included in CNO bulletin and 6Cs live website. Publish articles highlighting workstreams and outcomes in professional nursing press.	SRO	Ongoing
	1h	Develop education and training package to support safe and effective staffing.	SRO, Lisa Bayliss-Pratt and Pauline Milne	Jul-15

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Action Area 5a
Ensuring we have the right staff, with the right skills in the right place.

	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
	Work with NICE to establish adequate, and appropriate, staffing levels for all care settings: • adult in-patients in acute hospitals • maternity • A&E • acute wards in mental health inpatient settings • community nursing teams • mental health in the community • learning disability in the community • learning disability in inpatient settings).	1i	Commission overview of nursing and midwifery shift patterns, using existing secondary data sources, with particular focus on the impact of 12 hour shifts on patients and staff using links to data held by RCN. Disseminate key learning points to nursing and midwifery workforce.	SRO and Virginia Minogue	Oct-14
		1j	Research links between outcomes (patient and staff) and staff numbers. Investigate options for National Institute of Health Research (NIHR) funded research studies on nurse staffing.	To be reviewed by Virginia Minogue and SRO	Mar-15 On-going
2	Providers to review supervisory status for ward managers and team leaders.	2a	In conjunction with Action Areas 4 and 6, undertake or commission an assessment of ward or community nurse/midwifery leaders having a supervisory role and the impact of this on patient and staff outcomes.	SRO in partnership with SROs for Action Areas 4 & 6	Dec-14

Action Area 5b
6Cs in education and training.

Senior Responsible Officer (SRO) Lisa Bayliss-Pratt, Health Education England

		Objectives		National/Local/Call to Action	Owner	Expected delivery date
				National Actions		
3		Embed the 6Cs in all nursing and midwifery university education and training	**3a**	Review the content of registered nurse adult branch pre-registration education to ensure all new nurses have skills to work with the large numbers of older people within the care system. [Carried over from 13/14 actions.]	Lisa Bayliss-Pratt (SRO)	Mar-15
			3b	Develop specific post-graduate training for nurses caring for older people with complex needs and frailty in all care settings. [Carried over from 13/14 actions.]	SRO	Mar-15
			3c	FOR CONSIDERATION The 13/14 action plan asked that how 6Cs are already represented in the NMC standards for nursing and midwifery curricula should be investigated and, subsequently, put in a process to ensure any gaps in curricula were remedied. Considering the NMC standards explicitly or implicitly describe the 6Cs, there was no need to undertake this action. However, the CiP programme may wish to include the NMC's evaluation of its education standards which starts this year. The Government's response to recommendation 188 of the Francis Inquiry, says that "the NMC has committed to undertaking a full evaluation of its new education standards, commencing in 2014, and will have particular regard to issues of caring and compassion. This will give the Nursing and Midwifery Council an evidence base for any further revisions to these new standards, including the need for an aptitude test." If you wish this to be part of the Compassion in Practice programme, it would be best to have the NMC directly involved and reporting on progress. The contact is David Gordon, Council Services Officer, david.gordon@nmc-uk.org. Work with NICE in relation to NICE accreditation in line with NICE process and timeframes.		

Action Area 5b
6Cs in education and training.

	Objectives		National/Local/Call to Action	Owner	Expected delivery date
National Actions					
4	Value based recruitment and appraisal	4a	Investigate with higher educational institutions if 'values' is a reason for students dropping out/or failed from undergraduate programmes, and the attrition rate of students coming through clearing.	SRO	Mar-15
		4b	Deliver a national values-based recruitment framework and associated tools and resources and ensure that selection into all new NHS funded training posts incorporates testing of value based recruitment.	SRO	Mar-15
		4c	Work with the NMC, professional leaders and trades unions to develop and implement the two current pre-degree care pilots (autumn 2013 and spring 2014) and introduce two further pilot cohorts of similar numbers – one in October 2014 and the second in February 2015.	SRO	Sep-15
		4d	Ensure there is a strategy for a robust career development framework for the healthcare support worker (HCSW) workforce.	SRO	Sep-14
5	Effective training, recruitment and induction of support workers	5a	Developing the training and education of the HCSW workforce, especially setting the induction standards which will be embodied in the Care Certificate, with pilots in spring/summer 2014 and roll out to new care assistants from March 2015.	SRO	Mar-15

