

<b>Scrutiny Review</b>	ESHT Quality Improvement Plan
<b>Responsible Committee</b>	HOSC
<b>Author</b>	Giles Rossington
<b>Version</b>	1
<b>Date</b>	30 July 2015

## **Aims of the Review**

To receive assurance that the ESHT Quality Improvement Plan (QIP) properly addresses the findings of the CQC inspection(s); that ESHT meets its QIP commitments; and that the QIP actions lead to improved performance – particularly in terms of outcomes for patients.

## **Scope of the Review**

The review will focus on five key service areas identified by the CQC in its initial (March 2015) inspection reports: surgery, maternity, patient records, outpatients, and pharmacy. The review will also include some related issues: (1) the implementation of the Better Beginnings Scrutiny Review recommendations – to be considered as part of maternity; (2) problems with ESHT communication with patients (e.g. cancer letter) – to be considered as part of outpatients; (3) data security (e.g. lost memory sticks) – to be considered as part of patient records.

The review will also address issues relating to ESHT's corporate 'culture', including complaints, whistleblowing, staff survey, sickness absence, bullying & harassment, incident reporting, and the Friends & Family test.

## **Areas outside the scope of the review**

The review will not consider the substantive issues of the reconfiguration of ESHT surgical or maternity services. The review will not consider the financial position of ESHT as a substantive issue.

## **Background**

The Scrutiny Board was established following the CQC inspection reports on ESHT services published in March 2015. The Board will also take into account the follow-up CQC inspection report (due to be published Sep 15).

## **Review methods**

Board members will form five sub-groups of 3-4 members to explore each of the key service areas (see above). Sub-groups will study the CQC reports and the ESHT QIP; will interview the relevant lead ESHT officers, and potentially also selected stakeholders; and will report back to the Scrutiny Board. The Scrutiny Board will make final recommendations. Recommendations will be to the NHS quality regulators: e.g. the CQC and the TDA rather than directly to ESHT or to CCGs.

Issues relating to ESHT’s corporate culture (see **Scope of the Review** above) will either be scrutinised by an additional sub-group or by the whole Review Board. This will be determined by Board members.

The work of the Scrutiny Board will be supported by the Scrutiny team. However, given the scale of this work, it will not be possible for officers to support all activity and sub-group members will be expected to arrange some meetings and to take their own meeting notes etc. Officers will draft the final report for approval by Board members.

**Potential witnesses for oral and/or written evidence:**

- Lead ESHT clinicians for the key service areas
- ESHT CE, Head of HR and Improvement Director
- CCG commissioners (esp. in terms of analysis of ESHT performance)
- Stakeholders (e.g. Mr Richard Hallett for HW maternity pathways)

**Review Organisation and Responsibilities**

Project Manager  
Giles Rossington

**Timetable**

<b>Activity</b>	<b>Date</b>
<u>Review Board Meeting 1</u> •	Late Oct 15
<u>Review Board Meeting 2</u> •	Late Nov 15
<u>Final Review Board Meeting 3</u> •	TBC
Draft Scrutiny committee covering report and finalise Review Board report.	Feb 16
Deadline for Report Dispatch	End Feb 16
Report to HOSC	March 16