



Update on 2013 and onwards in 2014

Wednesday 5th March
2014

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Content

- March 5th 2014
- Review of 2013
- Onwards in 2014



Review of 2013

- New name
- Staff changes
- Standards developed
- Clients and surveys
- Quality assessments
- Events

Review of 2013 New name

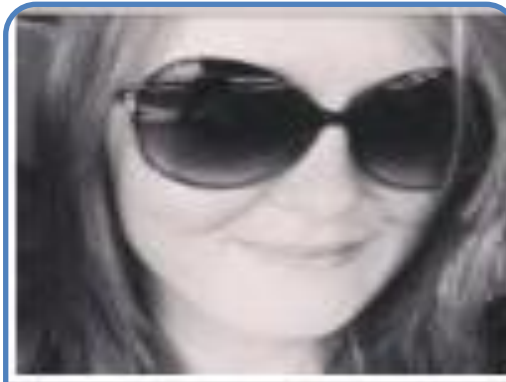
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Review of 2013 Staff changes

Good bye to.....



Ruth



Amy



Ann

Review of 2013 Staff changes

Hello to.....



Rita



Su

ALCESTER OFFICE



Rita Burton – Surveyor
Scheduling Team, Lead



Su Wood – Surveyor
Scheduling Team, Support



Julie Hodges – Finance
and Facilities coordinator



Nina Hermolle – Finance
Controller

Review of 2013 Standards Development

Standards published in 2013

- Oncology standards
- Patient focused care
- International standards 2013



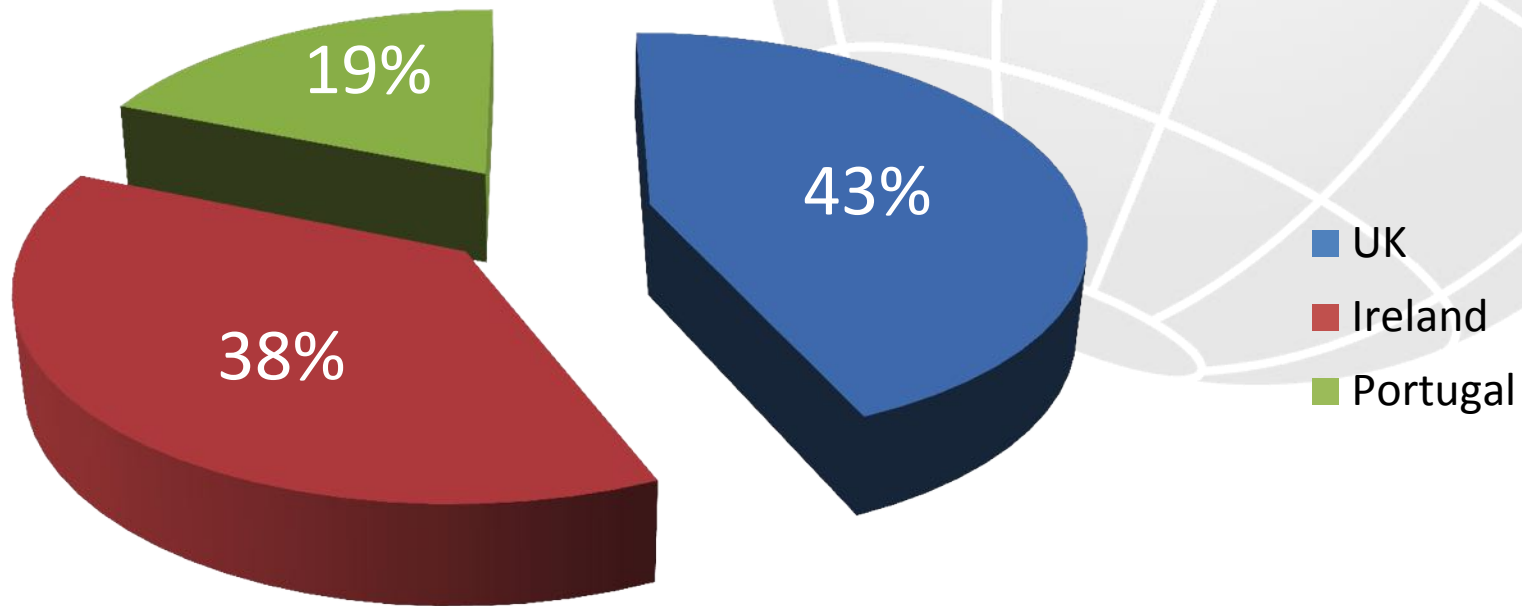
Preparatory work during 2013 for publishing 2014

