

Report to:	Council of Governors	Agenda item:	15
Date of Meeting:	5 September 2018		

Title of Report:	Governor Quality Working Group Update Report
Status:	For Information
Sponsor:	Nick Houlton, Public Governor, North East Somerset (Chair)
Author:	Emily McConnell, Membership & Governance Administrator
Appendices:	Appendix 1: Future Work Plan Appendix 2: Draft Annual Report

Purpose

To provide the Council of Governors with an update following the Governor Quality Working Group held on 5 July 2018.

Background

The report is prepared to inform the Council of Governors on the salient issues discussed and agreed at the Governor Quality Working Group.

Business Undertaken

The Working Group received the following updates:

- Quality Accounts Priorities for 2018-19:
 - Update on QA priority 1 – Transitional Care

Transitional Care

The working group received an update on one of the Trust's Quality Accounts Priorities, Transitional Care. They were informed that the aim of the RUH Maternity Services was to keep mothers and babies together and reduce the number of term babies being admitted to the Neonatal Unit (NICU).

They were informed that as part of the National Avoiding Term Admission in Neonates (ATAIN) scheme, all Trusts in the South of England were required to achieve below 5% of admissions by March 2019 and that the RUH was currently at 7.8%.

The working group was asked to identify any specific statistics that would be useful to read in the end of year report.

The Working Group also received the following updates which had been delegated from CoG:

- Maternity Clinical Governance Report
- Follow up any recommendations from ECIST and monitor implementation. Also to be appraised of any implications/actions resulting from the external scrutiny of the elective plan.

Maternity Clinical Governance Report

The working group received an update on the Maternity Clinical Governance Report for quarter 4 and were informed that overall, the birth rate had remained static and that although there had been a slight increase of 0.7% in the community, overall the annual data showed a downward trend in community births and that work continued to be done regarding governance within Maternity Services.

Recommendations from ECIST

The working group received an update on the Emergency Care Improvement Plan (ECIP) and were informed that the name had been changed to Emergency Care Intensive Support Team (ECIST) and that the Trust was currently working through the elective surgery to ensure that it did not have an impact on capacity during the winter.

Key Decisions

The working group approved its draft Annual Report subject to the addition of full explanations for abbreviations.

The working group was informed that the Governor dashboard was still in the process of being amended to include more appropriate statistics and that BIU would be helping to develop a suitable format.

Exceptions and Challenges

N/A

Assurance

No assurance was sought from the working group this quarter.

Governance and Other Business

Learning from Patient Stories in the Last 3 Years

The working group received an update from Joanna Hole, Non-Executive Director on how the Trust learns from the patient stories that are presented to the Board of Directors meetings. Joanna provided assurance that learning points from the stories was shared across the Trust to all members of staff through the Patient Experience section on the website and that it was also incorporated into staff training.

The working group was assured that the Trust continues to share learning from complaints and good news stories across the Trust through various channels and requested that the quarterly Patient and Carer Experience report be adapted to communicate the learning in a better way.

Other Business

The working group requested that a Non-Executive Director be assigned to the working group and that they should be invited to attend meetings if necessary.

Future Business

The working group approved the current workplan with no additions.

Recommendations
<p>The Council of Governors is asked to:</p> <ol style="list-style-type: none"> 1. Note the update report 2. Approve the Annual Report

Governor Quality Working Group - Proposed Workplan

	10th January 2018	4th April 2018	5th July 2018	4th October 2018	9th January 2019
Opening Business					
Welcome, Introduction & Apologies	✓	✓	✓	✓	✓
Minutes of the Quality Working Group held in private on XX	✓	✓	✓	✓	✓
Action list and matters arising	✓	✓	✓	✓	✓
Standing items					
Governor Dashboard (to identify themes)	✓	✓	✓	✓	✓
Working group delegated work from CoG	<p>* Attending Governors are aware that Sepsis and AKI are Trust safety priorities and that the focus is on training and implementation of improved procedures. We would really like the Trust to consider whether any clinical outcome data could be produced which shows the effect on for example patient morbidity/mortality to demonstrate to the public. The Quality strategy does not have any hard data/targets and we feel that it should.</p> <p>* Governors are concerned about the discharge process and would like the Trust to investigate producing more detailed measures of the process - in addition to discharges before midday and DTOC performance.</p> <p>* QWG to consider adding the learning points from patient stories to their workplan.</p>	<p>* Seek reassurance that the Nursing shortage is not affecting Quality.</p> <p>* Obtain reassurance that the Trust is initiating a plan to tackle patients left alone/in isolation for extended periods.</p>	<p>* Update on the new discharge lounge and obtain ongoing reassurance that it is utilised for the correct purpose (not as an overflow in-patient area).</p> <p>* Follow up any recommendations from ECIP and monitor implementation. Also to be appraised of any implications/actions resulting from the external scrutiny of the elective plan.</p>	<p>* Monitor the number of patients who repeat fall.</p> <p>* Monitor figures for cancer haematology for an increase.</p>	<p>* Receive feedback on the CQC extraordinary visits to ED due to winter pressure. Be briefed on the impact on the Super Discharge week and any lessons learned.</p>
Working Group Self-Assessment		Discuss, then survey to be sent after mtg	Review W/G self assessment		
Terms of Reference review				✓	
Review Annual Report		Plan for draft	Review draft report		
Information items					
CQC updates - inspections, reports and action plans	As required	as required	as required	as required	as required
Ares of interest / presentations requested	Antibiotic Prescribing & Stewardship regarding C Diff. (postponed from Oct 17)	HSMR review in 6 months' time (agreed from July 17 meeting)	Learning from patient stories in the last 3 years	Update on stillbirth rate at RUH	TBA by working group
		Falls Improvement Programme Update	Maternity Clinical Governance Report	Update on Discharge Pathway and the challenges of discharging stranded and super stranded patients	TBA by working group
Assurance Items					
Progress against Quality priorities	QA priority 4 - Sepsis	QA priority 1 - TBC	QA priority 1 - Transitional Care	QA priority 2 - Reducing the wait time for diagnostic tests	QA priority 3 - Ensuring patients go to theatre within 36 hours of admission
Additional Quality Accounts	Review draft QA priorities & choose local indicators 2018/19			Governor suggestions for QA priorities for 2019/20 based on Member feedback	Review draft QA priorities & indicators 2019/20
Public Board of Directors assurance - questions to be submitted in advance	✓	✓	✓	✓	✓
Closing Business					
Meeting Review	✓	✓	✓	✓	✓
Future Workplan	✓	✓	✓	✓	✓

