

Draft Quality Account 2015/16. Presentation to HSC 17 March 2016



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Quality ambitions 2014-16

- SAFE -** Mortality. Reduction in HSMR year on year
- SAFE –** Achieve 96% Harm Free Care (HFC) with zero avoidable grade 2-4 pressure ulcers and zero avoidable falls with harm
- CARING & RELIABLE -** Achieve improvement in all Friends and Family (FFT) responses
- RELIABLE –** Achieve all national waiting times targets i.e. 18 weeks, cancer and A&E



Quality improvements 2015/16

- 100% of unpredicted deaths will be subject to review
- From a baseline of 120 we will reduce the number of patients with a LOS >14/7
- Improved reporting of the deteriorating patient
- Reduce noise at night
- Increase the number of colleagues trained in dementia care & reduce complaints
- Improve complaints response times
- Meet stroke targets



So how have we done?

Mortality

- Rolling 12 month HSMR:
 - December 2014 = 99.28
 - November 2015 = 108.06
 - (March 2015 – 112.48)
- SHMI July 2014 to June 2015:
 - 111.64



Harm Free Care

Achieve minimum 96% Harm Free Care with the following percentage reduction on the 2014/15 baseline:

- 70% reduction in avoidable pressure ulcers grade 2-4
- 50% reduction in avoidable falls with significant harm

No. Trending at 94.85%; a 0.5% improvement on the previous year.

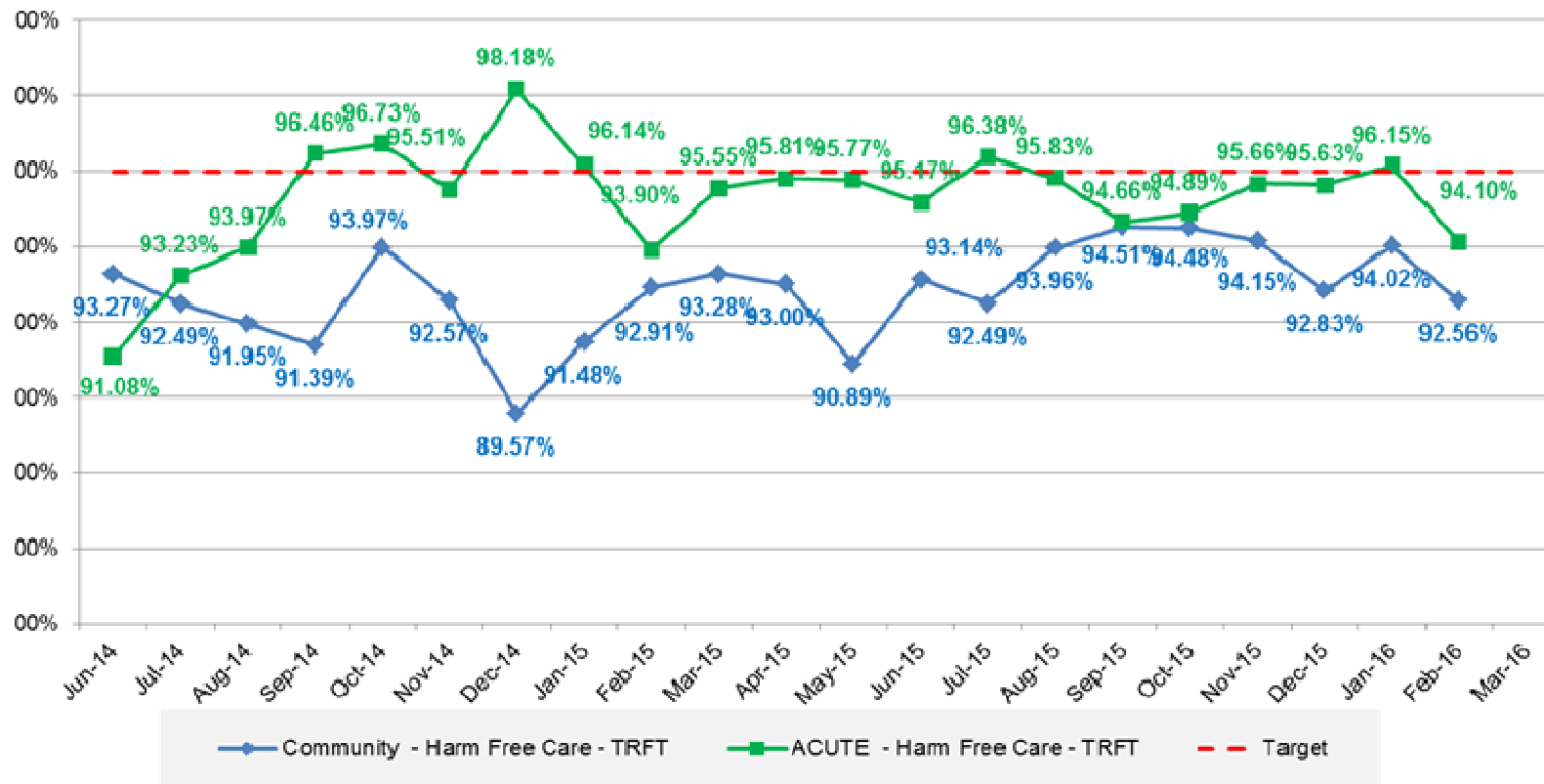
Yes – 74% achieved.

