



		Milds Tomore
Meeting title	Department of Health and Social Care Meeting	Date: 31 <sup>st</sup> May 2024
Report title	Whittington Health NHS Trust Draft	Agenda item:
	Quality Account Review	
Executive director lead	Sarah Wilding (SW), Chief Nurse and Director of Allied Health	
	Professionals	
Report authors	Kat Nolan-Cullen (KNC), Compliance and Quality Improvement	
Evacutiva cummony	Manager  1. The Committee is asked to approve the draft document and	
Executive summary	proposed priorities.	
	2. Patients and their families want to know they are receiving the very best quality of care from Whittington Health. NHS Providers are required to publish a Quality Account annually.	
	3. The reporting of Quality account requir NHSE/I for 2024/25 and are as follows	- I
	<ul> <li>a. Organisations are required under the Health Act 2009 and subsequent Health and Social Care Act 2012 to produce Quality Accounts if they deliver services under an NHS Standard Contract, employ over 50 staff and an NHS income greater than £130k per annum.</li> <li>b. As a provider above this threshold, the trust is required to publish a Quality Account for the financial period 2023-24 by 30 June 2024.</li> <li>c. There have been some minor changes to the process and terminology used in producing the quality account, these are detailed below: <ul> <li>There is no national requirement for NHS trusts to obtain external auditor assurance on the</li> </ul> </li> </ul>	
		report, with the latter no
	•	IS trust or NHS foundation
	trust may choose to local	ly commission assurance
	over the quality account;	this is a matter for local
	discussion between the 1	rust (or governors for an
	NHS trust) and its auditor	r. For quality accounts
	approval from within the	Trust's own governance
	procedures is sufficient.	
	The publication proces	s has been amended for
	this year, as noted below	
	Integrated Care Boards	
	Clinical Commissioning	` '
	responsibilities for the r	,
	Quality Accounts (subjec	•
	` ` `	
	Bill receiving Royal Asser	-
		CCGs to ICBs, CCGs must
	continue to undertake it fo	
	cycle. ICBs/ CCGs must	ciarity with providers

	where they are expected to send their Quality Account.  • When producing the Quality Account, reference will be made to the relevant <a href="NHS Operational Planning">NHS Operational Planning</a> and Contracting Guidance for 2023-24.	
	Organisations are also reminded that schedule 6, paragraph 11b of the Terms and Conditions of Service for NHS Doctors and Dentists in Training (England) 2016 requires "a consolidated annual report on rota gaps and the plan for improvement to reduce these gaps shall be included in a statement in the Trust's Quality Account".	
	The quality priorities for improvement from 2024 onwards are below. They are aligned to the Trust's commitment to helping local people live longer, healthier lives and build on factors such as quality performance, clinical or public proposals and our 'Learn innovate and improve ambition, to continually improve and provide even better care. These include: <ul> <li>Ensuring patients are seen by the right person in the right place at the right time.</li> <li>Access and attendance.</li> <li>Reducing health inequalities in our local population.</li> <li>Improving the Trust Environment to Improve Patient Experience.</li> </ul>	
Purpose:	Approval	
Recommendation(s)	The committee is asked to:  I. Provide approval on the draft Quality Account and agree the proposed priorities for 2024-2025.	
Risk Register or Board Assurance Framework	BAF Quality Entry 1 - Failure to provide care which is 'outstanding' in being consistently safe, caring, responsive, effective or well-led and which provides a positive experience for our patients may result in poorer patient experience, harm, a loss of income, an adverse impact upon staff retention and damage to organisational reputation.	
Report history	QGC 25/04/2024, QAC 08/05/2024, TMG 13/05/2024, TMG 20/05/2024	
Appendices	Appendix 1 – Draft Quality account 2023/2024	