- Primary health care

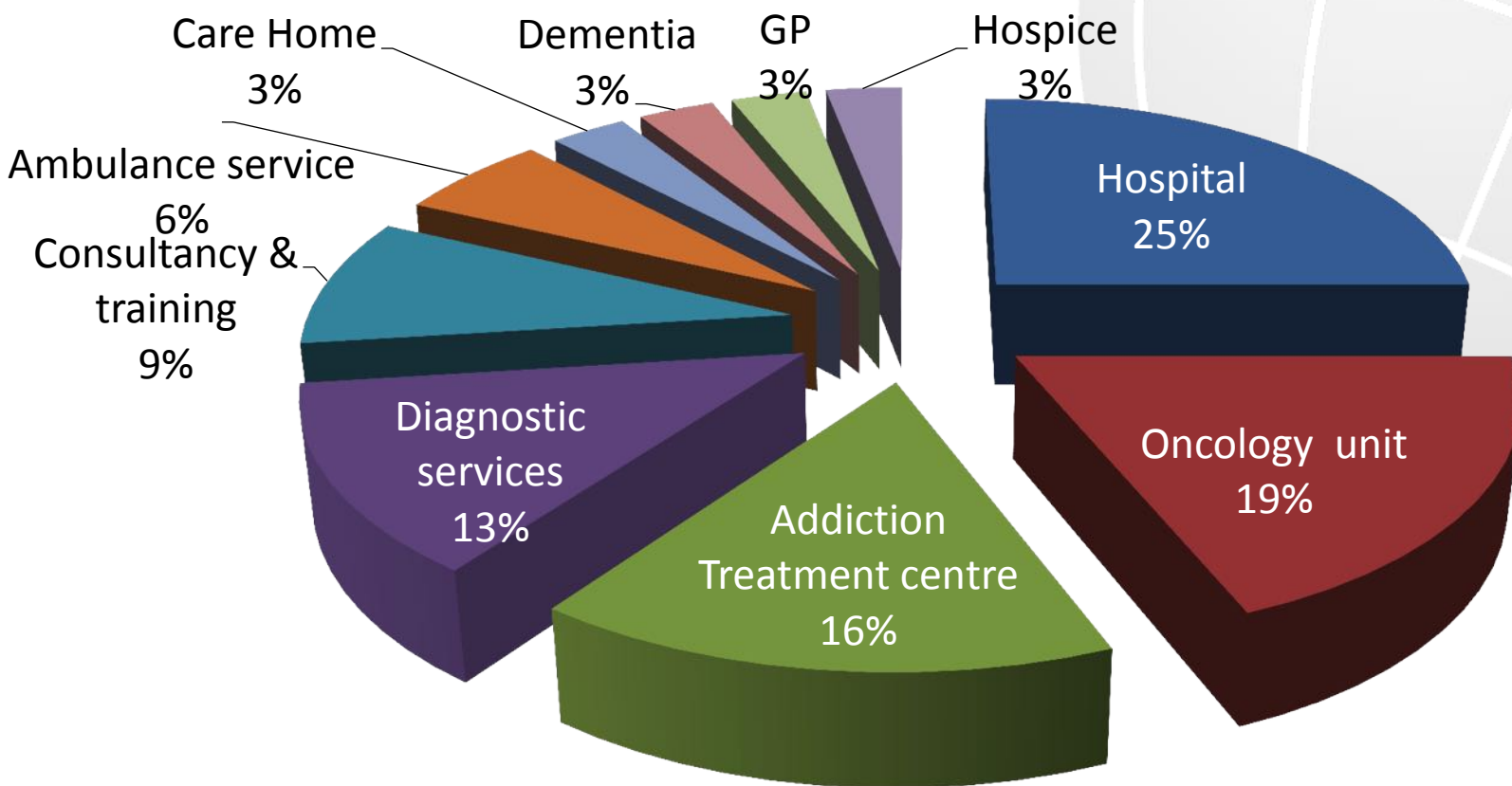
Review of 2013 / Onwards in 2014 Standards Development



New business in 2013 by geographical market



New business in 2013 by organisation type



Review of 2013 Surveys

	2011	2012	2013
Surveys	24	20	29
Focused resurveys	5	2	3
Monitoring /Surveillance visits	40	39	33
Accreditation awards	20	19	30

