

Meeting of the Governing Body

Date: 3rd July 2018

Time: 1.30pm

Location: the Vassall Centre, Gill Avenue, Downend, BS16 2QQ

Agenda item: 8.1 Development Plan for the Quality Strategy

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1. Purpose

This report outlines the proposed steps that will be undertaken to engage and communicate with key stakeholders, patients and the public to develop and launch the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) Quality Strategy 2018 – 2021.

This will be the first quality strategy for the newly formed BNSSG CCG. The overall aims of the Quality Strategy will be to

- Set out the vision and strategy to deliver high quality care across our commissioned services
- Provide assurance that BNSSG CCG will meet its responsibilities in terms of securing assurance and continuous improvement in the quality of our commissioned services
- Document the key priorities for achievement that have been agreed through consultation with patients and the public, stakeholders and commissioners.
- Describe our responsibilities, approach, governance and systems to enable and promote quality across the local health economy

The purpose of the paper is to seek approval from the Governing Body for the plan for the development of the Quality Strategy.

2. Background

The Five Year Forward view (NHS England 2014) identified the challenges to healthcare that include changes to health needs, technology and care needs and financial pressures that have set the vision for the development of Sustainability and Transformation Plans (STP) to deliver future healthcare.

The mission of the BNSSG CCG is to shape better health for the population of Bristol, North Somerset and South Gloucestershire that it serves. The focus of the STP is to ensure provision of high quality services that meet the needs of the population and addresses the challenges to healthcare. This will also challenge the way that the CCG both improves and assures the quality of health services. The quality strategy will ensure that quality is placed at the centre of the CCGs planning and procuring the best possible and high quality health services for our population. In order to execute this commitment and improve the quality of health services, the CCG ascribes to a definition of quality that defines high quality care in three equally important parts.

1. Clinical effectiveness, where high quality care is evidence based care. This entails employing processes which are clinically proven to be the most effective in improving the health of an individual
2. Safety, where high quality care is delivered in a safe environment.
3. Patient experience, where high quality care gives an individual as positive an experience of treatment and recovery as possible including acknowledging the wants or needs of individuals, and treating them with compassion, dignity and respect.

Managing performance indicators such as mandatory national targets rests with the commissioning teams and is not addressed through the quality strategy. The quality strategy should identify the key priorities that will improve the safety of the care that is delivered to patients and improve their experiences of that care.

2.1 Quality Governance

The BNSSG CCG Governing Body provides leadership and guidance as well as providing the formal control and expertise in administering the work of the CCG. The CCG Governing Body is supported by 6 sub committees that undertake and focus on specific business areas including Audit, Finance, Quality and Governance, Clinical Operational Executive, Improving Patient Experience and Remuneration. The Quality committee oversees the systems and processes for Quality and Governance on behalf of the Governing Body.

Quality is everybody's responsibility within the CCG and all directorates should be involved in improving quality.

The Quality Directorate drives the focus for quality improvement and assurance, ensuring that reports on progress against the three dimensions of quality drawn from all directorates are provided to the BNSSG CCG Quality committee. This includes escalation of issues and assurance reports regarding the delivery of provider quality performance.

