

NHS North Cumbria CCG Governing Body	Agenda Item
5 December 2018	11

Report from the Quality and Outcomes Assurance Committee held on 7th September 2018 and 2 October 2018

Purpose of the Report								
The purpose of this report is to highlight the key points, risks and assurances from the minutes of the Outcome and Quality Assurance Committee (OQAC) held in September and November 2018.								
Outcome Required:	Approve		Ratify		For Discussion		For Information	X
Assurance Framework Reference:								
As detailed in the Strategic Objectives below.								

Recommendation(s):
The Governing Body is asked to receive the minutes for information and assurance.

Executive Summary:
Governing Body is asked to note that this report includes minutes from the September 2018 meeting as at the time of writing the previous report, the minutes of the meeting had not been ratified. This was due to the 2 October 2018 OQUAC being stood down as it would not have been quorate.
<u>Patient Safety</u>
<u>Safeguarding Assurance</u>
The Safeguarding Annual Report was presented to the Outcomes and Quality Assurance Committee in October 2018 and an overview was provided. The report demonstrates that the CCG fulfilled its statutory duties in relation to safeguarding and children looked after in North Cumbria CCG and for those of its commissioned services during 2017/18.

Key risk were noted in relation to:

- a) the current staffing arrangements in NCCCG as not meeting the minimum staffing requirements outlined in the Revised Accountability and Assurance Framework (2015)
- b) impact of NCCCG staffing on strategic oversight of Children Looked After with CCG self-assessment showing some improvement but still with 8 amber rated standards (previously 9 amber and 3 red)

Despite these challenges the range and number of achievements led and/or coordinated by the safeguarding team were highlighted. The recent Internal Safeguarding Audit Outcome of 'good' provided external validation of this.

Quality in Commissioned Services **NCUHT & CPFT Highlights and Exceptions**

Key Points: (all data is to end of November 2018 unless otherwise stated)

North Cumbria University Hospitals Trust (NCUHT)

Serious Incidents (SIs): In October 2018, NCUHT reported 13 serious incidents which is the highest monthly figure from the last 12 months.

NCUHT was the highest SI reporter in Maternity across the North East and Cumbria region for 2017 and 2018 YTD. NCUHT is also currently ranked highest in 2018 in terms of Maternity SIs as a percentage of total SIs across the region.

SI Performance: The Trust has improved from 15% in September 2018 to 92% in October 2018 for the number of days between an incident being identified and reported on STEIS (the national serious incident reporting tool).

Never Event: A Never Event in the category 'overdose of Insulin due to abbreviations or incorrect device' was declared following an incident on 17 October 2018. Staff acted promptly and the patient has suffered no lasting harm.

MRSA

In November a MRSA Blood Stream Infection was attributed to NCUH.

A multidisciplinary post infection review highlighted that no lapses in care were identified in relation to the MRSA Blood Stream Infection however as the patient died an organisational detailed serious incident review will be undertaken to identify the root cause of the patient's death and to highlight learning that will be shared.

A&E Attendance: Levels of A&E attendance were unexpectedly high in September 2018.

Particular attention is being paid to bed occupancy through the NCCCG Contract Review Group.

Procedures limited clinical value compliance: It has been reported in the September 2018 Joint Integrated Performance Report that only 50% of procedures taking place are compliant. NCUHT is unable to see who has had the correct form filled out prior to the procedure, if GPs are sending patients they should not or if surgeons are doing work they should not. As a system, there is no access to this data and it has been recognised that there is also a huge delay in getting data back.

Key Action: One of the GP Leads is to meet with the NCUH Clinical Lead to address a number of these issues with the relevant support staff.

Quality Dashboard: The Trust is below standard in 6 of the dashboard indicators and is an outlier against 2, their CQC rating in November 2018.

Indicator	Period	Standard	Provider	Trend
Preventing People from Dying Prematurely				
Cancer: 31 day wait (diagnosis to treatment)	Sept-18 Public	96%	94.1%	
Cancer 62 day wait (Urgent GP referrals)	Sept18 – Public	90%	85.7%	
Diagnostics – over 6 week waits	Sept18 – Public	1%	3.9%	
RTT - Incompletes	Sept 18 – Public	92%	84.3%	
Helping people to recover from episodes of ill health or following injury				
A&E 4 hour waits	Oct 18 – Public	95%	91.6%	
Ensuring that people have a positive experience of care				
Cancelled ops – 28 day target	Sept 18 – Public	Zero	13.9%	
Treating and caring for people in a safe environment and protecting them from avoidable harm				
Patient safety alerts open past deadline	Nov 18 – Public	Zero	2	
Alerts from Regulators				
CQC Inspection Rating – Under new approach	Oct 18 - Public	Requires Improvement		

Key Action: The indicators within the NHSE Quality Dashboard are discussed at the Contract meeting and included within the monitoring and assurance reports presented to the IHPQAC on a regular basis, where further assurance is sought regarding improvement plans for those areas with consistent underperformance.

Friends and Family Test:

The Trust continues to exceed in all FFT areas against the national average with the exception of A&E and the staff response.

