

1. Purpose of Report

This report aims to:

- Provide Walsall Overview and Scrutiny Committee with a progress report on the development of Dudley and Walsall Mental Health Partnership Trust's 2010/11 Quality Account.
- Inform the Committee of the timeline for the development of the Quality Account for 2011/12.

2. Background / Overview

1. *What is the purpose of a Quality Account?*

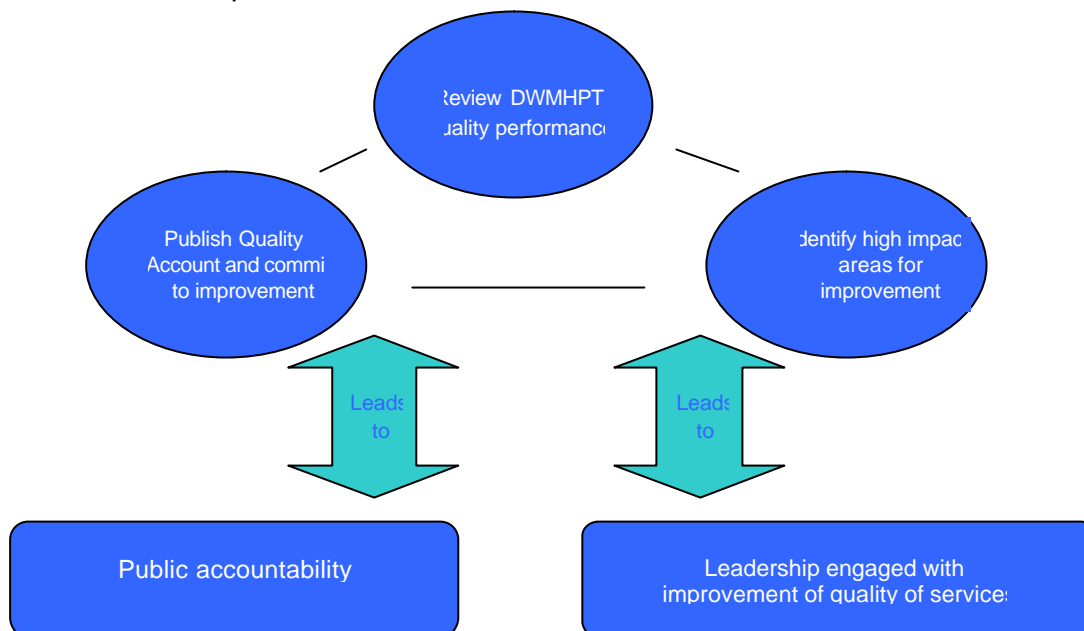
Quality Accounts are annual reports to the public from providers of NHS healthcare about the quality of services they deliver. The primary purpose of Quality Accounts is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer. It allows leaders, clinicians, governors and staff to demonstrate their commitment to continuous, evidence-based quality improvement, and to explain their progress to the public.

DOH Quality Account Toolkit 2011

Dudley and Walsall Mental Health Partnership Trust is currently in the process of developing the Quality Account for 2011/12. The Quality Account will be developed in accordance with Department of Health requirements and importantly, as part of the Trust's process of assuring itself of the quality of services it provides. Last year, Mental Health Trusts were only required to include acute services within the Quality Account whereas this year, all services will be covered. The final Quality Account for 2011/12 will be published by 30th June 2011.

As part of this formal process, the Trust is required to engage with and receive comments from PCTs, LINKs and Health Overview and Scrutiny Committees. Best practice suggests that Trusts give Scrutiny Committees 30 days to comment on their Quality Accounts. The comments should be published as part of final quality account.

The Trust's Quality Account will be used to ensure public accountability and demonstrate commitment to quality improvement. The diagram below demonstrates this process:



2. What will we include in the Quality Account?

The Quality Account must include the following elements:

Part 1

- A statement from the Chief Executive outlining commitment to quality and stating to the best of their knowledge the information in the Account is accurate.

Part 2

- Priorities for improvement – the forward looking section which gives us an opportunity to state our plans for quality improvement. Priorities will be identified from a long list which will be drawn from
 - CQUIN schemes
 - Locally defined metrics which focus on high impact areas for quality improvement.

Work has already been undertaken to identify priorities locally. Through this process consideration has been given to the Trust's current risk profile, the Trust's strategic direction, service user views and staff views. Both the Director of Operations and Medical Director have been integral to this process.

From its list of quality improvement areas for 2011/12, the Trust is proposing that the three quality priorities to be included in the Quality Account will focus on the following areas:

- Improving arrangements for assessing the physical health of service users, focussing initially on inpatients.
 - Improving the arrangements for the management of disruptive and aggressive behaviour in inpatient care.
 - Improving patient experience, focussing on the area of respect and dignity.
- Statements related to the quality of our service provision (set in regulations).

Part 3

- Review of our quality performance - report on our previous year's performance including performance against the three areas that the Trust previously identified for quality improvement:
 - All patients who are on CPA receive contact within 7 days of discharge from hospital
 - Delayed discharges from hospital will be minimised
 - All admissions to acute inpatient services will have access to crisis resolution/home treatment team
- An explanation of who we have involved in developing our Quality Account e.g. staff and service user/ carers
- Any statements provided from commissioning PCTs, LINKs or Scrutiny Committees.

3. What is the process for developing the Quality Account?

The Trust is committed to adopting an inclusive approach in developing the Quality Account. This will involve feedback from:

- Service Users and Carers
- Staff
- Commissioners
- Scrutiny Committees
- LINKs

The following table is the outline timeline for the development of the Trusts Quality Account:

Action	Milestones
Identify Quality Improvement priorities for 2011/12 <ul style="list-style-type: none"> • Involve staff • Service users/carers • Commissioners (in line with service transformation and trust risk profile)	Quality Priorities to be taken to Trust's Quality and Governance Committee in April 2011 for final agreement.
Review of quality performance for 2010/11	Completed by 30 th April 2011
1st Draft Quality Account produced for consultation with senior management team	Completed by 30 th April 2011
2nd Draft copy of Quality Account to internal committees	Mid May 2011
Send copy of Quality Account to PCT/LINKs/Scrutiny Committees (should be given 30 days to return comments)	Copy to be sent at least 30 days prior -Returned by 14 th June 2011
Include comments from stakeholders in Quality Account	14 th June 2011
Final Quality Account	Presentation to Quality and Governance Committee 15 th June 2011 and ratification by Trust Board June 2011
Copy sent to Secretary of State Copy published on website Copy published on NHS Choices	By June 30 th 2011

4. Recommendations

The Health Scrutiny Committee is asked to:

- Receive this report for information.
- Consider their role in commenting on the Trust's Quality Account.