

STANDARD SETTING
A Practical Approach

For Adrian

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June Girvin



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First published 1995 by
MACMILLAN PRESS LTD
Houndmills, Basingstoke, Hampshire RG21 2XS
and London
Companies and representatives
throughout the world

ISBN 978-0-333-59872-6 ISBN 978-1-349-13287-4 (eBook)
DOI 10.1007/978-1-349-13287-4

A catalogue record for this book is available
from the British Library.

10 9 8 7 6 5 4 3 2 1
04 03 02 01 00 99 98 97 96 95

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Preface

I have wanted to write a book like this for a long time. Like a lot of first-time writers I thought that I did not have the skills required, and I could not quite believe that people would actually want to read what I might write. Kerry Lawrence, and later Margaret O’Gorman, both of the Macmillan Press, encouraged me to take the plunge and this text is the result. The book is based upon my experiences and expertise gained using the Royal College of Nursing’s Dynamic Standard Setting System (DySSSy), and several years of working with nurses on monitoring and improving their practice.

DySSSy was developed into a usable framework by Professor Alison Kitson of the Royal College of Nursing’s Dynamic Quality Improvement Programme based at the National Institute of Nursing, Oxford. I want to thank Alison for the support and practical assistance she has freely given me during the past five or six years and I unreservedly acknowledge her influence and her generosity. The founding members of the RCN’s Quality Assurance Network (QUAN) have been a source of support and friendship over the years and have influenced my work and my career plans far more than I suspect they realise.

I also want to thank the nurses who contributed their stories and standards to this book and made the whole project possible, especially my clinical colleagues in Wales. If this book is a success it will be because of their candour and willingness to share not only their successes, but some of their more difficult moments too. Many of the comments quoted in the text were noted during

workshops on standard setting and auditing carried out throughout Wales when the author was employed as Nursing and Midwifery Audit Co-ordinator (Wales) between 1991 and 1993. It was largely as a result of the comments and conversations from these workshops that the need for a simple text on standard setting became clear. I hope that this book goes some way towards meeting the needs of those nurses who welcomed me so enthusiastically into their work areas to help them with the mechanics of standard setting and monitoring.

Chrissy Dunn, Practice Development Nurse at Battle Hospital, Reading, has been an invaluable source of good sense and quiet advice. Without her to share the uncertainties, triumphs and tribulations of making quality assurance accessible and acceptable to busy nurses I would have given it all up long ago. Much of what is written here, Chrissy has been putting into practice for years. Long may she continue to do so.

I want to thank Poppy Moon, who made sense out of the figures for me, and Chris Baker who read and re-read numerous drafts of the text (until she could recite great chunks of it!) with enthusiasm and encouragement. Her staff of the Child and Adolescent Unit at the Royal Gwent Hospital, Newport, were some of the first nurses that I worked with using these techniques.

I acknowledge the assistance of Hazel Taylor, Director of Nursing and Quality, Glan Hafren NHS Trust (formerly South Gwent Health Unit) who gave permission for work undertaken when the author was employed there as Senior Nurse Special Projects between 1987 and 1991 to be used in some of the figures in this book.

Judith Potter and Ken Dolbear are to be thanked for allowing the use of a standard and audit tool resulting from a collaborative project between Social Services and the Swindon and Marlborough NHS Trust during the author's employment as Executive Director of Nursing and Quality.

Finally, I thank my husband, Adrian, who for the past nineteen years has believed in me totally and fiercely, and who must be heartily sick of eating, sleeping and breathing nursing and nursing developments! It is his contribution to my confidence that I am most grateful for.

June Girvin

Introduction

For much of the past six years I have been involved in standard setting with clinical nurses. When I first started out I did not have a clue – I did not know what a standard was, or how to go about writing one, or how it might be used. There were countless occasions when I wished that someone had written a simple text that might help me. Six years on, Macmillan have given me the opportunity to write that simple text myself, and that is exactly what I hope I have done – prepared a simple handbook on the mechanics of standard setting for those who want to have a go but are not sure of where to start.

Almost every day at work I meet with nurses who are confused about quality assurance activities – I hear complaints about remoteness and irrelevance to practice, and there is an unsurprising reluctance to get involved in activities that are meaningless. I meet with other nurses who have a genuine desire to get to grips with standards but who have been totally confused by inadequate training, conflicting methods, and the all too common problem of the organisation flitting from one quick fix for quality to another.

In the areas of England and Wales where I have been actively and persistently involved with nurses setting standards, I have seen the changes, improvements and motivation that such an approach can encourage. When people know what they are doing, standard setting is a wonderful mechanism for making things happen. It works. Knowing what you are doing, however, takes a bit of practice, and requires encouragement, coaching, a good grasp of the practical skills and knowledge of where those practical

skills fit into the bigger picture. Standards are part of a whole cycle of activities – identifying areas for improvement, setting the standard that you want to reach, monitoring that standard, and taking any remedial action required. These component parts cannot be separated – must not be separated. Standards are pointless if you are not going to attempt to improve upon them, pointless if you are not going to monitor them, pointless if you have no intention of acting upon the results of your monitoring.

Standard setting is only one link in a chain of activities – it is a means to an end and **never** an end in itself. It is the first step into practical quality improvement. It is not just fine words and clever theories, but a truly practical way of tackling quality improvement in a busy work environment.

The aim of this book is to provide nurses (primarily, though I hope the book will be useful for others) with limited experience of standard setting with an introduction to the basic skills required and some down to earth advice on how to get started and keep going through the whole chain of activity. It is not an academic reader on quality assurance, but a simple handbook of techniques. It has its limitations, and I freely acknowledge them – some will accuse me of being simplistic, of not giving enough background information, of not setting the subject in context, of being mechanistic, and so on. Some may decry its informal style or its amateur approach.

I have written this book in the same way that I speak, and I have relied upon my editor to let me know when this does not work. I have run successful workshops and have given some well-received talks and papers on standard setting – I hope the style is equally successful in print.

The quality of nursing care provided to patients is very important to me. Important enough to have led me to take a number of jobs through which I have tried to influence a wider and wider section of the profession. Equally important to me is finding ways of helping nurses to under-

stand how they can make the quality of their care explicit, how they might monitor that quality and how they can influence what happens in their sphere of practice through standards. I hope that those who read and use this book will find themselves beginning to appreciate how standard setting can be an educational device, a mechanism for change, an organisational tool and a springboard for professional development. Yes, it can be all of these things.

All of my experience in working with standards has been gained using the Royal College of Nursing's Dynamic Standard Setting System (DySSSy). I have worked with the RCN's Standards of Care team, now the Dynamic Quality Improvement team, since I started in standards and much of what I have learned has come through them. This book uses the basic principles of DySSSy throughout, and all the examples follow its format to a lesser or greater degree. However, this book is about how I use DySSSy and as such may differ occasionally from the original. DySSSy is an excellent framework, but you have to make it work through people; you have to understand its mechanics and you have to realise its philosophy. Any standards contained in this text are not meant to be seen as good or bad examples. They are simply there to illustrate the relevant point, and should not be seen as cast in tablets of stone or examples of excellence. I am sure that they will be scrutinised and judged by anyone who has ever written a standard – it is important to remember that they have been written by nurses (and occasionally other professionals) at varying stages of development and with varying levels of expertise. They are examples based on actual practice experiences and were not written especially for this book, but were freely given to be used as illustrations.

The aim of this book is to give more nurses the confidence to participate in and influence the quality and audit processes in their workplace. If this is achieved it will have been well worth the effort of the last eighteen months.