

SUMMARY REPORT		
<b>TRUST BOARD</b>	<b>5<sup>th</sup> April 2018</b>	<b>Agenda Number: 08</b>
<b>Title of Report</b>	<b>Quality Improvement Programme Update</b>	
<b>Accountable Officer</b>	Kate Shields, Deputy Chief Executive	
<b>Author(s)</b>	Kate Shields, Deputy Chief Executive	
<b>Purpose of Report</b>	Update on Quality Improvement Programme	
<b>Recommendation</b>	The Trust Board is recommended to <ul style="list-style-type: none"> <li>• Receive the update report</li> </ul>	
<b>Consultation Undertaken to Date</b>	Update presented at Quality Improvement Delivery Board (QIDB) and the Quality Assurance Committee (QAC)	
<b>Signed off by Executive Owner</b>	Deputy Chief Executive	29.03.18
<b>Reviewed by Executive Team</b>	Quality Improvement Delivery Board	21.03.18
<b>Reviewed by Board Committee (where applicable)</b>	Quality Assurance Committee	29.03.18
<b>Reviewed by Trust Board (where applicable)</b>	Trust Board	05.04.18
<b>Date(s) at which previously discussed by Trust Board / Committee</b>	01.03.18	
<b>Next Steps</b>	Trust Board to receive routine updates	

#### Executive Summary

The update will outline:

- An Executive summary of progress for the Quality Improvement Plan and the Programme Plan on a Page to demonstrate the last 30 days and next 30 days of milestone delivery across the Programme
- An update on actions and proposed supporting evidence to drive compliance for the Second Section 29A Warning Notice

Trust Board

05/04/18

Quality Improvement Programme Update

### Quality Improvement Programme Executive summary

The Quality plan is making good progress and starting to deliver across all Workstreams. Maternity is now establishing as a Workstream in its own right and the delivery milestones to drive Section 29a compliance are included in this performance pack. The below outlines a summary of achievement for all Workstream areas:

#### Maternity

- The revised MEOWS audit process continues with daily audits, with improvement being shown since its introduction in February 2018
- The Fresh Eyes review and Section 29a requirements are continuing to progress with external validation of the guidelines review undertaken and now daily monitoring of the action plan

#### Safety Culture

- Ward accreditation ready to test on Phoenix and the Trauma Ward by the end of March 2018
- Work is progressing to develop an electronic solution in QUANTA for the long term
- Positive feedback on the NHSI Theatre Review. Recommendations will be reviewed and now included into the existing WHO Surgical Checklist workbook
- The DON is reporting observations of positive staff engagement in responding to and improving maternity services.

#### Tackling Delays

- The project reporting structure is now successfully implemented to ensure delivery rigour and pace across the projects
- The Programme Director (Deputy COO) is now working full time in the Trust and will be meeting with all project leads to refine the project priorities to support Section 29a compliance

#### Strong Governance

- Refining milestones for delivery by 31st March 2018 following the February CQC Warning Notice
- Development of SI performance reporting and management tool has begun with a review and validation of performance against each of the indicators (revised data is now being reported)
- An audit methodology for Duty of Candour has been developed and has commenced

#### Culture & Leadership

- The Medical Engagement Scale (MES) survey has been completed and the results have been shared with the divisional leadership teams
- The NHSI Culture and Leadership diagnostic has been completed and are now preparing for phase 2 of the programme which is being planned

#### Engagement & Communication

- Kicked off the Trust Improvement Programme campaign at a series of open Trust Team Talks on all main sites on 06/07<sup>th</sup> March 2018
- The first Trust Improvement Programme bulletin will go live on 16 March

