

Social Care Health and Housing OSC 15th May 2017

QUALITY ACCOUNT

Situation

This paper summarises the approach taken for the development of a set of indicators, common to participating Trusts, for discussion at the annual meeting on 15th May 2017.

The participating Trusts are:

- Bedford Hospital NHS Trust
- East & North Hertfordshire NHS Trust
- East London NHS Foundation Trust
- Essex Partnership University NHS Foundation Trust
- Luton & Dunstable University Hospital NHS Foundation Trust

The set of indicators is attached at Appendix 1.

Background

At the Social Care, Health and Housing OSC meeting in May 2016 the participating Trusts agreed to identify a priority list of 20 performance indicators, common to all, so that Central Bedfordshire residents can compare hospital services in their area.

Assessment

The approach took account of the following:

- There are a number of indicators that are already supplied within the QAs (nationally mandated as core indicators) which therefore should not be re-supplied in a different format where possible
- NHS Digital Indicator Portal lists approx. 1900 indicators. The Quality Account, quality improvement and outcomes framework indicators were reviewed. There was commonality with the mandated lists already included within the QA; or a range of indicators that are too specific to make reasonable comparisons across all organisations
- The indicators need to be comparable in terms of methodology
- The indicators should ideally reflect what is within each organisations ability to control
- The context for each Trust is different so variation is likely

A draft set of indicators was produced taking into account the above points and circulated to the Trust representatives for comment. Each representative was asked to review the indicators and identify those that were collected/ not collected/ not applicable or to add extras they felt would be useful and comparable.

Feedback indicated there is very little common across all Trusts; and where the indicators are not mandated the collection methods are not always comparable. However, eight common indicators were found and the outcomes for these are shown in Appendix 1.

Recommendation

The OSC is asked to consider the indicators supplied.

Appendix 1 – Common indicators

Indicator	Measure	Bedford	Date	Luton	Date	E&N H	Date	ELFT	Date	SEPT	Date
Incidence of MRSA	Number	1	2016/17	1	2016/17	2	2016/17			1	2016/17
Incidence of C Diff	Number (& rate per 100,000 bed days)	8 (9.0)	2016/17	8 (3.5)	2016/17	22 (10.27)	2016/17			0	2016/17
Staff recommend Trust (Staff survey 2016)	Percentage	72%	2016/17	77%	2016	69%	2016			71%	2016
Friends & Family - in-patient	Percentage	92%	2016/17	95%	2016/2017	97%	Feb-17			*96%	2016/17
Rate of patient safety incidents (NRLS)	Per 1000 bed days	38.2	2016/17	32.2	Apr-Sept 16	31.76	Apr-Sept 16			43.9	Apr-Sept 16
KF26 - harassment/ bullying by staff (Staff survey 2016)	Percentage	22%	2016/17	28%	2016	29%	2016			20%	2016
KF21 - equal opportunities (Staff survey 2016)	Percentage	86%	2016/17	85%	2016	87%	2016			91%	2016
Overall staff engagement (Staff survey 2016)	Score	3.82	2016/17	3.9	2016	3.86	2016			3.88	2016

* Note: FFT score applies to community and in-patient services