

Public Board Meeting

Report

Subject: Quality Improvement Plan
Date: 7 September 2016
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Executive Summary

The Board of Directors agreed our Quality Improvement Plan on 26 November 2015. The QIP combines the Trust's existing Quality Improvement Plan with actions to address matters highlighted by Health Education East Midlands (HEEM), and the requirements of the Care Quality Commission. The QIP also encapsulates the action being taken to address the CQCs' enforcement actions.

This paper provides the Board and Sub Committees with an update on the progress of delivering the Quality Improvement Plan (QIP).

There are currently 287 actions over 10 Workstreams. Good progress continues to be made to deliver the plan. Following confirm and challenge meetings held during August 2016, there are 215 (74.91%) actions embedded (62 are subject to verification by the Care Quality Commission); 55 (19.16%) actions are completed or remain on track to be completed as planned; and 1 (0.35%) action is behind plan. There are 16 (5.57%) actions now superseded by the Long Term Partnership.

The position at month ending August 2016 is set out below: (This data is subject to the final approval of the Board of Directors)

Workstreams	Number of actions	Red	Green		Amber	Blue	Green/Blue	Grey
		Off Track	Completed	On track	Off track	Embedded	Embedded subject to External confirmation	Actions superseded by Long Term Partnership
Leadership	24	-	-	-	-	19	-	5
Governance	51	-	6	1	-	7	37	-
Recruitment & Retention	15	-	1	-	-	12	-	2
Personalised Care	30	-	11	2	-	13	4	-
Safety Culture	75	-	23	-	-	51	1	-
Timely Access	41	-	2	-	-	19	19	1
Mandatory Training	6	-	-	-	-	6	-	-
Staff Engagement	12	-	-	-	-	7	-	5
Maternity	23	-	5	-	-	16	-	2
Newark	10	1	1	3	-	4	-	1
Total Number	287	1 (0.35%)	49 (17.07%)	6 (2.09%)	- (0.00%)	154 (53.66%)	61 (21.25%)	16 (5.57%)

All ongoing actions have been reviewed in detail. This paper summarises the position in each Workstream, and recommends 22 actions for Board approval for marking as embedded.

There is 1 action rated as Red (has failed to deliver to agreed timescales/are off track and unlikely to deliver to the agreed date) as detailed below:

Only 1 action continues as red from last month and is subject to monthly scrutiny. This is within the following Workstream:

Workstreams	Action
Newark	10.3.2 Following publication of the Strategy the Trust will develop a plan of implementation, with clear milestones with accountability

There are 0 new Red actions this month.

There were 5 actions reported as Red last month where the BRAG rating has changed. This is within the following Workstreams:

Workstreams	Action	BRAG
Safety Culture	5.3.26 Extended Critical Care Outreach (CCOT) support to give access until 02.00 hours on a daily basis and utilising Vital Pac real-time monitoring as appropriately	Green
Newark	10.1.2 The Newark Healthy Communities Partnership Group to focus on the development of the strategy with components of the offer from Newark Hospital, together with other elements of health and social care, in the Newark and Sherwood area and clarify and develop proposals for future provision	Green
	10.1.3 Greater engagement of community and primary care providers in integrated care provision, so that MIU/UCC is clearly part of enhanced primary care offer	Green
	10.1.4 Greater engagement of community and primary care providers in integrated care provision, so that Newark bed capacity is clearly part of enhanced primary/community offer	Green
	10.3.1 Publication and staff engagement of the key themes, of the revised strategy	Green

The Workstream Executive Leads have recommended that 22 actions are embedded and should be rated as blue.

The Quality Committee and Organisational Development and Workforce (OD&W) Committee have not convened in August and as such the usual assurance process for agreeing embedded actions has not taken place. However, the Non-Executive Director Chair and Vice Chair of the respective meetings have taken time to review the evidence presented within the proposed Blue Action Forms and are assured it fully supports that the action is embedded.

The breakdown of the blue (embedded) submissions by Workstream is as detailed below:

Workstream	Number of blue (embedded) submissions
Leadership	2
Governance	7
Recruitment & Retention	3
Personalised Care	1
Safety Culture	3
Timely Access	0
Mandatory Training	1
Staff Engagement	3
Maternity	2
Newark	0

A copy of the report that has been uploaded on NHS Choices and the Trust Internet is contained within the reading room for information.

Throughout the execution and implementation of the QIP the Trust has built productive relationships with its external regulators, in particular CQC and NHS Improvement (NHSI). Since November 2015 it has become clear that confidence in the progress and ability of the organisation to address concerns has significantly increased. The first indication of this was the lifting of the Section 31 in relation to the management of patients with suspected/actual Sepsis on 31st May 2016 and further demonstrated with the lifting of Section 10 in relation to assessment or medical treatment for patients detained under the Mental Health Act 1983 on 28th July 2016.

The number of outstanding actions is now disproportionate to the resource allocation both from Executive Directors and from the PMO to manage the programme. For the September Board of Director meeting 3 programmes are reporting 0% (0) outstanding actions with all embedded actions now monitored through the relevant Trust Management system.

Given the projected status of the QIP at the end of August it is proposed that the timing is now right to consider options for the future management of the programme. A proposal to dissolve the QIP in its current form will be presented to the Quality Improvement Board on 14th September with a recommendation to the October Board of Directors' meeting.

Recommendation

The Board of Directors is asked to:

- Note the Quality Improvement Plan update
- Approve the updated Quality Improvement Plan (version 8.16.2)
- Consider and agree the Workstream recommendations for embedded actions.

Relevant Strategic Priorities (please mark in bold)

Ensure the highest standards of safe care are consistently delivered by, and for, individuals, teams and departments	Ensure that patients experience the very best care, building on good practice and listening and learning from both negative and positive feedback and events
Provide timely access to diagnosis, treatment and care when people need it and safely reduce the time patients spend in hospital	Raise the level of staff engagement through strong leadership, communication, feedback and recognition
Reduce the scale of our financial deficit by reducing costs, improving utilisation of resources and productivity, and achieving best value for money	Work in partnership to keep people well in the community, and enable them to return as soon as they are ready to leave hospital
Develop and implement a programme of work in conjunction with Nottingham University Hospital NHST to create a new combined organisation	

How has organisational learning been disseminated	
Links to the BAF	
Financial Implications/Impact	Potential for further regulatory action
Legal Implications/Impact	Potential for further regulatory action by the CQC
Partnership working & Public Engagement Implications/Impact	
Committees/groups where this item has been presented before	Quality Improvement Board Organisational Development & Workforce Committee Quality Committee