

Southwark Council Overview and Scrutiny Committee

25 March 2013

Quality Account Priorities 2013/14

Status: A Paper for *Information*

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Overview and Scrutiny Committee

25 March 2013

A paper prepared and presented by Elizabeth Palmer

1.0 Purpose of the Paper

- 1.1 To present to the Committee the quality priorities for Guy's and St Thomas' NHS Foundation Trust for 2013/14.
- 1.2 In April 2010 the production of an annual 'quality account' by all NHS Trusts in England was laid in statute. Trusts are required to produce a set of quality accounts along with their financial accounts each year. The Trust's quality accounts are published in the annual report to Monitor, on the NHS Choices website, and sent directly to the Secretary of State for Health.
- 1.3 The Quality Account consists of a statement on quality from the Chief Executive, a look-back section on the previous year's performance against a number of quality indicators and a forward looking section which selects a small number of priorities or initiatives to focus on for the forthcoming year. These priorities are developed under the headings of patient safety, clinical effectiveness and patient experience. Guy's & St Thomas' accounts include the performance of the community services provided by the Trust.
- 1.4 The performance section for the previous year is set out in a specific format which is set out in the quality account regulations. This is intended to make it easy for the public to compare the performance of trusts across the NHS.

2.0 Consultation on priorities for 2013/14

- 2.1 As well as a staff consultation at the 'Safety Connections' Conference, two stakeholder events were held December 2012 and January 2013. These were led jointly by representatives from the Chief Nurse and Medical Directors' Offices. The events were very well attended by Trust Governors, Lead GP Commissioners, Lambeth & Southwark LINKs, Local Overview & Scrutiny Committees, and KHP Partners.
- 2.2 At these events stakeholders were asked to review and comment on a final short-list of potential priorities for this forthcoming year. The resulting shortlist of priorities is set out in appendix 1.

3.0 Quality Account Assurance

- 3.1 Review and assurance of the quality account document by key stakeholder groups is prescribed by the quality account regulations.
- 3.2 The assurance process is carried out by providing local commissioners, the local Healthwatch and the local Overview and Scrutiny Committee with a draft of the accounts within the 30 days beginning with the 1st April following the end of the reporting period. At this point the performance information for the full year is available.
- 3.3 Local stakeholders have the opportunity to review the performance information and to comment on whether the information reflects their knowledge and experience of the Trust.

4.0 Recommendation:

The Overview and Scrutiny Committee is asked to:

- **Note the quality priorities for 2013/14**

Elizabeth Palmer

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APPENDIX ONE

Extract from Quality Account: Quality priorities for 2013-14

Patient safety

<i>Our quality priorities and why we chose them</i>	<i>What success will look like</i>
<i>Keeping our patients safe and reducing the risk of harm: a continued focus on reducing the major harms in hospital; with a particular emphasis on pressure ulcers, falls and infection.</i>	<p>We will reduce pressure ulcers in line with our CQUIN targets, with zero attributable grade 4 pressure ulcers across our hospitals and community services.</p> <p>We will reduce moderate and severe harm events associated with falls by at least 10% by the end of quarter 4 in our hospitals and inpatient community services.</p> <p>We will achieve our 2013/14 C.difficile target of no more than 47 cases during the year.</p>
<i>Keeping you informed on how we are doing: transforming how we publish and present our outcome data to our patients and the public.</i>	<p>We will create a 'hub' of quality and patient experience information on our website, increasing the frequency, content and quality of data that we publish, including links to information about our services published by other organisations.</p> <p>Each hospital ward and community inpatient services will publish its Family and Friends Test results and provide regular updates on other performance and patient safety measures including the number of days since the last patient safety incident and what has been done to prevent it happening again.</p>
<i>Capturing how we are doing: implement the national safety thermometer across our hospital and community services.</i>	<p>In line with our acute and community CQUIN; we will embed the national patient safety thermometer in the hospital and roll this out to our community services.</p>

Clinical effectiveness

<i>Our quality priorities and why we chose them</i>	<i>What success will look like</i>
<i>From Board to Ward: focus on assuring the Board of our quality standards and reducing the administrative burden on our front-line clinical staff</i>	<p>Weekly 'Board to Ward' quality reviews will be carried out by the Trust's executive directors.</p> <p>Board to Ward quality improvement: Trust executive directors 'use & test' systems as if they were a ward sister or junior doctor.</p> <p>Report progress via the quarterly Quality and Patient Safety Report</p>
<i>Improve our out-patient department efficiency we have a brand new facility, but can do more to improve efficiency and the patient experience.</i>	<p>We will reduce the number of patients who 'do not attend' for their appointment.</p> <p>We will reduce how long patients have to wait for their first appointment.</p> <p>We will reduce out-patient clinic waiting times.</p>
<i>Improve communication between GPs and community nurses.</i>	<p>We will continue this improvement programme which was started last year.</p>
<i>Protect the future health of local children by improving childhood immunisation rates across Lambeth and Southwark.</i>	<p>We will continue this improvement programme and will increase the xxx immunisation rates by xxx.</p>

Patient experience

<i>Our quality priorities and why we chose them</i>	<i>What success will look like</i>
<i>Improving our complaints and PALs services</i>	We will formally review both our complaints and PALs services and will recommend and consult on improvements to processes that will ensure rapid Trust-wide learning from the feedback we receive.
<i>Improving the care of older people: a continued focus on patients with dementia and their carers.</i>	<p>In line with our CQUIN target we will focus on individualised care of dementia and on early assessment, identification and intervention and on 'caring for the carers' of patients with dementia.</p> <p>We will build on the work we have done using Barbara's Story to build a culture of understanding, knowledge and empathy amongst all staff and will develop the next phase of that project.</p>
<i>Extend user involvement in our 'quality health checks' (known as the ward accreditation assessment) which we carry out on each hospital ward and community inpatient service annually.</i>	<p>We continually assess the quality of our care, including through the annual health check assessment carried out by our staff and governors. We invite representatives from our local community (Overview and Scrutiny Committee, Commissioners, Healthwatch and others) to participate in the assessments and feedback sessions.</p> <p>Following our recent pilot, we will further develop our 'mystery shopper' programme and report our findings and actions to the Board.</p>
<i>Achieve our acute and community patient experience CQUINs in 2013-2014</i>	<p>We will roll out and embed the Family and Friends Test across our hospital wards and the emergency department.</p> <p>We will achieve our community patient experience CQUIN and roll-out of the 'Near Patient Experience' system.</p>