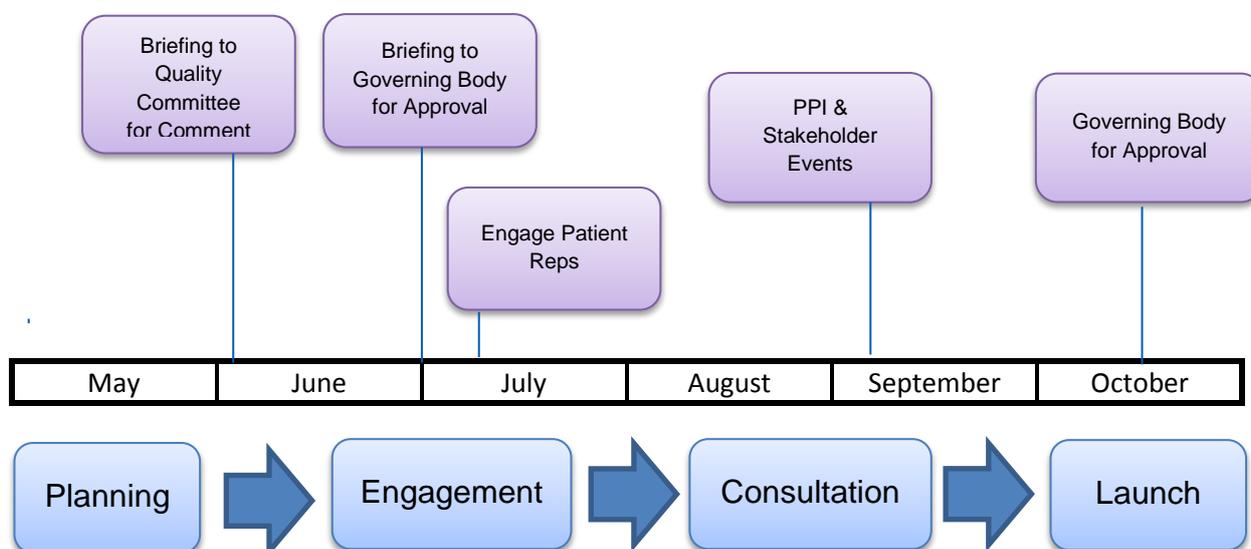
2.2 Principles

The suggested principles to underpin the development of the quality strategy will be the BNSSG CCG key values:

- Put people's needs at the heart of our decision making
- Ensure the voice of local people shapes what we do
- Be open and transparent, doing what we say we will
- Work as good partners and system leaders
- Value our staff
- Seek best value in the application of our resources

This definition of quality alongside the principles will underpin the development of the strategy and will be used during discussion with stakeholders, patients and the public to test out the fitness of the strategy to meet the agreed objectives.

3. Key Activity Timeline



4. Key Priorities

The CCG will engage with patients, the public, stakeholders and commissioners through engagement events to ensure that the quality key priorities support our aim to deliver continuous quality improvement across our commissioned services and provide positive patient experiences

Key priorities (not in priority order) that will be addressed by the quality strategy include:

Quality

- **Primary Care**

In April 2018, BNSSG CCG became responsible for the commissioning of primary care medical services. To ensure the quality of General Practice primary care services our intention is to establish primary care quality metrics.

We will support GP practices to achieve and maintain good or outstanding CQC ratings. Of our 87 practices currently one GP practice has an overall rating of “Requires Improvement”, 84 have an overall rating of “Good”, and 2 are rated “Outstanding”. We will work closely with primary care to achieve this aim across all practices. Through the development of GP Quality leads within practices or at locality level we want to promote the sharing of learning and best practice to support quality improvement.

We will work with the practice nurse network supporting delivery of the practice nurse 10 point plan (NHS England 2017). Our focus will be on supporting the delivery of high quality, patient centred care for patients.

- **Care Homes**

Ensuring quality services are developed and maintained within the care home sector, our intention is to develop a robust process to monitor quality for the Care Homes with Nursing that we commission. We intend to link with partners across health and social care support the unnecessary admission of patients to acute hospitals. This will include further development of the Care Home Quality Dashboard and assurance framework to support quality improvement

- **Multiagency Approach to tackling Healthcare Associated Infections**

BNSSG CCG has seen an increase in the number of reported cases of healthcare acquired MRSA bacteraemia. Research, undertaken by Public Health England, has identified that the increase in MRSA was connected to a specific genetic type of MRSA found within the community of people who inject drugs. Our intention is to ensure sustained emphasis on reducing healthcare associated infections including MRSA, Clostridium difficile and Escherichia coli bacteraemia is maintained. We will undertake a review of the Healthcare Associated Infection Group and associated task and finish groups that will include the introduction of a new local post infection review process that will focus on shared learning, action and intervention with the aim of reducing MRSA to be in line with other CCGs across the South West.

- **Serious Incidents/Never Events**

Never Events are defined by NHS Improvement 2017 as ‘Serious Incidents that are wholly preventable because guidance or safety recommendations that provide strong systemic protective barriers are available at a national level and should have been implemented by all healthcare providers’.

Fourteen Never Events were reported by Providers of commissioned services in 2017/18. Following implementation of a single BNSSG CCG panel, our intention is to engage with our providers to explore and develop a patient safety faculty to ensure that system wide learning and associated action planning from serious incidents and never events takes place with the aim of eliminating the occurrence of never events.

- **Patient Experience & Engagement**

BNSSG CCGs recognise that good patient experience is a fundamental component of good quality care. Understanding patients’ views of commissioned services including feedback on existing service reviews and new service proposals is an essential feature of monitoring the services commissioned. Our key challenges are not only how to obtain patient experience data, but also how to use it intelligently to lead to real improvements in patient experience. By analysing and triangulating patient experience information, themes and trends can be ascertained to understand the quality of services provided.