Survey	Trust result (August	Trust result	National average
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	2018)	(September 2018)	(September 2018)
A&E	80%	81%	86%
Inpatient	80%	96%	96%
Outpatient	80%	98%	93%
Maternity Antenatal	100%	100%	95%
Maternity Birth	98%	99%	96%
Maternity Postnatal/Ward	98%	99%	94%
Maternity Postnatal/community	100%	100%	98%
*Staff Q1	57% (Q4 result)	64%	66%

Safety Thermometer & Harm Free Care:

All pressure ulcers: The 'all pressure ulcers' figure has been steadily rising again from July 2018 with 4.4% of patients with a pressure ulcer in October 2018.

All Falls: The reporting rate for 'All Falls' increased again in October 2018 to 5.5%. It has been steadily rising since July 2018 when the figure was as low as 1.5% and was in line with the National average.

Catheters: October 2018 has seen the lowest number of patients with a catheter since May 2018. 17.3% of patients had a catheter, although this is still well above the National average of 13.8%.

Patients with medicine allergy status documented: October 2018 has seen the lowest number of patients with their allergy status documented since May 2018.

Patients with an omission of a critical medicine: In October 2018 there was a 4% rise in patients with an omission compared to September 2018.

Harm Free Care (Maternity): 100% of patients in November 2018 received combined harm free care.

Cumbria Partnership Foundation Trust (CPFT)

SIRMS: CPFT medication concerns relate to 44% of the previous 12 months reported incidents, but there have been no medication concerns reported during October 2018.

SI Performance: In September 2018 the Trust submitted only 2 of 7 RCAs within the timescale.


Key Action: The NECS Clinical Quality Team meets regularly with the Trust to gain assurance around SI compliance.

In October 2018 the Trust has achieved 83% compliance against the 2 day reporting target

across a 12 month period (October 2017-October 2018).

Quality Dashboard:

In the November 2018 dashboard, Cumbria Partnership NHS Foundation Trust was identified as having 2 outliers as follows:

Indicator	Period	Standards	Provider	Trend
Alerts from Regulators				
Consistency of NRLS Reporting	Sep 18 – provisional	N/A	4	
CQC Inspection Rating	Oct 18 - Public	Requires Improvement		

Safety Thermometer

Patient with a urinary catheter: September 2018 saw the highest number of patients with a catheter since May 2018 with 12.2% of patients compared to 10.3% in August.

Self- Harm in last 72 hours: In September 2018 the figure was at its highest for the past 6 months.

Patients with a new VTE: There have been no patients June-October 2018 with a new VTE.

Friends and Family Test

Survey	Trust Result (August 2018)	Trust result (September 2018)	National average (September 2018)
Mental Health	97%	97%	90%
Community	95%	98%	95%
Staff Q1	66% (Q4 result)	66%	63%

Trust Commissioned Acorn Unit: It has been agreed that the Acorn Unit will be an inpatient service and that this will be picked up in the due diligence process.

West Cumbria CAMHS Team: Following a number of resignations, including from the Team manager, the West Cumbria CAMHS team has been at approximately 50% of establishment at the end of October 2018. Against a backdrop in a dramatic rise in the numbers of children and young people being assessed as needing the service (30% increase over 12 months ago) the CPFT therefore implemented their Business continuity plan drawing on resource from other teams in west Cumbria and elsewhere in the county. This has had an impact on the CAMHS teams in the remainder of the county triggering their stability.

Care Homes

- Dalton Court continues with the Quality Improvements required by CQC, and a re-

assessment visit is awaited. There has been a recent visit by the Council Quality Care Governance Offer who reported good progress against the action plan being made, and a Quality Improvement Process meeting is being planned.

- The Grange, Turning Point was taken into the Quality Improvement Programme in September 2018 due to concerns about recruitment/retention, staffing levels and contracted care hours not being delivered.
- In November the Pennine Lodge QUIP meeting confirmed that the care home has made a number of quality improvements and provided an updated action plan to evidence this however there are still a number of quality concerns that need addressed such as leadership and staff training. The group agreed that the care home will remain under formal QUIP and the next meeting will be held in December. It is expected that CQC will make an unannounced visit in November/December.

Primary Care

No exceptions or specific issues to report.

CCG Quality Exceptions

Key Points

NCUHT was the highest SI reporter in Maternity across the North East and Cumbria region for 2017 and 2018 YTD. NCUHT is also currently ranked highest in 2018 in terms of Maternity SIs as a percentage of total SIs across the region.

Implications/Actions for Public and Patient Engagement:

Nil known at this stage.

Financial Impact on the CCG:

Nil known at this stage.

Implications/Actions for Public and Patient Engagement:

None.

Financial Impact on the CCG:

None.

Strategic Objective(s) supported by this paper:	Please select (X)
Support continuous quality improvement within existing services including General Practice	X
Commission a range of health services, including an increasing range of integrated services, appropriate to our population's needs	
Develop our system leadership role (in the context of an integrated health and	X

Strategic Objective(s) supported by this paper:	Please select (X)
care system) and our effectiveness as a partner	
Continuously improve our organisation and support our staff to excel	

Impact assessment: (Including Health, Equality, Diversity and Human Rights)	N/A
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Conflicts of Interest Describe any possible Conflicts of interest associated with this paper, and how they will be managed	N/A
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