

Meeting: Governing Body			
Meeting Date	28 March 2018	Action	Receive
Item No.	10b	Confidential	No
Title	Quality Dashboard		
Presented By	Catherine Jackson, Executive Nurse (Director of Nursing & Quality)		
Author	Catherine Jackson, Executive Nurse (Director of Nursing & Quality), Carolyn Trembath, Head of Quality		
Clinical Lead	Cathy Fines/Catherine Jackson		

Executive Summary
<p>The Quality Dashboard provides an overview of:</p> <ul style="list-style-type: none"> • Fairfield General Hospitals Perfect Fortnight • Pennine Acute and Pennine Care updates • General Practice update • Nursing Home update
Recommendations
<p>It is recommended that Governing Body:</p> <ul style="list-style-type: none"> • Receive the report for information • Note the main focus areas raised; and • Note the recommendations and take action where required.

Links to CCG Strategic Objectives	
To empower patients so that they want to, and do, take responsibility for their own healthcare. This includes prevention, self-care and navigation of the system.	<input type="checkbox"/>
To deliver system wide transformation in priority areas through innovation	<input checked="" type="checkbox"/>
To develop Primary Care to become excellent and high performing commissioners	<input checked="" type="checkbox"/>
To work with the Local Authority to establish a single commissioning organisation	<input type="checkbox"/>
To maintain and further develop robust and effective working relationships with all stakeholders and partners to drive integrated commissioning.	<input type="checkbox"/>
To deliver long term financial sustainability in partnership with all stakeholders through innovative investment which will benefit the whole Bury economy.	<input type="checkbox"/>
To develop the Locality Care Organisation to a level of maturity such that it can consistently deliver high quality services in line with Commissioner's intentions.	<input checked="" type="checkbox"/>
Supports NHS Bury CCG Governance arrangements	<input checked="" type="checkbox"/>

Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	Yes
GBAF <ul style="list-style-type: none"> • GBAF 2.2 • GBAF 2.3 	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. If you are unsure seek advice from Lynne Byers about the risk register.</i>						

Governance and Reporting		
Meeting	Date	Outcome
Quality & Performance Committee	14/03/2018	Recommended to be reported to Governing Body

QUALITY REPORT

Governing Body - March 2018

March update

Urgent care remains the highest priority in the refreshed 2018-19 planning guidance. The guidance sets out the expectations for reducing and managing the demand on urgent care services. Failure to do this will impact our ability to achieve the 2018-19 Quality Premium requirements. Below are the key indicators that will be monitored in 2018-19 for urgent care.

4 hour A&E standard is to be above 90% for Sept 18 and 95% for March 19
Plans will report non-elective admissions of less than 1 day separately from those of one day or more
Proportion of beds occupied by patients meeting the national Delayed Transfer of Care (DToC) criteria to reduce to 3.5%
Focus on stranded DToC patients (waiting > 7 days) and super-stranded (waiting > 21 days)
NHS 111 online available to 100% of population by Dec 18
Access to enhanced NHS 111 services to 100% of population with more than 50% of callers receiving clinical input, bringing 111 and GP out of hours (OoH) provision into integrated Clinical Assessment Service (CAS)
By March 19, ensure that CAS can book into GP systems where technology allows
Implement new Emergency Care Data Set in A&E (Type 1&2 by June 18 and Type 3 by March 19)
Operate new Urgent Care Treatment Centres
Meet new ambulance response time standards

Pennine Acute Hospital Trust (PAHT)

The Care Quality Commission (CQC) has published the results of their unannounced inspections undertaken in October 2017. PAHT are now assessed overall as '**Requires improvement**' compared to '**Inadequate**' in 2016. **No** services have now been rated as *Inadequate*.

