

<b>Meeting:</b>	Board of Directors	<b>Date:</b>	4 <sup>th</sup> January 2018
<b>Title:</b>	<b>Quality Report</b>		
<b>Summary of paper:</b>	<p>This paper provides the monthly quality report with commentary and progress on activity associated with key safety and quality indicators.</p> <p>Key quality issues for November 2017 are as follows:</p> <ul style="list-style-type: none"> <li>• The HSMR figure for September 2016 to August 2017 is 98.9</li> <li>• No cases of Clostridium difficile were reported during November 2017, the CDI rate year to date is 10.83 per 100,000 bed days against a target of 9.4 per 100,000 bed days.</li> <li>• 1 Serious Incident was reported during November 2017.</li> <li>• There has been a decrease in overdue clinical incident investigations during November 2017</li> <li>• A slight increase in complaints can be seen during November 2017</li> </ul> <p><b>It is important to note that the Patient Quality Committee did not take place in November 2017 due to short notice cancellation as the Trust was in OPEL 4.</b></p>		
<b>Consultation / other committee views:</b>	<p>The Quality information has been reviewed at the Quality and Governance Committee, the Executive Committee, the Patient Quality Committee and via Divisional Governance meetings.</p> <p>Investigations into Serious Incidents are reviewed at the Serious Incident Panel.</p>		
<b>Assurances:</b>	<p>National Reporting and Learning System (NRLS) PHSO reviews and reporting Dr Foster reporting Contract Quality Review Meetings with Commissioners CQC Inspection Report</p>		

<b>Recommendations/decisions required:</b>	<p><b>(a) That it be agreed that the Quality Report provides assurance of progress towards quality improvements and quality indicators.</b></p> <p><b>(b) That the report be noted.</b></p>
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Link to Trust Priorities	Link to Quality
<p>(1) We will make the patient the centre of everything we do.</p> <p>(2) We will work smarter not harder to make best use of existing resource.</p> <p>(3) We will innovate and identify new ways of working.</p> <p>(4) We will build capacity and capability by investing in our staff, infrastructure and partnerships.</p>	<p>(1) Safety (staffing, falls, never events, handover, SI, safeguarding, infection control, environment, medicines, equipment).</p> <p>(2) Effectiveness (HMSR, SHMI, Mortality, Clinical audits, care bundles, deteriorating patient).</p> <p>(3) Caring (patient experience, patient surveys, friends and family test, patient stories, response to call bells).</p> <p>(4) Responsiveness (complaints, waiting times, cancelled operations, ambulance stays, translation services, comfort factors – TV and seating).</p> <p>(5) Well led (staff survey, staffing levels, sickness rates, flu vaccinations rates, board/ward interactions, staff reports, governance and reporting, risk management, financial control).</p>

Risk issues:	Risk Register Ref No:	Risk Score:
<p>Key risks related to quality of care are themed around:</p> <ul style="list-style-type: none"> <li>• Staffing levels</li> <li>• Medicines errors</li> <li>• Falls</li> <li>• End of Life care</li> </ul>	<p>328, 1235, 1364 489, 1377 1114,1350</p>	<p>All red (score 15 or 16) except falls which scores 12</p>
<b>Resource Implications:</b>	<b>Regulations and legal considerations:</b>	<b>Quality consideration and impact on patient and carers:</b>
<p>Expenditure / Income net value</p> <p>There are financial implications of poor quality of care</p>	<p>Regulatory implications associated with non-achievement of standards and indicators</p>	<p>Report provides assurances of quality care provided and the impact on patients and carers.</p>

Report Sign Off:		
Financial	Operational	HR
N/A	N/A	N/A

#### Confidentiality

This report does not contain any confidential information.

#### Equality Impact Assessment

Great Western Hospitals NHS Foundation wants its services and opportunities to be as accessible as possible, to as many people as possible, at the first attempt.

This report has been assessed against the Trust's Equality Impact Assessment Tool and there are no proposals or matters which affect any persons with protected characteristics.

<b>Lead Executive Director:</b>	Hilary Walker	Title:	Chief Nurse
<b>Report Author:</b>	Quality Governance Team	Title:	