

ITEM: 11/018
Doc: 15

Meeting: Trust Board
Date: 26 January 2011

Title: **Clinical Governance Annual Report 2009-10**

Executive Summary:

The attached report sets out progress in meeting the Trust Clinical Governance Strategy's aims during 2009 – 10, and reflects the Strategy's key domains. It includes updates on the following areas: -

- Patient Experience
 - Patient feedback
 - Patient information
 - CQC standards and new registration to operate
 - Infection prevention and control
- Risk Management
 - Patient Safety First
- Clinical Audit
- Learning from complaints
- Staff education and development
- Research and Development
- The year ahead
 - Quality Accounts
 - Energising for Excellence
 - Improving the Complaints Service

Overall good progress has been made in most areas. Area where we performed particularly well were as follows: -

- Infection prevention and control: The trust was set targets of having no more than 92 cases of clostridium difficile infections throughout the year, and no more than 15 cases of MRSA Bacteraemia. Our actual performance was 49 and 8 respectively
- Hand hygiene training was rolled out to staff throughout the trust
- Electronic patient feedback stations were set up in Outpatients and the Emergency Department, and hand held devices on the wards. This has provided us with a wealth of patient feedback
- A new Risk Management system called "Datix" was installed throughout the Trust, which allows staff to easily report any risks to patient safety, and for the relevant staff to know about them and take action
- The Trust maintained compliance with the Health Care Commission's core standards, and was also successfully registered with the Care Quality Commission without condition
- Work to refurbish the Whittington Education Centre commenced, and the Simulation Centre opened

The management of complaints, however, is an area identified as requiring improvement, particularly the timeliness and quality of responses, and this is being addressed in 2010 -11.

The report is deliberately short and simply written and does not attempt to provide detail. It will be made available for the public via the website. Full details of each section can be found in the corresponding papers that are brought to the Clinical Governance Committee.

The Clinical Governance Annual Report was initially approved by the Clinical Governance Committee in June 2010. Following this it was presented to the Audit Committee in November 2010. This delay was due to there being an interim, and then new Director of Nursing.

The 2010 -11 Clinical Governance Annual Report will be available and presented to Trust Board by the end of summer 2011.

Action: For information

Report from: Veronica Shaw
Assistant Director of Nursing and Governance

Sponsor: Bronagh Scott
Director of Nursing and Clinical Development

Financial Validation Not applicable
Lead: Director of Finance

Compliance with statute, directions, policy, guidance **Reference:**
Lead: All directors

Compliance with Care Quality Commission Regulations/Outcomes **Reference**
Lead: Director of Nursing & Clinical Development All 16 Essential Standards of Quality and Safety

Compliance with Auditors' Local Evaluation standards (ALE) **Reference:**
Lead: Director of Finance

Evidence for self-certification under the Monitor compliance regime **Compliance framework reference:**
Lead: All directors