



Quality Accounts 2014-15

Rotherham Health Select Commission

April 2015

Tracey McErlain-Burns, Chief Nurse
Hilary Fawcett, Quality Governance Lead

The focus of the Quality Account is on how we take assurance that the services we provide are safe, effective and enabling our patients, their families and carers to have a positive experience of care

CQC Registration

- The Trust is required to register with the Care Quality Commission and its current registration status is 'fully compliant' with no conditions on registration.
- The Trust was subject to a routine, announced inspection between 23rd and 27th February 2015. Draft report awaited
- Trust is currently on Band 4 on CQC Intelligent Monitoring Report (scale of 1-6 where band 1 represents highest level of risk, 6 lowest)

LOOKING BACK – Our quality improvement priorities for 2014-15

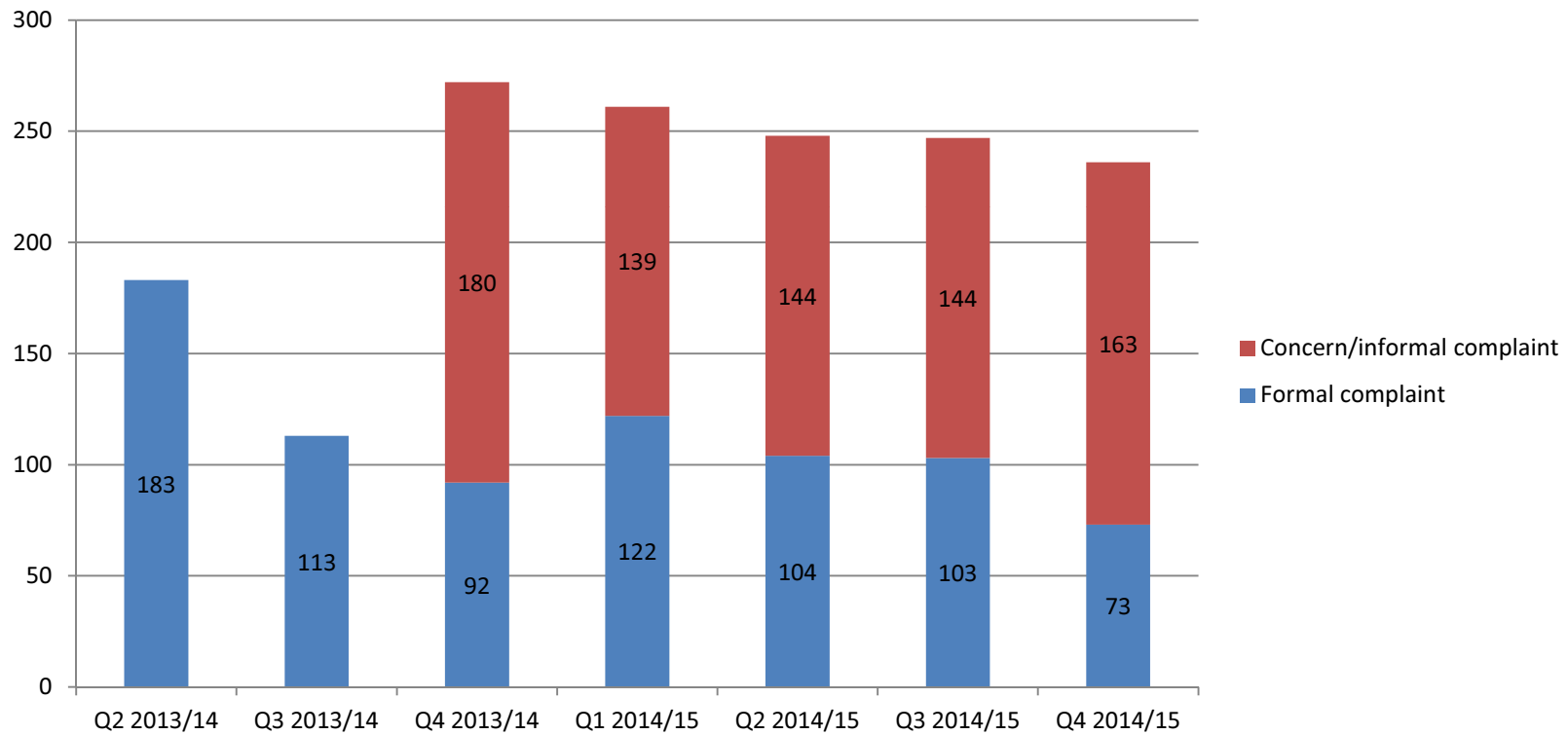
| Priority | Description | Did we achieve this goal? |
|----------|--|---------------------------|
| 1 | Mortality. To achieve a 4 point reduction in HSMR Confirmation of figures awaited | TBC |
| 2 | SAFE - Harm Free Care (HFC) Achieve Minimum 96% HFC avoidable pressure ulcers grade 2-4 Zero avoidable falls with harm | Almost achieved this goal |
| 3 | Achieve all national waiting times targets <ul style="list-style-type: none"> • Cancer <ul style="list-style-type: none"> 2 week waits 31 days 62 days. • A&E • 18 weeks • 52 weeks target | 1. yes |
| | | No |
| | | Yes |
| | | No |
| 4 | Achieve improvement in all Friends and Family Test scores – all | No |

