



MEETING TITLE Public Board		MEETING DATE 28/03/2019	
TITLE of PAPER	Quality Account Priorities 2019-20	PAPER REF	4.2
STRATEGIC OBJECTIVE(S)	Safe and Sustainable: Provide a safe, effective, caring and sustainable service for all patients Achieving Excellence: Transform our services to exceed national performance and quality measures		
PURPOSE OF THE PAPER	The purpose of the paper is provide an overview to the Board of the process for Quality Accounts development and outline the key quality priorities for 2019-20		
For Approval	<input checked="" type="checkbox"/>	For Assurance	<input type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input type="checkbox"/>
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DISCUSSED AT / INFORMED BY Board Development Workshop – March 2019 Quality Committee – March 2019			
PREVIOUSLY AGREED AT:	Committee/Group:	Date:	
RECOMMENDATION(S)	It is recommended that the Trust Board: <ul style="list-style-type: none"> Notes the process for Quality Accounts. Agree the key quality priorities for 2019-2020. 		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equality Impact Assessment <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		1: Safe 5: Well led	
NHSI Single Oversight Framework Choose a THEME(s)		2. Quality of Care (safe, effective, caring, responsive) 6. Leadership & Improvement Capability (Well-Led)	

1. PURPOSE/AIM

- 1.1 The purpose of the paper is provide an overview to the Board of the process for Quality Accounts development and outline the key quality priorities for 2019-20

2. BACKGROUND/CONTEXT

- 2.1 Quality Account is a report about the quality of services offered by an NHS healthcare provider. The Quality Account is published annually by each provider, including the independent sector, and are available to the public.
- 2.2 Quality Accounts are an important way for local NHS services to report on quality and show improvements in the services they deliver to local communities and stakeholders.
- 2.3 The quality of the services is measured by looking at patient safety, the effectiveness of treatments patients receive, and patient feedback about the care provided.
- 2.4 The Department of Health and Social Care requires providers to submit their final Quality Account to the Secretary of State by uploading it to the NHS website by June 30. The requirement is set out in the Health Act 2009.
- 2.5 The Quality Account includes information on how we measure how well we are doing, continuously improves the services we provide, and how we respond to checks made by regulators like the Care Quality Commission (CQC).
- 2.6 It requires a signed statement from the most senior manager of the organisation and a description of the quality of healthcare provided by the organisation and the areas of responsibility - within this statement, senior managers declare they have seen the Quality Account and they are happy with the accuracy of the data reported, are aware of the quality of the NHS services they provide, and highlight where the organisation needs to improve the services it delivers. The statement is also an acknowledgement of any issues in the quality of services currently provided.
- 2.7 It requires a statement from the organisation detailing the quality of the services it provides. Clinical teams, managers, patients and patient groups input into this process supporting the organisation depending on what is important to the organisation and the local community. The Quality Account will include a statement from the provider's main commissioner. It may also include statements from the local Health-watch and the Health and Wellbeing Boards. These groups represent patients and the public on healthcare issues.

3. PROCESS

- 3.1 The Quality Account for 2018-19 is in draft and is progressing through the internal sign off processes before publication for external comment from key stakeholders on 1st April. Full publication will take place following consultation on the document on 30th June on NHS Choices. An update on progress toward each of the agreed priorities for 2018-19 is included in the Quality Account for 2018-19.

3.2 Priorities have been consulted on with key stakeholders such as local Health-watch and reflect areas of development from within the Trust Strategy or national drivers such as Ambulance Response Programme. Key quality priorities have been agreed for 2019-2020 and are as follows;

Priority One:

Patient Safety: Delivery of sustainable improvement in emergency ambulance response performance in line with national standards; delivering the best possible response for each patient, first time and in the right place.

Lead: Stephen Segasby, Deputy Director of Operations

Key Drivers: National Standards. Improve patient safety and clinical effectiveness. Patients and communities experience fully joined up care responsive to their needs.

Priority Two:

Clinical Effectiveness: To embed the Mortality review process to include Patient Relations service and determine how we work with Acute Trusts to further progress review process

Lead: Dr Steven Dykes, Deputy Medical Director

Key Drivers: Learning from Deaths policy. NHS Improvement Patient Safety Strategy.

Priority Three:

Clinical Effectiveness: Development of the Trust's role in place based care co-ordination across the urgent and emergency care system, with particular focus on frail older patients, patients with palliative care needs and patients with mental health conditions

Lead: Catherine Bange, Regional General Manager

Key Drivers: NHS Long Term Plan. Placed based care agenda and development of integrated urgent care systems.

Priority Four:

Patient Experience: Improvement in experience for patients with learning difficulties and patients who suffer from dementia including the Trust becoming registered and recognised as a 'Dementia Friendly' organisation.

Lead: Clare Ashby, Associate Director of Quality and Nursing

Key Drivers: Learning from incidents suggests particular groups, such as those with learning difficulties; sometimes do not receive the high quality experience we would like them to.

3.3 The draft Quality Account will be subject to formal consultation from 1 April 2019 an feedback from stakeholders will be incorporated into the final document.

3.4 As in previous years, an accessible version of the document will also be published.

4. RISKS

4.1 Delivery of sustainable improvement in emergency ambulance response performance in line with national standards is a risk to the organisation due to the breadth and complexity of the change required which includes significant investment, recruitment and workforce redesign. A quality impact assessment on the current commissioner's contract offer is underway.

4.2 Each priority will be tracked over the year to ensure progress is achieved in line with plan.

5. RECOMMENDATIONS

5.1 It is recommended that the Trust Board:

- Notes the process for Quality Accounts.
- 'Agree' the key quality priorities for 2019-2020.