

Date	17 July 2018
-------------	--------------

Title of paper	Quality & Performance Committee Report
-----------------------	---

Presenter	Dr Rachael Garner, Chair of Quality & Performance Committee
Author	Kerry Doyle, Head of Corporate Services/ Michael Roach, Assistant Director of Quality Improvement and Clinical Assurance
Responsible Director	Mary Mullix, Director of Nursing, Quality & Patient Safety
Clinical Lead	Dr Rachael Garner, Chair of Quality & Performance Committee
Confidential	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (items are only confidential if it is in the public interest for them to be so)

The Governing Body is asked to:
Note the report.

Summary of purpose and scope of report
<p>This report summarises the Quality & Performance Committee’s work since the last Governing Body meeting in May 2018.</p> <p>The Committee is responsible for assurance on the quality, safety and performance of services commissioned and for promoting a culture of continuous improvement and innovation with respect to safety of services, clinical effectiveness and patient experience. It supports the CCG’s aim of ensuring that high quality services are commissioned and provided for patients as outlined in the North West London Sustainability & Transformation Plan:</p> <ul style="list-style-type: none"> - Radically upgrading prevention and wellbeing; - Eliminating unwarranted variation and improving long-term condition management; - Achieving better outcomes and experiences for older people; - Improving outcomes for children and adults with mental health needs; - Ensuring we have safe, high quality sustainable services; - Ensuring the system has the capacity and capability to deliver (workforce, OD, IT primary care etc.). <p>It does this through receiving and acting on feedback about services commissioned by the CCG to improve service quality and patient experience.</p> <p>Points of note are:</p> <ul style="list-style-type: none"> - Chelsea & Westminster Hospital NHS Foundation Trust was the best performing Trust for A&E and saw the lowest conversion rate for admittance out of the top ten national Trusts in terms of all types of A&E attendances; - At Chelsea & Westminster Hospital NHS Foundation Trust, the Care Quality Commission reported outstanding

practice in services including End of Life, Children and Young People services and Urgent and Emergency care.

- A review of local expenditure rates compared with other CCGs in NWL confirmed that West London CCG has relatively low acute expenditure when compared with peers and local CCGs.

1 Quality, performance & patient experience

1.a Patient Feedback Q4: Jan – March 2018

The report summarised feedback from patients collected by member practices in the final quarter of 2017/18.

The two acute providers in the CCG, Chelsea & Westminster Hospital NHS Foundation Trust and Imperial College Healthcare NHS Trust saw similar numbers of feedback forms submitted by patients. However, the amount of feedback received remained too small to be indicative.

Other methods of collecting data, including using a shared tool across North West London CCGs, were discussed.

This element had been removed from the CLS plan in 2018/19, therefore this would be the final report for the Committee.

1.b Out of hours services and data/ consent

The Committee Chair had received advice confirming that patients could not be excluded from services if they had not given consent for their data to be shared.

The Committee was informed that the service would remain open to all patients, and that legal advice had been shared with the GP Federation.

1.c NHS RightCare Programme update

The report gave an overview of the NHS RightCare programme for 2018/19, and an update on progress in NHS West London CCG.

The following areas were discussed:

- Links to improving Primary Care management of Dementia;
- NWL Sustainable Transformation Plan program to maintain high Dementia registration rates;
- Implementation of the NHS guidance on Dementia, focusing on post-diagnostic care and support;
- 2018/19 Neurology QIPP plan.

The Committee suggested that the data could be used to support new Primary Care Networks to identify opportunities, and that Endocrine and Chronic Obstructive Pulmonary Disease/ Asthma could also be areas of focus.

1.d Operating Plan 2018/19

The Committee discussed the following:

- Activity levels had been set using month 10 data, and aligned to the NHS England dataset;
- Non recurrent adjustments had been made to account for additional activity in 2018/19, such as referral to treatment backlog clearance at Imperial;
- 52 Week waits: backlog at Imperial College Healthcare NHS Trust.

1.e Annual Report on Healthcare Associated Infection 2017/18

The following points were considered:

- No sub-optimal management found in Primary Care;
- Chelsea & Westminster Hospital NHS Foundation Trust and Imperial College Healthcare NHS Trust had C difficile rates were below threshold, and no lapses in care were found at either Trust;
- Chelsea & Westminster Hospital NHS Foundation Trust was harmonising policies across both sites;
- Infection prevention and control being standardised across North West London;
- Reduction in infections in West London CCG from 2016/17 to 2017/18;
- 2018/19 C difficile thresholds reduced by one case at each North West London Trust.