We are using a range of mechanisms to gather feedback from patients including complaints and compliments, concerns, patient surveys, Care Quality Commission (CQC) patient experience feedback portal/inspection reports, Patient Reported Outcome Measures (PROMs), Healthwatch reports and the Friends and Family Test (FFT), all of which provide a valuable source of information about the quality of care patients have experienced. Our ambition is to extend the use of PROMs and Patient Reported Experience Measures (PREMs) to achieve an increased focus on patient experience outcomes.

Our future quality strategy will include exploring the use of social media and working with Partnership and Public Engagement colleagues in the involvement of patients. Inequalities in access to care and outcomes achieved between patient groups such as black and ethnic minority and hard to reach groups, and the degree of involvement and patient choice, are known determinants that impact on the patients experience of care. We will also be working alongside commissioners to ensure access and equity in all of our services through alignment of equality impact assessment processes and in

considering how services can be better tailored to our population and patient need to give a better patient experience.

- **Improving Quality through investment**

Nationally there are currently two schemes which seek to incentivise the improvement of quality in providers and commissioners. These are:

1. The Quality Premium (QP) scheme which is about rewarding Clinical Commissioning Groups (CCGs) for delivering improvements in the quality of the services they commission to improve patient health outcomes, reduce inequalities in health outcomes and improve access to services;
2. Commissioning for Quality and Innovation (CQUIN) offered on an annual basis to all providers of healthcare services commissioned under the NHS standard contract and accounts for 2.5% of a provider's total income.

Together these two schemes offer a powerful opportunity to work at scale and on a system wide basis to facilitate change. Our future quality strategy will include a plan to align this work across the BNSSG system to attain optimal success in improving the services we offer to patients of BNSSG

- **Adult Continuing Healthcare**

The CCG is undertaking a comprehensive review of Adult Continuing Healthcare CHC processes and delivery. The review will focus on ensuring National Framework compliance and delivering the revised National Framework for CHC from 1 October 2018 with agreed written protocols and processes in place with Bristol, North Somerset and South Gloucestershire Local Authorities and current CHC function providers.

The aim of the review is to improve whole systems relationships including local operating protocols with Local Authorities, in relation to quality assurance of providers to ensure the quality of an individual's care provision. The Adult CHC function of the CCG will continue to work to improve both patient and their relatives' experience of the CHC process.

Our future quality strategy will incorporate close partnership working with the Local Authority to achieve delivery of the special educational needs and disability (SEND) code of practice and to continue to improve support and high quality care for children with complex health needs within Children Continuing Care.

- **Implementation of the BNSSG Multiagency Strategy for the Prevention and Management of Pressure Injuries**

Pressure injuries occur in all provider care settings including patients' homes. Each pressure injury that occurs in hospital is estimated to add an additional £4000 to care and represents a major burden of sickness and reduced quality of life for people and their carers (NHS Improvement Stop the Pressure 2017) Pressure Injuries account for a significant proportion of all incidents reported across the Bristol, North Somerset and South Gloucestershire area. The CCG will lead the Programme Board to deliver the multiagency strategy, ensuring a consistent approach to reduce the number of Grade 2, 3 and 4 pressure injury incidents across BNSSG care providers.

- **Urgent Care**

BNSSG CCG is recommissioning integrated urgent care to ensure that the right treatment and solutions are reached for patients who utilise the urgent and emergency care services within the pathway. Our intention is to support the development and implementation of this strategy, ensuring that patients receive high quality services and are kept safe from harm. We will work with providers across the healthcare system to deliver NEWS2, use of the ED safety checklist and ensure the requisite quality oversight is in place to identify key themes, share learning and take action to deliver high quality care and improve patient experiences.

- **Provider Assurance**

The CCG has a duty to secure continuous improvement in the outcomes that are achieved and, in particular, outcomes which show the effectiveness of their services, the safety of the services provided, and the quality of the experience of the patient (Health & Social Care Act 2012). The monitoring of provider quality provision and monitoring/review of quality and performance measures across all commissioned services will remain a key focus for the CCG to foster and embed a culture of continual improvement. Triangulation of provider data, regulatory reports, provider intelligence will also inform a programme of observational assurance visits that is responsive to the themes identified through the triangulation of data. Our intention is to plan and deliver a series of assurance visits that will focus on patient experience and include support from members of other BNSSG CCG directorates

Safeguarding

- **Wood Review**

The Wood Review undertaken in 2016 (Department for Education) has identified fundamental changes for the safeguarding arrangements for children across England and Wales. The CCG, Police and Local Authority are

working closely together to develop the new safeguarding arrangements identified through the review that must be in place by April 2019. The CCG is working with partners to apply for funding for the safeguarding early adopters programme to support implementation of the new arrangements. If successful the CCG will lead the project for our partners. Our intention is to ensure that the new arrangements will improve the lives and outcomes for children and their families.

