

Board of Directors

Thursday, 01 November 2018

Report Title:	Patient/Staff Story Brief
Executive/NED Lead:	Catherine Morgan; Chief Nurse
Report author(s):	Catherine Morgan; Chief Nurse
Previously considered by:	

Approval
 Discussion
 Information
 Assurance

Executive summary

At the Trust Board in August, we received a presentation from Jo Simpson (Consultant Anaesthetist; Colchester site) about a programme of work to improve the quality of perioperative care for our patients. You will recall that PQIP (Perioperative Quality Improvement Programme) is a Health Foundation and Royal College of Anaesthetists funded research study that uses high-quality local data to improve outcomes for patients having major surgery. The main aim of the programme is to improve outcomes for patients having major surgery; in particular, complications, patient satisfaction, disability free survival and health-related quality of life.

I am pleased to be able to provide an update on the on-going QI work. Some highlights from the recently published quarterly report (which includes patients who underwent surgery during the period 21 November 2017 to 31 August 2018 shows;

- ✚ 100 patients have been recruited to the study
- ✚ All patients had their HbA1c measured (although numbers are small)
- ✚ Individualised risk assessment is still not universal however is beginning to show improvement at between 25-50% of our patient cohort
- ✚ Length of stay is 5.5 days (median) – this is very similar to the national average
- ✚ Satisfaction with anaesthesia is above national average on every Bauer domain

This is a longer-term project and current data relates to colorectal surgery (except one orthopaedic patient). Next quarter more orthopaedic patients will be included. Programme updates have been shared at the Anaesthetics governance meeting and further trainees in surgery have been recruited to join the QI team. QI work will continue in the areas of national priority that have already commenced (anaemia and individualised risk assessment) and there is data to support QI work in other areas. Oversight of progress for this QI programme is through the clinical effectiveness committee.

Today the Board will hear from Mrs Ann Ledgley who will share with us both hers and her husband's experience of care at Ipswich hospital. Mrs Ledgley's husband was diagnosed with cancer last year and whilst his treatment has been successful, there were a few issues/observations of care and service for which feedback to us will help drive improvements. Some observations of care and service are for example related to the environment, food and other small things, which all add up and have an impact on experience for patients and families.

Sarah Higson; Head of Patient Experience, will accompany Mrs Ledgley to the Board.

Action Required of the Board of Directors

To note the report

Link to Strategic Objectives (SO)		Please tick
SO1	Improve quality and patient outcomes	<input checked="" type="checkbox"/>
SO2	Provide better value for money	<input type="checkbox"/>

SO3	Sustain and improve access to services that meet the needs of the population	<input checked="" type="checkbox"/>
SO4	Deliver a sustainable, skilled workforce	<input type="checkbox"/>

Risk Implications for the Trust <i>(including any clinical and financial consequences)</i>	
Trust Risk Appetite	Quality: The board will take minimal risks when it comes to patient safety, patient experience or clinical outcomes. Its tolerance for risk taking will be limited to decisions where the impact is low and the potential mitigations are strong

Legal and regulatory implications <i>(including links to CQC outcomes, Monitor, inspections, audits, etc)</i>	Nil
Financial Implications	Nil
Equality and Diversity	Click here to enter text