

# Oversight and Assurance Group – December Update

#### Introduction

In December the Oversight and Assurance Group (OAG) of external stakeholders was briefed on the Norfolk and Norwich University Hospitals' progress towards delivery of the CQC recommendations as follows:

## **Quality Improvement Plan - Progress Summary**

In October, of the 82 Must do and Should do actions:

- 9 (14%) are Blue completed and evidenced
- 6 (9%) Red actions have been started not yet complete
- 21 (32%) Amber actions are underway
- 30 (45%) Green actions are completed and are currently being evidenced.

#### The Performance Dashboard

The dashboard will be launched fully in February 2019. The delayed launch is primarily to allow current data to be produced in the second week of the month, and reported to the Quality Programme Board.

## **Evidence Group**

To substantiate progress on the Improvement Plan actions, information is collated and checked by the Evidence Group. This Evidence Group includes Trust and External partners such as the Chief Nurse, Medical Director, NHSI Director of Improvement, Programme Director QIP, three Staff members, Governor, Patient representative, CCG representative and other partners as agreed. The Evidence Group reviews the evidence to assess suitability.

## **Outcome of Evidence Group**

- The QIP Evidence Group met on 29th November, to review the evidence in respect of nine recommendations. The group included Trust and External partners, including the Chief Nurse, Medical Director and a CCG representative.
- The meeting was extended to allow for detailed discussion and check/challenge. At the meeting, four of the five recommendations submitted for their first review were agreed as BLUE.
- It was agreed that the January meeting would be extended to review eleven recommendations. It was planned that a second meeting that month would review all of the action plans put in place to address the Section 29a CQC requirements.

### **Presentations**

'Deep dive' presentations to the OAG updated on the Medicine Division and Older People's Medicine.

**Medicine Division's update included:** recruitment progress, Junior doctor shift patterns and rotas, improved stroke care demonstrated in Sentinel Stroke National Audit Programme (SSNAP) A rating, reduction in pressure ulcers, expansion of seven day services and establishment of a Standard Operating Procedure for monitoring and reducing patient ward moves, and information sharing through the Medical Division's Organisation-Wide Learning newsletter.



The Older People's Medicine (OPM) service update included: the patient-focused redesign of OPM which set up the Older People's Assessment Service giving access to a Multidisciplinary Geriatric Assessment for patients within 48hours, Older People's Ambulatory Care which does fast-track investigations, same day assessments and ongoing therapy, and Older People's Emergency Department - the dedicated department for patients over the age of 80 which brought specialists in older people's medicine to the front doors of the hospital.

The next OAG meeting takes place on 17<sup>th</sup> January and the presentations will focus on Appraisals and Mandatory Training and Demand and Capacity.