- **Making Safeguarding Personal**

The Making Safeguarding Personal Programme and the Safeguarding Principles are laid out in The Care Act 2014. Our intention is to ensure that safeguarding is person-led and outcome focused so that we engage people on how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving the quality of life, well-being and safe.

Working closely with multiagency partners we will ensure that these principles and the lessons learned from safeguarding adult reviews are acted upon and embedded within health commissioned services. We will monitor this through performance reviews as well as safeguarding supervision.

We will ensure that we have policies and procedures that are in line with a personalised safeguarding approach including strategies to enable staff to deliver this approach and provide support to our commissioned health services.

5. Assuring Quality

From June 2018, a quarterly Quality Improvement Board led by the Director of Nursing & Quality will be in place. Membership of the meeting will be drawn from executive quality leads and Heads of Quality from acute providers, the senior quality team and include the CCG GP lead for Quality. This meeting will enable shared learning and system wide action to address identified quality issues. Escalation of issues from the oversight board will be to the IQPMG with reports on progress and assurance to the Quality Committee.

Individual provider meetings between the CCG Quality Portfolio Lead and the Head of Quality at the provider will continue to be held to discuss individual quality performance concerns with reporting to IQPMG and Quality Committee.

6. Engagement

Patient and public engagement and engagement of our stakeholders and commissioners is requisite in order to develop a strategy that delivers our aims for the quality strategy. We are currently seeking recruitment of 2 patient representatives and information is being circulated to Healthwatch, the Care Forum, Voscur and VANS to invite interested people to nominate themselves. These patient representatives will be invited to work with the quality team to plan and develop the quality strategy.

A series of engagement events and workshops with patients, the public and stakeholders will be planned for July 2018 to consult on the strategy. Our patient representatives will be asked to support these events. The draft strategy will also be placed on the BNSSG CCG website to engage the wider community.

Following consultation the proposed quality strategy will be shared with the Governing Body to approve in September 2018 with the aim of launching the final approved quality strategy in October 2018.

7. Summary and Recommendations

Key to meeting the challenges to the delivery of healthcare to meet changing health needs, technology and care needs and financial pressures during the next three years will be a responsive quality improvement and assurance strategy that is supportive to shaping, responding and adapting to system changes to ensure delivery of continuous quality improvement for example our engagement with the workforce STP.

The plan for the development of the quality strategy and the key priorities to support continuing improvement across BNSSG CCG commissioned services will ensure that the strategy is developed through good engagement with patients, the public, stakeholders and commissioners.

The key priorities shared through this briefing report will provide the focus for consultation and engagement.

Governance arrangements to assure provider quality whilst the quality strategy is being developed will include the planned quality improvement board the SI learning forum, individual provider meetings and assurance visits. Monitoring of provider quality will include close working relationships with regulators and the triangulation of regulatory and other report data.

Escalation of identified issues and concerns will be through the IQPMG to the Quality Committee.

The Governing Body is asked to

- Note the contents of this report
- Approve the plan for the development of the BNSSG CCG Quality Strategy 2018 – 2021

8. Financial Resource Implications

There are no specific financial resource implications in this paper.

9. Legal implications

There are no specific legal implications in this paper. The requirement to secure assurance and continuous improvement in the quality of our commissioned services is detailed in the NHS Constitution.

10. Risk implications

The Quality Improvement Board will ensure senior leadership and a collaborative approach is given to quality improvement across the healthcare system. Escalation of identified risks, issues and associated actions will be reported to the BNSSG CCG Quality committee and by Trusts through internal governance processes.

11. Implications for health inequalities

The aim of the quality strategy is to reduce health inequalities through identification and focus on key priorities to achieve continuous quality improvement and improve patient outcomes. The CCG will engage with patients, the public, stakeholders and commissioners through engagement events to ensure that the key priorities meet this aim.

12. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

The CCG will engage with patients, the public, stakeholders and commissioners through engagement events to ensure that implications for equalities are identified and addressed through the consultation process.

13. Consultation and Communication including Public Involvement

Consultation to develop the quality strategy is outlined within the briefing paper

14. References

NHS England	2014	Five Year Forward View
NHS England	2017	General Practice – Developing confidence, capability and capacity: a ten point action plan for General Practice Nursing
NHS Improvement	2018	Revised Never Events policy and framework and Never Events list 2018
Dept. for Education	2016	Wood Report: Review of the role and functions of Local Safeguarding Children Boards