

# CLINICAL QUALITY REVIEW HIGHLIGHT REPORT QUARTER 3 (17/18)

Please note that due to the Governing Body meeting being rescheduled (26 July 2018) the Q4 CQR Report has been delayed.

### 1 SUMMARY AND PURPOSE OF PAPER

- 1.1 The aim of this and accompanying report is to provide quality assurance for each of the providers of NHS care for which Somerset Clinical Commissioning Group (CCG) is the lead or associate commissioner in line with the CCG's Strategic Theme 4: sustain and continually improve the quality of all services.
- 1.2 A number of key quality assurance metrics related to clinical effectiveness, clinical safety and patient experience are monitored through the accompanying report to reflect national and local issues. This enables the CCG to understand potential pressure points and opportunities to influence and improve service delivery. The accompanying report (Appendix A) also provides an overview of any national surveys published in Q3 (17/18) where there is specific relevance on local performance.

### 2 QUALITY

2.1 Some of the key quality and patient safety issues highlighted within the accompanying report are:

#### **Areas of Challenge**

- 2.2 This quarter's report contains a review of Summary Hospital-level Mortality Indicator (SHMI) data across all Trusts. All Trusts featured in this report are noted as being within 'as expected range.' The CCG's review of the latest SHMI data has identified areas of enquiry in a number of diagnostic groups: these are being taken forward through the CCG's Clinical Quality Review Meeting (CQRM) process. The CCG has agreed to purchase HSMR (Hospital Standardised Mortality Ratio) data and once available a complementary review of HSMR data will be included in a future report and dashboards updated accordingly.
- 2.3 The quality and elevated level of risk associated with delays in delivery of care, treatment and non-achievement of Key Performance Indicators for both NHS111 and Out of Hours services provided by the Somerset Doctors Urgent Care (SDUC) continues to be an issue of concern in Somerset. A summary of oversight activity is included in the report. Although the provider (Vocare) has made some progress there remains significant outstanding work to achieve regulatory requirements.

- 2.4 Royal United Hospitals (Bath) reports continuing under-performance below threshold for VTE (venous thromboembolism) Risk Assessments. In addition, Somerset Partnership is currently working with RUH on a number of reviews concerning VTE incidents that has occurred at Frome Community Hospital earlier this year.
- 2.5 Both Yeovil District Hospital and Weston Area Health Trust have reported one Never Event each during the quarter. Somerset Partnership sadly reported one suicide by ligature point.

### Areas to Celebrate

- 2.6 Patient Reported Outcome Measures (PROMS) data (published February 2018) shows that patients in Somerset show an improved health gain for hip / knee procedures compared to the England average. However, groin hernia and varicose vein procedures shows health gains below England average.
- 2.7 The CCG notes gradual reduction in total falls and harm from falls (grade 3+) within Somerset Partnership.

#### **Correction Report**

- 2.8 The Committee is asked to note the following correction to the CCG's report at page 25 (Somerset Partnership NHS Foundation Trust):
- 2.9 Restraint: The number of incidents remains high with 129 reported in Q3 (against quarterly average of 111.33). The CCG notes that the November 2017 total is 47 (equating to 13.811 restraints per 1000 bed days), this being the highest monthly total (and rate) year to date.

# 3 PATIENT ENGAGEMENT AND EQUALITY

- 3.1 The report includes information on Patient Reported Outcome Measures (PROMS) data and complaints.
- 3.2 The information in the accompanying report highlights quality assurance work relating to all patients. The report also highlights work undertaken in relation to a number of people with protected characteristics (as defined by the Equality Act 2010). This quarter's report summarises CQC maternity survey results.

# 4 CONCLUSION

4.1 The Scrutiny for Policies, Adults and Health Committee is asked to discuss this report and consider the assurance provided of the safety and quality of healthcare services commissioned by Somerset Clinical Commissioning Group.