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	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			National Actions		
1	Establish a national scheme to recognise excellence in the 6Cs, drawing from best practice in the service.	1a	To deliver an agreed national opportunity to recognise implementation of the 6Cs.	SRO	Compassion in Practice awards took place in November at the 2014 CNO Summit (25/26 November 2014)
2	Strengthen the delivery of the NHS Constitution Pledges to staff	2a	Produce an overview or narrative which describes how the NHS Constitution values underpin elements of workforce strategy.		NHS Employers will work with a number of Trusts to identify best practice in taking embedding NHS Constitution pledges and values. Case Studies will be produces and disseminated. Links with the Government's response to the Francis Review will be referenced. Delivery is subject to timely receipt of funding.
		2b	Share and spread best practice in the development of workforce strategies, policies and procedures which are underpinned by the NHS Constitution pledges or locally developed values.		

Action Area 6
Supporting positive staff experience.

Senior Responsible Officer (SRO) Danny Mortimer, NHS Employers (replacing Dean Royles, NHS Employers, from November 2014)

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Action Area 6
Supporting positive staff experience.

	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			Local Actions		
3	Make explicit the link between good staff experience and quality outcomes for patients.	3a	Promote and publicise the evidence base to a wider audience of different professional groups e.g. doctors, nurses and allied health professionals.	SRO	Scoping of delivery plans and timescales for this workstream are underway.
		3b	Undertake a literature review to identify international best practice in linking workforce experience to qualify outcomes for patients.		
		3c	Promote and publicise the existing staff engagement materials to a wider professional audience.		
		3d	Identify gaps in the available literature and research in this area and present a research and development proposal.		
		3e	Identify effective practice in implementing the friends and family test, integrating it with other feedback mechanisms and acting on the feedback obtained.		
		3f	Promote and publicise best practice.		

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Action Area 6
Supporting positive staff experience.

	Objectives		National/Local/Call to Action	Owner	Expected delivery date
			Local Actions		
4	Ensure staff understand their responsibility to report and deal with concerns.	4a	Develop, pilot and evaluate a training programme to support nurse/service managers with techniques to better equip them in dealing with concerns raised by staff.	SRO	Scoping of delivery plans and timescales for this workstream are underway.
		4b	Consistently applying the Home Office's barring regime: Patients First and Foremost, March 2013).		
5	Commit to working with local employers to improve experience in the workplace.	5	Deliver training in selected organisations		Scoping of delivery plan and timescales for the workstream are underway.

Compassion in Practice product list 2014/15

Action Area 1
Helping people stay independent, maximising wellbeing and improving health outcomes.

Products	Further information
Developed the dementia vision and strategy for the nursing contribution to dementia care, along with e-learning sessions on dementia.	https://www.gov.uk/government/publications/making-a-difference-in-dementia-nursing-vision-and-strategy
Worked with CCGs to promote the use of tools to measure and reduce impact of health inequalities.	http://www.ndti.org.uk/publications/other-publications/the-health-equality-framework-and-commissioning-guide1/
Completed a summary of NICE guidelines to develop an accessible evidence base for midwifery in public health practice.	https://www.gov.uk/government/publications/nice-guidance-summary-for-public-health-outcome-domain
Published a common purpose framework for the integration of care and local services.	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198748/DEFINITIVE_FINAL_VERSION_Integrated_Care_and_Support_-_Our_Shared_Commitment_2013-05-13.pdf
Implemented 'Care in Local Communities', a new vision and model for district nursing.	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213363/vision-district-nursing-04012013.pdf
Published guidance supporting effective commissioning of school nursing services to provide public health for school aged children.	https://www.gov.uk/government/publications/school-nursing-public-health-services

Action Area 2
Working with people top provide a positive experience of care.

