

ITEM: 10/153
Doc: 06

Meeting:	Trust Board
Date:	15 December 2010

Title:	2009/10 Care Quality Commission Annual Health Check Assessment and 2010/11 Quality and Risk Profile
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Executive Summary:	<p>The Care Quality Commission (CQC) Annual Health Check assessment of 2009/2010 performance was halted in July 2010. The CQC has released a benchmark tool with the 09/10 data for Trust to assess their performance and to review priorities for improvement. On the basis of the analysis described below it is highly probable that the Trust would have achieved “Excellent/Excellent” ratings for the two components of the Quality of Services and financial performance section of the Annual Health Check for 2009/2010. The detail relating to trust performance in several of the performance domains can be found at appendix 1</p> <p>To replace the Annual Health Check assessment of performance the CQC has developed the Quality and Risk Profile (QRP). A profile for every trust is compiled of information from a variety of external sources. The first full profile provided was in September 2010, following a limited basic version produced in January 2010. Monthly versions of the QRP are now being provided. As, however, key information sources used are the NHS staff survey, NHS Outpatients Survey and NHS Inpatient Survey, which are only published annually, many of the elements on the QRP will only change annually.</p> <p>An extended traffic light rating has been given to each of the overall outcomes and to each individual element of the outcomes. It should be noted, however, that the colour amber has been used to show a position of “similar to expected” rather than meaning not fully compliant as it is usually used. Although we have no overall red sections or outcomes, there are a number of reds within the elements. These are described as worse than expected. Key areas of concern are outpatients and staffing (from the staff survey results). The report for the 3 month period September to November 2010 is attached as Appendix 2.</p> <p>The information in the profile will be used by the CQC to identify areas that may be of concern and at risk of non-compliance with the regulations/outcomes. The red areas will also inform the areas which the CQC choose to look at when they carry out their inspections.</p> <p>The CQC will also make the QRP available to commissioners.</p> <p>Recommendations</p> <ul style="list-style-type: none"> ▪ The monthly QRP Report becomes part of the trust’s overall performance framework, so that changes in ratings are identified and acted upon. It has been agreed that the Information Management Team prepare the report so that ratings can be compared over time and trends identified ▪ Quarterly updates should be taken to the Trust Board, Executive Committee, HMB and Audit Committee via the Clinical Governance Committee, so that any significant changes, particularly any deteriorating position, can be identified, discussed and addressed ▪ Directors have been requested to review the areas they are responsible for, and where red identify sources of evidence that demonstrate compliance, or agree and set up improvement actions to be implemented.
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Action: For information

Report from: Veronica Shaw Assistant Director of Nursing and Clinical Development

Sponsor: Bronagh Scott Director of Nursing and Clinical Development

Financial Validation Lead: Director of Finance	Name of finance officer
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Compliance with statute, directions, policy, guidance Lead: All directors	Reference:
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Compliance with Care Quality Commission Registration regulations and outcomes Lead: Director of Nursing & Clinical Development	Reference: The relevant patient safety and quality regulation/outcome with red ratings. Part of overall registration and compliance process.
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Compliance with Auditors' Local Evaluation standards (ALE) Lead: Director of Finance	Reference:
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Evidence for self-certification under the Monitor compliance regime Lead: All directors	Compliance framework reference:
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