



MEETING TITLE Public Trust Board		MEETING DATE 26 01 16	
TITLE of PAPER		Board to agree priorities for 2016-17 YAS Quality Account	PAPER REF 6.5
STRATEGIC OBJECTIVE		Choose an item. Develop culture, systems and processes to support continuous improvement and innovation	
PURPOSE OF THE PAPER		The purpose of this report is to set out and seek Board support for the proposed 2016/17 developmental priorities to be included in the 2015/16 YAS Quality Account	
For Approval		<input checked="" type="checkbox"/>	For Assurance <input type="checkbox"/>
For Decision		<input type="checkbox"/>	Discussion/Information <input type="checkbox"/>
AUTHOR / LEAD	Gareth Flanders Head of Quality	ACCOUNTABLE DIRECTOR	Steve Page Executive Director of Standards & Compliance
DISCUSSED AT / INFORMED BY – include date(s) as appropriate (free text – i.e. please provide an audit trail of the development(s)/proposal(s) subject of this paper): The priorities for 2016/17 have been informed by consultation with Trust Directors, managers and staff and with external stakeholders including commissioners. They were also presented to December Quality Committee as part of the Quality Governance report.			
PREVIOUSLY AGREED AT:		Committee/Group: Choose an item.	Date: Click to enter date
RECOMMENDATION		It is recommended that the Board notes and supports the proposed improvement priorities for 2016/17 for inclusion in the 2015/16 Quality Account.	
RISK ASSESSMENT			Yes No
Corporate Risk Register and/or Board Assurance Framework amended			<input type="checkbox"/> <input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify)			<input checked="" type="checkbox"/> <input type="checkbox"/>
Legal implications/Regulatory requirements			<input type="checkbox"/> <input checked="" type="checkbox"/>
Equality and Diversity Implications			<input type="checkbox"/> <input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission		3: Caring 1: Respecting and involving people who use services 17: Complaints	
Monitor Quality Governance Framework		3: Planning and driving continuous improvement 2: Learning from Experience 1: Governance	

1. PURPOSE/AIM

- 1.1 The purpose of this report is to set out and seek Board support for the proposed 2016/17 developmental priorities to be included in the 2015/16 YAS Quality Account.

2 BANKGROUND / CONTEXT

- 2.1 Quality Accounts are a mandated requirement of all healthcare providers and are published annually. They describe the quality of care and services, and also highlight the priorities for quality improvement for the forthcoming year. The Quality Account is publically available and contains a number of mandated statements.
- 2.2 The timeline for the YAS Quality Account 15/16 has been reviewed by both the Quality and Audit Committee and is progressing to plan. The Department of Health requires providers to submit their final Quality Account to the Secretary of State by June 30 2016.
- 2.3 The proposed priorities are determined through the national agenda, the five year Integrated Business Plan (IBP), the 2015-18 Clinical Quality Strategy, learning from incidents and complaints, and also through consultation both internally and externally with stakeholders.

3. PROPOSED PRIORITIES FOR THE QUALITY ACCOUNT 2016/17

3.1 Moving patients safely

Rationale:

This is a key work-stream within the YAS "Sign Up To Safety" pledges. The focus is on ensuring that front line staff have the right equipment, skills and knowledge to reduce the risk of harm to patients in our care.

Aim:

To reduce the number of incidents where staff and patients are harmed whilst providing care.

3.2 Care of deteriorating adult and child

Rationale:

The timely detection of deterioration in the sick adult and child can significantly increase the likelihood of recovery. Evidenced based tools are now available which support the ongoing assessment of patients and the detection and management of deterioration.

Aim:

To provide staff with the right skills, knowledge and tools to detect and manage deterioration in a timely and appropriate way.

3.3 High Quality Resuscitation skills

Rationale:

Understanding the quality of Cardio Pulmonary Resuscitation (CPR) through data analysis from the Lifepak will inform feedback to staff and education and training, which will further improve outcomes for patients who suffer cardiac arrest.

Aim:

To further improve cardiac arrest survival rates.

3.4 Improving care for patients with suspected sepsis

Rationale:

Sepsis kills 37,000 people in the UK every year. As an ambulance provider there is a significant role in early recognition and treatment of patients with suspected sepsis.

Aim:

YAS staff will continue to follow a best practice care bundle which will be extended to include the consistent use of an early warning score, appropriate pre alert to hospital and the use of an agreed handover tool.

3.5 Improving the experience of children

Rationale:

YAS respond to a significant number of children every year and it is important to understand their experience, and how this may be improved.

Aim:

To understand the experience of children who access YAS services.

3.6 Improving the experience of palliative care patients

Rationale:

A number of best practice models of care have emerged across the region providing single point of contact for patients with terminal illness. Despite this YAS receive a significant number of calls from palliative care patients. It is important to explore the possibilities and opportunities for more collaborative and integrated working, based on the patient's perception of need.

Aim:

To improve the experience of patients with palliative care needs.

3.7 PTS - Creation of a Patient Portal

Rationale:

Patients will be able to view their booking and transport in the first instance, with a view to developing this for them to book their transport on the portal in the future.

Aim:

To enhance patient choice and experience.

3.8 PTS - Expansion of courtesy calls to patients prior to collection.

Rationale:

To enhance patient experience and reduce aborted journeys

Aim:

To enhance patient choice and experience.

3.9 PTS - Continuation of the West Yorkshire PTS Renal Transport CQUIN from 2015-16

Rationale:

Due to the findings of the Renal Transport CQUIN from 2015-16, commissioners and YAS would like to continue the CQUIN by looking at the impact on patient experience and other process indicators following implementation of service improvement work streams.

Aim:

To enhance patient choice and experience.

4. NEXT STEPS

4.1 The draft Quality Account 2015/16 will be presented to the Trust Management Group in February 2016 prior to the 30 day consultation period with stakeholders in March 2016. It is due to be presented at the Quality Committee in March 2016 for onward recommendation to the Trust Board in June 2016.

4.2 An external limited scope audit is scheduled to take place to ensure compliance to the statutory guidance prior to publication.

5. RECOMMENDATIONS

5.1 It is recommended that the Board notes and supports the proposed improvement priorities for 2016/17 for inclusion in the 2015/16 Quality Account.