

## **Board of Directors**

Meeting Report

Subject: Open and Honest Care: Driving Improvement (Midlands and East)

Date: Thursday 26<sup>th</sup> March 2015

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Lead Director: Susan Bowler – Executive Director of Nursing & Quality

## **Executive Summary**

In November 2012 the National Nursing Strategy: Compassion in Practice (2012) was launched and as part of Action Area 3 the Open and Honest Care: Driving Improvement Programme was created. From November 2013, NHS England North supported 23 Acute Trusts in the North of England to start voluntarily publishing monthly Open and Honest Care reports. Currently there are 32 Acute, Community and Integrated Trusts in the North Region, regularly publishing data including acute, community and maternity metrics.

The Open and Honest work stream is now being rolled out across the Midlands & East region, commencing with 14 pilot sites of which Sherwood Forest Hospitals NHS Foundation Trust (The Trust) is one of them.

The aim of the Open and Honest Improvement programme is to provide patient safety (nurse indicator) data to patients and their families in a consistent, easy to ready format, 2 clicks away from an individual NHS provider organisations 'home' web page.

Clinical Quality and Governance Committee approved in principle on 11 March 2015. Attached are three documents for discussion and approval on behalf of the Board of Directors.

## Recommendation

- There is now a requirement for the Trust's Board of Directors to sign up to the Open and Honest Care: Driving Improvement Programme and committing to all of the nine principles of the Board Compact.
- The Standard Operating Procedure for Acute and Community is to be approved.
- The Standard Operating Procedure for Maternity has been reviewed and commented on by Maternity Leads and no concerns with implementation have been identified
- The reports should be published monthly on the Trust internet, intranet and on the NHS England website by the end of each month.
- Access to the Open and Honest Care report should be labelled clearly from the homepage and should be available within 2 clicks from that home page.

Relevant Strategic Objectives (please mark in bold)	
Achieve the best patient experience	Achieve financial sustainability
Improve patient safety and provide high	Build successful relationships with
quality care	external organisations and regulators
Attract, develop and motivate effective	
teams	

Links to the BAF and Corporate	BAF 1.0
Risk Register	
Details of additional risks	Failure to meet the Monitor regulatory requirements for
associated with this paper (may	governance- remain in significant breach.
include CQC Essential Standards,	Risk of being assessed as non-compliant against the
NHSLA, NHS Constitution)	CQC essential standards of Quality and Safety
Links to NHS Constitution	Principle 2, 3, 4 & 7
Financial Implications/Impact	
Legal Implications/Impact	Reputational implications of delivering sub-standard
	safety and care
Partnership working & Public	
Engagement Implications/Impact	
Committees/groups where this	A number of specific items have been discussed;
item has been presented before	Clinical Governance & Quality Committee, Falls
	Steering Group and Mortality Group
Monitoring and Review	
Is a QIA required/been	No
completed? If yes provide brief	
details	