

Northumberland, Tyne and Wear NHS Foundation Trust

Board of Directors Meeting

Meeting Date: 25 January 2017

Title and Author of Paper:

Preparation for Quality Account 2016-17 and Quality Priorities Setting 2017-18
Lisa Quinn Executive Director of Commissioning & Quality Assurance

Executive Lead: Lisa Quinn Executive Director of Commissioning & Quality Assurance

Paper for Debate, Decision or Information: Information

Key Points to Note:

- The 16-17 Quality Account will be finalised in May 2017. This will include progress against this year's quality priorities, and will also include the final agreed quality priorities for 2017-18.
- A process and timescale for determining the 17-18 quality priorities is proposed, reflecting on the process last year to ensure engagement with stakeholders and allowing sufficient time for development of the details definitions prior to 1st April 2017.
- The development of quality priorities for 17-18 will, where possible, be linked to areas for improvement identified in the CQC comprehensive inspection reports.

Risks Highlighted to Board : none

Does this affect any Board Assurance Framework/Corporate Risks? No

Please state Yes or No

If Yes please outline

Equal Opportunities, Legal and Other Implications: none

Outcome Required: for information

Link to Policies and Strategies: Quality Priorities Quarterly Updates & Quality Account guidance

BOARD OF DIRECTORS

25 January 2017

Quality Account 2016-17 and Quality Priority setting 2017-18

PURPOSE

To notify the Board of the process and timetable for the production of the 2016-17 Quality Account and the development of Quality Priorities for 2017-18.

BACKGROUND

Each NHS provider is required to produce an annual Quality Account, and agree new quality improvement priorities at the end of each financial year. The Quality Account demonstrates to staff, service users, carers, stakeholders and the public the organisation's commitment to continuous, evidence-based quality improvement.

Quality priorities are set on an annual basis to support the achievement of the quality goals. The Quality Account reports progress against the previous year's quality priorities, and sets out the agreed quality priorities for the forthcoming year. In May/June 2017 the final 2016-17 Quality Account will be published and the timetable for the production and publication of the document has been attached to this paper as **Appendix 1**. The timetable will be adapted as necessary to reflect any potential changes when the planning guidance in relation to annual reports is released.

NTW's three overarching long term Quality Goals have been reviewed as part of the refresh of the NTW strategy and are now as follows:

Refreshed Quality Goals:

Quality Dimension:	Current Quality Goals:	Quality Goals from 1.4.2017:	In 5 years' time what would success look like?
Patient Safety	Reduce incidents of harm to patients	Keeping you safe	<ul style="list-style-type: none"> • Learning from experience; • Openness in reporting; • Demonstrating improvement; • Reduction in incidents of harm; • Smooth transitions from one service to another; • Better suicide prevention.
Patient/Carer Experience	Improve the way we relate to patients and carers	Working with you, your carers and your family to support your journey	<ul style="list-style-type: none"> • Working together with service users, carers and communities; • Principles of the Triangle of Care embedded; • Co-production at all levels; • Improved positive service user and carer feedback; • Seamless care across all partners-no barriers; • Wellness Recovery Action Plans (WRAP) embedded; • Supporting resilience in people and communities.
Clinical Effectiveness	Ensure the right services are in the right place at the right time for the right person	Ensuring the right services are in the right place at the right time to meet all your health and wellbeing needs	<ul style="list-style-type: none"> • Service users “living better for longer”; • Evidence based care consistently provided; • Meaningful outcomes; • Timely access to 24/7 services, in accordance with need; • Care close to home and elimination of out of area placements; • An integrated approach to meeting physical, mental health and social care needs.

The current (2016-17) quality priorities are listed below for reference (nb this table uses the old quality goal language). The expectation remains that quality priorities not achieved in a financial year will be automatically carried forward into the next year, along with any new quality priorities identified.

