



# Agenda Item 6

## Report to Healthier Communities & Adult Social Care Scrutiny & Policy Development Committee

### 10<sup>th</sup> April 2014

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**Report of:** Dr David Throssell  
Medical Director  
Sheffield Teaching Hospitals NHS Foundation Trust

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**Subject:** Quality Report 2013/14

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#### **Summary:**

Foundation Trusts are required to produce an Annual Quality Report, which sits alongside the Annual Report, and specific reporting requirements are detailed in Monitors NHS Foundation Trust Annual Reporting Manual 2013/2014.

The Quality Report has two key aims; to report on the quality of services delivered by Sheffield Teaching Hospitals in the year 2013/14 and to identify the Quality Report Objectives for 2014/15.

A draft of the Quality Report 2013/14 has been produced and is enclosed for the Committee to consider and provide views, comments and recommendations on the contents of the report. The most up to date data has been used, where available, throughout this report. Please note that in most cases this is quarter 3 data (the first 3 quarters of the financial year 2013/14) which will be updated when the data becomes available. Figures and sections that require updating are marked in **red**.

The Quality Report is made up of 4 parts:

#### **Part 1**

A statement on quality from the Chief Executive and the Medical Director.

#### **Part 2**

**Priorities for improvement** – the forward looking section of the report where the Trust documents the objectives for quality improvement within 2014/15 and why we have chosen these priorities. This section also includes an update on priorities set for 2012/13 and 2013/14.

**Statements relating to quality of NHS services provided** – content common to all providers which makes the accounts comparable between organisations and provides assurance that the Board has reviewed and engaged in cross-cutting initiatives which link strongly to quality improvement.

### **Part 3**

**Review of quality performance** report on the previous year's quality performance

**An explanation of who you have involved** and engaged with to determine the content and priorities contained in your Quality Account.

### **Part 4**

Response to partner organisation comments following the Quality Report 2012/13 and provider organisation comments on the Draft Quality Report 2013/2014.

It is recognised that the objectives for 2014/15 in Part 2 cover only a small part of the improvement work in place across the organisation, and many other initiatives are reported within the Monitor Operational Plan and other external publications.

In order to identify the four priority objectives, a review has been completed of the key areas for action arising out of the Government final response to the Mid-Staffordshire Public Inquiry. Scoping work has also been undertaken looking at the national areas for improvement (such as mortality rates) and local initiatives such as responses from Trust surveys. Following this analysis and subsequent discussion with the Quality Report Steering Group and other parties the following Quality Report Objectives for 2014/15 are proposed:

1. To ensure that every hospital inpatient knows the name of the consultant responsible for their care during their inpatient stay and the name of the nurse responsible for their care at that time.
2. To improve complainant satisfaction with the complaints process.
3. To Review Mortality rates at the weekend.
4. To review the impact of waiting time on the patient experience (specifically patients waiting over 18 weeks for treatment).

These have been updated following suggestions made at the last Committee meeting.

The overall report production is supported by the Quality Report Steering Group which advises on content, format and design. The Quality Report Steering Group membership is supported by a number of Trust Governors who contribute widely to the process of production. The final Quality Report requires presenting to the Board of Directors in May 2014. In line with statutory requirements the draft Quality Report and various supporting documents will be submitted to KPMG for external assurance and audit.

A more accessible version of the quality report developed in collaboration with Trust Governors and Healthwatch representatives will be produced again this year and this will be shared with Scrutiny Committee members when available.

The Quality Report 2013/14 is presented to the Scrutiny Committee to request their views and comments.

**Type of item:**

Reviewing of existing policy	
Informing the development of new policy	
Statutory consultation	X
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Community Assembly request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	X
Other	X

**The Scrutiny Committee is being asked to:**

The Committee is asked to consider the Quality Report 2013/14 and provide views, comments and recommendations on the contents of the report.

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**Background Papers:**

[Monitor NHS Foundation Trust Annual Reporting Manual 2013/14](#)  
[Quality Account: Reporting Requirements for 2013/14- Gateway Reference No. 00931](#)

[Quality Account: Reporting Requirements for 2013/14- Gateway Reference No. 18690](#)

[Monitor detailed requirements for quality reports 2013/14](#)

[Quality Accounts a Guide for Overview and Scrutiny Committees](#)

[National Clinical Audits for Inclusion in Quality Accounts 2012/13](#)

**Category of Report:** OPEN

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