

**NHS QUALITY ACCOUNTS – RESPONDING TO REQUEST TO COMMENT**

*To:* **HEALTH COMMITTEE**

*Meeting Date:* **14<sup>th</sup> June 2017**

*From* **The Monitoring Officer**

*Electoral division(s):* **All**

*Forward Plan ref:* **Not applicable**

*Purpose:* **For the Committee, as part of its Health Scrutiny function, to agree the draft response statements on the Quality Accounts provided by NHS Provider Trusts.**

*Recommendation:* **The Health Committee is asked to note the requirement to comment on Quality Accounts and to**

**a) note the responses sent to the NHS Trusts (Appendix A)**

**b) agree the process to responding to Quality Accounts for 2017/18 set out in paragraphs 4.2 and 4.3**

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## **1. BACKGROUND**

- 1.1 NHS Healthcare providers are required under the Health Act 2009 to produce an annual Quality Account report. A Quality Account is a report about the quality of services by an NHS healthcare provider
- 1.2 Quality Accounts are an important way for local NHS services to report on quality and show improvements in the services they deliver to local communities and stakeholders. The quality of the services is measured by looking at patient safety, the effectiveness of treatments that patients receive and patient feedback about the care provided.
- 1.3 This paper outlines the proposed response to the Quality Accounts received by the Health Committee and the internal deadlines to respond to the NHS Trusts.

## **2. MAIN ISSUES**

- 2.1 It is a requirement for NHS Healthcare providers to send to the Health Committee in its Overview and Scrutiny function a copy of their Quality Account for information or comment. Statements from Healthwatch and Health Overview and Scrutiny Committees must be included in the published version.
- 2.2 NHS Healthcare providers are required to submit their final Quality Account to the Secretary of State by 30th June each year. For foundation trusts the Quality Accounts are required to be submitted to NHS Improvement (previously Monitor) by 31st May. However each provider has internal deadlines for receipt of any comments from relevant statutory consultees.
- 2.3 The timing of responding to the Quality Account deadlines was particularly difficult this year because of County Council elections. Following the elections on the 4th May and the start of the new four-year Council, the Health Committee was not meeting again until 8th June and the announcement of the General Election postponed this meeting until 14th June 2017.
- 2.4 Under the committee system of governance, it is not possible to delegate decisions to individual elected members or groups of members, but scrutiny regulations require that scrutiny be carried out by elected members and not delegated to officers.
- 2.5 At the 16th March meeting it was agreed to delegate approval of the responses to the Quality Accounts to the Head of Public Health Business Programmes acting in consultation with, and in accordance with the views of, members of the Committee (where a response was required before 4th May) or (for later response deadlines) such members of the present Committee as were still elected members of Council following the elections on 4th May.

### **3.0 RESPONSES TO QUALITY ACCOUNTS**

- 3.1 At the Health Committee meeting on 16th March 2017 priority was given to respond to Quality Accounts received from NHS trusts that had attended Health Committee meetings over the last year. It was agreed a response to Trusts that had not been scrutinised by the committee would not be prioritised.
- 3.2 Table 1 Details the Quality Accounts received and associated deadlines to respond.

**Table 1: Quality Accounts 2016/17**

<b>Organisation</b>	<b>Statutory Submission date for the Trust</b>	<b>Date received Quality Account</b>	<b>Date requested to respond to Trust</b>	<b>Response completed by Health Committee</b>
Cambridgeshire University Hospital Foundation Trust (CUH)	31 <sup>st</sup> May 2017	3 <sup>rd</sup> April 2017	24 <sup>th</sup> April 2017	Yes (See Appendix 1)
Cambridgeshire & Peterborough Foundation Trust (CPFT)	31 <sup>st</sup> May 2017	10 <sup>th</sup> May 2017	19 <sup>th</sup> May 2017	Yes (See Appendix 1)
Papworth Hospital Foundation Trust	31 <sup>st</sup> May 2017	18 <sup>th</sup> April 2017	19 <sup>th</sup> May 2017	No response sent.
Cambridgeshire Community Services	30 <sup>th</sup> June 2017	27 <sup>th</sup> April 2017	30 <sup>th</sup> May 2017	No response sent.
Hinchingbrooke Health Care NHS Trust (HHCT)	30 <sup>th</sup> June 2017	27 <sup>th</sup> April 2017	No Date	Yes (See Appendix 1)
Peterborough & Stamford Hospital Foundation Trust (PSHFT)	31 <sup>st</sup> May 2017	21 <sup>st</sup> April 2017	3 <sup>rd</sup> May 2017 with invitation to stakeholder event 4 <sup>th</sup> May	No response sent.