1.f Clinical Quality Groups

Reports on the Clinical Quality Groups at West London CCG's acute Trusts were discussed as follows:

Chelsea & Westminster Hospital NHS Foundation Trust

- Cerner (electronic health records system) went live at West Middlesex site in May 2018, with no major issues reported;
- An external audit of the Trust's complaints process had found "significant assurance with minor improvement opportunities", the Trust's complaints team was developing a feedback system and a quarterly Trust wide report; complaints would remain an area of focus for the Clinical Quality Group;
- A seven day working face-to-face Palliative care nursing service introduced;
- Care Quality Commission reported outstanding practice in services including End of Life, Children and Young People services and Urgent and Emergency care.
- Work underway to clear endoscopy backlog.

1.g Integrated quality & performance reports

The Committee reviewed reports for March and April 2018.

Chelsea & Westminster Hospital NHS Foundation Trust

- Best performing Trust for A&E and saw the lowest conversion rate for admittance out of the top ten national Trusts in terms of all types of A&E attendances;
- A&E attendances increasing, including under 5s and mental health;

- Child & adolescent mental health services: occupational therapy referrals not being made within timeframe;
- A meeting had been arranged with the Head of Midwifery to discuss the relatively high number of non-elective C-sections;

Imperial College Healthcare NHS Trust

- The Trust was meeting its A&E trajectory;
- Challenging QIPP programme had been accepted by the Trust;
- Increased performance in referral to treatment.

1.h) Primary Care Quality Dashboard

The use of the dashboard will support improvement to the quality of care delivered within primary care, reduce unwarranted variation, and support the developments in service quality within primary care.

The dashboard uses readily available information, so there is no additional requirement of general practice. The dashboard is not a performance management tool.

The Committee:

- Endorsed the Primary Care Quality Dashboard and the quality standards for each of the three levels:
 - Level 1 Standards which should be deemed essential for every practice to deliver;
 - Level 2 Standards which should be deemed an addition to level 1 and should be a progression from the essential 'expectations';
- Level 3 Standards which should be deemed 'of the highest quality' and reflecting best practice;
- Endorsed the use of the Primary Care Quality Dashboard as a Quality Improvement Tool not as a performance management tool for the CCG Primary Care Commissioning Committee, GP Federations and Networks;
- Endorsed the production of the Primary Care Dashboard twice per annum.

2 Safeguarding

2.a) CWHHE Clinical Commissioning Groups Safeguarding Report Quarter 2 – 2017

The Designated Adult Safeguarding & Clinical Quality Manager presented the report, outlined safeguarding activity during quarter 2 at the main Trusts commissioned by CWHHE CCGs.

- The safeguarding team would ensure that all CWHHE CCGs had robust arrangement for monitoring safeguarding training;
- CCGs' safeguarding teams were continuing to work with NHS providers, Local Authorities, and NHS Digital to monitor progress against 'going live' with the Child Protection Information Sharing Project (CP-IS) across North West London;
- CCGs' safeguarding teams were working with Chelsea & Westminster Hospital NHS Foundation Trust

to develop robust training monitoring methods;

- Modern Slavery Act duty had been cascaded across the five CCGs.

2.b) Nursing Home – change of GP provider

A practice in West London CCG, which provided Primary Care Services to a nursing home in Wandsworth CCG, was not renewing its contract with the nursing home. The practice was continuing to provide Primary Care services while a new GP practice was found in Wandsworth.

3 Governance and assurance

3.a Groups reporting to the Committee

The Committee received the following minutes:

- Medicines Management Group, 23 March 2018;
- Clinical Quality Group: Chelsea & Westminster NHS Foundation Trust, 28 March and 30 May 2018;
- Chelsea & Westminster NHS Foundation Trust Performance & Contract Executive, 26 March and 14 May 2018;

3.b Board Assurance Framework

The Committee discussed *risk 2: If we do not have coherent plans for managing demand for urgent and emergency care we will not achieve the operating plan targets set by NHS England.*

- Need data on Primary Care's activity and extended access activity/ outcomes;
- A&E delivery boards in place in all acute Trusts;
- Trust Performance & Contract Executives monitor A&E performance;
- Success lies in Primary Care/ Urgent Care Centres managing demand;
- More patient engagement/ education needed;
- The Committee agreed to have oversight of this risk in 2018/19.

Quality & Safety/ Patient Engagement/ Impact on patient services:

The Committee is responsible for monitoring quality of services the CCG commissions, and uses patient and clinician feedback to do this. The Committee ensures stakeholders are involved in its work through:

- Having patient, lay and third sector representation on the Committee;
- Clinical representation via GP members;
- Receiving regular reports from the Patient & Public Engagement Committee, quarterly patient experience reports, Commissioning Learning Sets and complaints from service users.

Financial and resource implications

None identified for this report.

Equality / Human Rights / Privacy impact analysis

Not required for this report.

Quality impact analysis reports are presented to the Committee for review.

Risk

The Committee is responsible for the review and scrutiny of key risks outlined in the Board Assurance Framework.

Supporting documents

Integrated Performance and Quality Report, Month 1

Governance and reporting (list committees, groups, or other bodies that have discussed the paper)

Committee name	Date discussed	Outcome