

**NHS QUALITY ACCOUNTS – ESTABLISHING A PROCESS FOR RESPONDING TO 2017-18 REQUESTS**

*To:* **HEALTH COMMITTEE**

*Meeting Date:* **17<sup>th</sup> May 2018**

*From* **The Monitoring Officer**

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

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

*Purpose:* **To provide an update to the Committee on responses submitted to NHS Provider Trusts in regards to their Quality Accounts 2017/18. It is a requirement for NHS Provider Trusts to request comment from Health Scrutiny Committees on their Quality Accounts.**

*Recommendation:* **The Health Committee is asked to**

- a) note the statements and responses sent to the NHS Provider Trusts; and
- b) note any Quality Accounts that are outstanding

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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 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 and comment. Statements received from Healthwatch and Health Overview and Scrutiny Committees must be included in the published version.
- 1.3 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.
- 1.4 This Health Committee on 16<sup>th</sup> March 2018 delegated approval of the responses to the Quality Accounts, received from NHS Providers, to the Head of Public Health Business Programmes in consultation with the views of members of the Task and Finish Group.

## **2. MAIN ISSUES**

- 2.1 Councillors Dupre, Hudson and Jones were appointed to the Task and Finish Group on 16<sup>th</sup> March 2018. Table 1 details Quality Accounts that have been received at the time of this report was compiled.

**Table 1**

<b>Organisation</b>	<b>Quality Account Received</b>	<b>Deadline to respond</b>	<b>Response Made</b>
Cambridge University Foundation Trust	3 <sup>rd</sup> April 2018	27 <sup>th</sup> April 2018	27 <sup>th</sup> April 2018 Appendix 1
North West Anglia Foundation Trust	20 <sup>th</sup> April 2018	4 <sup>th</sup> May 2018	4 <sup>th</sup> May 2018 Appendix 2
Cambridgeshire Community Services	27 <sup>th</sup> April 2018	28 <sup>th</sup> May 2018	Pending

- 2.2 North West Anglia Foundation Trust also provided members with the opportunity to attend a stakeholder event on 8<sup>th</sup> May 2018 to review all feedback received from stakeholders. The Trust responded to all comments made by members of the Task & Finish group and adjusted the final version of their Quality Account to reflect these.

- 2.2 Further Quality Accounts are expected from the following organisations with the timescales advised in Table 2. At the point of completion of this report we were not in receipt of these quality accounts.

**Table 2**

Organisation	Quality Account Received	Deadline to respond	Response Made
Cambridgeshire & Peterborough Foundation Trust	Expected 3 <sup>rd</sup> May 2018 No report as of 8 <sup>th</sup> May 2018	No date advised yet.	No Report
East of England Ambulance Service Trust	Expected at beginning of May 2018	Advised of 30 day consultation period.	No Report

## SIGNIFICANT IMPLICATIONS

### 3.1 Resource Implications

Officer time in preparing a paper for the Committee.

### 3.2 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.

### 3.3 Equality and Diversity Implications

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

### 3.4 Engagement and Consultation Implications

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

### 3.5 Localism and Local Member Involvement

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

### 3.6 Public Health Implications

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

Source Documents	Location
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="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</a>

## **Appendix 1**

### **CAMBRIDGE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST - QUALITY ACCOUNT 2017/18**

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

The Health Committee within its scrutiny capacity has not called on representatives from Cambridgeshire University Hospital over the last year to attend scrutiny committee meetings. However, committee members have maintained an open dialogue with senior leadership at the Trust through the valuable quarterly liaison meetings which are seen as an essential part of the scrutiny function.

In response to the Quality Report 2017/18 members have found the “other Information section” very helpful in setting out targets, measurements and degree of success in reaching targets. The Committee would welcome further conversations to understand the links between not meeting targets and the challenges the Trust faces in terms of staffing. The Committee has paid a particular interest in workforce development and recruitment and retention issues across the whole health care sector and specifically scrutinising this under the Sustainable Transformation Programme (minutes can accessed via the link below).

[https://cmis.cambridgeshire.gov.uk/ccc\\_live/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/538/Committee/6/Default.aspx](https://cmis.cambridgeshire.gov.uk/ccc_live/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/538/Committee/6/Default.aspx)

There are four objectives, of which one is ‘Strengthening the Organisation’. The goal is admirable and the Committee would welcome further clarity about how this is being achieved. It would be interesting to understand the impact of this on patient journeys and organisational strength. Engaging patients in improvement is important and more information of patient involvement would be welcomed.

The Committee would like to comment on how impressive that in the staff survey over two-thirds of staff would recommend CUH as a place to work. A deeper understanding would be helpful about why there was less confidence shown by staff in their responses to taking actions over errors, near misses and incidents.

Evidence of the pressure the Trust is under through rising demand for services and vacancy rates is evident in the missed target for cancelled operations and delayed transfers of care. The Health Committee recognised that this is a whole system issue involving health and social care and acknowledge the work that CUH are undertaking in working within a partnership framework to address this local pressure.

The Committee has provided some clarification comments separately, recognising the Quality Accounts are a technical document but would like to conclude that this is a helpful report in explaining the Trusts stance on issues and what is being done though the year to make improvements.

## **Appendix 2**

### **NORTH WEST ANGLIA FOUNDATION TRUST**

#### **QUALITY ACCOUNT 2017/18**

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

The Health Committee within its scrutiny capacity has welcomed the opportunity to comment on the Quality Account for North West Anglia Foundation Trust (NWAFT) during its first year of existence. We recognise that the Trust has had a number of challenges during the merger of the Peterborough and Stamford NHS Foundation Trust (PSHFT) and Hinchingsbrooke Healthcare Trust (HHCT). Previously the Health Committee has examined a number of issues with the former HHCT as it moved out of special measures.

The Health Committee within its scrutiny capacity has not called on representatives from NWAFT over the last year to attend scrutiny committee meetings, recognising that the Trust needed time to address the impact of the merger. However, committee members have maintained an open dialogue with senior leadership at the Trust through the valuable quarterly liaison meetings which are seen as an essential part of the scrutiny function.

The report highlights the significant staffing challenges the Trust faces and how recruitment for nursing staff is being addressed both internally through programmes like “Aspiring Clinical Managers” and through overseas nurse recruitment. The committee welcomes continued dialogue with the Trust around wider medical workforce issues. We have paid a particular interest in workforce development and recruitment and retention issues across the whole health care sector and specifically scrutinising this under the Sustainable Transformation Programme (minutes can be accessed via the link below).

<https://cmis.cambridgeshire.gov.uk/ccclive/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/538/Committee/6/Default.aspx>

At the time of reviewing NWAT’s Quality Account a final figure was not available for the target set for developing and retaining the workforce and the committee await this with interest as part of their wider scrutiny of workforce planning in both the health and social care sector.

The Committee was particularly impressed with the Trusts progress around CQUIN on Healthy Eating working with the Trusts suppliers of food and drink in the hospitals, to assist them in making changes to their outlets to offer staff and visitors healthier choices.

Of concern the Health Committee has noted that the volume of complaints has increased and it will be interesting to see next year if this changes i.e. how much of it

is related to the impact of the merger and how much is managing increased demand on the health care system.

In recognising that the Quality Accounts are a technical document the Committee has provided some clarification comments separately. The committee has been encouraged to see how the Trust has actively responded to this feedback, inviting members to a stakeholder meeting and incorporating suggestions in the final Quality Account. This is an excellent example of listening to ones stakeholders.