Sherwood Forest Hospitals NHS
NHS Foundation Trust

Board of Directors

Report

Subject: Quality Committee Report
Date: 24/03/2016
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Lead Director: Dr Peter Marks

Executive Summary
The Quality Committee met on 23/03/2016. This paper summarises the matters agreed by the Committee for reporting to the Board of Directors:

Quality Improvement Programme

- The Committee received an update on the QIP following the Confirm and Challenge meetings held in March. The QIP is progressing well. Overall 76% of actions in the QIP are rated as completed (56%) or on track to complete (20%), 20% of the actions are embedded (although 15% are subject to verification by the Care Quality Commission), 1% of the plan is rated Amber and 3.5% Red. The Committee received a briefing on all actions rated Red. The Committee also examined and approved 19 actions which have been completed and recommended by Management as embedded.

Quality Report 2015/16

- The Committee received a briefing from the Deputy Chief Nurse on the arrangements in place to prepare and approve the Trust's Quality Account 2015/16. An extraordinary meeting of the Committee is scheduled to consider and approve the Quality Report on 14th April 2016.

Serious Incidents

- The Committee received a report from the Director of Governance on the number and nature of serious incidents at the Trust since January 2014, including an update on compliance with the Duty of Candour requirement, and performance on conclusion of serious incident investigations. The report followed a period of data validation and improvement to data quality and, therefore, the Committee understood that the report may restate and clarify information previously reported. The Director of Governance confirmed that the Trust continues to apply and follow NHS England's Serious Incident Framework.

  The Committee welcomed the report and the enhanced clarity on the number and nature of serious incidents, and the plans to address more directly the Duty of Candour requirement. However, Members expressed concern about the length of time it is taking to conclude serious incident investigations. As of 18/03/2016 it was reported that there were 19 serious incident investigations ongoing, of which 12 were overdue for conclusion. The longest delay being 24 weeks overdue. Mr Moore confirmed that whilst this performance is not acceptable, there has been considerable work undertaken with divisional teams to reduce this backlog and he reassured the Committee that there will remain a strong focus on concluding investigations within 60-days as required by NHS England's Serious Incident Framework.

Relevant Strategic Priorities (please mark in bold)	
To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

How has organisational learning been disseminated	Through management teams.
Links to the BAF and Corporate Risk Register	AF1.0
Details of additional risks associated with this paper *(may include CQC Essential Standards, NHSLA, NHS Constitution)*	The following CQC Domains apply: Safety Effective Responsive Well-led
Links to NHS Constitution	Delivery of care within nationally mandated and clinically appropriate timescales
Financial Implications/Impact	None identified
Legal Implications/Impact	None identified
Partnership working & Public Engagement Implications/Impact	None identified
Committees/groups where this item has been presented before	Quality Committee
Monitoring and Review	Divisional Management Teams Quality Committee
Is a QIA required/been completed? If yes provide brief details	Not applicable.