LOOKING FORWARD: TRFT Quality Objectives 2015/16

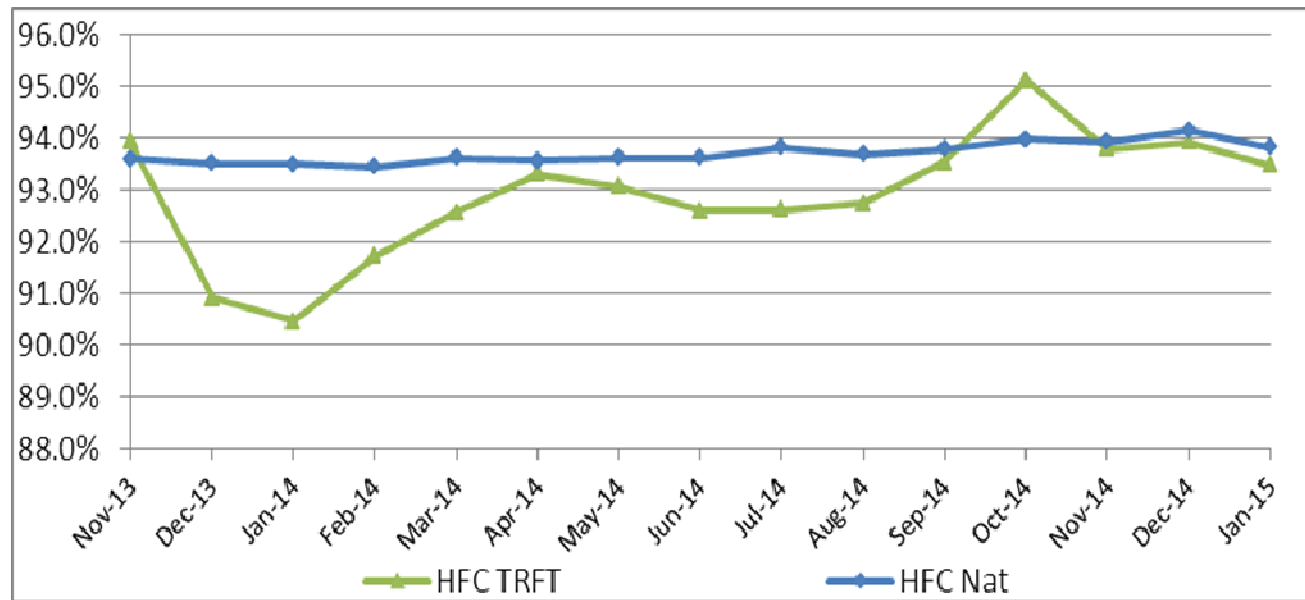
| PRIORITY | DESCRIPTION |
|-------------------------------|--|
| Clinical Effectiveness | <ol style="list-style-type: none"> 1. Ensure maximum learning from unexpected deaths and reduction in mortality rates through review of all unexpected deaths, in line with Trust mortality review process 2. Reduction in delayed discharge of patients – SAFER patient care bundle |
| Patient Safety | <ol style="list-style-type: none"> 1. SAFE - Harm Free Care (HFC) Continue to aim for minimum 96% HFC 2. Sign up to Safety campaign <ul style="list-style-type: none"> • Improve responsiveness to diagnostic test results to ensure avoidable harm caused by missed/delayed diagnosis • Improve processes designed to recognise and respond to signs of deterioration in condition of adult patients |
| Patient Experience | <ol style="list-style-type: none"> 1. achieve improvement in the outcome of the national in-patient survey, specifically having a focus on reduction of noise at night 2. Achieve and maintain improvement relating to Friends & Family Test results, both in terms of positive score rates, and responsiveness 3. Improve care of patients with Dementia – ensure Trust colleagues undertake awareness training 4. Improve Trust responsiveness to complaints – 90% of responses with complainant by date agreed 5. Improve patient satisfaction with quality of complaints management process |

Patient Experience

Number of Complaints by Quarter



Harm Free Care



Infection Control

Incidence of Clostridium Difficile 2014-15

| TRFT | | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar |
|--------------------------------|----------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 2014/15 Target = 22 | Monthly Actual | 2 | 3 | 3 | 2 | 2 | 1 | 3 | 3 | 3 | 3 | 5 | 2 |
| | Monthly Plan | 3 | 3 | 1 | 2 | 2 | 3 | 2 | 1 | 1 | 2 | 2 | 2 |
| | YTD Actual | 2 | 5 | 8 | 10 | 12 | 13 | 16 | 19 | 22 | 25 | 30 | 32 |
| | YTD Plan | 3 | 6 | 7 | 9 | 11 | 14 | 16 | 17 | 18 | 20 | 22 | 24 |

Patients at the heart of what we do, providing excellent clinical outcomes and a safe, first class service

Any Questions?