

## The 6Cs

### 1. 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.

### 2. 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.

### 3. competence

Competence means all those in caring roles must 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.

### 4. communication

Communication is central to successful caring relationships and to effective team working. Listening is as important as what we say and do.

It is essential for "no decision about me without me". Communication is the key to a good workplace with benefits for those in our care and staff alike.

### 5. 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.

### 6. 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.

### 5. Ensuring we have the right staff, with the right skills in the right place

#### National Actions:

- Develop evidence based staffing levels for mental health, community, learning disability services and care and support
- Embed the 6Cs in all nursing and midwifery university education and training
- Value based recruitment and appraisal
- Effective training, recruitment and induction of support workers

#### Local Actions:

- Boards sign off and publish evidence based staffing levels at least every 6 months, linked to quality of care and patient experience
- Providers to review Supervisory status for Ward Managers and Team Leaders

#### Call to Actions:

- Deploy staff effectively and efficiently; identify the impact this has on the quality of care and the experience of the people in our care

### 6. Supporting positive staff experience

#### National Actions:

- National scheme to recognise excellent implementation of 6Cs
- Plan to support care staff within the workplace
- Review implementation of the Cultural Barometer once pilots have taken place
- Evidence based good practice for clinical placements of students, preceptorship and supervision
- Review the 'Image of Nursing' work and develop actions

#### Local Actions:

- Strategies to secure meaningful staff engagement
- Implement the Friends and Family Test for staff
- Commissioners to ensure locally agreed targets to deliver high quality appraisals for their staff

#### Call to Actions:

- Commit to working with local employers to improve experience in the work place

## Our Culture of Compassionate Care



## The Next Steps

To see the latest information about the implementation of the Vision & Strategy for Nurses, Midwives and Care Staff please visit: [www.commissioningboard.nhs.uk/nursingvision](http://www.commissioningboard.nhs.uk/nursingvision)

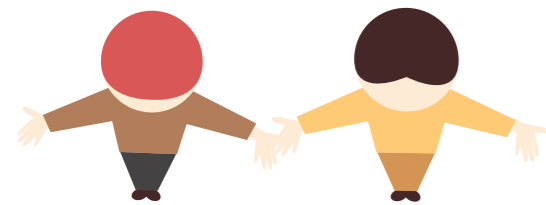
## Exec Summary

To be a nurse, a midwife or member of care staff is an extraordinary role. What we do every day has a deep importance. We are at the heart of how people in this country keep themselves independent, healthy and well for longer.

We help people to recover from illness, and support people in living with illness. We provide care and comfort when people's lives are coming to an end. The compassion and humanity we show shapes the culture of our health service and our care and support system.

We care for everyone, from the joy at the beginning of new life to the sadness at its end. We do so in the privacy of people's homes, in the local surgery, in the community, in care homes, in hospices and in hospitals. We support the people in our care and their families when they are at their most vulnerable and when clinical expertise, care and compassion matter most.

But there are big challenges. People also encounter care that falls short of what they have a right to expect, sometimes by a long way. We know we miss too many opportunities to support people to keep well, connected and healthy. Society and the health, care and support system is changing fast, and we will need to adapt in order to prosper and to continue to care for people well.



We acknowledge this and our professional commitment and values drive our determination to tackle these issues. We all joined our professions to make a difference. We have the potential to transform the care, advice and support that people receive from us.

We must seize this opportunity to create a future where people are placed at the heart of care and are treated with compassion, dignity and respect by skilled staff who have the competence and time to care, a future where the unbounded potential of our professions to provide compassionate care, promote independence, health and well-being is properly unleashed. This is our vision, and we have developed a strategy with you to make it a reality.

## The Vision and Strategy for Nurses, Midwives and Care Staff The 6 Areas of Action

### 1. Helping people to stay independent, maximising well-being and improving health outcomes

#### National Actions:

- Policy and programmes for:
  - Making every contact count
  - Maximising the leadership role of SCPHN
  - The public health role of midwives
  - Health visitor and school nursing plans
  - Dementia Challenge
  - 'No health without Mental Health'
- Developing accessible evidence based on NICE guidance
- Actively engaging across sectors, leading work effectively, integrating health, care and support

#### Local Actions:

- Make 'every contact count'
- Support nurses and midwives to maximise their contribution to the 'Dementia Challenge'
- Ensure practice is supported by appropriate technology

#### Call to Actions:

- Develop skills as 'health promoting practitioners' making every contact count

### 2. Working with people to provide a positive experience of care

#### National Actions:

- Provide rapid feedback from patients to build a rich picture of the 6Cs in action
- Support local services to seek the views of the most vulnerable
- Use feedback to improve the reported experiences of patients
- Identify strong patient experience measures that can be used between settings and sectors

#### Local Actions:

- Support the roll out of the Family and Friends test
- Rollout of the public reporting of pressure ulcers, falls, patient and staff experience and Safety Thermometer

#### Call to Actions:

- Actively listen to, seek out and act on patient and carer feedback, identifying any themes or issues and ensuring the patient and carer voice is heard



### 3. Delivering high quality care and measuring impact

#### National Actions:

- Publish 'High Quality Care Metrics for Nursing' by the National Nursing Research Unit
- Identification of metrics and indicators, which reflect compassion and effective care
- Development of the Safety Thermometer in mental health, learning disability, children and young people
- Publish information that identifies the quality of care and informs patients and the public

#### Local Actions:

- Publish & discuss quality metrics and outcomes at each Board meeting.
- Enable staff to gain knowledge and skills to interpret data.
- Ensure measurement and data collection is effective and simple.

#### Call to Actions:

- Support the measurement of care to learn, improve and highlight the positive impact on the people cared for

### 4. Building and strengthening leadership

#### National Actions:

- Develop a set of tools that enable organisations to measure their culture
- New leadership programme for ward managers, team leaders and nursing directors based on values and behaviours of the 6Cs
- DH will lead work to implement and embed the Leadership Qualities Framework for Adult Social Care and roll this out

#### Local Actions:

- Providers undertake a review of their organisational culture and publish the results
- Providers review options for introducing ward managers and team leaders supervisory status into their staffing structure

#### Call to Actions:

- See ourselves as leaders in the care setting and role model the 6Cs in our everyday care of patients

