



Council of Governors: Monday 30 April 2018

CoG 2018.10

Title	Oxford University Hospitals NHS FT (OUH NHS FT) Draft Quality Account 2017/18
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Status	For Information
History	The draft 2017/18 Quality Account was presented to Clinical Governance Committee (CGC) in January, March and April 2018, TME April 2018 and Quality Committee April 2018.

Board Lead(s)	Dr Tony Berendt – Medical Director			
Key purpose	Strategy	Assurance	Policy	Performance

Executive Summary

<p>1. The quality report incorporates all the requirements of the Quality Account Regulations as well as a number of additional reporting requirements set by NHS Improvement and NHS England. The quality report specifically aims to improve public accountability for the quality of care.</p>
<p>2. OUH needs to reform and refresh its Quality Priorities for 2018/19 as part of the annual planning cycle and the Quality Account. This is in parallel with the refresh of the Quality Strategy.</p>
<p>3. Each Trust proposes a range of Quality Priorities for the forthcoming year and reports back achievements from the current year. Staff and public engagement is sought when devising quality priorities. Almost 100 patients, public, stakeholders, Foundation Trust governors, members, and staff took part in a Quality Conversation event on Tuesday 16 January 2018. The four priorities the audience chose to carry forward to next year were:</p> <ul style="list-style-type: none">a) Partnership workingb) End of life carec) Preventing patients from deteriorating andd) Go Digital
<p>4. A seminar attended by board members and divisional representatives was held in February, and priorities and objectives are being finalised.</p>
<p>5. The Patient Experience Membership and Quality committee (PEMQ) Committee of the Council of Governors selected the patient experience indicators (Family & Friends test (FFT)) for audit purposes at its meeting held on 22 March 2018.</p>
<p>6. The 2017/18 draft Quality Account including the progress against the 2017 18 Quality Priorities is included for the Council of Governors' consideration and feedback.</p>
<p>Recommendation</p> <p>7. The Council of Governors is asked to review the draft Quality Account.</p>

1. Background

- 1.1 Patients want to know they are receiving the very best quality of care. NHS Improvement requires all NHS Foundation Trusts to produce reports on the quality of care (as part of their annual reports). Quality reports help Trusts to improve public accountability for the quality of care they provide.
- 1.2 Foundation Trusts must also publish quality accounts each year, as required by the Health Act 2009, and in the terms set out in the National Health Service (Quality Accounts) Regulations 2010 as amended¹ ('the quality accounts regulations').
- 1.3 The quality report incorporates all the requirements of the quality accounts regulations as well as NHS Improvement's and NHS England's additional reporting requirements.
- 1.4 NHS Improvement also requires Trusts to obtain external assurance on their quality reports.

2. The Quality Account

- 2.1 The Quality Account is due to be formally submitted to NHS Improvement by 31st May 2018 and published via the NHS Choices website by 29th June 2018.
- 2.2 The draft 2017/18 quality account is appended to this paper.
- 2.3 The content of the Quality Account is largely mandated by statute and includes;
 - 2.1.1. Statement on Quality from the Chief Executive
 - 2.1.2. Statement of Directors' responsibilities in relation to the Quality Account
 - 2.1.3. Articulation of Quality Priorities for the year ahead
 - 2.1.4. Progress report on Quality Priorities identified for the previous year
 - 2.1.5. Review and publication of various other nationally benchmarked data relating to quality (for example, incident reporting)
 - 2.1.6. Review and publication of various other nationally benchmarked data relating to performance
 - 2.1.7. Participation in national clinical audits
 - 2.1.8. Information on research participation
 - 2.1.9. Commissioning for Quality Innovation (CQUIN) goals for the previous year
 - 2.1.10. Statement on compliance with Care Quality Commission (CQC) standards
 - 2.1.11. Statement on data quality
 - 2.1.12. Statements from external reviewers (Commissioners, Health Overview and Scrutiny Committee, NHS England, Auditors – Ernst and Young)

¹ SI 2010/279; as amended by the NHS (Quality Accounts) Amendment Regulations 2011 (SI 2011/269), the NHS (Quality Accounts) Amendment Regulations 2012 (SI 2012/3081) and the NHS (Quality Accounts) Amendment Regulations 2017 (SI 2017/744).

2.1.13. NHS England also have additional requirements to the report including Duty of Candour and the patient safety improvement plan as part of Sign up to Safety.

3. Quality Priorities for 2018/19

3.1. A patient engagement event called a ‘Quality Conversation’ took place on 16th January 2018. At this event key stakeholders such as patients, carers, staff, Governors and commissioners heard about progress with the 2017 18 Quality Priorities and had a chance to influence the choice of Quality Priorities for 2018-19. The four priorities the audience voted to carry forward to next year were:

- a) Partnership working
- b) End of life care
- c) Preventing patients from deteriorating and
- d) Go Digital

4. Quality Priorities

4.1. The Board held a seminar to further discuss the quality priority framework and develop the priorities. This has also been agreed at TME (Trust Management Executive) and presented to staff at a briefing on 24/4/18. The table below shows the draft priorities considered by executives and is for comment.

Quality Priority	Overall Goal
Do no harm (Patient Safety)	
a. Preventing patients deteriorating – focusing on cardiac arrest reduction strategies.	% cardiac arrest reduction, % antibiotics within 1 hour sepsis flag
b. Safe surgery and procedures	Implement NatSSips [National safety standards for invasive procedures] and LocSSIPs [Local safety standards for invasive procedures]
c. Right patient every time	Positive patient ID
War on waste (Clinical Effectiveness)	
a. Go Digital	Global Digital Exemplar program-patient portal
b. Lean Processes	Transformation team to train divisional staff in lean processes and each directorate to complete a lean pathway exercise

Quality Priority	Overall Goal
Respect for patients and partners (Patient Experience)	
a. Partnership working	
i. Goal from Care Quality Commission (CQC) system wide review	goal from the CQC system wide action plan e.g. engagement with the health and wellbeing board
ii. Home assessment and reablement team (HART)	Goal to be confirmed
b. End of life care	Single Trust wide goal in discussion

5. Governor's indicator for audit

- 5.1. The PEMQ section of the Council of Governors selected the patient experience indicators (Family & Friends test (FFT)) for audit purposes at its meeting held on 22 March 2018.
- 5.2. The auditors' work is underway and a report will be issued to the Governors after 23 May 2018.

6. Recommendation

- 6.1. The Council of Governors is asked to review the draft Quality Account.

Dr Clare Dollery, Deputy Medical Director

Report prepared by

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24th April 2018