

<b>Meeting: Governing Body</b>			
<b>Meeting Date</b>	22 September 2021	<b>Action</b>	Receive
<b>Item No.</b>	8b	<b>Confidential</b>	No
<b>Title</b>	Quality Report		
<b>Presented By</b>	Catherine Jackson (Executive Nurse, Director of Nursing & Quality)		
<b>Author</b>	Catherine Jackson (Executive Nurse, Director of Nursing & Quality) Carolyn Trembath (Head of Quality) Sarah Tomlinson (Quality Assurance Manager)		
<b>Clinical Lead</b>	Catherine Jackson/Cathy Fines		

<b>Executive Summary</b>
The Quality Dashboard provides an overview of: <ul style="list-style-type: none"> <li>Provider Updates</li> <li>CHC/complex care update</li> <li>Independent/Small value contracts</li> <li>Covid19</li> <li>Key actions/learning/successes</li> </ul>
<b>Recommendations</b>
It is recommended the Quality and Performance Committee: <ul style="list-style-type: none"> <li>• Consider this report and provide feedback</li> <li>• Note the focus areas raised</li> <li>• Note recommendations made and take action where required</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<b>SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.</b>	<input checked="" type="checkbox"/>
<b>SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.</b>	<input type="checkbox"/>
<b>SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.</b>	<input checked="" type="checkbox"/>
<b>SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.</b>	<input 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:	
GBAF <i>[Insert Risk Number and Detail Here]</i>	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
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"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, please give details below:						
If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment:						
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome
Quality and Performance Committee	08/09/2021	Recommended to be shared with Governing Body with follow up actions to be complete within agreed action plan timescales

**Date:** 22nd September 2021  
**Title:** Quality Report  
**Author:** Catherine Jackson, Director of Nursing & Quality Improvement  
Carolyn Trembath, Head of Quality  
Sarah Tomlinson, Quality Assurance Manager

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## **KEY POINTS**

### **System Quality, Safeguarding & Performance Assurance Committee**

Initial planning for future borough wide Health & Care assurance is now underway. Two development sessions have been arranged to shape the future System Quality, Safeguarding & Performance Assurance Committee. The committee will sit under the Bury Locality System Board and will likely replace the CCG Quality & Performance Committee.

The aim would be to:

- Understand what we must report on at a national level for Health and Social Care
- Get a collective view on what we would like to see reported and what adds real value in providing us with assurance that ALL our Health & Care Services are of a high quality
- Understand what data is readily available now and where the gaps maybe, eliminating duplicated effort and streamlining processes
- Agree where Risk sits

### **Pennine Acute Hospitals Trust (PAHT)**

NHSE/I Quality Oversight Group continues its role of assuring the transaction of the Bury, Oldham and Rochdale Infirmary Care Organisations (COs) from PAHT to the new Northern Care Alliance (NCA) NHS Foundation Trust due to complete in Autumn 2021. PAHT will cease to exist as a statutory entity.

Clinical Quality Leads (CQL) – now meet quarterly focusing on supporting CO to deliver key priorities relating to safety, experience and quality services linked to themes across care of deteriorating patient, sepsis, and treatment delays with a forward workplan developed.

### **Mortality**

Fairfield General Hospital (FGH) Mortality Oversight Group continues to progress work on reducing unexpected deaths. Work is underway with Dr Foster to review the data used to calculate Hospital Standardised Mortality Ratios (HSMR) rates to ensure that this is robust as on review current HSMR may be over-estimated.

### **52 weeks waiting list management**

Waiting List Surveillance Groups set up with clinical validation Standard Operating Procedures (SOPs) in place across the COs.

Waiting times are being reviewed to prioritise patients allowing for changes in conditions and urgent case management. The processes around delays and treatments and the level of harms are being reviewed and recorded on Datix. For any potential harms identified further investigations are underway.

There are themes around patients choosing to defer or cancel procedures due to the pandemic, particularly related to self-isolation/swabbing pre-admission. Currently work is ongoing on processes and procedures and looking to further identify how the issues can be resolved. Patients waits should not be disadvantage in these instances.

#### Learning from Deaths reports

The focus is on Structured Judgement Reviews (SJRs). However, SJR is not a helpful tool when reviewing nosocomial deaths compared with Serious Incident (SI) investigations which is better for identifying issues with infection control and social distancing requirements.

Increasing the Medical Examiner function should further reduce the requirement for coronial investigations. The service is planned to be at full capacity by September 2021 and extended to non-acute, community deaths by April 2022. Currently, around 55-60% deaths are medical examiner reviews with the remaining being coronial deaths.

Work ongoing with completion of SJRs for 13 patients that were reported with learning disabilities, with a request for focused information to be shared with CCGs. Further work underway to clear backlog of outstanding reviews.

The quality of SJRs is planned to be reviewed. SJRs are completed jointly between medics and non-medical staff to add assurance to the process followed across NCA.

#### FGH Critical Care

The risks around medical staffing and critical care are being handled jointly between FGH and Salford Royal Foundation Trust. The staffing risks have decreased significantly due to this.