Yes – 57% achieved.



Harm Free Care

Patient Safety Thermometer - Acute and Community Split

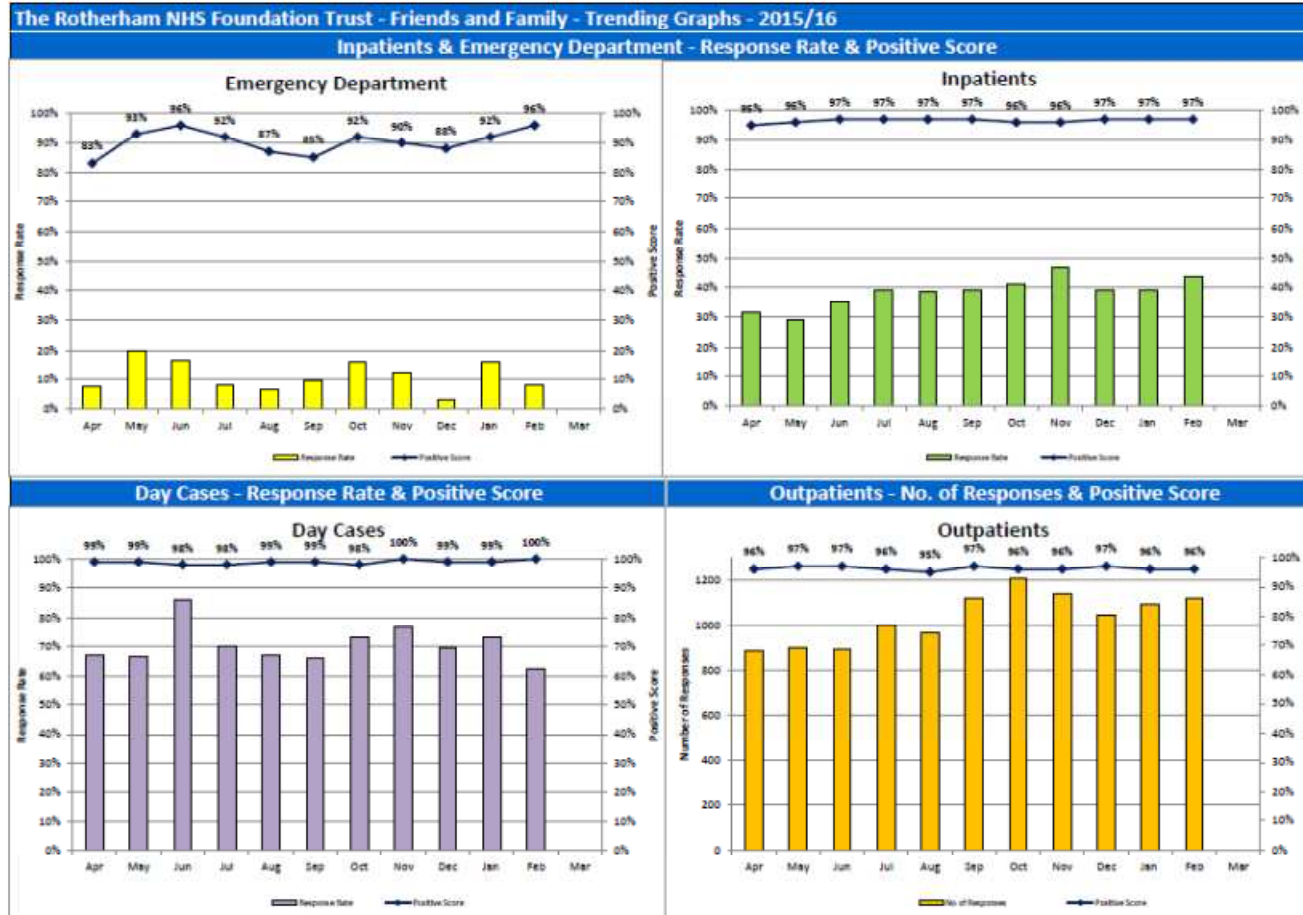


FFT

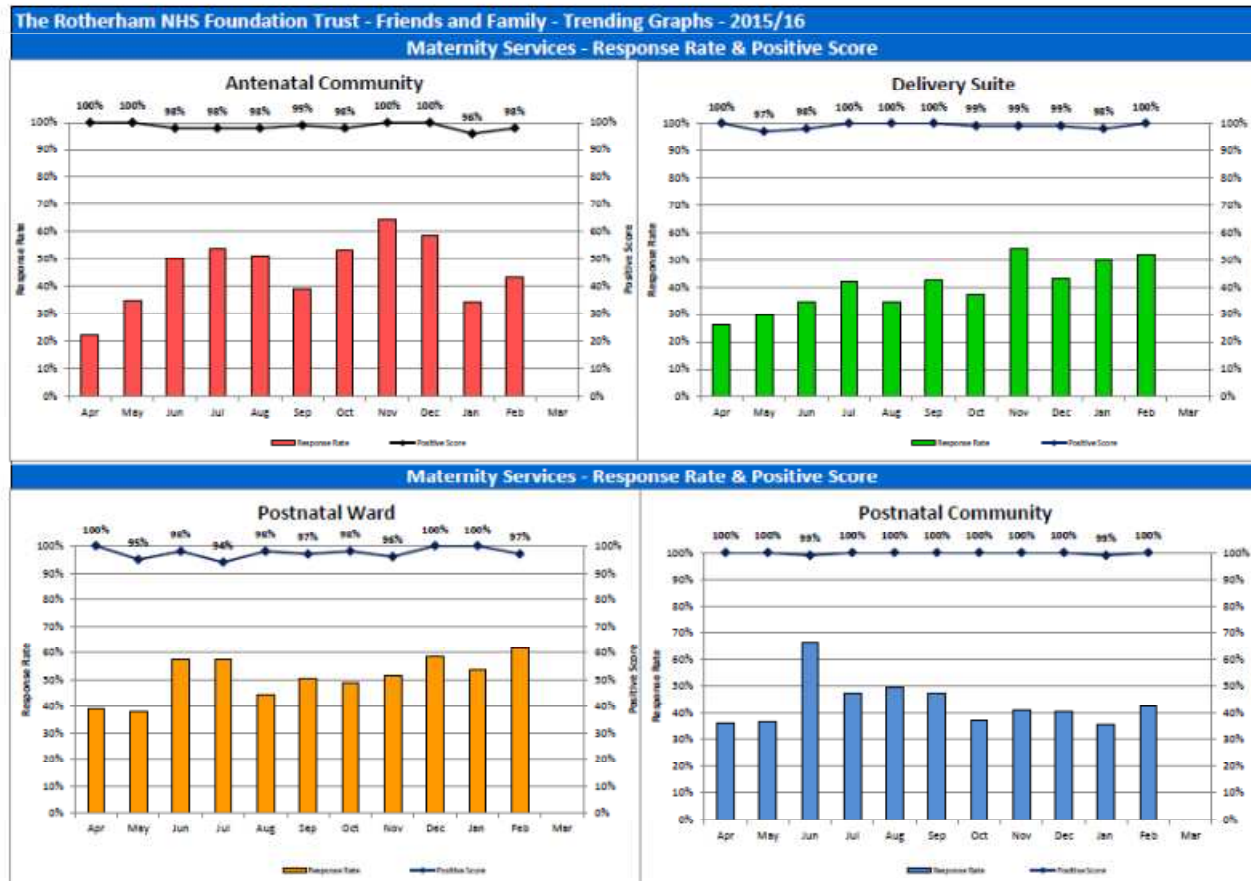
Achieve and maintain a minimum 95% positive Friends and Family Test (FFT) score – in-patients	Yes – 97% achieved
Achieve and maintain a minimum 86% positive Friends and Family Test (FFT) score – A&E	Yes – 88% achieved
Achieve a 40% FFT response rate – in-patient areas.	Yes – 41% achieved.



