Service Quality Reviews

Agenda Item: 13
Reference: 10B.081

Board Meeting: 26 July 2010

NHS Direct

Summary	This paper summarizes the proposal to do a series of service reviews to ensure NHSD is able to demonstrate it offer safe high quality services and provide accountability for and transparency of those reviews to the NHSD Board
Issues to be considered	1. Are these the right service areas to review? 2. Is the proposed approach appropriate to meet the aims?
Action required	The Board is asked to: 1. Approve the proposed plan and approach. 2. Approve the proposed governance arrangements. 3. Give approval to proceed with reviews, as proposed.
Accountable Executive Director	Helen Young, Executive Clinical Director / Chief Nurse
Author of Paper	Helen Young Clinical Director/Chief Nurse David Foord, Associate Director of Clinical Governance Patricia Hamilton, Deputy Clinical Director / Chief Nurse
Date prepared	July 2010

1. Background

1.1 The Board has agreed to become more engaged in both promoting and overseeing the improvement of the quality of services that NHS Direct provides, which was prompted, in part, by the action plan to learn from the findings of the Francis Report.

1.2 Many NHS Trusts, in particular Foundation Trusts, are implementing new approaches to reviewing the quality of services reporting to their Boards. This has been stimulated by the requirement to be more publicly accountable for the quality of services through Quality Accounts and a requirement in the Acute Trust Provider Contact to undertake quality reviews.

1.3 Following the patient experience review recently presented to the Board and the growing desire of the Board to regularly discuss quality issues at full board meetings, this paper proposes a framework for a series of service quality reviews that will support this to happen.

2. Quality Issues at Board Level

2.1 The Board currently receives and discusses reports on a variety of quality related issues at present. On these occasions, quality tends to form part of a wider report or issue rather than the issue being discussed in itself. Similarly, when quality issues are raised, they are often isolated examples and do not provide enough wider contextual information to allow the Board to make informed decisions. The following are examples of some of the quality issues where the Board is currently engaged:

- KPIs in the scorecard relating to Quality.
- Monthly review of the Corporate Risk Register, incorporating risks to quality.
- Approval of annual Quality Accounts.
- Bi-monthly call recordings on specific topics.
- Non-Executive and Executive Director involvement in serious incident peer reviews.
- NED visits to sites to see services being provided in the live setting

2.2 NHS Direct is continually improving the quality of services provided but this is not always reported to the full Board and the proposed approach will enable more transparency of and accountability for improvements made.

3. Service Quality Reviews in NHS Direct

Governance Framework

3.1 Reports on the quality reviews we undertake will come to the Full Board for discussion and agreement of recommended actions. It is proposed that the first two of these reports pass through the Board Clinical Governance Committee prior to coming to full Board to provide a level of quality assurance that they are in line with what the Board has agreed.
See attached presentation for a list or the proposed areas for review.

3.2 The reviews will be overseen by Helen Young, Executive Clinical Director / Chief Nurse, but will engage with and draw in expertise form a range of individuals and groups across the organisation and will be don in collaboration with the COO and Director of Strategy. There will be a quality review governance group established reporting to the Executive Management Board to provide some consistent expertise and project governance to the process.

Proposed Approach

3.3 A series of reviews, initially eight, will be undertaken and reports over the next eighteen months, using a consistent core terms of reference around the areas of Patient Safety, User Experience and Clinical Effectiveness.

3.4 Initially the scope of these reviews will not extend to operational practicalities or financial efficiency of services, as these areas are the subject of other programmes of review, such as internal audit. To include this may dilute the focus on quality. However, where these areas are identified as causing issues in relation to quality then this will be considered for inclusion within the scope of the reviews. Further details on the proposed content and approach to the reviews is provided in the presentation in Appendix 1 of this paper.

4. Action for Board

3.1 Board are asked to:

- Approve the proposed plan and approach.
- Approve the proposed governance arrangements.
- Give approval to proceed with reviews, as proposed.

Helen Young
Executive Clinical Director / Chief Nurse
July 2010

Appendix 1 – Slide Deck outlining governance framework and proposed approach
In electronic versions of this paper the slide deck is embedded as an object.

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