

Quality Assurance Committee Update

Trust Board	Item: 16
Date: 28 th September 2016	Enclosure: M
Purpose of the Report: To provide feedback from the Trust Quality Assurance Committee 15 September 2016.	
FOR: Information <input checked="" type="checkbox"/> Assurance <input checked="" type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input type="checkbox"/>	
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	Corporate Quality and safety risks are recorded on the risk register
Legal / Regulatory / Reputation Implications:	CQC registration
Link to Relevant CQC Domain: Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well Led <input checked="" type="checkbox"/>	
Link to Relevant Corporate Objective:	Strategic Objective 1: to deliver quality, patient centred healthcare services with and an excellent reputation.
Document Previously Considered By:	N/A
Recommendations: <ol style="list-style-type: none"> 1. Note the main areas of discussion at the 15 September 2015 Quality Assurance Committee meeting and the assurances gained 2. Note that the next meeting of the Quality Assurance Committee is due to take place on 10 November 2016 3. Note the recommendations from QAC 	

QAC Update to Trust Board September 2016

UPDATE FROM THE 15 SEPTEMBER 2016 QUALITY ASSURANCE COMMITTEE

HEADLINES

Overview of Clinical Quality Safety Reports and Risk Issues: At every QAC there is an overview presentation of clinical quality, risks and assurances which aims to provide the committee with triangulation of data and intelligence for assurance purpose. This information is based on Trust data and reports and any significant quality or safety developments both at the hospital and nationally. The structure of the presentation has been updated so that topics and content are grouped against the 5 CQC Domains: Safe, Effective, Caring, Responsive and Well Led.

Overview from the Divisions

Emergency Services:

- Compliance with the 4 hour target has been inconsistent
- Difficulties in recruiting to essential middle grade posts
- Decision made to recruit physicians assistants and explore other roles in ED
- Significant progress with the work of the faster flow and safer care, discharge and inpatient patient tracking list

Clinical Support Services:

- Successful recruitment to radiographers
- Patient experience a concern in busy anticoagulation clinics – capacity under review
- Phase one of the OPD redevelopment is now open with phase 2 due for the end of November

Specialist Services:

- Recruitment drive to reduce Paediatric nurse vacancies.
- Glaucoma/retinal disease capacity

Trust wide

Safe:

- Maternal readmission outlier response accepted by CQC.
- Hand hygiene results improving but still not acceptable in some areas. These areas are being targeted with support. The committee members expressed concern to ensure that these results rapidly improve.
- Post-Partum Haemorrhage is being reviewed and a deep dive on Caesarean section will come to the next QAC.

Effective:

Reviewed areas where the Trust national audit results were below the national average. There are action plans in place and some early indications show improvements in at least 2 areas.

Quality Priorities update Good progress was noted in projects to:

- Reduce falls in the hospital setting
- Reduce avoidable harm from sepsis
- Reduce use of agency staff by reducing vacancies
- To transform administration across the hospital

Progress on the remaining priorities will be updated at the next QAC

- Annual Clinical Audit and Effectiveness report. This group has overseen improvements in NICE compliance reporting, developed red rated audit action plans and overseen gap analyses for NCEPOD studies.
- Annual Organ Donation Report. Between 1 April 2015 and 31 March 2016, your Trust had one deceased solid organ donor.

Caring:

- The Patient Experience committee is overseeing patient survey action plans and approved the updated Translation policy.
- A Darzi fellow has been appointed to support the End of Life Care Project.

Responsive:

- The complaints response time has improved. The compliance rate for July 2016 was 91%.
- Hematology Review to help the service become more responsive to current needs

Well Led:

The Clinical Quality improvement Committee noted improvements in overdue policies and NEWS improvement project. CQIC also discussed the PHSO Learning from Mistakes and CQC Learning from SIs – national reports. The Trust SI process is being reviewed to ensure best practice is being followed here. A new QIP approved is learning from excellence which is reporting positive events so they can be logged and learning shared similar to the process for incidents.

CQC report and action plan

The CQC action plan is being progressed. The Quality Summit with the CQC and NHSI takes place 19 September 2016. There are 7 must does as well as a number of actions the Trust should do. These are being addressed by the services and overseen by a CQC programme Board. A great deal of progress against actions has already been made.

CQC action plans – service feedback

At each QAC selected services will feedback on their CQC action plans to provide assurance. The services that presented their action plans to this meeting were Trauma and Orthopaedics, Surgery and Maternity. No specific barriers to action were noted and good progress had been made. Some actions will rely on wider system changes and decisions. The services intend to devise plans to show how they will move to an outstanding rating and will utilise patient feedback to achieve this.

Recommendations from QAC

1. The Board note the progress made with the CQC action plans.
2. The Board to note the actions to improve the safety and quality of care.
3. The Board to note that QAC will be requesting more structured representation and feedback from divisions.