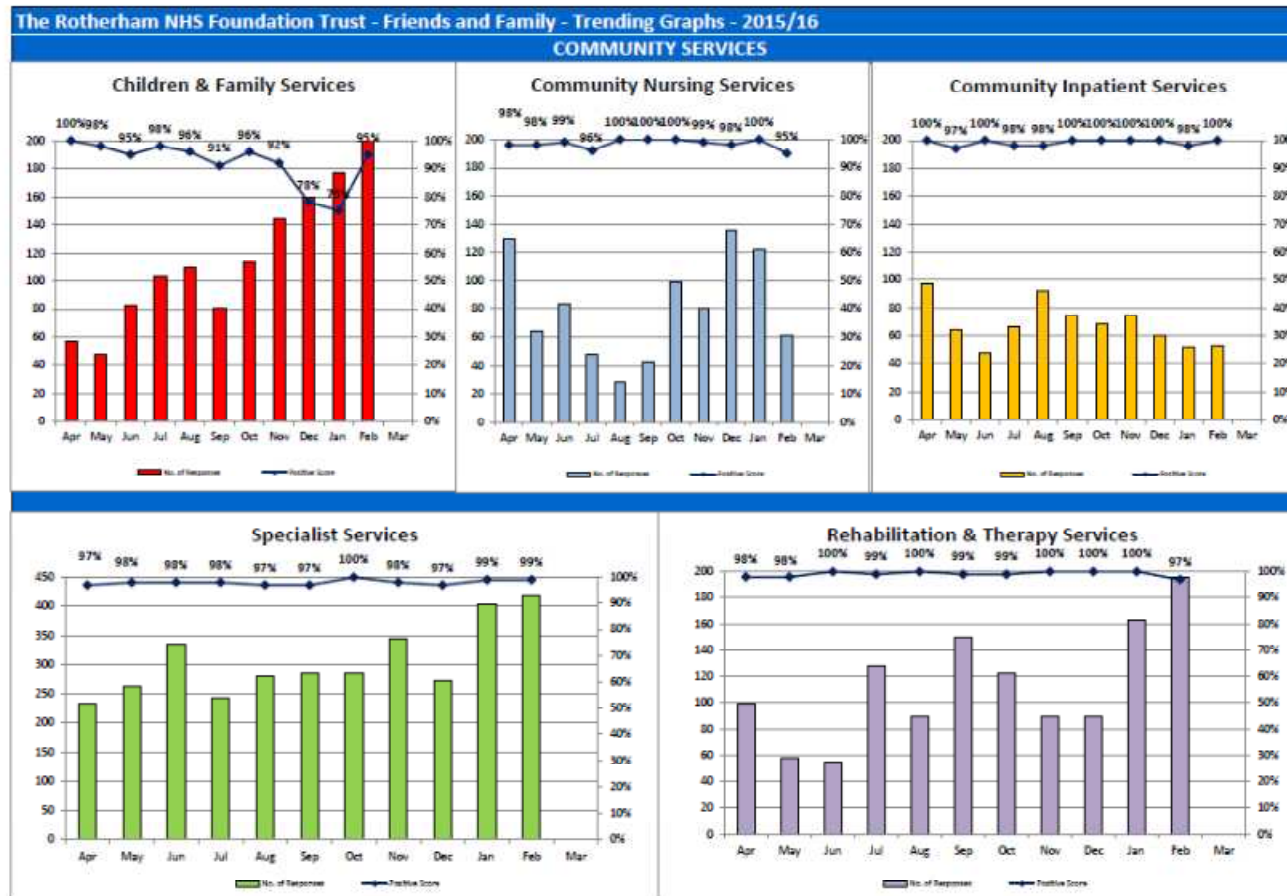
FFT



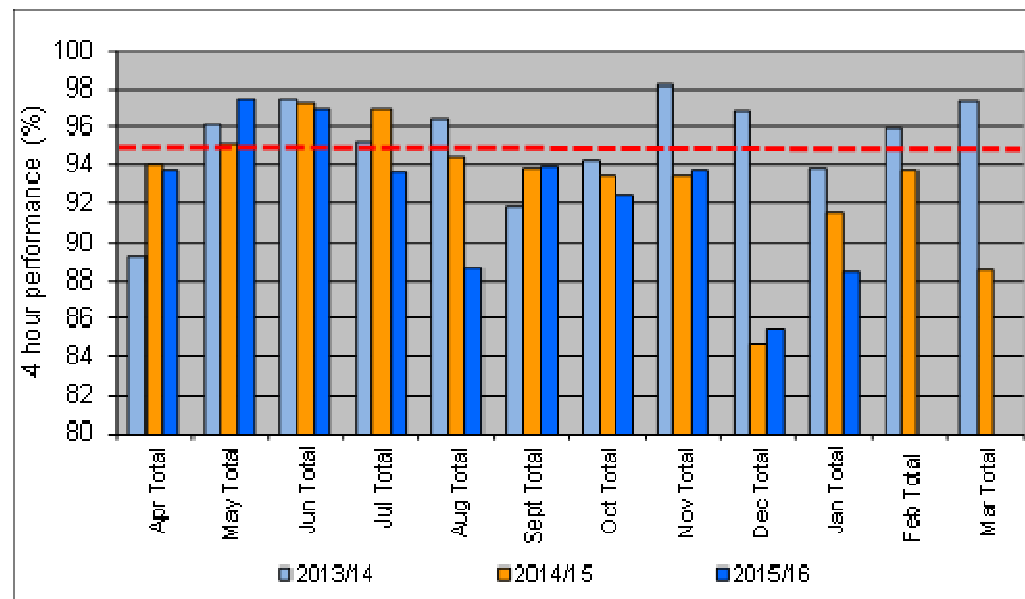
FFT



FFT



National targets – 4 hour access



4 hour access – national comparison

Period	TRFT Performance	TRFT Rank (of 140)	England Avg (Type 1)	No. of Trusts >95% (Type 1)
April	93.3%	53	89.8%	31
May	97.3%	9	91.5%	45
June	97.1%	16	91.5%	53
Q1	95.7%	23	91.1%	44
July	93.7%	73	92.5%	55
August	88.6%	113	91.5%	44
September	93.9%	46	90.1%	34
Q2	92.1%	79	91.4%	43
October	92.5%	44	88.6%	21
November	93.7%	29	87.1%	14
December	85.5%	82	86.6%	14
Q3	90.5%	58	87.4%	12



Cancer

TRFT Cancer Performance Q1 to Q3 15/16

Target	Operational Standard	Q1 2015/16	Q2 2015/16	Oct 2015/16	Nov 2015/16	Dec 2015/16	Q3 2015/16	Nation (Q3)
<i>2ww</i>	93%	94.6%	94.8%	95.2%	95.4%	94.1%	94.9%	94.8%
<i>31 Day First Definitive Treatment</i>	96%	98.6%	98.8%	100.0%	97.0%	100.0%	99.1%	97.9%
<i>62 Day from 2ww</i>	85%	88.7%	85.1%	84.4%	88.9%	100.0%	91.2%	83.5%
<i>Breast Symptoms 2ww</i>	93%	97.3%	96.5%	100.0%	98.1%	97.3%	98.4%	93.4%
<i>31 day Subsequent Treatment</i>								
<i>Surgery</i>	94%	100.0%	95.8%	100.0%	100.0%	100.0%	100.0%	96.2%
<i>Drug</i>	98%	100.0%	99.6%	100.0%	100.0%	100.0%	100.0%	99.6%
<i>Palliative Care</i>	TBC	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
<i>62 Day Screening</i>	90%	100.0%	95.7%	100.0%	100.0%	100.0%	100.0%	93.5%

