

The Shrewsbury and Telford Hospital NHS Trust

Trust Board – 26th January 2012

Protected Mealtime Briefing Paper

Executive Lead	Vicky Morris Director of Quality and Safety/Chief Nurse
Author	Shelley Gooding Hygiene and Compliance Officer
Strategic Domain	C. Quality and Safety
Organisational Objective	C1. Ensure that we learn from mistakes and embrace what works well C2. Design care around patient needs C3. Provide the right care, right time, right place, right professional C4. Deliver services that offer safe, evidence-based practice C5. Meet regulatory requirements and healthcare standards C6. Ensure our patients suffer no avoidable harm
Executive Summary	<p>The briefing paper outlines the roll out programme planned for Quarter 4 of 2011/12 and seeks the Boards support to the approach proposed to launch and promote Protected meal times.</p> <p>The Paper also outlines the follow up process to the Implementation with audit tools and patient representative/ staff involvement to be used to measure the success of this initiative.</p> <p>Feedback to each of the Centres from this process will be fundamental to enable operational actions to ensure a successful implementation.</p>
Recommendations	<p>The Trust Board is asked:</p> <ul style="list-style-type: none"> • to NOTE and support the approach to the implementation and subsequent review of the Protected meal times programme.

Insert Title of Paper

Contribution to Inspection, Registration, Assurance, Performance and Delivery

Risks and Assurance	Please refer to relevant risks in the Corporate Risk Register and Principal risks in the Board Assurance Framework and explain how this paper will support the Trust to mitigate these risks and/or provide assurance that this risk is being managed (or state “not applicable”). More information is available from the Risk Management Strategy. The Risk register and Assurance Framework are available at https://www.4risk.co.uk/riskmanager/default.aspx Contact the Chief Compliance Officer for access.
Contribution to Key Performance Indicators	Please describe how this paper supports the Trust to maintain and improve performance and/or manage risk to delivery of Key Performance Indicators (or state “not applicable”).
Compliance with Clinical and other Governance Requirements	Please describe how this paper supports the Trust to maintain: CQC Standards; other quality standards (e.g. NHSLA, CNST, NPSA); External Reports and Inquiries. Refer to specific standards wherever possible (or state “not applicable”). Information about CQC standards, NHSLA and CNST (located in the NHSLA folder) is available from the “Corporate Projects” shared drive at \\rshsan02\CorporateProjects\PerformanceFramework Information about NPSA compliance is available from the “Corporate Projects” shared drive at \\rshsan02\CorporateProjects\CAS
Engagement and Decision-Making Process	Please indicate if the report has been considered by any Boards or Committees prior to presentation at the meeting (including the date of the meetings at which the report was considered and any decisions made concerning the proposal, if applicable). Also, briefly describe the engagement (e.g. with patients, local communities, staff, partner organisations) that has contributed to this paper. Please note there is a statutory duty under Section 242 of the NHS Act 2006 to engage with patients and public in changes and developments to health services. Papers relating to service change/delivery details of engagement with patients and public should provide details of the engagement process that has contributed to the development of the proposals.

Strategic Impact Assessment

Quality and Safety	Please summarise the impact of this paper on patient experience, patient safety and clinical effectiveness (or state “not applicable”).
Financial Strength	Please summarise the financial implications of this paper (or state “not applicable”).
Learning and Growth	Please summarise the workforce, learning and growth implications of this paper (or state “not applicable”).
Patients, GPs and Commissioners	Please summarise the implications for patients, GPs and/or commissioners (or state “not applicable”).
Equality and Diversity	Please summarise the impact on equality and diversity, including whether a Stage 1 and/or Stage 2 Equality Impact Assessment is required and has been completed. Please note that EqlAs are needed for new and revised policies, service reviews/developments and new services.
Legislation and Policy	Please summarise the legislation and policy implications of this paper. This should include reference to the relevant exemption under the Freedom of Information Act 2000 if this paper is being considered in Part II of the Trust Board meeting (or for Committee or other internal papers that are exempt from publication).
Communication and Marketing	Please describe the ongoing communications and engagement implications of this paper. For example, how will the decisions resulting from this paper be communicated (e.g. with patients, local communities, staff, partner organisations)?