

Trust Board Meeting: Wednesday 9 July 2014
TB2014.81

Title	Quality Account for 2013/14
--------------	------------------------------------

Status	For approval
History	<p>The Quality Account for 2013/14 was considered by the Trust Board and its Quality Sub-Committee during its preparation, as follows:</p> <p>Quality Committee, April 2014 - QC2014.25 Trust Board, May 2014 - TB2014.25 Quality Committee, June 2014 - QC2014.41</p>

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

Background

1. It is a statutory requirement for all providers holding contracts with NHS commissioners exceeding £130K per annum to publish an annual Quality Account. The Quality Account is formally submitted to the Secretary of State and published via the NHS Choices website each year.

Consultation

2. Various groups and committees within the Trust have been involved in the preparation of this year's Quality Account. The draft Quality Account was considered by the Board in May and by the Quality Committee in April and June.
3. The Quality Account was published on 30th June, the date set for publication across the NHS.
4. A number of external bodies were provided with an earlier draft of the Quality Account and invited to comment upon its content. The following bodies responded and their comments are included within the Quality Account:
 - Oxfordshire Health Overview and Scrutiny Committee (HOSC)
 - Healthwatch Oxfordshire
 - Oxfordshire Clinical Commissioning Group
5. Oxfordshire Health and Wellbeing Board elected not to provide feedback on the document, deferring to Healthwatch and HOSC, with which there is a significant overlap in membership.
6. Representatives of the Trust attended meetings of Oxfordshire HOSC and Healthwatch Oxfordshire during May 2014 in order to explain the genesis of the priorities for 2014/15.

External Audit

7. It is a statutory requirement that independent auditors review a late draft of the Trust's Quality Account in order to ensure that it includes the required content. In addition, two selected data items are chosen and reviewed in some detail so as to provide assurance on the quality of figures reported therein.
8. Ernst and Young were engaged to undertake this limited assurance exercise and concluded that the Quality Account is in order (in relation to the relevant regulations) and that the two data items reviewed (*Clostridium Difficile* and clinical incident reports) were accurate. Ernst and Young's assurance statement is included within the Quality Account as published.

Priorities for 2014/15

9. The Trust has worked hard in recent years to ensure that priorities articulated within the Quality Account are:
 - 9.1. Meaningful in relation to the quality of patient care
 - 9.2. Relatively few in number

9.3. Closely aligned to CQUIN goals for the same year

10. As in previous years, a patient and public engagement event was held (24 April) where the draft priorities for 2014/15 were shared and work was done to improve the Trust's understanding of issues pertaining to outpatient services (which forms one of the priorities for the year).

11. The priorities listed within the Quality Account for 2014/15 are as follows:

- 11.1. **Patient safety:** a programme of work to review and improve arrangements in place for the management of inpatients outside normal office hours across the four Trust sites. A series of risk summits on 'care 24/7' commenced with meetings held on 31 March and 11 April 2014. This priority is supported via CQUIN.
- 11.2. **Clinical Effectiveness:** implementation of the outputs of the risk summits examining the care of adult inpatients with diabetes or pneumonia.
- 11.3. **Clinical Effectiveness:** expand the provision of physician input into the care of inpatients in surgical specialties. This priority is supported via CQUIN.
- 11.4. **Patient Experience:** improvements to the timeliness and communication around discharge from hospital. This priority is supported via CQUIN.
- 11.5. **Patient Experience:** develop services to provide integrated psychological support for patients with cancer. This priority is supported via CQUIN.
- 11.6. **Patient Experience:** improvements to the experience of our outpatient services, from booking through to attendance and further correspondence.

12. Updates on progress will be provided to the Trust Board and other groups at appropriate intervals throughout the year.

13. The Quality Account is appended to this paper. It is hoped that hard copies of the Quality Account will be available to those attending the meeting of the Trust Board on 09 July 2014.

Recommendation

14. Trust Board is asked to formally approve the Quality Account for 2013/14.

Dr Tony Berendt
Interim Medical Director

Report prepared by:

Dr Ian Reckless
Acting Deputy Medical Director

July 2014