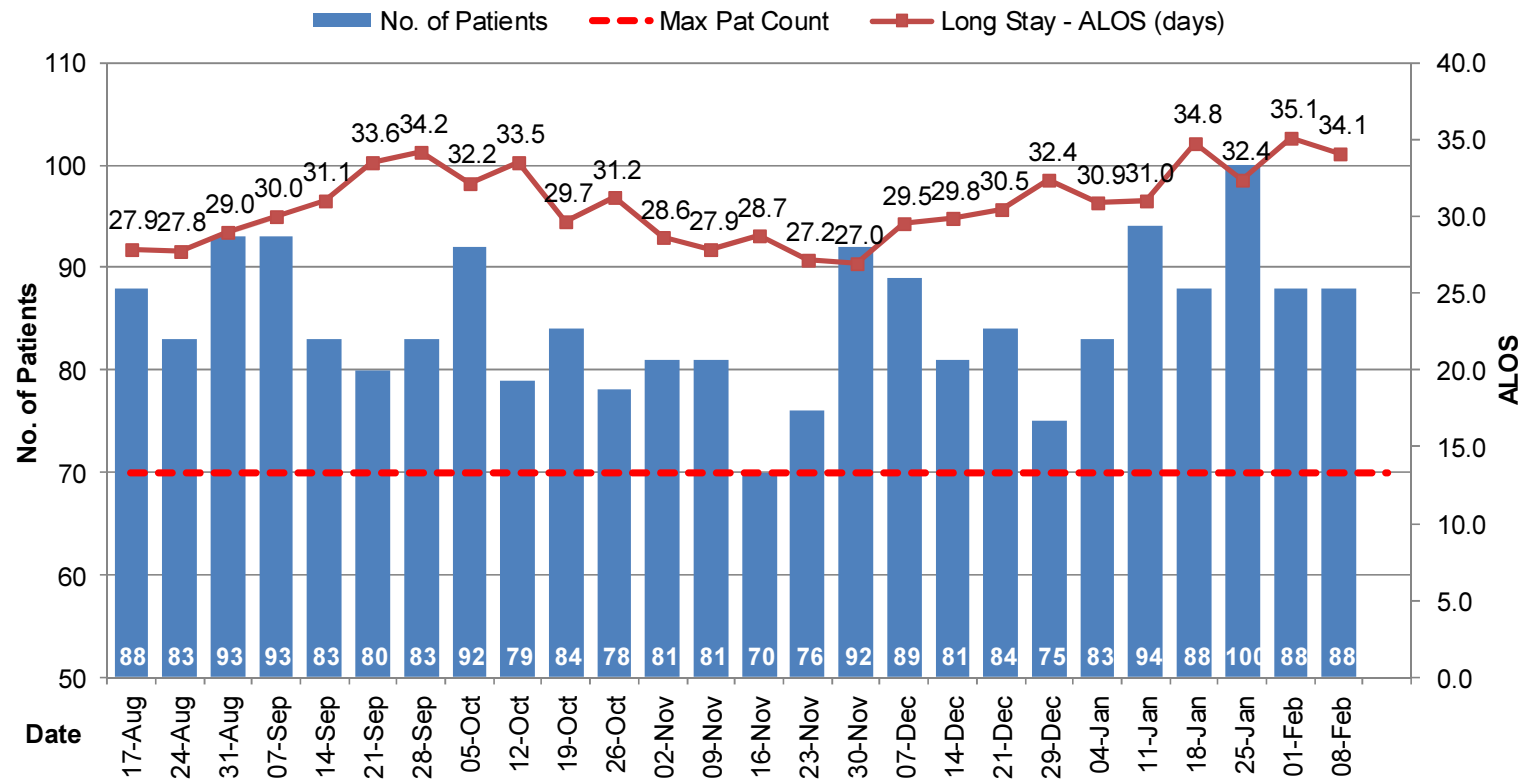
18 weeks

TRFT 18 week RTT Performance Apr'15 to Oct'15

	Q1			Q2			Q3			Q4
	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Admitted										
Clock Stops	1,802	1,601	1,509	1,730	1,353	1,617	1,662	1,380	1,065	1,176
Performance (Target = 90%)	93.8%	95.6%	94.5%	95.1%	94.1%	92.5%	91.2%	91.3%	91.0%	89.6%
Non-Admitted										
Clock Stops	4,149	3,890	5,296	5,087	4,145	4,509	4,681	4,355	4,681	3,715
Performance (Target = 95%)	99.4%	99.0%	98.9%	99.0%	98.5%	98.3%	97.7%	96.3%	96.0%	96.2%
Incompletes										
Total PTL	9,798	11,072	11,576	10,141	9,750	11,061	11,176	12,171	11,176	12,511
Performance (Target = 92%)	96.8%	97.3%	97.2%	96.4%	95.2%	96.3%	96.1%	96.0%	95.0%	97.2%