The overall rating is broken down across the 5 key domain areas as follows:

Safe	<i>Requires improvement</i> (was <i>Inadequate</i>)
Effective	<i>Requires improvement</i>
Caring	<i>Good</i>
Responsive	<i>Requires improvement</i>
Well-led	<i>Good</i> (was <i>Inadequate</i>)

For specific services:

Community health inpatient services, community health services for adults, community health services for children, young people and families, end of life care – PAHT was rated as '*Good*'.

For **Fairfield General Hospital**, the overall rating has improved from '*Requires improvement*' to '**Good**' with '**Outstanding**' in medicine.

Safe was rated as '*Requires improvement*'. Effective, caring, responsive and well-led were rated as '*Good*'.

For specific services the ratings were as follows:

Medical care (including older people's) - *Outstanding*
 Urgent and emergency services (A&E) - *Good*
 Surgery - *Good*
 Intensive/critical care - *Requires improvement*
 End of life care - *Requires improvement*
 Outpatients - *Good*

Pennine Care Foundation Trust (PCFT) - Community Services

Leadership

PCFT have a new Managing Director in a substantive post for Bury Community Services. This will provide a new opportunity to work with the Trust on local commissioning and quality issues.

Posture and Mobility Service

- The quality of data in the waiting times report is under review to ensure it is in line with national guidance
- Wider concerns raised about consistency of activity reporting and hotspot issues
- Due to budget constraints referrals are on hold until 1st April 2018
- Need to review if this needs to be added to the CCG's risk register

Community IV

- Further concerns raised about service performance; on-going discussions with the Trust and other partners to ensure a safe and resilient service can be delivered to local people

Community Dataset

- Manual data recording currently not included in community dataset, which is putting delivery of the contract at risk

Pennine Care Foundation Trust (PCFT) - Mental Health services

Leadership

- PCFT is also appointing a new Managing Director for Bury Mental Health Services, providing a new opportunity to work with the Trust on local commissioning and quality issues.

Mixed sex accommodation (MSA)

- The proposed Trust-wide redesign of all adult acute wards is due to go out for consultation shortly. For Bury the biggest impact will be on older people's wards due to the cross border proposal.
- An in-depth analysis of MSA has been undertaken to receive assurance regarding the impact on patient care and experience and ensure that this is positively and proactively managed

Serious Incident reporting workshop

- Reviewed definitions and reporting thresholds for fractures and falls alongside the quality of information being provided in reported incidents
- Heywood, Middleton & Rochdale CCG's audit provided assurance that PCFT is grading lower level incidents appropriately
- Agreed for the CCG to be the point of contact for the north east sector if PCFT is unclear if a serious incident reporting threshold is met (for community services incidents)
- Discussed the introduction of PCFT's new approach to investigating more proportionately to create time for learning

New PCFT quality committee

- As an outcome of its well-led review, PCFT is establishing a new, separate quality committee. Currently, a combined quality and performance committee reports to the Trust's board.

Triangle of Care (TofC)

- PCFT achieved its first star in recognition of the Trust's commitment and work so far to recognise the role and involvement of carers
- Trust-wide proposal to recruit Carer Development roles and specific to Bury a support worker for Carer Champions

Learning Disabilities mortality review (LeDeR) programme

LeDeR mortality reviews

- Bury has four current open LeDeR mortality reviews
- Capacity and availability of reviewers remains a challenge both locally and nationally

LeDeR reviews		
		Jan - 18
Nationally	Total	1866
	Completed	146
North of England	Total	747
	Completed	82

LeDeR reviews (to January 18)							
		Mar-17		Oct-17	Nov-17	Dec-17	Jan-18
GM	Total	3		59	69	84	93
	Completed			0	2	3	4
Bury	Total	0		0	1	3	5
	Completed					1	1

- The CCG has developed links with PAHT Bereavement Service and PAHT Learning Disability Liaison Service to support reviews where the person has died in hospital
- Greater Manchester LeDeR learning event taking place to share good practice and review local implementation plans
- Nigget Saleem has taken up her part-time role as the LeDeR Clinical Champion for the north east

General Practice update

Quality in Primary Care Contract

- The combined Local Commissioned Service (LCS) has been finalised and has gone to practices for sign up. It is still expected that the Quality in Primary Care Contract phase three will go live in practices on the 1 April 2018. We are in quarter four of phase two delivery and practices are achieving well against KPIs.

