NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS' MEETING

Meeting Date: 23 March 2016

Title and Author of Paper: NTW Quality Account 2015/16 Lisa Quinn, Executive Director of Commissioning & Quality Assurance

Paper for Debate, Decision or Information: Decision

Key Points to Note:

The Board is asked to:

- Note the 15-16 Quality Account process
- Approve the proposed new Quality Priorities 2016/17 identified
- Note the external assurance requirements
- Note the requirement to approve the statements of Directors' Responsibilities at the May 2016 Board meeting.

Outcome required:

Approval of proposed new Quality Priorities 2016/17.

BOARD OF DIRECTORS MEETING

23 March 2016

Quality Account 2015-16 & Quality Priorities 2016-17

PURPOSE

The purpose of this paper is:

- to share the process for preparing the 2015-16 Quality Account
- to present the proposed 2016/17 Quality Priorities identified for approval

BACKGROUND

The approved 2015-16 Northumberland, Tyne & Wear NHS Foundation Trust Quality Account will be submitted to Monitor at the end of May 2016 and uploaded to the NHS Choices website by 30th June 2016.

During April and May 2016 the working drafts of the Quality Account will be shared widely both internally (with the Corporate Decisions Team, the Audit Committee, Trust Quality & Performance Committee and the Council of Governors) and externally (with CCG's, Overview & Scrutiny Committees, Local Healthwatch and external audit).

Comments received from local partners will be included in the published Quality Account, and any comments from other localities/partners will be published alongside the document on the NTW website.

2016-17 PROPOSED QUALITY PRIORITIES

In response to internal and external requests for engagement with the process of developing quality priorities, an engagement exercise has taken place to seek views from all stakeholders on ideas that could inform quality priorities in 2016-17. These ideas were considered along with known issues arising this year from complaints, serious incidents, feedback from service users and carers and also from Mental Health Act visits conducted by the CQC. Views were subsequently gathered from stakeholders on prioritisation of identified themes, which have been further discussed at the CDT Quality sub group meeting held in February 2016, where preferred options per quality goal were identified. Group Business Meeting has supported the identified three priorities, and developed these further to identify the proposed specific, measurable milestones to be reported in the 2015-16 Quality Account.

These are as follows (note that proposed measurable quarterly milestones will be presented to a future Trust Board meeting):

Quality Goal 1: Patient Safety - Reduce incidents of harm to patients	 Quality Priority 2016-17 – Description: a) To improve Transitions between Young Peoples Services and Adulthood. b) To improve Transitions between Inpatient and Community mainstream services.
Quality Goal 2: Patient Experience - Improve the way we relate to patients and carers	Quality Priority 2016-17 – Description: Adopt the principles of Triangle of Care to improve engagement with carers and families, with a particular focus on community services.
Quality Goal 3: Clinical Effectiveness - Ensure the right services are in the right place at the right time for the right person	Quality Priority 2016-17 – Description: To improve the quality of services though further developing staff skills, providing them with enhanced tools and techniques to prevent and respond to Violence and Aggression, through implementing the Positive and Safe Strategy.

Please note that in line with previous years, any existing quality priorities not achieved in this financial year (2015-16) will continue into next year automatically.

The Board of Directors is asked to **approve** the proposed new quality priorities to be adopted in 2016-17 and included within the 2015-16 Quality Account.

EXTERNAL ASSURANCE

The content of the Quality Account will be audited to ensure it complies with legislation and Monitor requirements, additionally 3 performance indicators will also be audited to assess the accuracy of the systems and processes used to report performance information. The audit results will be presented to the Audit Committee in May 2016.

STATEMENTS OF DIRECTORS' RESPONSIBILITIES

A statement of Directors' Responsibilities in relation to the Quality Account/Report will be prepared and presented to the Board of Directors for approval in May 2016 as follows:

- in respect of the content of the 2015-16 Quality Report <u>for inclusion</u> in the published 2015-16 Quality Report within the annual report
- in respect of the 2015-16 performance indicators included in the Quality Report to be provided to auditors (but not included within the annual report)

RECOMMENDATIONS

The Board of Directors are asked to:

- 1. Approve the 2016-17 Quality Priorities identified within the report
- 2. Note the external assurance requirements.
- 3. Note the requirement to approve the statements of Directors' Responsibilities at the May 2016 Board meeting.

Lisa Quinn Executive Director of Commissioning & Quality Assurance March 2016