ITEM 7 - UPDATE

QUALITY IMPROVEMENT HIGH LEVEL REPORT

SAFE

Q1a Medicines storage, security & handling Closure report received July 2017 Continue to monitor for next two months (end of Oct) regarding FP10's Re-Audit	Closure expected End of Oct following monitoring
Q1b Improved Storage of IV Fluids in ED & ITU Still areas of concern regarding consistency of storage of medicines On-going audits Ward Action report to be developed	On-Going
Q2 Equipment Evidence of Audit and training provided Monitor for 6 month – need to be confident that process has been embedded Equipment maintenance data regularly presented at Divisional board. Resuscitation equipment checks continues to be monitored via Nursing Metrics. Re-Audit in October to support final closure Communication Re-Daily Checking – APP to improve visibility of checking	Closure expected End of year following Monitoring
Q3 Accurate Recording of Patient Care Order comms • Project Board planned 23rd Aug to establish prioritisation of TWOC Programme of works – dates cannot be provided at this stage – not due until Q4 – early Q1 17/18 Documentation • Weekly Ward Audit Documentation evidence provided – Main areas of concern is regarding Signatures being identifiable and Drug errors. General comment • Action be picked up by MD CNO for clinical oversight • Report from Health Records Committee to evidence documentation is being managed / Challenged	On -Going

SAFE

Q4a Nursing Recruitment & Retention High Risk – Vacancies Bi Annual Skill mix – Sept 2017 (available in Oct)	
Q4b – Endoscopy/ staffing – JAG Accreditation received – Closed	
Q4c Midwifery Recruitment Evidence of board papers and minutes to be provided Staffing establishment update BAU following this evidence	Closure expected – end of Sept
Q4d Nursing Evidence of board papers and minutes to be provided where changes to NICU were discussed BAU following this evidence	
Q4e – Nursing – Day Surgery Closure Review and evidence approved Sept 17	
Q5a Decontamination of flexible cystoscopies Closure Report reviewed and approved Aug 2017	
Q5b Clinical Outcome data in Maternity Closure Report and evidence received and approved	
Q 8 IPAC Closure Report reviewed and approved Sept 2017	

QUALITY IMPROVEMENT HIGH LEVEL REPORT

WELL LED

Q10 Divisional structure Review With a new Executive Team Roles and responsibilities to be reviewed; restructures agreed and proceeding to recruit; The Trust commenced an engagement process in reducing the Divisional splits from 4 to a more manageable level. On the 26th July 2017, to date there has been a good response from the organisation Comms strategy in place. The engagement process completes at the end of August with a view to have an agreed structure launched 4th September 2017 followed by a 28 day consultation process for those whose roles will be impacted upon. The agreed new Divisions will then be put in place. In light of a CQC visit prudence would suggest this commences in April 2018.	April 2018

EFFECTIVE

Q9a.Incraese Focus on management of delirium in patients Training update received following report – part of the recommendation and action plan - Action plan going to Clinical Governance	Expected closure Oct / Nov
Q9b The Mental Capacity Act Update on training provided Audit conducted regarding how well the QEHKL meets the guidelines outlined by NICE	

CARING

Q12 Complaints Process in place to easily identify EOL Complaints. PALs concerns and compliments include in the narrative 'EOL' which also allows them to be easily identified. Over the last 18 months 7 formal complaints have been received and 5 were responded to within the 30 day deadline. Awaiting feedback from Division regarding how the learning from the Complaints is shared and embedded within the division and EofL Group	On-going

RESPONSIVE

Q5c Outpatients Risk stratification of patients on referral pathways undertaken at speciality level. Plans underway to reduce waiting times. Operational grip work on-going with plans in place to address back log.	Ongoing
Q6a Review clinical pathways for #NOF between Ed & orthopaedic service Flow chart provided showing pathway between ED & Ortho Main issue still remains around ring fence beds and patients sitting in SAU with Fractured NOF Evidence of improvement s to be provided – what else needs to be done (four key points)	On - Going
Q6b maternity pathways developed Evidence of maternity and Gynae pathways (including early pregnancy) Business case for Specialist Nurse Sonographer	Oct / Nov
Q7 New workforce model for obstetrics to include consultant OOH & increased midwifery care Review SOP regarding access to Obs and Gynae medical advice	Partially completed / Oct
Q 11 Children's services Business Case re- resource for increased opening hours (Sat & Sunday) to ED's – Oct 3rd	Oct / Nov

	Major Actions Outstanding
	Actions Outstanding
	Actions Completed but compliance monitoring on-going OR awaiting Closure Report & Evidence
	Business As Usual (BAU)