ASH North Tees and Hartlepool NHS Foundation Trust Quality Account 2016-54/16 17

Members received a presentation from senior representatives of North Tees and Hartlepool NHS Foundation Trust's (NTHFT). The presentation covered the consultation into the priorities for inclusion in next year's Quality Account, progress on the current year's priorities, and an update on key issues as requested at the last meeting of the Committee.

NHS Acute Trusts are under a duty to produce yearly 'Quality Accounts' and these were intended to set out:

- what an organisation was doing well;
- where improvements in service quality were required;
- what the priorities for improvement were for the coming year;
- how the organisation had involved service users, staff and others with an interest in that organisation in determining those priorities for improvement.

The Quality Account process enabled Members to review key information on the performance and quality of local health services.

Providers were encouraged to engage with local stakeholders throughout the production of each year's Quality Account. Representatives from NTHFT were in attendance at the meeting and provided a presentation on the key issues this year.

For each Account, the relevant commissioning CCG would need to provide a statement of assurance. Health overview and scrutiny committees had a voluntary opportunity to comment on draft Accounts. The Committee would have the opportunity to comment on NTHFT's draft 2016-17 Account in the new year.

Member were given opportunity to ask questions/make comments that could be summarised as follows:-

- - Members noted that the mortality data had significantly improved over the previous year, and a lot of work had gone into understanding and improving the data. There was no indication as to why there has been a recent small increase as yet but the overall trend was downwards. The Trust has previously had the highest HSMR rate in the country and this had improved. The Trust was now 6th lowest in the North East.
- Recent newspaper reports had identified the Trust as having delays in relation to the time taken to scan patients presenting with a stroke. It was noted that this was not currently an identified issue by the Trust, but this would be taken back and investigated.
- The Nursing Dashboard was being replaced by the Safety, Quality and Infections Dashboard which would show key indicators for each ward in realtime.

- it had been reported previously that the reason targets had not been met in relation to Clostridium Difficile was due to a decant ward not being available, was this still the case? It was reported that the decant ward was now available to allow for cleaning of wards but numbers still weren't coming down. The Trust was on course to undertake fogging of all wards by Christmas.

The Trust was looking into why this was happening and what could be done. A summit led by a non-Executive Director would investigate the issue and produce an action plan. Each case was investigated and any one cause was not standing out at present.

The Secretary of State had undertaken to look into the prevalence of Ecoli in hospitals and this was being looked at by the Infection Control lead.

- Members discussed the Friends and Family Test and requested a breakdown of the results by service area/ward.
- The detailed action plan following the CQC inspection report was available on the Trust website. The CQC was now in contact with the Trust on a quarterly basis, instead of two-monthly, as the CQC was satisfied that the Trust was working well.

The Committee was reminded of the Quality Account Marketplace event taking place on 14th December at the North Tees Site. Members were also asked to consider if there was other ways in which they would like to receive the information on the Quality Account.

Members queried whether there was national benchmarking information available on infection rates.

RESOLVED that the information be noted, and information requested be provided.