



Clinical Directorate

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To: Overview and Scrutiny Committees/Healthwatch

Debbie Simmons
Director of Nursing
Thames Valley/ Wokingham CCG

Simon Hawkins
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Julia Barton
Director of Nursing
Fareham and Gosport CCG

Julie Gumbrell
Head of Quality
Fareham and Gosport CCG

Dear Colleague,

I am writing to ask for your feedback and engagement in agreeing our quality improvement priorities for the 2016/17 Quality Accounts.

SCAS have engaged widely internally to develop the proposed priorities and used a variety of sources of intelligence such as feedback/complaints/incidents/audits and compliance actions to inform our planning.

The Quality Accounts and report provides a framework to assess the quality of the service on what matters to patients and informs the public, our commissioners and staff about the quality of care provided to patients and families.

It also provides assurance about our commitments to improve the quality of the service through the setting of key priorities and actions.

Preparation has begun to produce the 2016 -17 Quality Accounts. The Quality Account report will provide the following (although this list is not exhaustive):

- A statement from the Chairman and Chief Executive
- Set out our statutory requirements as a Trust
- Describe our journey to the “good” rating from the CQC
- Identify key priority improvement areas
- Provide assurance statements from our commissioners
- Demonstrate engagement with other partners such as Overview and Scrutiny Committees, our Council of Governors and other stakeholders
- Describe our progress against the current priorities
- Describe our progress with the Workforce Race Equality Standard and Staff Survey for equal opportunities
- Outline our approach to Duty of Candour
- Describe our commitment to the Sign up to Safety Campaign
- Give data on a variety of mandated indicators as described by NHS England

It is important to note that the data set cannot be completed until April 2017 as that will be the end of year reporting timeframe.

We will take into account, the feedback received when setting the priorities for next year and in our review of this year. Along with your comments we will, of course, provide you with the full report once it is complete.

Mandated indicators to be included in the Quality Accounts for Ambulance Services (NHS England)

- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of Category A telephone calls (Red 1 and Red 2 calls) resulting in an emergency response by the Trust at the scene of the emergency within 8 minutes of receipt of that call during the reporting period
- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of Category A telephone calls resulting in an ambulance response by the Trust at the scene of the emergency within 19 minutes of receipt of that call during the reporting period.
- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of patients with a pre-existing diagnosis of suspected ST elevation myocardial infarction who received an appropriate care bundle from the Trust during the reporting period.
- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of patients with suspected stroke assessed face to face who received an appropriate care bundle from the Trust during the reporting period.
- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of staff employed by, or under contract to, the Trust during the reporting period who would recommend the Trust as a provider of care to their family or friends.
- The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the number and, where available, rate of patient safety incidents reported within the Trust during the reporting period, and the number and percentage of such patient safety incidents that resulted in severe harm or death.

Proposed priority improvements for Quality Accounts (SCAS)

- The priorities outlined have been highlighted as areas/issues emerging throughout the course of the year and have been selected as areas SCAS feels the need to improve on.

The following are the proposed local areas and priorities for next year:

Priority 1 Patient Safety

1a	To improve the recognition of sepsis in adults in CCC (Clinical Coordination Centre) and Emergency and Urgent care (999)
1b	To complete a clinical governance review of the Emergency and Urgent Care (E&UC) 999 service and implement the recommendations
1c	To provide a consistent approach to medicines management which is compliant with the regulatory standards

1d	To continue to implement the workstreams in the national Sign up to Safety campaign to improve patient safety across all services
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Priority 2 Clinical Effectiveness

2a	To report on the percentage of patients with Stroke and Heart Attacks who receive an appropriate care bundle (mandated indicators) (as described above)
2b	To report on the percentage of patients receiving an emergency Ambulance response within 8 minutes and 19 minutes (mandated indicators) (as described above)
2c	To review and improve call abandonment for NEPTS (Non-Emergency Patient Transport Service), 999 and 111 (2 year priority)
2d	To increase clinical assessments in CCC (call centres) ensuring consistent methods and application across the services (3 year priority)

Priority 3 Patient Experience

3a	The data made available to the National Health Service Trust or NHS Foundation Trust by NHS Digital with regard to the percentage of staff employed by, or under contract to, the Trust during the reporting period who would recommend the Trust as a provider of care to their family or friends.
3b	To improve and learn from HCP (Healthcare Professional) feedback in all services
3c	To ensure a service that is consistently responsive, listens and engages with feedback from a variety of sources in NHS 111 and PTS

I would be very grateful for any feedback and if you would review the priorities and provide comments to me on the suitability / relevance of the chosen priorities for next year by 8th March 2017 at debbie.marrs@scas.nhs.uk

A full report can be obtained from 31st May 2017 onwards when it will be published.

Yours Faithfully



Debbie MARRS
Assistant Director of Quality