

Report to Trust Board

Date 27th July 2011

Agenda item no 5

Title	Francis Quarterly Report
Author	Associate Director of Nursing and Patient Services
Responsible Director	Director of Nursing and Patient Services
Purpose	Assurance/Information
Action required	The Board is asked to note the content of this report and support the ongoing programme of quality assurance.
Executive Summary	
This report provides information / update on the following areas:	
The Francis Report – Mid Staffs Inquiry	
Building on previous reports, this report, in conjunction with the patient experience presentation at the start of the Board meeting, outlines one of the approaches in place in the Trust to measure compliance with quality standards and senior review of the quality of care delivered to patients and their families.	
Relevant CQC standard	Most, in particular, 1,4,5,8,21
NHS Constitution pledge	Quality of Care and environment
Impact assessment:	
- quality	All items relevant to quality
- financial/business	Supports the Trust to meet its requirements
- equality/diversity	Supports the Trust to meet its requirements
- risk	Minimises risk and promotes assurance
- legal/statutory	Meets CQC requirements
- sustainability	N/A
Previous consultation/decision/discussion/	Last quarter report to the Trust Board. Discussed at the quarterly Professional Forum

Francis report update – July 2011

Background

In February 2010, the Robert Francis Inquiry report into Mid-Staffordshire NHS Foundation Trust was published. Robert Francis made eighteen recommendations for which a status report has been previously provided to the Board with assurance against each of the areas. In the last Francis Report update to this Board, a review of the five recommendations made in respect of Board levels failures were highlighted along with current status and ongoing action.

For the purpose of this report, the focus is placed on Recommendation 1.

“The trust must make its visible first priority the delivery of a high class standard of care to all its patients by putting their needs first.”

Current State

In June 2011, in response to local and national drivers, such as The Francis report (2010), The Ombudsman Report (2011) and the revised trust objectives, the Matrons developed a Quality Tool which enables a robust assessment of patient experience, safety and clinical effectiveness.

The tool is aligned to CQC Outcomes and allows Ward Sisters, Matrons and consequently Business Unit Managers to identify areas of good practice in ward areas and spread it throughout their own and other CBUs thus enabling the development of a shared learning network. The tool also allows for the identification of poor practice and development of a culture of continuous improvement using evidence based practice.

The tool is based upon the failings identified within the Francis report (2010), for example, nutrition and hydration, bladder and bowel care, cleanliness, communication and documentation (Appendix1).

In support of the Matrons rounds, Chief Nurse rounds have also been implemented. These are undertaken by members of the Corporate Nursing Team and feedback is delivered direct to the ward team with recommendations for improvement and timeframes for actions to be delivered.

Outcomes

- Improved patient experience due to improved management of care
- Provision of visible leadership and role modelling demonstrating senior support for the quality agenda
- Robust internal assessment leading to increased accountability and ownership from staff at all levels

Next steps

The tool is constantly being updated and evaluated using the patient safety approach of Plan, Do, Study, Act (PDSA) which creates a culture of continuous improvement based on current key drivers, such as, Energising for Excellence (2010) and High Impact Actions (2009).

In order to maintain robust ongoing quality assessment it is proposed that over the coming months the Matrons and Chief Nurse rounds continue and are refined.

In rolling out the programme it is proposed that :-

- the use of electronic information tablets replaces hard copies allowing real time results to be fed back to wards
- robust quality data from each ward area is captured to provide ongoing assurance
- a research study is developed to undertake a formal evaluation of the tool and its associated outcomes for patients.

Conclusion

It is clear that the Trust must remain vigilant and address any issues associated with poor quality in an appropriate timely manner. The Quality Ward Round tool allows for early identification of failings in quality and implementation of actions to address improvements and spread good practice.

It is proposed that the Board continues to receive quarterly Francis reports in the forthcoming financial year to provide assurance that quality remains a key focus for the Trust.