Products	Further information
Developed links with the Friends and Family Test team to use available and additional insight and feedback from the 6Cs in action.	http://www.insights.england.nhs.uk/social
Oversaw the implementation of the Friends and Family Test across A&E, in-patient and maternity services, with well over a million responses.	
Published 'Safe, compassionate care for frail older people using an integrated care pathway: Practical guidance for commissioners, providers and nursing, medical and allied health professional leaders'.	
Issued guidance requiring commissioners to demonstrate how they will assess the quality of care experienced by vulnerable groups of patients.	Guidance on Strategic and Operational Planning 2014 to 2019 requires commissioners to demonstrate how they will assess the quality of care experienced by vulnerable groups of patients and how and where experiences will be improved for those patients.
Introduced a Quality Premium and national CQUIN for the Friends and Family Test.	A Quality Premium and national CQUIN introduced for Friends and Family Test. NHS England Transforming Participation Programme is delivering this work. There are a range of existing measures and tools available to help monitor and evaluate progress in individual participation such as the National inpatient survey, GP patient survey, Patient Reported Outcome Measures (PROMS). There is a focus on: • Making arrangements for the public to be engaged in governance arrangements by ensuring that the CCG governing body includes at least two lay people. • Publishing evidence of what 'patient and public voice' activity has been conducted, its impact and the difference it has made.

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Action Area 3
Delivering high quality care and measuring impact.

Products	Further information
Undertook focus groups to identify outcomes and measures of the 6Cs which are meaningful to patients, carers and the public drawn from clinical staff and patient stories.	
Established an acute expert reference group to make recommendations to CNO and Regional Chief Nurses.	Now part of Open and Honest Care Programme.
Recruited a cohort of Trusts to publish and discuss quality metrics and outcomes at each Board meeting.	

Products	Further information
Established the National Nursing Federation Group, bringing together the senior nurse leaders from all health and care organisations.	
Completed a pilot with an acute Trust on how all ongoing work to measure organisational culture (such as the Cultural Barometer) links together.	
Implemented ten cohorts for a new leadership programme for ward managers, team leaders and nursing directors based on values and behaviours of the 6Cs.	
Launched a network for nurse leaders in commissioning, which focuses on building leadership and capability to commission for compassion.	
Major field and desk research study and practice guide into the role of leadership in compassion.	
Online guide to staffing in mental health clinical settings.	

**Action Area 4
Building and strengthening leadership.**

Action Area 5a
Ensuring we have the right staff, with the right skills in the right place.

Action Area 5b
6Cs in education and training.

Products	Further information
Worked with NICE to publish National Quality Board guidance on safe and effective staffing and held events to share this.	http://www.england.nhs.uk/ourwork/part-rel/nqb/#pub http://shelfordgroup.org/resource/chief-nurses/safety-nursing-care-tool
Held pilots on safe staffing for mental health and learning disability environments.	Six trusts have piloted.
Completed a Nursing and Midwifery Council review on the 6Cs in undergraduate nursing and midwifery curriculum standards.	NMC review of undergraduate nursing and midwifery curriculum standards found the 6cs either explicitly or implicitly described in the standards.
Reviewed how/if values are currently assessed in recruitment by employers and HEIs, and what/if any tools/methodologies have been effective.	Review completed as part of the scope of HEE's priority project on values based recruitment.

Action Area 6
Supporting positive staff experience.

Products	Further information
Compassion in Practice Awards ceremony held on 25 November 2014 at the CNO Summit.	https://www.cnosummit.co.uk/
Conducted research with a number of trusts to identify good practice in embedding the staff pledges from the NHS Constitution and case studies produced. These are available on NHS Employers website and have been promoted via social media and our HRD/Workforce bulletins.	http://www.nhsemployers.org/your-workforce/retain-and-improve/staff-experience/staff-engagement/nhs-staff-pledges http://www.nhsemployers.org/your-workforce/retain-and-improve/staff-experience/staff-engagement/nhs-staff-pledges/staff-pledge-on-health-and-wellbeing http://www.nhsemployers.org/your-workforce/retain-and-improve/staff-experience/staff-engagement/nhs-staff-pledges/fulfilling-staff-potential http://www.nhsemployers.org/your-workforce/retain-and-improve/staff-experience/staff-engagement/nhs-staff-pledges/staff-involvement-and-raising-concerns

Action Area 6
Supporting positive staff experience.

