

NHS QUALITY ACCOUNTS – ESTABLISHING A PROCESS FOR RESPONDING TO 2018-19 REQUESTS

To: **HEALTH COMMITTEE**

Meeting Date: **14th March 2019**

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 process to respond to statements on the Quality Accounts provided by NHS Provider Trusts.**

Recommendation: **The Health Committee is asked to note the requirement for NHS Provider Trusts to request comment from Health Scrutiny committees and**

- a) To consider if the committee wishes to respond to Quality Accounts and if so prioritise which Quality Accounts the Committee will respond to
- b) To note the improvements in the process introduced for responding to Quality Accounts in 2018 and feedback from the Trusts
- c) To delegate approval of the responses to the Quality Accounts to the Head of Public Health Business Programmes acting in consultation with the views of members of the Committee appointed to the Task and Finish Group; and
- d) To appoint members of the committee to the Task and Finish Group.

<i>Officer contact:</i>		<i>Member contact:</i>
Name:	Kate Parker	Cllr Peter Hudson
Post:	Head of Public Health Business Programmes	Chairman
Email:	Kate.parker@cambridgeshire.gov.uk	Peter.Hudson@cambridgeshire.gov.uk
Tel:	01480 379561	01223 699170

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. This paper also reflects on the success of the processes introduced for responding to the Quality Accounts in 2018.

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 and comment. Statements received 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 by 31st May for audit purposes. However each provider will have internal deadlines for receipt of any comments from relevant statutory consultees.
- 2.3 As discussed at the Health Committee meeting in previous years, the timing of the Quality Account deadlines puts the Committee in a difficult position to provide an adequate response. Often NHS Trusts are unable to send copies of their draft Quality Accounts until mid to end of April, resulting in a short timescale for the committee members to formally agree a response. There is no statutory requirement for the Health Committee to respond to the Quality Accounts.
- 2.4 A new process was introduced in 2018 whereby the Health Committee appointed members of the committee to a task and finish group. This group reviewed the content of the Quality Accounts that they were in receipt of and feedback was provided to the Trust. The Head of Public Health Business Programmes was responsible for submitting final statements to each Trust. It is a legal requirement for the Trusts to publish these statements as part of their complete quality account.

3. PROCESS FOR RESPONDING TO NHS QUALITY ACCOUNTS

- 3.1 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.
- 3.2 Due to time constraints identified in section 2.2, responses before 2018 were limited to details of where the Trust has attended the Health Committee for the purposes of health scrutiny. Any recommendations made by the committee were submitted within the statement. Feedback received from the Trusts noted that they had expected more of a reflection and comment on the content of the Quality Account rather than an overview of scrutiny actions.
- 3.3. As a result of this feedback, in 2018 a new process was introduced whereby the committee appointed a task and finish group to review the Quality Accounts provided by trusts and provide a more detail critical analysis. Feedback from the Trusts was positive and some examples of how the Trusts used the information from the responses received is provided below.

North West Anglia Foundation Trust (NWAFT)

The Trust held a stakeholder review meeting whereby all responses received from statutory partners and Trust Governors were discussed with the stakeholders in attendance. Where appropriate changes were made to the Quality Account providing further clarification or building on the feedback.

Cambridgeshire Community Services (CCS)

The Trust responded to a number of points of clarification that were raised and altered the Quality Account to address these.

Royal Papworth Hospital Trust (RPHT)

The committee were not in receipt of RPHT's Quality Account in time to respond. The process was communicated to the Trust and contact details provided so that this would not be an issue in 2019. RPHT has been the first trust to contact the Head of Public Health Programmes this year to ensure that the Health Committee will receive the Quality Account in time to respond.

4.0 PROPOSED PROCESS FOR RESPONDING TO NHS QUALITY ACCOUNTS IN 2019

- 4.1 As in previous years the scheduling of the committee meeting does not allow for members to discuss the responses at the Committee meeting on 23rd May 2019 as most Trusts will require a response before then. Section 4 outlines the expected deadlines from Trusts may require responses to be submitted prior to the committee meeting. In the past Trusts have refused to publish "draft" statements that have not been endorsed by the committee.

- 4.2 It is suggested that due to last years success in regards to identifying an effective process to respond to Quality Accounts, the committee follows the procedures agreed last year and delegates 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 the Committee. Last year the committee established a task and finish working group that responded to the Quality Accounts to ensure the views of the committee were represented.
- 4.3 The committee is asked to nominate members to the task and finish working group.

The committee is asked to prioritise which Quality Accounts should be responded to.

5.0 EXPECTED DEADLINES FOR RECEIPT OF QUALITY ACCOUNTS

- 5.1 In order to prioritise and prepare for responding to NHS Quality Accounts, Table 1 provides details of the timescales worked on in 2018 to respond to Quality Accounts which vary for each trust and can be very tight.

Table 1: Quality Account Timeline for 2018

Organisation	Quality Account Received	Deadline to respond	Response Made
Cambridge University Foundation Trust (CUH)	3 rd April 2018	27 th April 2018	27 th April 2018
North West Anglia Foundation Trust (NWAFT)	20 th April 2018	4 th May 2018	4 th May 2018
Cambridgeshire Community Services (CCS)	27 th April 2018	28 th May 2018	25 th May 2018
East of England Ambulance Service Trust (EAST)	14 th May 2018	13 June 2018	13 th June 2018
Royal Papworth Hospital Trust (RPH)	21 st May 2018 (First draft was never sent to CCC)	24 th May 2018	No formal response made due to late receipt of Quality Account
Cambridgeshire & Peterborough Foundation Trust (CPFT)	11 th May 2018	22 nd May 2018	22 nd May 2018

6.0 SIGNIFICANT IMPLICATIONS

6.1 Resource Implications

Officer time in preparing a paper for the Committee.

6.2 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.

6.3 Equality and Diversity Implications

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

6.4 Engagement and Consultation Implications

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

6.5 Localism and Local Member Involvement

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

6.6 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	http://www.nhs.uk/aboutNHSChoices/professionals/healthandcareprofessionals/quality-accounts/Pages/about-quality-accounts.aspx
Reports to and minutes of Health Committee	https://cmis.cambridgeshire.gov.uk/ccclive/Committees/tabid/62/ctl/ViewCMIS_CommitteeDetails/mid/381/id/6/Default.aspx