

## Board of Directors

Thursday, 01 August 2019

Report Title:	QUALITY STRATEGY – FINAL DRAFT
Executive/NED Lead:	Catherine Morgan, Chief Nurse
Report author(s):	Anne Rutland; Associate Director of Clinical Governance
Previously considered by:	Quality and Patient Safety Committee

Approval     
  Discussion     
  Information     
  Assurance

### Executive summary

The Quality and Patient Safety Committee considered the draft Quality Strategy in May 2019 and recommended to the Board for approval. Our Quality Strategy requires approval in a public Board meeting.

#### Summary of the Quality Strategy

This quality strategy sets out our commitment to improving the quality of care for our patient; and how we will make this a reality in terms of equipping our staff with the skills and knowledge to deliver quality patient care. The Quality Strategy is closely aligned with ESNEFT's ambition to *offer the best care and experience*, its strategic objectives, and the Trust's *Time Matters* philosophy. This will guide our approach to delivery between 2019 and 2021.

The purpose of the Quality Strategy is to articulate our ambitions for quality in a way that is meaningful and serves as a statement of intent that patients, carers, staff, commissioners and other stakeholders can use to hold the Trust Board to account for the delivery of high quality services.

The Quality Strategy will help the Trust to deliver on its strategic objectives to – keep people in control of their health, lead the integration of care, develop our centres of excellence, support and develop our staff, and drive technology-enabled care.

The Strategy presents our quality objectives, and through its implementation, sets out the ambition to enhance our reputation for providing the best possible treatment, delivered with care and compassion.

### Action Required of the Board/Committee

The board are recommended to approve the Quality Strategy 2019- 21.

Link to Strategic Objectives (SO)		Please tick
SO1	Keep people in control of their health	<input checked="" type="checkbox"/>
SO2	Lead the integration of care	<input checked="" type="checkbox"/>
SO3	Develop our centres of excellence	<input checked="" type="checkbox"/>
SO4	Support and develop our staff	<input checked="" type="checkbox"/>
SO5	Drive technology enabled care	<input checked="" type="checkbox"/>
<b>Risk Implications for the Trust</b> (including any clinical and financial consequences)		Failure to implement the quality strategy may lead to failure to achieve elements of the Trust Strategy, improve the quality of care, clinical outcomes and enhance our reputation for providing best care and treatment.
Trust Risk Appetite		Quality: The board is cautious when it comes to quality and places the principle of "no harm" at the heart of the decision. It is prepared to accept some risk if the benefits are justifiable and the potential for mitigation is strong

<b>Legal and regulatory implications</b> (including links to CQC outcomes, NHSI, inspections, audits, etc.)	Implementation of the quality strategy is required to sustain compliance with legal and regulatory requirements (CQC) over the next three years.
Financial Implications	No identified financial implications
Equality and Diversity	Equality and diversity impact assessments will be required within individual project plans / business cases.