#### Ambulance transfers

Issues highlighted with ambulance resourcing across the North East Sector and impact on inter-hospital transfers. Assurances to be sought from NWAS through the commissioner Quality and Safety Group.

#### Primary Secondary Care Interface Group (PSCIG)

Primary Secondary Care Interface group was re-established in May 2021. Terms of Reference focus on how lessons can be learned from COVID and building on joint working alongside recommendations that have come out from the previous British Medical Association (BMA) guidance. Future papers to be shared at this group for information or any other actions that can provide assurances going forward.

#### **Northern Care Alliance (NCA) Community Services**

#### Skills for Health – Wound Care Framework

Through the Community SI Panel, the NCA Pressure Ulcer (PU) Collaboratives are being asked to ensure that future assurances cover the requirements and learning into Integrated Neighbourhood Teams.

Quality Improvement work is being undertaken relating to pu/wound care alongside an improved reporting culture has seen a positive increase in SI reporting. This is being followed up at the Community SI Panel to understand joint working between community services teams ensuring service resilience.

### **Pennine Care Foundation Trust Mental Health Services**

#### **Community Mental health Team (CMHT) and Healthy Young Minds (HYM)**

Waiting list, caseload size and staffing pressures continue with senior level discussions in hand to support and mitigate against delays in patient care.

#### **Single Sex Accommodation Plan**

Following Bury's 2 x adult acute wards becoming single gender in January 2021, the planned change across the Trust footprint for older people's acute wards is now due for completion end of September 2021 (allowing for individual patient need and flow through to discharge).

An older person in Bury requiring inpatient mental health care will be admitted to one of four wards across the NES, depending on their gender and condition:

Ramsbottom ward, Bury - NES female patients with organic conditions

Rowan ward, Oldham - NES female patients with functional conditions

Cedar ward, Oldham - NES male patients with organic conditions

Beech ward, Rochdale - NES male patients with functional conditions

### **NWAS**

Positive discussion at Nursing and Care Home Forum with Safeguarding Leads across the health economy to understand key issues relating to transfers of residents for both planned and emergency transport.

### **Nursing/Care Homes**

Engagement continues with Nursing and Care Homes covering all aspects of patient/resident safety, quality and safeguarding assurance. Significant support provided into specific facilities linked to Care Quality Commission (CQC) requirements. Full detail to be provided in the Safeguarding Dashboard due to be presented to the October Quality and Performance Committee.

### **GP/Dental/Pharmacy/Optometry**

No issues of concern

### **Independent Sector**

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Improvement trajectory maintained, with waiting times for 1<sup>st</sup> appointment and diagnosis reducing  
Remote appointments continuing, with face to face appointments re-starting.  
Building post-diagnostic support model, with additional coaching staff being recruited.

### **Small Value Contracts**

#### Mental Health Services –

Early Break - 'Getting Help Line' (non-urgent/non-clinical support and guidance)

Bury Involvement Group (BIG) - Peer-led crisis service (urgent, non-clinical face to face)

CCG is working with both services to build referral pathways and capture support provided.

### **Continuing Health Care/Complex Care**

CHC database update planned which will integrate with the Local Authority.

CHC and Complex Care Team still under pressure with support from NHSEI and agency staff in place.

Lack of choice of facilities, locally and nationally, impacting on ability to place people in value for money settings.

#### Face Fit Testing

New processes and database set up to ensure all staff are using the appropriate equipment for their roles and reviewed within necessary times frames.

### **COVID19**

Schools testing recommenced for Autumn 2021 term. Support and resources provided but testing managed in-house until end October 2021.

Waterfold testing site closed on 3<sup>rd</sup> September. Mosses and Chesham continue to provide testing capacity for Bury East until end September 2021.

Engaged with plans being developed by Department of Health and Social Care (DHSC) for daily contact tracing to enable close contacts to work instead of isolate.

Pharmacy assisted testing plans being developed and expressions of interest being requested.

Vaccination uptake continues to progress with over 132,000 people in Bury having received their first dose and 118,000 being fully vaccinated. PCNs leading on the delivery of vaccinations across locations in Bury.

Working with Care Homes to understand implications of 11<sup>th</sup> November deadline for staff requiring working or attending facilities to be double vaccinated.

### **Key quality improvements in this reporting period**

Learning Disability webinars for provided for primary care colleagues supporting identification and review processes for patients with LD on practice registers.

### **Lessons for wider sharing (including system wide learning)**

Continued focus on joint working across the CCG/LA with progression to Greater Manchester Integrated Care System (ICS).

Joint working across GM to support with COVID19 testing provision in conjunction with Public Health leads.

### **Chief Nursing Officer Silver Award**

Gorsey Clough - the Registered Manager of Gorsey Clough Craig Priestley has recently been awarded a Chief Nursing Officer Silver Award. The award presented to Craig by Ruth May, Chief Nursing Officer NHSE. This is only the second time this award has been received within GM and highlights the high level of care, hard work, achievement, and partnership working Craig and his team have undertaken during the challenging months of the COVID pandemic.

### **Recommendation**

The committee is asked to accept the contents of this report and confirm any actions required.

Ends