



## Report to the Scrutiny Committee 20 February 2013

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

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**Subject:** Quality Report 2012/13 - Overview

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**Author of Report:** Sandi Carman  
Head of Patient and Healthcare Governance  
[Sandi.carman@sth.nhs.uk](mailto:Sandi.carman@sth.nhs.uk)  
0114 22 66489

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### Summary:

Foundation Trusts are required to produce an Annual Quality Report, which sits alongside the Annual Report, specific reporting requirements are detailed in Monitors NHS Foundation Trust Annual Reporting Manual 2012/13.

The Report has two key aims; to report on the quality of services delivered by Sheffield Teaching Hospitals in the year 2012/2013 and to identify the Quality Improvement Priorities for 2013/14.

This update report is structured into the following sections

1. Introduction
2. Quality Improvement Priorities 2012/2013
3. Proposed Quality Improvement Priorities 2013/2014
4. Quality Report Production
5. Recommendation

This information is presented to the Scrutiny Committee to request their views and comments on the Quality Improvement Priorities for 2013/14.

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**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 proposals and provide views, comments and recommendations on the contents of this report and the proposed Quality Improvement Priorities for 2013/14.

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**Background Papers:**

[Draft: Monitor NHS Foundation Trust Annual Reporting Manual 2012/13](#)  
[DH: Changes to Quality Accounts reporting arrangements for 2012/13](#)  
[Quality Accounts a Guide for Overview and Scrutiny Committees](#)  
[National Clinical Audits for Inclusion in Quality Accounts](#)

**Category of Report:** OPEN

## **Quality Report 2012/13 - Overview**

### **1. Introduction**

NHS organisations have a duty to provide patients with a service that delivers high quality care for all. The Quality Report seeks to provide the Board of Directors and key stakeholders with assurance that clinical quality is being monitored and assessed and that actions are being put in place when required.

The Quality Report details performance in Sheffield Teaching Hospitals NHS Foundation Trust using a range of information such as performance indicators, CQC reports, patient surveys and complaints.

This report is presented to update the Scrutiny Committee on the production of the 2012/13 Quality Report, to provide feedback on the current progress with the 2013/14 improvement priorities and to seek views and comments on these priorities for next year.

### **2. Quality Improvement Priorities 2012/13**

Sheffield Teaching Hospitals identified the following priorities to progress during 2012/13

#### **1. Optimise Length of Stay**

Through a systematic process of review identify areas for appropriate improvement in length of stay across the organisation.

Establish improvement plans to achieve necessary reductions in length of stay compared to national benchmarks.

#### **2. Communicate Better - Discharge Forms for GPs**

Improve the quality of immediate discharge notes sent to GPs by auditing the content of letters within each Directorate against standards agreed with NHS Sheffield.

Deficiencies identified during this process will be addressed by action planning at Directorate and Trust level.

#### **3. Communicate Better – Obtaining feedback**

Making what we've got work well - to improve the response rate by 20% for frequent feedback forms and 50% for the comments cards. By promoting the processes and demonstrating effectiveness, for example through case studies and actively communicating feedback - 'you said - we did'.

#### **4. Review mortality at the weekend**

Review in detail the Trusts position with regards to Mortality at the weekend and identify any significant differences, review causes and implement improvements as required.

## **5. Promote a good experience for those with mental health problems or dementia**

Undertake environmental audits across all appropriate directorates and put in place improvement plans to address areas of concern. (Link to the Kings Fund Dementia work and the ward essential maintenance programme).

Progress on each of these measures will be presented to the Scrutiny Committee at the meeting of the 20 February 2013. It is important to note that full year end performance figures will not be available until mid April 2013; however an interim performance position will be presented from April 2012 – December 2013.

## **3. Quality Improvement Priorities 2013/14**

The identification of Quality Improvement Priorities has been undertaken using a collaborative approach with staff, Trust Governors and LINKs representatives.

Three priority areas have been identified.

### **1. Cancelled operations**

- a. Why are operations cancelled?

### **2. Pressure ulcers**

- a. Reducing the prevalence of all Grade 2, 3 & 4 pressure ulcers, citywide

### **3. Discharge information for patients**

- a. Improving the provision of discharge information for patients
- b. Enabling the patient and relatives/carers to understand what to look for once they have been discharged including who to contact if concerned.

Further information on these suggested priorities will be provided during the presentation on the 20 February 2013.

## **4. Quality Report Production**

The report will contain comprehensive information regarding a range of quality measures covering all aspects of the Trust; some of these are detailed in mandatory statements specified by Monitor. Others have been added at the request of external auditors and following feedback from LINKs representatives (e.g. complaints, patient and staff survey feedback).

The mandated reporting requirements should enable staff, patients and the Trust Commissioners to compare quality indicators across a number of provider organisations.

The full report is currently in draft format and will be reviewed by the Quality Report Steering Group and other key stakeholders including LINKs and NHS Sheffield.

A copy of the draft version will be provided to the Scrutiny Committee early April when the majority of the year end data will become available.

## **5. Recommendation**

The Committee is asked to provide views, comments and recommendations on the contents of this report and the proposed Quality Improvement Priorities for 2013/14.

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