### **4.0 ESTABLISHING A LOCAL PROCESS FOR RECEIPT OF QUALITY ACCOUNTS 2017/18**

- 4.1 The deadlines to respond to Quality Accounts this year have been even tighter than in previous years. From the point of receipt of the draft Quality Accounts to the internal deadlines set by the Trusts has not allowed the committee the opportunity to discuss a response.
- 4.2 In preparation for responding to NHS Quality Accounts for 2017/18 a process similar to that agreed for this year should be considered. It is proposed that the committee establish a task and finish group to comment on the draft Quality Accounts.

- 4.3 The committee delegate approval for the Head of Public Health Business Programmes to respond to the Quality Accounts. Responses can then be reported back to the committee at their following meeting.

## **5.0. SIGNIFICANT IMPLICATIONS**

### **5.1 Resource Implications**

Officer time in preparing a paper for the Committee.

### **5.2 Statutory, Risk and Legal Implications**

These are outlined in a paper on the Health Committee powers and duties, which was considered by the Committee on 29th May 2014.

### **5.3 Equality and Diversity Implications**

There may be equality and diversity issues to be considered in relation to the quality accounts.

### **5.4 Engagement and Consultation Implications**

There may be engagement and consultation issues to be considered in relation to the quality accounts.

### **5.5 Localism and Local Member Involvement**

There may be relevant local issues in relation to the quality accounts.

### **5.6 Public Health Implications**

The quality of services at local healthcare providers will impact on public health

<b>Source Documents</b>	<b>Location</b>
NHS Choices information on Quality Accounts	<a href="http://www.nhs.uk/aboutNHSChoices/professionals/healthandcareprofessionals/quality-accounts/Pages/about-quality-accounts.aspx">http://www.nhs.uk/aboutNHSChoices/professionals/healthandcareprofessionals/quality-accounts/Pages/about-quality-accounts.aspx</a>
Reports to and minutes of Health Committee	<a href="http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Committee.aspx?committeeID=76">http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Committee.aspx?committeeID=76</a>

## **APPENDIX 1**

### **CAMBRIDGE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST - QUALITY ACCOUNT 2016/17**

#### **STATEMENT BY CAMBRIDGESHIRE COUNTY COUNCIL - HEALTH COMMITTEE**

The Health Committee within its scrutiny capacity has been encouraged by the Trust's openness, engagement and willingness to listen to external scrutiny. The committee has received presentations and attendance from the Trust at public Health Scrutiny meetings on 12<sup>th</sup> May and 15<sup>th</sup> December 2016. Minutes of these discussion are available from the link below:

[https://cmis.cambridgeshire.gov.uk/ccclive/Committees/tabid/62/ctl/ViewCMIS\\_CommitteeDetails/mid/381/id/6/Default.aspx](https://cmis.cambridgeshire.gov.uk/ccclive/Committees/tabid/62/ctl/ViewCMIS_CommitteeDetails/mid/381/id/6/Default.aspx)

The committee is delighted with the outcome of the recent CQC inspection moving the Trust from Special measures to a rating of "good" and is pleased to see the areas identified for improvement from the September 2016 CQC Inspection featuring in the Trust's Improvement Plan.

The problems over the implementation of EPIC software as part of the e-Hospital digital transformation programme, were identified by Health Committee members in 2015/16 as a concern. The committee has been informed of the success over the last year of the Electronic Paper Record and the benefits the system is bringing to the patients experience.

The committee recognises that the Trust needs to address issues and performance in A&E. Delayed Transfers of Care (DTOCs) will continue to be an area of concern and will require further monitoring across the health and social care system. However it is encouraging to see the Trust working in partnership with the County Council to identify ways to address the complex issue of DTOCs.

One of the effective communication methods with the Trust has been the continuation of informal 1/4 liaison meetings where members of the committee have had the opportunity to question senior representatives of CUH. This has fostered a better understanding of each others roles. We look forward to continuing this open relationship with the Trust to ensure effective health scrutiny is achieved and note the positive attitude of representatives from the trust to the rest of the health care economy.