Review of 2013 / onward in 2014 Quality within the Unit



Review of 2013 Events



Review of 2013 / onward in 3204

Assurance programmes

Concept

Standards programme + data dashboard



Summary indicators	Percentile (0 - 100)	National mean	Trust value (pals with dementia)	Variance (cf national rate)	Spells
1 % acute patients with previously recorded dementia, for which dementia is not recorded in the current spell	31.1	27.0%	24.9%	-2.0%	2,025
2 Average length of stay for patients with primary diagnosis of dementia (age / gender / admission type standardised)	79.5	16.0	20.5	-3.7	159
3 Mortality rate for patients with primary diagnosis of dementia (age / gender / admission type standardised)	100.0	8.0%	22.1%	14.1%	159
4 30 day readmission rate for patients with primary diagnosis of dementia (age / gender / admission type standardised)	17.0	24.1%	17.9%	-6.2%	125

Example programmes

- ✓ Dementia
 - ✓ Maternity
 - ✓ Patient safety and risk
 - ✓ Day case surgery
 - ✓ Patient focused care
- any department e.g. cardiology



CHKS
PARTNERSHIP

Achieving excellence in dementia care
The dementia challenge ahead



Key facts

- One in three people over 65 will develop dementia
- There are 800,000 people with dementia in the UK and this is set to double in next 30 years
- Over-recognized dementia in admission leads to poorer outcomes including prolonged length of stay - up to 30% longer than patients without dementia and have

Partnership with Alzheimer's Society



CHKS
INSIGHT FOR BETTER HEALTHCARE

Assurance in healthcare
Evidence-based best practice analysis of your standards and outcomes



Programme benefits

- Helps monitor and optimise performance on key quality indicators
- Provides the evidence change and identifies priority areas for improvement via a review of structures and processes
- Demonstrates commitment to quality of care and continuous improvement
- Helps to safeguard reputation and income
- Provides information and analysis for Quality Assurance and governance reports
- Ensures compliance with all relevant legislative and professional standards
- Shows how your organisation is performing against best practice
- Provides assurance for trust boards
- Identifies trust performance against local targets and national peers

The CHKS Solution

Our Assurance Review combines a thorough review of the structures and processes across your organisation. It uses evidence-based standards to compare current practice with best practice and an analysis of your outcomes using data benchmarked against other providers. This unique diagnostic approach provides an independent and evidence-based evaluation of practice by our organisation.

Interpretation and discussion of the analysis is developed into a tailored improvement plan for your trust. This plan will provide a highly effective framework for governance of healthcare throughout the organisation, focusing on high risk areas and opportunities for significant improvement. Trusts that wish to achieve the highest levels of achievement can showcase their world class quality standards by choosing to follow a CHKS accreditation programme - the recognised mark of industry best practice.

Onward in 2014 (1)

- ✓ **Continued development of assurance programmes including CQC domain one**
- ✓ Royal Colleges goal to develop accreditation
- ✓ Accreditation information use within CQC

CQC Five domains

- ✓ Caring
- ✓ Effective
- ✓ Safe
- ✓ Well Led
- ✓ Responsive



Guidance about compliance

Essential standards of quality and safety



What providers should do to comply with the section 20
regulations of the Health and Social Care Act 2008
March 2010

What's ahead in 2014? (1)

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CQC criteria to be official information provider

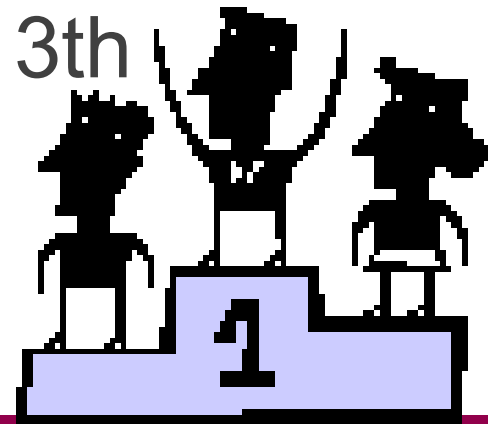
- ✓ Lay people who are ‘experts by experience’ are stakeholders in the scheme (patients, service users, carers)
 - Members of governance group (April 14)
 - Peer assessment teams (Sept 14)

Onwards in 2014 (2)

- ✓ UKAS Full assessment
- ✓ Revision of accreditation standards – Care Homes, Hospice and Maternity
- ✓ New surveyor training in early summer
 - Any colleagues or friends you could recommend?

CHKS Quality Improvement Award

- ✓ 14 entries
- ✓ 7 shortlisted for Panel consideration
- ✓ Winner and runners up to be announced at the Top Hospital Award ceremony, in Goldsmith's Hall, London, on May 13th



THANK YOU

