Use of Resources
Supporting services to deliver quality healthcare
Use of Resources
Quality Assessment and Improvement: Specialist Palliative Care Services, May 2014
Welcome to the Use of Resources Quality Assessment and Improvement Workbook. This workbook will support assessment teams in preparing for assessment against Theme 7 of the National Standards for Safer Better Healthcare.

There are 2 Standards and 2 Essential Elements of Quality under Theme 7. The Essential Elements are specific, tangible translations of the National Standards. They represent those key aspects of quality you would expect to see within a service that is delivering safe, sustainable, high quality care. There are four Levels of Quality for each Essential Element. These Levels build on each other and allow services to objectively assess the Level of Quality and maturity that most accurately reflects their service. The contents within each Level are guiding prompts as to what a service should be achieving for that Level and are not specific criteria that must be in place. Progress through these ascending Levels of Quality assumes that the main aspects of quality within the previous Level have been achieved before you move to the next Level.

Given that the National Standards for Safer Better Healthcare are relatively new to the healthcare system, it is recognised that implementing these standards may be challenging and require significant effort by services. Therefore a guiding principle of the assessment is to create a process of continuous quality improvement progressing towards full implementation. In some cases services may not have progressed as far along their quality journey compared to other services. This may result in services determining that for some Essential Elements and Standards they have not yet achieved ‘Emerging Improvement’, the first Level of Quality. In this instance services should not select a Level of Quality for these Essential Elements; instead they should consider outlining in the Additional Information section the necessary actions they need to implement to achieve ‘Emerging Improvement’ and higher Levels of Quality.

A list of examples of evidence is provided to support you in verifying your selected Level of Quality for each Essential Element. This list is intended as a guide and services can include additional evidence that better supports their selected level.

Similarly services may wish to consider the following bullets to guide them in providing additional information to support their assessment.

- Structures and processes in place and how they have been evaluated.
- Strategies and plans developed and implemented.
- Risks identified and improvement actions taken.
- Challenges to progressing to higher levels of quality.
- Outcomes achieved and examples of good practice.

### Levels of Quality

<table>
<thead>
<tr>
<th>Levels of Quality</th>
<th>Description</th>
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<tbody>
<tr>
<td>Emerging Improvement (EI)</td>
<td>There is progress with a strong recognition of the need to further develop and improve existing governing structures and processes.</td>
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<tr>
<td>Continuous Improvement (CI)</td>
<td>There is significant progress in the development, implementation and monitoring of improved quality systems.</td>
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<tr>
<td>Sustained Improvement (SI)</td>
<td>Well established quality systems are evaluated, consistently achieve quality outcomes and support sustainable good practice.</td>
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<tr>
<td>Excellence (E)</td>
<td>The service is an innovative leader in consistently delivering good service user experience and excellent quality care.</td>
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The key output of this assessment is the development of improvement actions which will support your service in implementing the National Standards for Person Centred Care and Support and improving the quality of your service.

An overview of the steps within the assessment process for the National Standards for Safer Better Healthcare is illustrated in Figure 1.

**Figure 1 Overview of Assessment Process**
7. USE OF RESOURCES

<table>
<thead>
<tr>
<th>STANDARD</th>
<th>ESSENTIAL ELEMENTS</th>
<th>WHAT A SERVICE USER CAN EXPECT OR EXPERIENCE WHEN A SPECIALIST PALLIATIVE CARE SERVICE IS MEETING THIS STANDARD.</th>
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</table>
| **STANDARD 7.1**  
Service providers plan and manage the use of resources to deliver high quality, safe and reliable healthcare efficiently and sustainably. | Governance and Management of Resources | The healthcare service is making the best use of resources available to them and takes account of your views, the views of your family, and staff in using resources. |
| **STANDARD 7.2**  
Service providers have arrangements in place to achieve best possible quality and safety outcomes for service users for the money and resources used. | Best Outcomes and Value for Resources Used | The healthcare service continually seeks to get best value for resources used in delivering safe, quality healthcare. |
**STANDARD 7.1**

*Service providers plan and manage the use of resources to deliver high quality, safe and reliable healthcare efficiently and sustainably*

**Essential Element: Governance and Management of Resources**

The use of resources are planned, managed and effectively governed.

