

ITEM: 11/061 Doc: 6

Meeting: Trust Board
Date: 27th April 2011

Title:

Care Quality Commission – Quality and Risk Profile (QRP) Quarter 4 2010/11

Executive Summary:

The CQC now provides every trust with a monthly Quality and Risk Profile compiled of information from a variety of external sources. They update it as new sources of information and data become available to them.

The information in the profile will be used by the CQC to assess where risks in an organisation may lie, and prompts regulatory activity such as requests for further information on a particular area, or inspection visits.

It should noted, however, that as key data sources used extensively throughout are the NHS Staff Survey, NHS Outpatients Survey and NHS Inpatient Survey, these results do not change monthly as they are annual surveys.

An extended traffic light rating has been given to the overall sections, quality and safety outcomes and to each individual element of the outcomes. It should be noted, however, that the colour amber is used to denote "similar to expected" rather than that an area is not fully compliant, as it is more generally used.

The three months covered in this quarter's report are December 2010, and February and March 2011, as the CQC did not produce a QRP in January 2011.

The findings in the three QRPs that comprise quarter four are virtually unchanged from the previous quarters. Again we have no overall red sections or outcomes, but there continues to be a number of reds within the elements. Key areas of concern are still outpatients (from the national survey of outpatients) and staffing (from the staff survey results). Relevant staff are asked to review the red elements pertinent to their area and to ensure appropriate improvement work has been put in place.

Overall, there are, however, far more elements where we have been rated better, or much better than expected, as opposed to worse or much worse than expected.

Action: For information and action where relevant



| Report from: | Veronica Shaw | |
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| Assistant Director of Nursing and Clinical Development | | |
| Sponsor: | Bronagh Scott Director of Nursing and Clinical Development | |
| Financial Validation | | Name of finance officer |
| Lead: Director of Finance | | |
| Compliance with statute, directions, policy, guidance | | Reference: |
| Lead: All directors | | |
| Compliance with Care Quality Commission Registration regulations and outcomes | | Reference: All 16 essential standards |
| Lead: Director | r of Nursing & Clinical Development | Part of overall registration and compliance process. |
| 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 direc | ctors | |