

**NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST**

**COUNCIL OF GOVERNORS MEETING**

**Meeting Date:** 6<sup>th</sup> March 2018

**Title and Author of Paper:** Quality Account 2017/18

Lisa Quinn, Executive Director of Commissioning & Quality Assurance

**Paper for Debate, Decision or Information:** Decision

**Key Points to Note:**

- It is a requirement that NHS Trusts ask their Council of Governors to select an existing Quality Priority to be audited.
- A shortlist of Quality Priorities is included within this paper.
- Governors are asked to vote for their preferred Quality Priority.

**Outcome required:** To vote on the preferred Quality Priority to be audited as part of the 2017/18 Quality Account assurance process.

## COUNCIL OF GOVERNORS

6<sup>th</sup> March 2018

### Quality Account 2017/18

In May 2018 we will be publishing our annual Quality Account. This is a report which sets out our view of the quality of our services, and how we have progressed against our quality priorities. Quality priorities are the areas we have chosen to focus upon each year.

Once again there is a requirement for Governors to choose a current Quality Priority to be audited to make sure that our processes are robust and that the information we publish in our Quality Account is accurate.

The current list of quality priorities is attached on page 3 for information. This shows the rationale for shortlisting the below three quality priorities as suitable for audit:

Priority	Aim/objective	Vote:
1	Embedding the Positive and Safe Strategy	
4	To improve the referral process and the waiting times for referrals to multidisciplinary teams.	
5	Mental Health Act – reading of patient’s rights	

Governors are asked to choose which one of the above 3 quality priorities should be audited, by means of a voting process.

Note that the quality priority chosen for audit last year (1617) was “To embed suicide risk training for staff” and the previous year’s audit (1516) was the quality priority “To improve the referral process and the waiting times for referral to multi-disciplinary teams”.

**Lisa Quinn**  
Executive Director of Commissioning & Quality Assurance  
March 2018

**2017/18 Quality Priorities & rationale for inclusion/exclusion from audit vote:**

Priority	Aim/objective	Is the impact of this Quality Priority Trust wide?	Is this Quality Priority quantitative, specific and measureable?	Go to vote?
<b>Safety - QUALITY GOAL ONE: Keeping You Safe</b>				
1	Embedding the Positive and Safe Strategy	Initial focus is upon inpatient wards	Yes	Yes
<b>Experience - QUALITY GOAL TWO: Working with you, your carers and your family to support your journey</b>				
2	Co-production and personalisation of care plans	Initial focus is upon adult inpatient wards	No	No
3	Implement principles of Triangle of Care	No (not all services currently use Triangle of Care eg Community Services for Children and Young People)	No	No
4	To improve the referral process and the waiting times for referrals to multidisciplinary teams.	Yes	Yes	Yes
<b>Effectiveness - QUALITY GOAL THREE: Ensure the right services are in the right place at the right time to meet all your health and wellbeing needs</b>				
5	Mental Health Act – reading of patient’s rights	Yes	Yes	Yes