Quality Goal One – Patient Safety		
Reduce incidents of harm to patients		
Quality Priority One	Embed suicide risk training for staff	Continued from 2015-16
Quality Priority Two	Improve transitions between young people's services and adulthood	New in 2016-17
Quality Priority Three	Improve transitions between inpatient and community mainstream services	New in 2016-17
Quality Goal Two – Patient Experience		
Improve the way we relate to patients and carers		
Quality Priority Four	Improve the referral process and the waiting times for referrals to multidisciplinary teams	Continued from 2015-16
Quality Priority Five	Implement principles of the Triangle of Care	New in 2016-17
Quality Goal Three – Clinical Effectiveness		
Ensure the right services are in the right place at the right time for the right person		
Quality Priority Six	Improve the recording and use of Outcome Measures	Continued from 2015-16
Quality Priority Seven	Develop staff and their skills to prevent and respond to violence and aggression, through implementing the Positive and Safe Strategy	New in 2016-17

Determining quality priorities for 2017-18

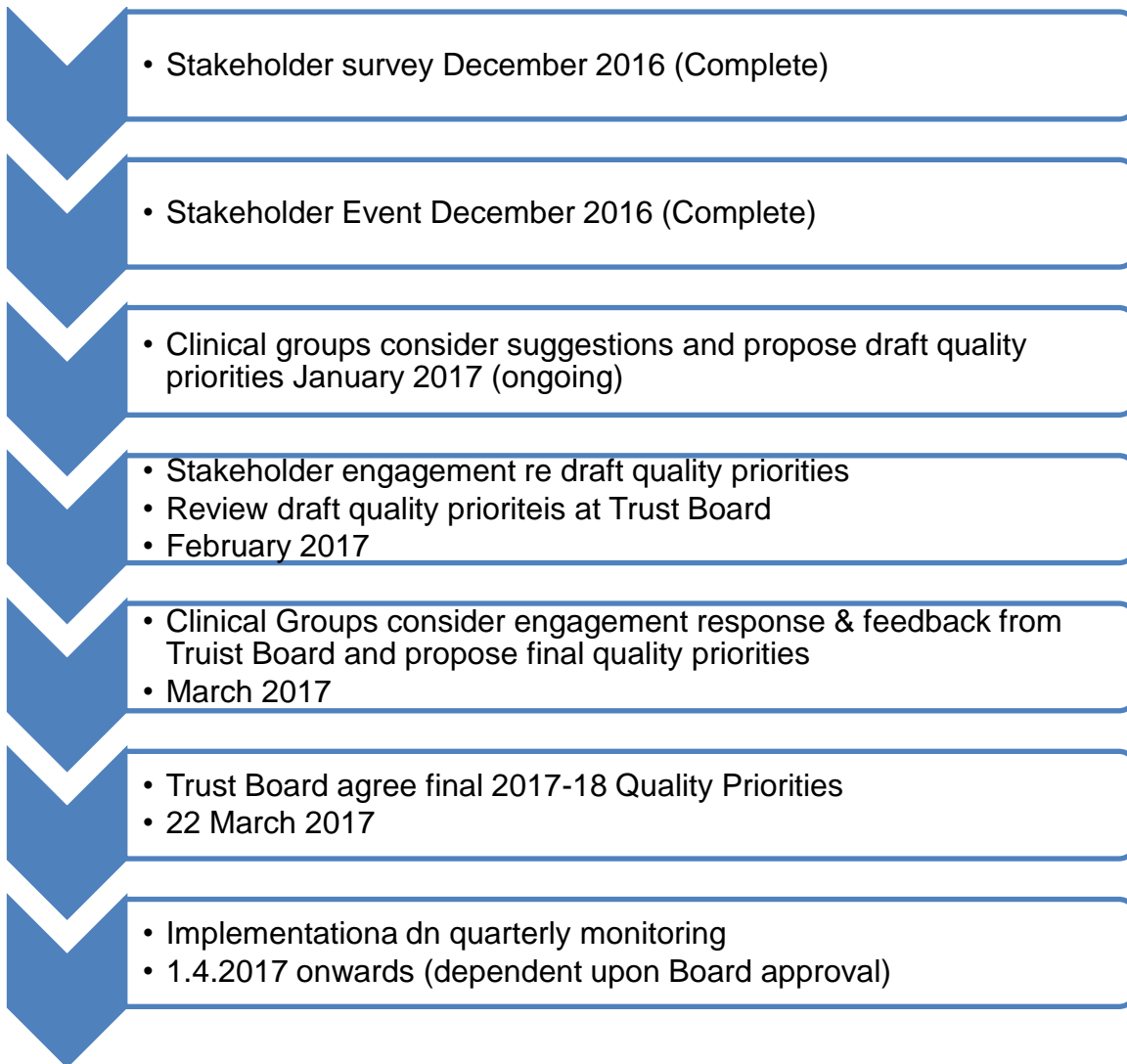
The quality priorities chosen each year to support the long term quality goals are ideally determined via an engagement process with as many staff, service users, carers and stakeholders as possible and should consider themes arising from serious incidents, complaints and experience feedback received.