Appendix 2

Quality Working Group Annual Report 2017/18

Introduction

This working group ensures that Governors are able to gain assurance from the Trust's Non-Executive Directors on matters relating to the quality of services provided by the Trust. By gaining an understanding of the Trust's Quality priorities, the group is able to fulfil its main objective, to identify any issues affecting the quality of care provided and which encompasses all aspects of patient experience, patient safety and clinical outcomes.

This report gives a brief synopsis of the work undertaken by the group over the last year.

The Working Group is made up of:

Nick Houlton, Public Governor, North East Somerset (*Chair*)
Amanda Buss, Public Governor, City of Bath
Anne Martin, Public Governor, Mendip
Shawn Lomax, Staff Governor (*from March 2018*)
James Colquhoun, Public Governor, South Wiltshire
Janet Adeyemi, Membership & Governance Manager
Helen Blanchard, Director of Nursing and Midwifery (*or Deputy*)

Activity

Each year the working group agrees its work plan. The main focus of activity is always on the Trust's progress against its Quality priorities. In addition to this, the working group also advises the Council of Governors in the setting of the Trust's future Quality Accounts priorities; and ensures that member's views on Quality related issues are properly considered and addressed. The agenda for the Group meetings consists of a number of standing items, which ensure the group has oversight of areas such as:

- The Trust's progress against its Quality priorities
- The Annual Quality Accounts
- The regular Quality reports which are considered at Board of Directors meetings
- Care Quality Commission (CQC) and other monitoring reports, the Trust's action plans, and progress against them
- Items delegated by the Council of Governors (CoG), which routinely consist of issues or topics highlighted by other Governors and members

In addition to this, the working group has had the opportunity to consider an array of reports, surveys and data focusing on the Quality and Operational Board of Directors reports as well as the Trust's performance scorecard. The attendance of the Director of Nursing and Midwifery enables the group to seek assurance on any issues that arise from them, in addition to which the group can seek assurance from the Non-Executive Directors that the Trust is achieving its quality priorities and objectives.

The working group meets four times a year.

Key Decisions, Monitoring & Assurance Activities

The working group has the opportunity to consider all the reports which are produced either by the Trust itself, or by the monitoring bodies who assess the Trust against national standards. In the last year, the group have reviewed the following:

- Outcomes of the 15 step challenge
- Action plans and trends from Patient Advice and Liaison Service (PALs) and complaints
- Quality Accounts Priorities and choosing a Local Indicator for 2018/19
- Antibiotic Prescribing and Stewardship regarding C-.Difficile infection control
- Terms of Reference

- Undertaking Self-Assessment to make any necessary improvement

In January 2018, the working group had the opportunity to contribute to and comment on this year's Quality Accounts (QAs) and has ensured that feedback from members on last year's QAs has been used to inform the 2018-19 process. The following QAs for 2018/19 were endorsed by the working group:

- Transitional Care
- Reducing the wait time for diagnostics tests
- Improving the pathway for our patients with a fractured neck of femur
- Using patients and carers feedback to improve our services.

As well as endorsing the QA priorities, the working group is also required to select a "local indicator" whereby the external auditors are asked to examine data used by the hospital. In January 2018, the working group debated the possible indicators and chose the "2 week wait from GP referral to first outpatient appointment- breast symptomatic patients" as the local indicator to be audited. This was endorsed by the Council of Governors.

Some agenda items have been directly delegated from the Council of Governors and areas that have been considered by the group include:

- Learning points from Patient Stories
- Delayed Transfers of Care (DTOC) Performance and Discharge - in particular before midday
- Sepsis and Acute Kidney Injury (AKI)
- Falls Improvement Programme implementation
- Update on Multi-Disciplinary Team (MDT) Progress
- Patient Transport
- Board Monitoring Report actions – proposed way forward

In addition, the group has sought assurance on a wide range of quality related issues including:

- 2017/18 Quality Accounts Priorities (Discharge, Frailty, Jaundice Management and Sepsis)
- Nursing staffing in the Critical Care Unit (CCU)
- Staff bullying figure within the 2016 Staff Survey
- Patient transport contract
- Improving speed of To Take Away (TTA's) medicines
- Evidencing Trust progress in learning from complaints

Public Views:

The Council of Governors and Trust have a well-established mechanism for ensuring that members', service users and the public views are taken into account. All feedback is identified by Governors, collated, and common themes are discussed by the Council of Governors. Issues that relate to the Quality of services and patient care are then delegated to the Quality Working Group.

Future Workplan:

Throughout the next year, the Quality Working Group will continue to monitor the Trust's performance in relation to Quality issues, and its response and action plans in respect of the CQC report findings, as well as to ensure that members' views are taken into account when Quality Priorities are agreed.

Nick Houlton

Quality Working Group (Chair)

June 2018