Friends and Family Test Results

- 97% of practices submitted FFT results in November 2017, the highest in GM. A total of 505 responses were received with 90% of patients recommending their GP practice to friends and family.

CQC

- Minden Family Practice Yacht Suite was inspected by CQC in December 2017 and Anchor Suite in January 2018. Both practices have maintained their overall rating of '**good**' and '**good**' in each of the five key domain areas of safe, effective, caring, responsive and well-led .

Practice Nurse (PN) Awards

- Bury practices were well represented at the Greater Manchester PN awards at the Etihad Stadium in February.
- 16 entries were received in the nine categories with several shortlisted
- Garden City practice received an award for the improvements they have made as a practice team.

Nursing Home update

Nursing Home Quality and Safeguarding Dashboard - Bury CCG

Safeguarding Investigations includes Cygnet Hospital Bury													
Type	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
Neglect		1	1	3		5	4		3	4	4		25
Physical	4	1		5	1		1	2	2	3	2		21
Sexual			1										1
Psychological											2		2
Financial				1					1		1		3
Organsational						1							1
Total	4	2	2	9	1	6	5	2	6	7	9		53

Nursing Home Forum Attendance												
Home	2016/17						2017/18					
	Apr	Jun	Aug	Oct	Dec	Feb	Apr	Jun	Aug	Oct	Dec	Feb
Ainsworth	Y	Y	Y	Y	Y			Y	Y		Y	
Bank House		Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Burrswood House			Y	Y	Y		Y	Y		Y		
Cameron House	Y			Y			Y			Y		
Gorsey Clough		Y	Y	Y	Y	Y	Y	Y	Y			
Healthlands	Y	Y	Y	Y	Y	Y	Y	Y	Y		Y	Y
Nazareth House		Y		Y		Y		Y		Y		Y
Oak Lodge	Y	Y			Y	Y	Y				Y	Y
Regency Care						Y	Y		Y	Y		
Rose Court				Y		Y	Y	Y	Y	Y		
The Elton Unit	Y	Y	Y	Y				Y	Y	Y	Y	Y
Bury Hospice			Y	Y				Y			Y	

Most Recent CQC Inspections			
Home	Date	Outcome	Comments
Ainsworth	06/12/2016	Requires Improvement	Recently inspected awaiting report publication March 2018
Bank House	25/11/2016	Good	
Burrswood House	07/04/2016	Good	
Cameron House	20/04/2015	Good	
Gorsey Clough	06/12/2016	Good	
Healthlands	24/03/2016	Good	
Nazareth House	29/11/2016	Good	
Oak Lodge	16/07/2016	Good	
Regency Care	08/06/2016	Good	
Rose Court	27/08/2015	Good	
The Elton Unit	02/05/2017	Good	

Most Recent Local Authority/CCG Assurance Visits			
Home	Date	Outcome	Comments
Ainsworth	29/06/2017	Partially Assured	Awaiting assurance on children's safeguarding policy
Bank House	06/06/2017	Fully Assured	
Burrswood House	31/07/2017	Fully Assured	
Cameron House	17/05/2017	Fully Assured	
Gorsey Clough	28/07/2017	Fully Assured	
Healthlands	23/05/2017	Fully Assured	
Nazareth House	31/10/2017	Fully Assured	
Oak Lodge	24/11/2017	Partially Assured	Awaiting addition of safeguarding into Home Manager's Job Description.
Regency Care	31/07/2017	Fully Assured	
Rose Court	19/07/2016	Fully Assured	
The Elton Unit	21/07/2017	Fully assured	

