

Meeting: Governing Body			
Meeting Date	24 March 2021	Action	Receive
Item No.	10b	Confidential	No
Title	Quality Report		
Presented By	Catherine Jackson (Executive Nurse, Director of Nursing & Quality)		
Author	Catherine Jackson (Executive Nurse, Director of Nursing & Quality) Carolyn Trembath (Head of Quality) Sarah Tomlinson (Quality & Performance Manager)		
Clinical Lead	Catherine Jackson/Cathy Fines		

Executive Summary
The Quality Dashboard provides an overview of: <ul style="list-style-type: none"> Provider updates General practice CHC/Independent Sector/Social Care Key achievements and improvements
Recommendations
It is recommended the Quality and Performance Committee: <ul style="list-style-type: none"> • Consider this report and provide feedback • Note the focus areas raised • Note recommendations made and take action where required

Links to CCG Strategic Objectives	
SO1 People and Place To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life	<input checked="" type="checkbox"/>
SO2 Inclusive Growth To increase the productivity of Burys economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value	<input type="checkbox"/>
SO3 Budget To deliver a balanced budget for 2019/20	<input type="checkbox"/>
SO4 Staff Wellbeing To increase the involvement and wellbeing of all staff in scope of the OCO	<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 [Insert Risk Number and Detail Here]

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"/>
Has an 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 checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
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 checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

If you have ticked yes provide details here. If you are unsure seek advice from Lisa Featherstone, Email - lisafeatherstone@nhs.net about the risk register.

Governance and Reporting

Meeting	Date	Outcome
Quality & Performance Committee	10/03/2021	Recommended to share with Governing Body

Date: 24th March 2021
Title: Quality Report
Author: Catherine Jackson, Director of Nursing & Quality Improvement
Carolyn Trembath, Head of Quality
Sarah Tomlinson, Quality Assurance Manager

KEY POINTS/ISSUES OF CONCERN

Pennine Acute Hospitals Trust (PAHT)

The transaction of North Manchester General Hospital (NMGH) from PAHT to Manchester University NHS Foundation Trust (MFT) has been delayed until later in 2021. PAHT will transact to Salford Royal NHS Foundation Trust (SRFT) and a new statutory organisation will be created Northern Care Alliance (NCA) NHS Foundation Trust encompassing both Trusts. PAHT will cease to exist as a statutory entity.

Quality assurance requirements for future shared learned, with a continued focus on serious incidents (SI), is being agreed with Manchester Health and Care Commissioning (MHCC) and Salford CCG.

Monthly Contract Performance Reports are being produced even in light of the 'reduction in the burden of reporting' guidance issued by NHS England/Improvement in March 2020.

Care Organisations (CO)

- CCG attendance at CO internal assurance meetings commenced in February 2021.

COVID19

- Fairfield General Hospital (FGH) numbers of COVID admissions falling in line with other Greater Manchester (GM) hospitals.
- Emergency Department (ED) work underway to reinstate the children's waiting area that has been closed due to COVID pathways being in place in the department. This work is an urgent priority.
- Critical Care medical cover remains a risk as running on high numbers of temporary/locum staff. Mitigation plan and support from NCA Group in place.

Patient Experience

- Trust have purchased 45 iPads to better collect and respond to patient experience with increased investment in Patient Experience staff to lead this work,

Infection Prevention and Control

- Low numbers of Clostridium Difficile (CDI) and no Methicillin-Resistant Staphylococcus Aureus (MRSA) in hospital and community settings.

Waiting List Management

- Regular updates on elective/planned activity being provided through the daily Integrated System Pressure NCA Management Meeting and the bi-weekly Elective Recovery and Transformation.
- Access to diagnostic investigations at FGH steady as clinical initiatives are being used to manage waiting lists.

Northern Care Alliance (NCA) Community Services

Community Services will be similarly affected by the transaction of PAHT to NCA NHS Foundation Trust.

- Quarterly Governance reports continue to be produced in light of the 'reduction in the burden of reporting' guidance issued by NHSE/I in March 2020.
- Report covers incident reporting, complaints, patient experience and risk.

NCA Flu and Covid-19 staff vaccination strategy in place.

COVID19

- Joint working with care homes for management of healthcare professional visits to residents.

Staff Testing

- Business continuity plans in place for staff absences due to need for self-isolation/shielding.

Pennine Care Foundation Trust Mental Health Services

Access service (Single Point Of Entry -SPOE)

- New direct consultant access service for GPs working well
- Homelessness pathway being developed
- Collaborative & constructive working relationship and pathway developed with Bury Getting Help Line provided by Early Break.

Urgent Care by Appointment

- Significant number of people diverted from ED with system wide benefits & positive qualitative patient feedback

A&E (Accident & Emergency) 4-hour target (95%)

- Achieved for first time in 12 months

Same sex/single gender accommodation

- Bury's 2 x working age adult wards now changed to single gender

Community Mental Health Team (CMHT)

- Pathway for service access updated and working well

Covid 19 vaccination & Oximetry@home

- Community Mental Health and Community Learning Disability Teams both increasing their offer to support patients to engage with both programmes.

North West Ambulance Service (NWAS)

- SIs being reported and managed between the abridged Clinical and Quality oversight monthly meetings
- Staff testing and vaccination programmes well established.

- National ambulance quality indicators still being reported.
- Lessons learned sharing in place for reported incidents.

Residential/Nursing Homes

- Local support for Care Homes to enable face to face relative visits through Lateral Flow Testing in place in line with easing of lockdown restrictions from 8th March.
- GM-wide approach also being developed with agreement from Directors of Public Health.

General Practice

COVID19

- Primary Care Networks delivering COVID19 vaccination services across the borough at Bealeys, Elizabethan Suite, Prestwich Walk in Centre and Ramsbottom.
- Programme management support from the GP Federation. Currently delivering on track and meeting targets. Vaccine delivery still problematic.
- Fortnightly webinars for practice staff for COVID19 updates.

Small Value Contracts

- Quality assurance support visits being provided to small community older people, mental health, learning disability and Black, Asian and Minority Ethnic (BAME) service providers, to improve their confidence in re-starting face to face services.

Continuing Health Care (CHC)/Complex Care

- CHC assessments backlog being addressed. Good progress being made against the trajectory, no gaps to escalate

Social Care

- Free influenza vaccine offer to all adult social care staff.

Key quality improvements in this reporting period

- Continued focus on Quality Assurance with providers with reduction in burden on reporting.
- Continued use of Teams, to ensure services can stay operational with appropriate support.
- Wider joint working across the CCG/Council teams
- Engagement and learning from the GM Locality Testing Leads Meeting.
- Significant increase in vaccination and testing across the borough.
- Wide engagement with local education providers and business to enable regular rapid COVID testing for all critical workers.
- Ongoing joint working with BARDOC to embed wider testing established with support from the military during January and February 2021.
- Housebound COVID19 vaccination programme established targeting clinically vulnerable residents.

Lessons for wider sharing (including system wide learning)

- NCA improvement programme around nutrition & hydration in place and having a positive impact on patient care.

Any awards / areas of good practice to be recognised

- Bury Community Services achieving 100% of Looked After Children health assessments, both in borough and out of borough currently.

End