

# Governing Body

22 March 2017

<b>Details</b>	Part 1	<b>X</b>	Part 2		Agenda Item No.	<b>10</b>
Title of Paper:	Quality and Performance Report					
Board Member:	Peter Bury, Lay Member for Quality and Performance					
Author:	Peter Bury, Lay Member for Quality and Performance					
Presenter:	Peter Bury, Lay Member for Quality and Performance					
Please indicate:	For Decision		For Information		For Discussion	<b>X</b>

## Executive Summary

<b>Summary</b>	This paper provides an outline of the matters discussed, assurances sought and decisions ratified at the last Quality and Performance Committee meeting. This report aims to provide information and assurance to the Governing Body that a robust, effective governance system is in place and that the Committee is discharging its responsibilities.					
<b>Risk</b>	<b>High</b>		<b>Medium</b>	<b>X</b>	<b>Low</b>	
	Failure by the Governing Body to understand governance risks could result in material failure of the organisation to achieve its strategic objectives alongside failure to discharge statutory responsibilities resulting in sanction or legal challenges.					
<b>Recommendations</b>	The Governing Body is asked to: <ul style="list-style-type: none"> <li>Note the update provided</li> <li>Note the reports provided for assurance</li> </ul>					

## Strategic themes

To deliver improved outcomes and reduce health inequalities for patients through better preventative strategies	
To deliver service re-design in priority areas through innovation	
To develop primary care to become excellent and high performing commissioners	
To develop the CCG leadership to work with the Local Authority to be excellent integrated commissioners	
To develop robust and effective working relationships with all stakeholders and partners to drive integrated commissioning	
To deliver long term financial sustainability through effective commissioning and innovative investment across the wider system	
To develop and influence the provider landscape through development of a Locality Care Organisation (LCO)	
Equality Analysis Assessed?	Supports NHS Bury CCG Governance arrangements <b>X</b>

## Quality and Performance Committee Report

### 1. Introduction and Background

The last meeting of the Quality and Performance Committee was held on 8 March 2017.

### 2. Further Information

Key points for the Governing Body to note are as follows:

- 2.1 **Performance** – The Committee considered the monthly performance report. The following discussions from the meeting are highlighted for the benefit of Governing Body members and what corrective actions the CCG and providers are taking.
- 2.2 Diagnostic waiting times – patients are routinely going to Central Manchester for gastroenterology and colonoscopies. This has affected the Bury position and so CCG performance is below target. A recovery plan has been requested on this issue.
- 2.3 A+E 4 Hour Waits – It is positive to note Fairfield is the best performing across the Pennine Acute Footprint. An initiative is taking place along with Heywood, Middleton and Rochdale CCG to ensure that an Rochdale patients presenting at FGH, after triage are sent to their Urgent Care Centre if appropriate.
- 2.4 Delayed Transfers of Care – Bury is an outlier especially at North Manchester General Hospital. The issue for staff at North Manchester is they are dealing with four different local authority criteria. This is being worked on to have a single discharge liaison team. It has a focus at Greater Manchester level as John Rouse, Chief Officer has wrote to all CCGs about the inconsistencies.
- 2.5 We are also an outlier in restarting packages of care which stop after 24 hours. Action is being taken by Bury Council to look at this and flexibility of social workers.
- 2.6 The Committee also noted that the CCG will have its next assurance meeting on 20 March and that outliers in performance will form a significant part of the discussions. This report was recommended for submission to the Governing Body and is included as part of the report pack.
- 2.7 **Quality** – The Committee considered the monthly quality report. This has been included with the report pack.
- 2.8 The CCG has completed its self-assessment against the Improvement and Assessment Framework, of which there are two sections on quality and safeguarding. Both requirements have been assessed as green star which is the highest rating.
- 2.9 Included elsewhere on the Governing Body agenda has been outcome of the Care Quality Commission report for Pennine Care. This was noted at the Committee meeting, along with the fact that locality level information has yet to be received.
- 2.10 Another issue raised was the waiting times for wheelchairs for children, we acknowledged staff shortages with occupational therapists, which is a national trend and means delays in assessments. To rectify this a new service specification will be designed and taken to Clinical Cabinet for approval.

- 2.11 **Safeguarding** – The Committee considered the quarterly safeguarding dashboard. This has been included within the report pack.
- 2.12 CCG Commissioning for Compliance Tool – This looks as looked after children and care leaver health services. The CCG were rated were 7<sup>th</sup> in country for the number of ‘red’ indicators we had. Thanks to the work of the Head of Safeguarding the position is now much improved and the Committee felt it was appropriate for this to be addressed in the report.
- 2.13 **Risk** – The Committee considered the monthly risk report. The Quality and Performance Committee monitors the largest number of risks across the CCG. For this report three risks were recommended for closure. The Committee were assured on two of the risks relating to IAPT moving to recovery and the dietetics pathway. These were supported for closure and will be sent to the next Audit Committee for final ratification.
- 2.14 The third risk related to health assessments for looked after children and wasn’t supported for closure. Although the CCG has done a great deal to improve the pathway, there is still a delay in receiving and obtaining consents. The CCG;s Head of Safeguarding is working with the local authority to look at further solutions and until the whole pathway has improved the risk will stay on the register.
- 2.15 The Committee also focussed attention on higher than expected mortality indicators across Pennine Acute. Action is being taken by Medical Director of Pennine Care to undertake a deep dive into mortality.

**Peter Bury**

Lay Member for Quality and Performance

Chair – Quality and Performance Committee

**March 2017**