<table>
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<tr>
<th>LEVEL OF QUALITY</th>
<th>GUIDING PROMPTS</th>
<th>SELECT</th>
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| **Emerging Improvement (EI)**     | • Governance arrangements support clear lines of accountability for management of resources e.g. delegation of authority to the executive team, standard procedures for delegated tasks.  
• Finance committee support and provide assurance to executive governing committees.  
• Service plan aligns financial plan allocation to service plan objectives and contingency plans are developed.  
• Performance reports against service plan are developed, monitored and reported to governing committees.  
• Risk assessments of significant resource decisions are undertaken to include impact on service user safety and quality. |        |
| **Continuous Improvement (CI)**   | • Implementation of plans to address variances in performance against service plan.  
• Internal and external resource audits are completed and inform action plans.  
• Consultation and transparency on resource decisions with service users, families and staff.  
• Ongoing service planning takes into account capital and equipment needs and reduction of waste.  
• Resource decisions are informed by quality and safety priorities, ethical implications, risk assessments, benchmarking and the views of service users, families and the workforce.  
• Systems are developed to gain better understanding of the costs of the service. |        |
| **Sustained Improvement (SI)**    | • Consistent performance in achieving service plan targets within budget allocation.  
• Consistent achievement of savings targets.  
• Audit structures are well established and provide timely accurate information on use of resources which informs good decision making. |        |
| **Excellence (E)**                | • Partnership with other agencies to improve financial intelligence.  
• Reporting on the use of resources is available to service users and families.  
• Fully costed pathways and services to support implementation of government policy. |        |
Evidence to verify selected level of quality

Examples

- Governing arrangements that support resource management.
- Terms of reference for finance and audit committees.
- Risk assessments of significant cost containment plans.
- Reports on achievement of service plan key performance indicators.
- Reports from the financial auditor reviewing compliance with national financial regulations.
- Remedial action plans for non compliance with legislation.
- Signed review of internal controls assurance.

Add your own evidence

Additional information
Essential Element: Best Outcomes and Value for Resources Used

The healthcare service continually seeks better outcomes and value for resources used in delivering healthcare services.

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<th>LEVEL OF QUALITY</th>
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| Emerging Improvement (EI) | • Individual and collective accountability and responsibility for resource management is clear to staff.  
• Service plan outlines quality and safety outcomes for resources allocated.  
• Service procures in line with national procurement policy.  
• Best available evidence is used to inform investment and disinvestment decisions. |        |
| Continuous Improvement (CI) | • Governing committee receive reports on resource management e.g. planned and actual financial outcomes and quality outcomes.  
• Governing committee systematically reviews contracts to optimise quality and cost.  
• Staff are encouraged and enabled to submit their views and ideas on opportunities for improving quality and safety outcomes, efficiencies and elimination of waste and duplication.  
• Cost effectiveness of new and existing services and technologies are reviewed and inform planning.  
• Implementation of initiatives that improve outcomes and reduce costs e.g. HCAI prevention, falls prevention, medication safety. |        |
| Sustained Improvement (SI) | • Consistent achievement of outcomes e.g. quality outcome and financial targets.  
• Active engagement with clinical leads to improve cost effectiveness of services provided.  
• Learning from service evaluations informs changes to current and future service plans. |        |
| Excellence (E)          | • Governing committees learn from other service providers to improve outcomes for resources used.  
• Partnership with other internal and external services to improve outcomes for service users and their families. |        |
Examples

- Compliance with local procurement policy.
- Health technology assessments informing resource decisions.
- Implementation and evaluation of cost saving initiatives e.g. preferred drugs list initiative, efficient use of national resources such as water and electricity, reduction of harm to environment.
- Improved performance against quality indicators with no increase in resources.
- Implementation of initiatives based on staff feedback to reduce duplication and waste.
- Implementation of effective international initiatives.

Evidence to verify selected level of quality

Add your own evidence

Additional information
### Improvement Actions for Theme 7: Use of Resources

<table>
<thead>
<tr>
<th>Standard</th>
<th>Essential Element</th>
<th>Improvement Action</th>
<th>Responsible Team Member</th>
<th>Due Date</th>
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