

<b>NHS North Cumbria CCG Governing Body</b>	<b>Agenda Item</b>  <b>11</b>
<b>3 April 2019</b>	

### Quality Exceptions Report

<b>Purpose of the Report</b>								
The purpose of this report is to highlight key exceptions in relation to quality of commissioned services, and to provide assurance.								
<b>Outcome Required:</b>	Approve		Ratify		For Discussion		For Information	<b>X</b>
<b>Assurance Framework Reference:</b>								
As detailed in the Strategic Objectives below.								

<b>Recommendation(s):</b>
The meeting is asked to receive the exceptions report for information and assurance.

<b>Executive Summary:</b>
<p><b>North Cumbria Acute NHS Trust</b></p> <p><b>Falls Management</b> – NCUHT has reported a YTD reduction of 35.85% in falls, and also reduction in harms from falls, with only 6 (1.8%) of the 337 falls with harm in Q3. Key themes included increased acuity, staffing levels and communication.</p> <p><b>Key Action:</b> A Trust wide falls prevention action plan is in place. The Trust is looking to appoint permanently into the falls prevention post, it is anticipated this role may also support work in within CPFT thus strengthening cross-trust learning and actions.</p> <p><b>Pressure damage</b> – a Trust wide ‘pressure reduction damage improvement plan’ is in place, and in the YTD there has been a reduction of 78.6%</p> <p><b>Key Action:</b> The North Cumbria System Quality assurance Committee will receive a thematic report Pressure damage and falls for assurance of learning.</p> <p><b>Two week waits &amp; urgent referrals:</b> delivery for the constitutional targets across a number of services including Diagnostics, Breast, Urology, Cardiology, Paediatrics Gynaecology and</p>

Gastroenterology are currently not being met.

**Key Action:** the Trust is being monitored through the contract review process, and assurance being sought to ensure that recovery plans are in place.

### **Cumbria Partnership Foundation Trust**

**CPFT Serious Incident Performance:** Although extensions were requested, only 10% of RCA reports due in Q3 were received within the 60 day target.

**Key Action:** The Trust has agreed to liaise with other Mental Health providers to learn from their system and processes to further understand how they improve on the 60day reporting target. Performance is being monitored through the SQAC.

**CAMHS:** CAMHS services remain challenged due to vacancies, maternity leave and sickness, NTW continue to provide support and oversight across the services. To Note the CAMHS Crisis and Intervention Service (CAIS) have put specific measures in place to respond to young people presenting in crisis in Accident and Emergency, on paediatric and medical wards, with assurance being provided that a full service will be available from April 2019.

**Key Action:** SQAC to continue to seek assurance on a monthly basis.

### **North West Ambulance Service:**

The CCG now receive performance information pertaining to the key standards relating to ambulance waiting times; it should be noted that across North Cumbria the service is performing better than other areas, due to the implementation of rapid response cars and how NWS integrate with other organisations/services to avoid hospital admissions.

**Key Action:** NWS to present SQAC A 6 monthly update.

### **Cumbria Clinical Commissioning Group**

**Learning from Serious Incidents:** The Serious Incident Closure Panel has been asked by the SQAC to consider 'human factors' when reviewing 60 day reports and to collate themes and trends.

**LeDer - Learning Disability Mortality Reviews:** There is a 12 month backlog of cases awaiting review due to a lack of reviewers. To note from April the CCG national target for completed reviews within six months is 75%.

**Key Action:** The CCG have supported colleagues from the third sector to train as reviewers and supported them to commence reviews by giving them a buddy. The numbers outstanding reviews are being monitored through the North Cumbria LeDeR group and the SQAC. In addition to ensure system learning completed reviews are being shared with the Adult Safeguarding Board to facilitate the development of five minute briefings for the system.

### **Care Homes**

Two Nursing Homes and one Supported Living Home remain in the Quality Improvement Process; all three are making good progress with the recovery plans in place. Further assurance visits are planned to review progress and make recommendations as to future monitoring.

The CCG are part of the NHS England Enhanced Health in Care Home project. This is a low cost high impact project that is focused on improving health and well-being of residents in care homes, nursing homes, assisted living sites and those who require support to live independently in the community or who are at risk of losing their independence. Initiatives already in process include the roll out of:

**React to Red** – a scheme to reduce pressure damage

**Hospital Transfer Pathway (Red Bag Scheme)** – A scheme that supports the sharing of key information between homes and hospital - 100% (16) Nursing homes 76% (52/68) residential homes have been met with and have received information / training packs and the red bags.

Further work is being developed to roll out the following initiatives:

- Capacity Tracker – Live information on available beds across both nursing and residential settings
- Nhs.net – all nursing and residential homes to be offered an nhs.net email to facilitate a secure means of communication between homes and hospital

The CCG are holding two Care home conferences in April / May to engage further with homes on the above projects.

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

<b>Impact assessment:</b> (Including Health, Equality, Diversity and Human Rights)	N/A
---	-----

<b>Conflicts of Interest</b> Describe any possible Conflicts of interest associated with this paper, and how they will be managed	Anna Stabler is currently seconded into NCCCG from NCUHT. This report has been compiled by the NECSU and the Senior Nurses in the CCG Nursing and Quality team to ensure no omissions of information pertain to NCUH.
--	---

<b>Lead Director</b>	Anna Stabler, Director of Nursing & Quality
<b>Presented By</b>	Anna Stabler, Director of Nursing & Quality
<b>Contact Details</b>	Anna.stabler@nhs.net
<b>Date Report Written</b>	4 March 2019

