Action: 6. Timely Access 6.6.1 Establish a retrospective clinical patient pathway review audit. Review of ten sets of notes per month within three separate specialities commencing with highest risk specialties	Current BRAG Rating	Recommended BRAG Rating
	Green Completed 31/12/15	Blue / subject to CQC Confirmation

Detail:

There have been data quality audits of 10 sets of case notes in ophthalmology, gastroenterology, cardiology, neurology and ENT. There is a plan to continue to undertake these audits, one speciality per month.

Reports have been written with recommendations for four of those specialities and fed back to the divisions.

As a consequence of work that has been undertaken in the organisation in relation to training and improved management of the whole RTT process, SFH is now able to demonstrate an improvement in its validation performance, reconciliation of OP appointments, increasing utilisation in OP clinics and theatres and we are consistently achieving the RTT target.

Evidence:

Reports that have been created	6.6.1 Audit report from Ophthal, Gastro 6.6.1 Audit report of RTT for ENT Feb 2016 6.6.1 DRAFT Audit report for NEUROLOG
Timetable for continuing audits	6.6.1 Updated timetable of Retrospe
Performance data to demonstrate improvement. Outpatient summary demonstrates improvement in reconciliation, and OP clinic utilisation. PTL validation summary show that at the start of the process there were 57,892 'no-stops' and that as a consequence of validating over 48,000 patients we have been able to create a new 'clean PTL' that currently has 17,252 no-stops. This report has a graph included that demonstrates continued achievement of the national target.	6.6.1 Copy of Outpatient Summary 6.6.1 PTL Validation Summary Report 31st 6.6.1 RTT performance chart.xls

On-going monitoring arrangements:	
• Outpatient Improvement Board. Weekly Operations meeting with COO. Divisional performance reports	
Executive Director Responsible:	Interim Chief Operating Officer Jon Scott	**Responsible Assurance Committee:**	Board of Directors