Products	Further information
NHS Employers commissioned a literature review. This was completed by Jeremy Dawson of Sheffield University. This is available on NHS Employers website and has been promoted via social media and our HRD/Workforce bulletins.	http://www.nhsemployers.org/case-studies-and-resources/2014/07/research-report-staff-experience-and-patient-outcomes
Collected and further reviewed evidence based good practice for clinical placements of students, and preceptorship. **These are available on NHS Employers website and have been promoted via social media and our HRD/Workforce bulletins.** **Supervision/supervisory nursing: unable to collect information- see detailed note below table.**	Placements: Used four trusts' case studies to develop 'What makes a good placement' – set in the context of the 6Cs: http://www.nhsemployers.org/case-studies-and-resources/2014/08/what-makes-a-good-student-placement Preceptorships: published on NHS Employers website one case study from Royal Chesterfield Hospitals on their preceptorship review: http://www.nhsemployers.org/case-studies-and-resources/2014/08/an-improved-preceptorship-offer-at-chesterfield-royal Published an interview with Rotherham NHS Foundation Trust's preceptorship lead on their approach to preceptorships: http://www.nhsemployers.org/your-workforce/retain-and-improve/staff-experience/preceptorships-for-newly-qualified-staff/a-personal-approach-to-preceptorships-at-rotherham

Action Area 6
Supporting positive staff experience.

Products	Further information
Held 'Image of Nursing' roundtable.	Notes sent to all attendees and delegates that were unable to attend: http://sites/empservices/cip/Image%20of%20Nursing/Image%20of%20Nursing%20notes.pdf
Published raising concerns pages and resources – an editable flowchart, top tips and three different poster designs. Raising concerns briefing page in the Compassion in Practice section of the NHS Employers website.	Editable flowchart on the process of how to raise a concern: http://www.nhsemployers.org/case-studies-and-resources/2014/08/model-process-flowchart-for-raising-concerns Top tips for raising concerns published: http://www.nhsemployers.org/case-studies-and-resources/2014/04/top-tips-for-reporting-concerns Three raising concerns posters: http://www.nhsemployers.org/your-workforce/retain-and-improve/raising-concerns-at-work-whistleblowing/tools-and-resources
Reviewed and revised 'excellence in nursing' to make it align to the 6Cs and in line with Compassion in Practice.	http://www.nhsemployers.org/your-workforce/plan/nursing-workforce/nursing-education-and-training/excellence-in-student-nursing-placements

The 6Cs: values essential to compassionate care

NHS England

✔ **Care**

Care is our core business and that of our organisations; and the care we deliver helps the individual person and improves the health of the whole community.

Caring defines us and our work. People receiving care expect it to be right for them consistently throughout every stage of their life.

✔ **Compassion**

Compassion is how care is given through relationships based on empathy, respect and dignity.

It can also be described as intelligent kindness and is central to how people perceive their care.

✔ **Competence**

Competence means all those in caring roles mist have the ability to understand an individual's health and social needs.

It is also about having the expertise, clinical and technical knowledge to deliver effective care and treatments based on research and evidence.

✔ **Communication**

Communication is central to successful caring relationships and to effective team working. Listening is as important as what we say. It is essential for 'No decision without me'.

Communication is the key to a good workplace with benefits for those in our care and staff alike.

✔ **Courage**

Courage enables us to do the right thing for the people we care for, to speak up when we have concerns.

It means we have the personal strength and vision to innovate and to embrace new ways of working.

✔ **Commitment**

A commitment to our patients and populations is a cornerstone of what we do. We need to build on our commitment to improve the care and experience of our patients.

We need to take action to make this vision and strategy a reality for all and meet the health and social care challenges ahead.

Compassion in Practice: Two years on

The latest report on the progress made so far was launched at the 2014 CNO Summit 25-26 November 2015. Called Compassion in Practice: Two years on, the report includes a foreword from Jane Cummings, Chief Nurse England, and talks about how the values of the 6Cs are spreading across health and social care and informing the commissioning process, along with the important role Care Makers play in bringing the vision to life.

Download the report here: Compassion in Practice: Two years on