

**TRUST BOARD**

<b>Date of Meeting:</b> 05/07/2011	<b>Agenda Item No:</b> 7.1	<b>Enclosure:</b> 5
<b>Intended Outcome:</b>		
<b>For noting</b>	<b>For information</b>	<b>For decision</b> ✓
<b>Title of Report: Review of Clinical Governance</b>		
<b>Aims:</b> To update the Trust Board on the review of Clinical Governance which has been undertaken across the Trust.		
<b>Executive Summary:</b>		
<p>In January 2011 the Trust Board approved specific terms of reference to undertake a review of clinical governance across the Trust. The review was based on the following core objectives:</p> <ul style="list-style-type: none"> <li>• <b>Objective 1</b> - To examine compliance and evidence of meeting CQC Essential Standards of Safety and Quality and how this information is shared with stakeholders.</li> <li>• <b>Objective 2</b> - Independent assessment of the robustness of the Trust's Clinical Audit function.</li> <li>• <b>Objective 3</b> - Independent assessment of the provision and monitoring of mandatory training across nursing, medical and non clinical staff.</li> <li>• <b>Objective 4</b> - Independent assessment of the robustness of the Trust's system for the recording and monitoring of appraisals for all staff.</li> <li>• <b>Objective 5</b> - Independent assessment of the robustness of the Trust's system for recording and monitoring compliance with NICE clinical guidance, including the reviewing of clinical guidelines based on best practice.</li> <li>• <b>Objective 6</b> - To determine whether the Trust's strategy for Governance, Risk and Quality is fully embedded across all wards and departments in the Trust.</li> <li>• <b>Objective 7</b> - To determine whether the current governance support structure is fit for purpose to support the implementation and development of effective clinical governance across the Trust.</li> <li>• <b>Objective 8</b> - To determine whether all specialties have in place robust clinical audit and review systems, including external peer review and benchmarking to ensure effective clinical governance arrangements are in place for all clinical specialties.</li> </ul> <p>The Governance and Quality Committee have received progress reports on the review in March and May 2011.</p> <p>The review is now concluded and the key findings and recommendations from the review are attached at Appendix 1 of this report.</p>		

**Overview of key areas for consideration or noting:**

- It has been important for the Trust to ensure a robust review of clinical governance was undertaken across the organisation.
- This review has looked at a broad range of areas in terms of systems, supporting structures and specific areas of practice of clinical governance for example clinical audit.
- The review has identified a number of areas of good practice as well as highlighted the significant improvements which have already been made during the last 18 months.
- To ensure independence, internal audit have assisted in the reviewing of some of the key areas to ensure an objective assessment was undertaken on key areas.
- The review has highlighted a number of recommendations for further improvement.
- The review has also highlighted the need to strengthen the support structures for both the Director of Nursing and Medical Director.

**The full report outlines the following next steps which will be taken forward:**

- All recommendations should be combined into a Governance Improvement Plan for 2011/12, which should be reviewed by the Governance and Quality Committee on a monthly basis by exception.
- Audit Committee to review the detailed Internal Audit reports referred to in this report.
- Key findings of the review to be shared with all staff.
- Key findings and details of the review to be shared with key stakeholders.
- New structure to be approved and implemented.

**Specific implications and links to the Trust's Strategic Aims:**

Ensure we provide high quality, safe and effective care for all our patients including meeting essential standards of safety and quality as set out by the CQC	✓
Develop a viable integrated clinical strategy for secondary care services which is sustainable and affordable	
Develop a new healthcare facility in West Cumbria that is fit for the 21st century	
Achieve sustainable financial balance through the delivery of the Trust's internal Cost Improvement Programme, securing a viable contract income from our GP commissioners and contributing to the system wide cost reductions	
To develop and implement a successful merger or acquisition plan that enables the Trust to become part of an existing NHS Foundation Trust	✓

**Recommendations:**

That the Board approves the recommendations and next steps resulting from the review of clinical governance across the Trust.

**Prepared by:**  
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**Presented by:**  
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