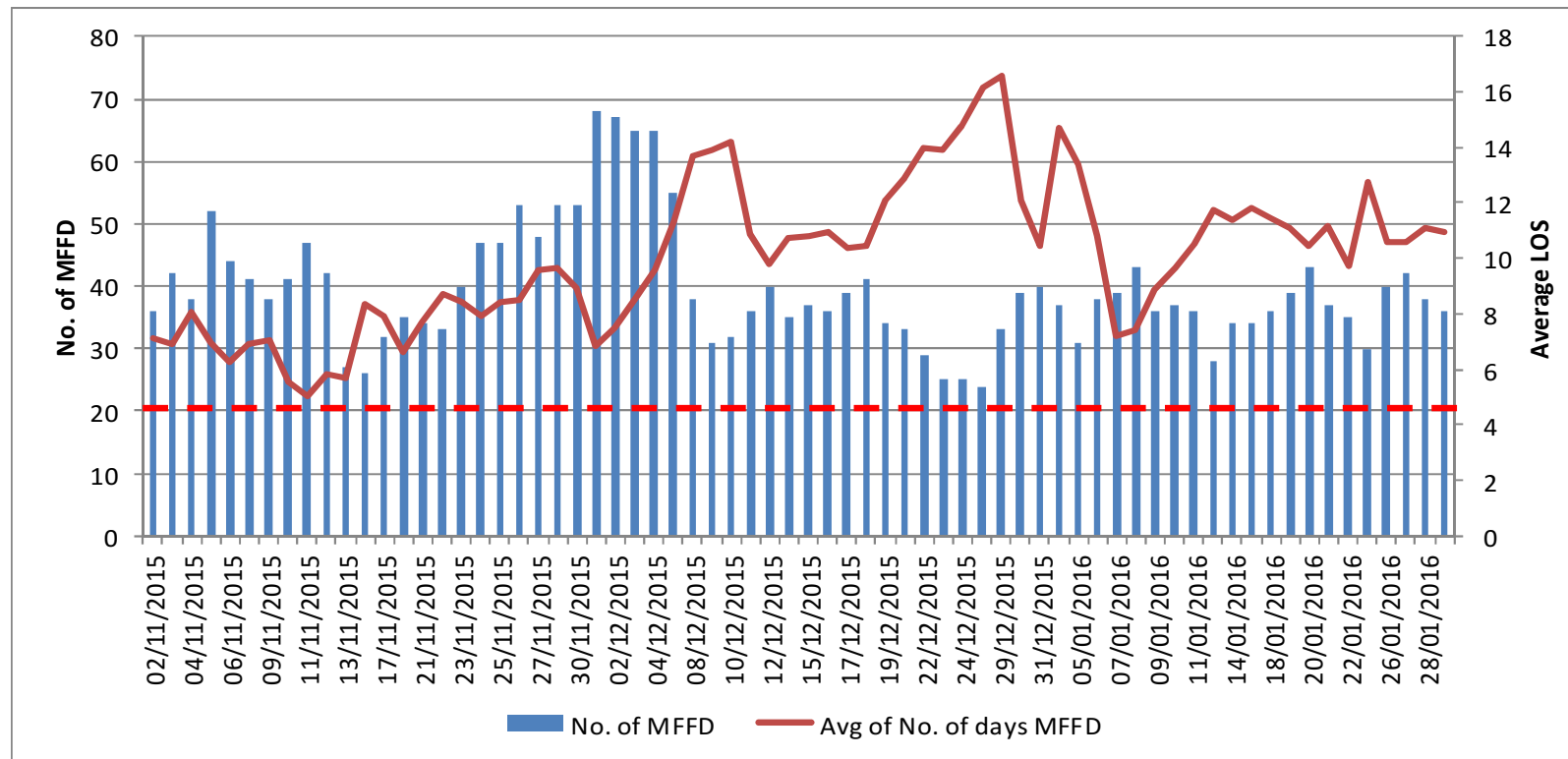
Long length of stay patients

No. of long stay patients (>14 days)



Medically fit and long length of stay

Medically fit for discharge patients and LOS



Other improvement priorities

100% unpredicted death reviews	Yes
Reporting of the deteriorating patient	yes
Noise at night	?
Dementia training	yes
Complaints performance	No
Stroke targets	yes

Improved proportion with AF anti coagulated on discharge; proportion admitted directly to stroke unit and spending 90% of their time on the stroke unit; proportion scanned within an hour. Business case for allied health professional ESD team supported.

61% of TRFT colleagues have had first level dementia training



Other items to be covered in the Quality Account / Report

- Staff and patient survey results
- Listening into Action work
- Environmental improvements
- Community transformation
- Progression from the CQC action plan to a Quality Improvement Plan
- Serious incidents and Never Events
- Data Quality
- Workforce