Positive feedback was received following last year's collaborative process undertaken to determine the themes for the current quality priorities. A similar process is underway for 17-18, with the 2nd element of the engagement refocussed onto seeking views on draft quality priorities. More internal development time has also been incorporated into the proposed timescale to ensure that clinical groups have sufficient time to prepare the draft quality priorities for further engagement, prior to final Board approval hopefully in March 2017.

It is proposed that 3 new quality priorities for 17-18 are developed, one per quality goal, and that each is linked to an area for improvement identified by CQC.

The suggested engagement process and timetable are as follows:

Setting Quality Priorities 2017-18 Process:



RECOMMENDATIONS

The Trust Board is asked to note the process for the production of the 2016-17 Quality Account and for determining the 2017-18 quality priorities.

Lisa Quinn
Executive Director of Commissioning & Quality Assurance
January 2017

Quality Account 2016-17 & Quality Priorities 2017-18 Timetable

w/c	17/10/16	Seek views on process at GBM	
w/c	31/10/16	Paper to Trust CDT-Q outlining suggested process & draft timetable. Communication re December event circulated	
w/c	7/11/16		
w/c	14/11/16		Quality Priority Survey open on website for 6 weeks, supported by one event and communications.
w/c	21/11/16		
w/c	28/11/16		Share Q2 progress update re 1617 quality priorities with stakeholders
w/c	05/12/16	CoG quality group event - Stonehills	
w/c	12/12/16		
w/c	19/12/16		
w/c	26/12/16		
w/c	02/01/17	Collate responses	GBM to consider responses & agree draft priorities linked to CQC areas for improvement
w/c	09/01/17		
w/c	16/01/17		
w/c	23/01/17		
w/c	30/01/17	Progress update to CDT-Q	Quality Priority engagement – seek comments on draft Quality Priorities
w/c	06/02/17	Share progress with CoG quality group	
w/c	13/02/17		
w/c	20/02/17		
w/c	27/02/17		Clinical groups agree final version of draft quality priorities to be submitted for Trust Board approval
w/c	06/03/17	CoG agree 1617 quality priority to be audited Progress update to CDT-Q	
w/c	13/03/17	Progress update to Trust Q&P	
w/c	20/03/17	Trust Board agree 17-18 Quality Priorities	
w/c	27/03/17		
w/c	03/04/17	Full year data available (dashboard snapshot)	
w/c	10/04/17	Draft 1 available and CoG/partners event, 30 day consultation starts	30 day consultation - attend OSC's and Healthwatch's
w/c	17/04/17	Draft 1 to Trust Q&P	
w/c	24/04/17	Draft 1 to Trust Board	
w/c	01/05/17	Draft 1 to CDT-Q	
w/c	08/05/17	Draft 2 to CoG meeting	
w/c	18/05/17	Draft 2 to Q&P & Audit Committee	
w/c	22/05/17	Draft 2 to Trust Board	
w/c	29/05/17	Submission of Annual report (incl Quality Report) to Monitor	
w/c	05/06/17	Final version to CDT-Q	Develop publication format and easy read version
w/c	12/06/17		
w/c	19/06/17		
w/c	26/06/17	Upload final Quality Account to NHS Choices by 30th June	

NB Dates of 2017 assurance committees & governors meetings TBC when known