Nursing Home Update continued

Clinical Supervision Attendance									
Home	2016/17	2017/18				2018/19			
	Sept	Jan	May	Sept	Jan	May	Sept	Jan	
Ainsworth	Y								
Bank House	Y	Y			Y				
Burrswood House	Y				Y				
Cameron House					Y				
Gorsey Clough	Y	Y							
Healthlands	Y		y						
Nazareth House	Y								
Oak Lodge									
Regency Care				y					
Rose Court	Y								
Elton Unit/Priory		Y			Y				
Beenstock (OOA)		Y							

Most Recent Infection Control Audit			
Home	Date	Outcome	Comments
Ainsworth	Apr-17	97%	
Bank House	Mar-17	96%	
Burrswood House	Jun-17	82%	
Cameron House	Sep-16	93%	
Gorsey Clough	May-17	89%	
Healthlands	Jun-17	97%	
Nazareth House	Aug-16	87%	
Oak Lodge	Apr-17	98%	
Regency Care	Jun-17	92%	
Rose Court	Mar-17	98%	
The Elton Unit	Jul-17	96%	

Communication:

Burrswood changed ownership from BUPA to Advinia with effect from 31st January 2018. New Manager appointed.

Bank House new manager appointed.

Nazareth House new manager appointed.

Quality and Resilience:

Rose Court is representing care homes on GM Teaching Care Home Project.

Regency has achieved Dementia Care Accreditation within Four Seasons – all staff completed training and had to attain the same level before the home could achieve this ward which also included an audit of all care plans to ensure they were person centred.

Good engagement from care homes with the React to Red initiative.

All care homes with nursing have now attended and cascade training to colleagues is under way.

Bank House are reporting a reduction in pressure ulcer prevalence

Chief Officer completed visits to Nazareth House and Regency Nursing Homes January 2018 with Safeguarding Team.

Transforming Care

The Transforming Care Programme (previously called Winterbourne) is an NHS England Programme, and Greater Manchester has been identified as a fast track area. Due to the increased scrutiny of GM progress the CCG reports weekly to the GM Transforming Care Lead. Currently Bury CCG are on track to deliver the expected discharges and repatriation of people with a learning disability receiving care in and out of area placements.

Commissioner	Comment	Location
Bury CCG	1 Currently on leave at supported living accommodation. Transition going okay. Awaiting allocation of local Responsible Clinician. Once handover formalised patient will be discharged	Merseycare
	2 Exploring discharge options	Nottingham
	3 Currently in active care and treatment	Bradford
	4 Exploring discharge options	Bolton
	5 Waiting to view supported living property in locality. Accommodation opening in April.	
NHSE	6 Currently on leave at supported living accommodation	Merseycare
	7 Exploring discharge options	Merseycare
	8 Discharge planning placed on hold due to circumstances requiring further investigation	Merseycare
	9 Recent admission from criminal justice system. Appropriately placed at present	Merseycare

Quality Report Forward Planner

Quality Dashboard 2018												
Contents	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Regular updates for:												
Monthly strategic update	√	√	√	√	√	√	√	√	√	√	√	√
General Practice	√	√	x	√	√	√	√	√	√	√	√	√
PAHT	√	√	√	√	√	√	√	√	√	√	√	√
PCFT Mental Health	√	√	√	√	√	√	√	√	√	√	√	√
PCFT Community Services	√	√	√	√	√	√	√	√	√	√	√	√
Nursing Homes	√		√				√				√	
Additional Information												
Transforming Care			√			√			√			√
CHC Update						√				√		
PHBs update					√				√			
Public Health update	√				√		√			√		
Walk Around reports		√	√	√				√		√		
Provider Quality Accounts						√						
Quality Premium			√				√				√	
CQUIN update			Q3				Q4		Q1			Q2
LD Mortality update				√						√		
Mortality (HSMR/SHMI)		√						√				