

## HOSC/42/16

**Committee** Health Overview and Scrutiny

**Date** 29 June 2016

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### **QUALITY ACCOUNTS**

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#### **Recommendation:**

The Committee is asked to note the Quality Accounts received for comment and how these were dealt with.

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#### **Overview**

At the HOSC Meeting on 14 April 2016 the Committee agreed the approach to take in relation to commenting on draft Quality Accounts submitted to it by Essex health bodies.

This provides a further update to that given at the 1<sup>st</sup> June 2016 HOSC.

#### **Quality Accounts received from Essex health bodies:**

Anglian Community Enterprise (no comments submitted)  
Colchester Hospital University Foundation Trust (no comments submitted)  
Farleigh Hospice (no comments submitted)  
Mid Essex Hospitals Trust (comments submitted)  
Southend University Hospital NHS Foundation Trust (comments submitted)  
Princess Alexandra Hospital Trust (comments submitted)  
North Essex Partnership Trust (no comments submitted)  
St Clare Hospice (no comments submitted)  
Saint Francis Hospice (no comments submitted)  
South Essex Partnership Trust (no comments submitted)

Since the last meeting some comments have been submitted to Princess Alexandra Hospital (Harlow) and these are reproduced overleaf.

HOSC response to Quality Accounts prepared by Princess Alexandra Hospital  
(Harlow)

The accounts were reviewed by Cllr Naylor and comments agreed with the HOSC Chairman:

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Thank you for the opportunity to comment on your latest Quality Accounts.

This a clear reflective document covering performance and outcomes during 2015-16. There is a justifiable sense of pride in the way that challenges are acknowledged and outcomes have mostly been achieved . Data for 2015-16 is still awaited.

Patient safety, patient experience and staff experience are at the forefront in the report.

Patient reported outcome measures and managed incident reporting are clearly important to the Trust.

The clinical areas where most pressure has been experienced are outlined in some detail and the importance of working with partners is acknowledged. In particular, steps to manage pressure in the ED during the winter but also now all year round, are spelled out in clear steps..

There are clear plans for the future - again based on putting the patient first, in terms of outcomes and experience.

This is an excellent document.