# **CAMBRIDGESHIRE & PETERBOROUGH FOUNDATION TRUST (CPFT)**

## **QUALITY ACCOUNT 2016/17**

### **STATEMENT BY CAMBRIDGESHIRE COUNTY COUNCIL**

#### **HEALTH COMMITTEE**

The Health Committee within its scrutiny capacity has examined the following issues with CPFT over the past year:

- CPFT & CCG – Older People and Adult Community Services – termination of UnitingCare contract (learning from internal reviews) on 12<sup>th</sup> May 2016
- CPFT – Older People and Adult Community Services – update on service provision on 10<sup>th</sup> November 2016
- CPFT & CCG – New Primary Care Service for Mental Health First response service (Mental Health Crises Support Service) on 16<sup>th</sup> March 2017

Minutes of these discussions can be found following the link below.

[https://cmis.cambridgeshire.gov.uk/ccc\\_live/Committees/tabid/62/ctl/ViewCMIS\\_CommitteeDetails/mid/381/id/6/Default.aspx](https://cmis.cambridgeshire.gov.uk/ccc_live/Committees/tabid/62/ctl/ViewCMIS_CommitteeDetails/mid/381/id/6/Default.aspx)

The Health committee welcomed the update on progress made against quality priorities 2016/17 as outlined in the draft report that has been shared for comment with the committee. The report provides a clear statement on performance against identified priorities. The trusts achievements in clinical effectiveness performance and work towards improvements around patient experience were noted. The committee encourages a focus on Leadership and Patient safety as performance indicators for the 2017/18.

The committees focus this year has been on the new services acquired by CPFT following the termination of UnitingCare model. The committee has sought reassurances over the implementation of Older People and Adult Community Services. The committee has noted concerns over aspects of the service that have not been delivered and will continue to watch developments.

In March 2017 the committee received a report on the progress that had been made by the Primary Care Services for Mental Health (PRISM). Committee members welcomed the development of this new service and that of the first response team for patients in mental health crises.

The committee has continued to meet with the Chief Executive from CPFT through liaison meetings which has provided enhanced communication. It is hoped that these arrangements will continue under the new senior management when the new Chief Executive is in place. The health committee welcomes continual open and honest dialogue with CPFT as services are developed to meet the needs of the local population.

## **HINCHINGBROOKE HEALTH CARE NHS TRUST**

### **QUALITY ACCOUNT 2016/17**

#### **STATEMENT BY CAMBRIDGESHIRE COUNTY COUNCIL HEALTH COMMITTEE**

The Health Committee within its scrutiny capacity has examined the following issue with Hinchingsbrooke Hospital over the past year:

- Planned Consultation on Collaboration Between Hinchingsbrooke Health Care NHS Trust and Peterborough & Stamford NHS Foundation Trust (14 July 2016)
- Proposal to form a Joint Committee to scrutinise the proposed merger of PSHFT with HHCT (8 Sept 2016)

Minutes of these discussions can be found following the link below:

[https://cmis.cambridgeshire.gov.uk/ccc\\_live/Committees/tabid/62/ctl/ViewCMIS\\_CommitteeDetails/mid/381/id/6/Default.aspx](https://cmis.cambridgeshire.gov.uk/ccc_live/Committees/tabid/62/ctl/ViewCMIS_CommitteeDetails/mid/381/id/6/Default.aspx)

The committee's focus this year has been reviewing the progress made to move Hinchingsbrooke Hospital from special measures. The committee's chair was extended an invitation to the Trusts Quality Summit following the CQC inspection in August 2016 and was pleased to see the Trusts services are safe, effective, caring, responsive and well led, rating as "good".

The Health committee welcomed the Trusts identified quality indicators around safety and patient experience for 2016/17, addressing issues identified in previous CQC inspections and noted the Trusts achievements against these.

The committee has established good communication mechanisms with the Trust where the Chair has met with both Chief Executive and the Chairman and continued to meet with representatives from the trust through the quarterly liaison meetings. These have provided members with an oversight of issues the Trust is handling which is helpful as background to support formal scrutiny.

Members of the Health Committee have also participated in a Joint Health Scrutiny committee with Peterborough City Council to review the proposals to merge with Peterborough & Stamford Hospital Foundation Trust. As the management of Hinchingsbrooke Hospital now moves to North West Anglia NHS Foundation Trust, the Health Committee will continue to scrutinise the implementation of the merger and hopes to continue the open and transparent communication with the new management.