

Clinical Quality Improvement Governance and Oversight Proposals 1 July 2019

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Agenda Item No: 7.8

Trust Board Report

Meeting Date:	1 July 2019
Title:	CQI Governance and Oversight Proposals
Executive Summary:	The Paper sets out proposals to provide a governance framework for the CQI programme
Action Requested:	The Board is asked to approve the recommendations
For the attention of the Board	
Assure	<ul style="list-style-type: none"> The paper is intended to Assure the Board that there is adequate oversight and management of the Programme
Advise	<ul style="list-style-type: none"> The process will be reviewed in twelve months
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Links to Trust Strategic Objectives	<ol style="list-style-type: none"> Create a culture of compassion, safety and quality Proactively seek opportunities to develop our services To have an effective and well integrated local health and care system that operates efficiently Attract, retain and develop our staff, and improve employee engagement Maintain financial health – Appropriate investment to patient services Be in the top 25% of all key performance indicators
Resource Implications	None
Report Data Caveats	None
CQC Domains	<p>Safe: patients, staff and the public are protected from abuse and avoidable harm.</p> <p>Effective: care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence.</p> <p>Caring: staff involve and treat everyone with compassion, kindness, dignity and respect.</p> <p>Responsive: services are organised so that they meet people's needs.</p> <p>Well-led: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.</p>
Equality and Diversity Impact	None identified
Public or Private:	Public
Other formal bodies involved:	QGAC

NHS Constitution:	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> • Equality of treatment and access to services • High standards of excellence and professionalism • Service user preferences • Cross community working • Best Value • Accountability through local influence and scrutiny
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Report Details

CQI Oversight and Governance Proposals

This paper sets out the principles and proposed options to ensure that effective governance mechanisms are in place to support the Continuous Quality Improvement (CQI) programme.

The reporting and governance of CQI needs to ensure that there is a clear focus on three main areas of reporting:

1. Oversight – Board Programme governance and Executive commitment,
2. Internal CQI Programme Governance, and
3. Clinical and Operational staff engagement, involvement and Wider Trust ownership.

Level 1 – Board and Executive Level Oversight

1.1 Executive Oversight and Commitment

Where	It is proposed that this takes place at the weekly Executive Meeting.
Lead/Provided by	As Executive lead, it is proposed that the Director of Strategy provides a verbal regular update.
Exception Reporting	Formal reporting including by exception is to the CEO.
Purpose	This keeps the CQI programme current on the executive agenda and gives the opportunity to create high level support and executive commitment without the need to create an additional meeting.

1.2 Board and Board Committee Oversight

Where	Trust Board – Quarterly Trust Management Committee (TMC) – Quarterly Quality Safety Improvement Group (QSIG) – Quarterly Quality Safety and Governance committee (QGAC) – Quarterly
Lead/provided by	As Executive lead, it is proposed that the Director of Strategy provides the reports for Trust Board and QGAC and would attend QGAC quarterly. As clinical lead, the Associate Medical Director for Quality Improvement provides the reports for QSIG and TMC.
Exception reporting	Formal reporting including by exception is to the CEO.
Purpose	This keeps the CQI programme current on the management and senior clinical professional's agenda and gives the opportunity to create high level support and commitment without the need to create an additional meeting.

Rationale

The TMC has recently changed its structure, discussing fewer reports in greater depth. The advantage of using TMC as the reporting route is the good representation from across the whole Trust management and clinical services. This could help to generate interest, and ultimately support, for future programmes of work.

Recommendation: That CQI reports through to TMC quarterly.

The Quality groups focus for the Trust is primarily through QSIG and QGAC. There would be considerable alignment between the CQI work programme and the items under discussion at these groups. As TMC would provide the clinical and operational drive and impetus, QGAC would be ideal to overseeing the operation of the programme, alignment with the quality agenda and the progress of the overall CQI programme. QGAC could seek assurance from QSIG in matters of detailed scrutiny and reporting of good governance and progress.

Recommendation: That CQI reports through to QGAC quarterly.

Recommendation: That QGAC seeks assurance from QSIG regarding the CQI programme.

The Trust Board have committed to supporting the development of a CQI programme and has commenced the NHSI Leadership for Improvement Programme. It is appropriate that in addition to the chairs reports of TMC and QGAC, that the Board receives a dedicated CQI programme update on a quarterly basis. The Board report will provide additional forward focus for the programme and reporting on the broader Organisational Developments of the programme. This allows the Board the opportunity to support and challenge the progress being made and provides clear oversight of the outcomes for the Trust.

Recommendation: That CQI reports through to Trust Board quarterly.

Level 2 - CQI Internal Programme Governance

A CQI team will meet monthly as the Programme Group, Chaired by the Deputy Director of Strategic Planning and Performance.

The remit for this group is to;

- Determine the agreed programme of work and agree on the expected outcomes
- Provide assurance/sign off for any new programmes of work
- Receive and scrutinise programme progress reports
- Monitoring and approval of the CQI plans
- Oversee and support CQI communications and engagement plan

The meeting will be supported by the CQI PMO officer and will be formally minuted.

Level 3 - Wider Trust Ownership

The intention of the CQI is that the principles of continuous improvement will, over time, extend across the whole organisation and inform the behaviour and ultimately the culture of the Trust.

This can't be achieved without the commitment and support of a wider stakeholder group that is representative of the Trust as a whole. The purpose of the group is to support and help embed CQI in all activities and functions.

The proposal is to create a wider CQI Stakeholder Group, as an adjunct to the CQI Programme Group with the Lead Director (DSPP) as Chair, meetings would be quarterly and proposed attendees include:

Role*	Role
Chair	Head of service efficiency & Redesign
CQI Lead	Division 1 Lead
CQI Clinical Lead	Division 2 Lead
Education & Training Lead	Division 3 Lead

Nursing Lead	IT Lead
Governance Lead	Information Lead
Human Resources Lead	Nurse Education Lead
Finance Lead	Deputy MD
Estates & Facilities Lead	Communications Lead
Patient Experience Lead	

*all names to be agreed and confirmed

The meeting will be supported by the CQI PMO Officer and will be formally minuted.

Recommendation: The CQI Stakeholder Group meets Quarterly with the Director of Strategic Planning and Performance as Chair.