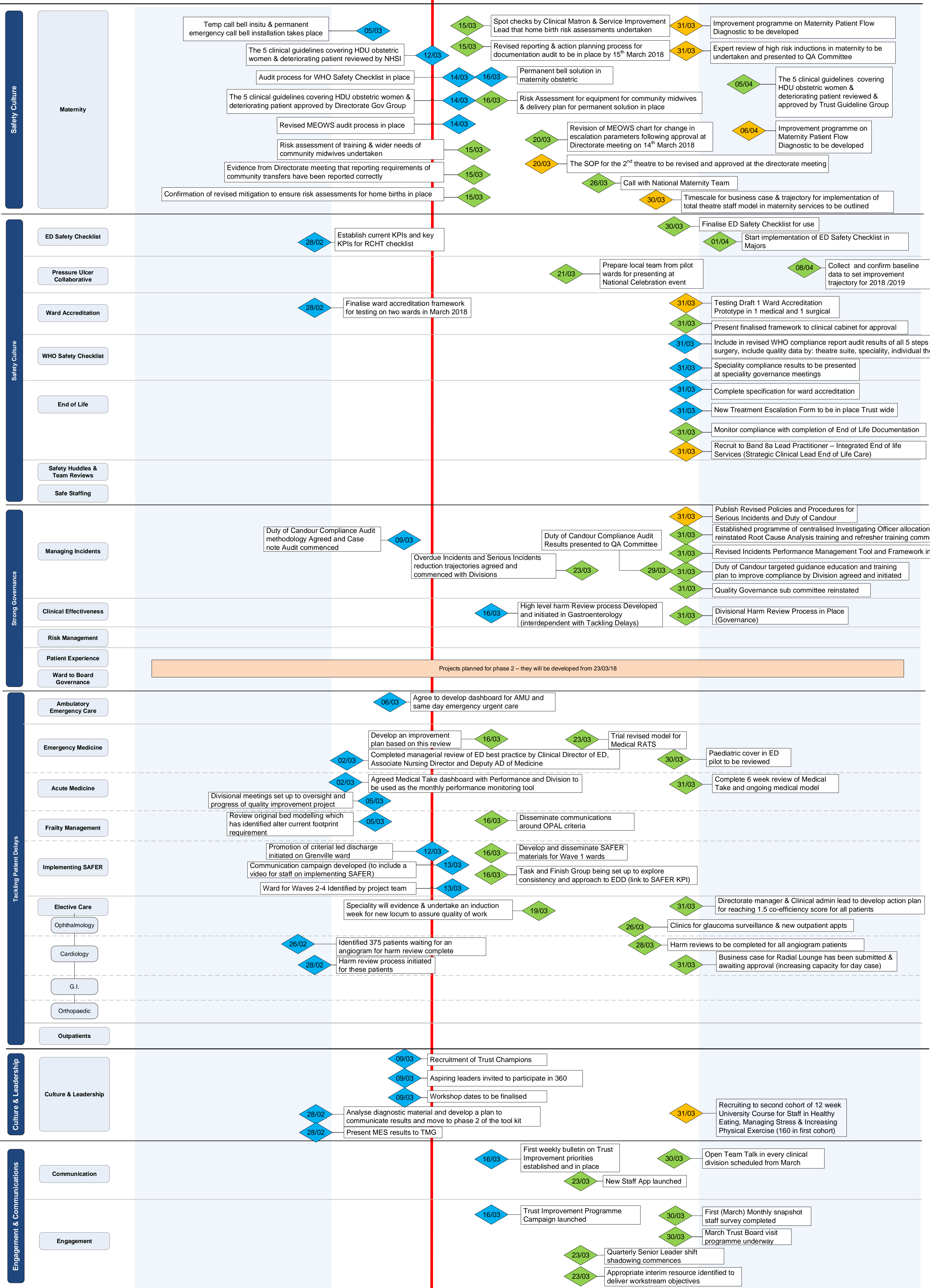
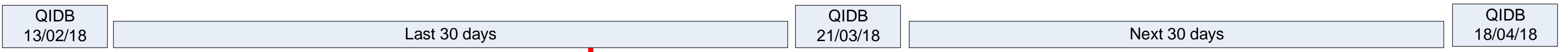
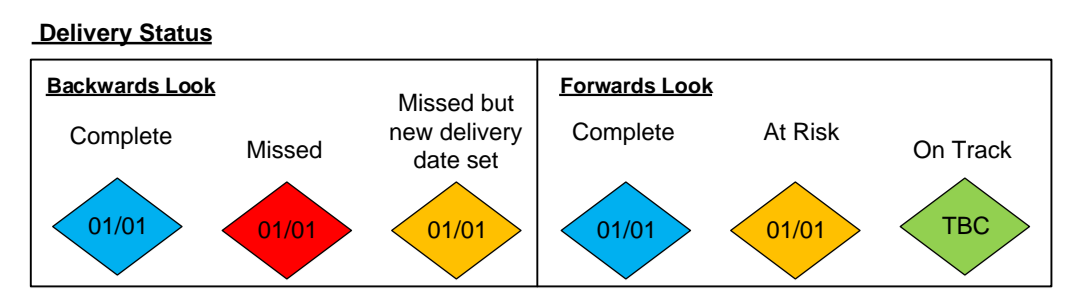
### Immediate Next Steps – Programme governance

- Prioritisation of projects as required to drive Section 29a compliance within Workstreams
- All level 1 Quality Plan KPIs data dictionaries reviewed to promote sustainable and accurate reporting
- Cross workstream interdependency mapping

~ Please refer to Programme Plan on a Page for Summary of Programme Delivery ~

**DRAFT**  
**Royal Cornwall Hospital Quality Improvement Programme Plan**  
**30 Day cycles**

Version 0.1 (updated 19 March 2018)



Currently Here 12<sup>th</sup> March 2018