

Integrated Quality, Safety and Performance Report

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1. Summary

1.1. This paper provides an update on the Somerset CCG Integrated Quality, Safety and Performance. The CCG has established performance monitoring meeting with all providers of healthcare services, this paper gives a high-level exception a summary of escalation issues for quality, safety and performance against the constitutional and other standards for the period 1 April 2018 to 31 July 2018, and provides an analysis for both across the following areas:

- urgent and emergency care
- elective care
- mental health
- quality indicators

1.2. Quality and patient safety is at the heart of the services Somerset CCG commissions and this report includes areas of challenge and concern as well as areas to celebrate. In July the NHS celebrated its 70th birthday and during the lead up to the celebrations, during a period when services were under increased pressure, there were many personal stories shared both regionally and nationally through documentaries and interviews which all highlighted the fantastic achievements of the service and its people over the last 70 years.

During 2018/19 the demand for both elective and emergency services in Somerset continues to increase as a result of more patients accessing services when compared to the previous year and has led to an increase in waiting times particularly for diagnostics and inpatient elective treatment.

The national Inpatient Survey was published during June 2018 which showed improvements in patients' perceptions of the quality of communication between themselves and medical professionals (doctors and nurses), the quality of information about operations or procedures, privacy when discussing their condition and quality of food and cleanliness of their room or ward. However, the results also indicated that responses to some questions were less positive or have not improved over time which included the noise at night from other patients, emotional support from staff during their hospital stay, information on new medications prescribed while in hospital the quality of preparation and information for leaving hospital areas for improvement.

During 2018/19 the collaboration, communication and co-operation with our key stakeholders has been under increasing spotlight and pressure with the use of inpatient children wards beds for children known to CAMHS services and the quality assurance of the Home First Discharge to assess programme. The quality and elevated level of risk associated with delays in delivery of care

and treatment provided by the Somerset Doctors Urgent Care (SDUC) service continues to be an issue of concern in Somerset. The latest CQC assessment published in July 2018 has rated the service as Requires Improvement with an Inadequate rating in the Well Lead Domain. The NHS 111 service has been issued with a warning notice for the breach of Regulation 17 Good Governance. The service will be kept under review and if needed measures could be escalated to urgent enforcement action. A summary of recent oversight activity is included in the integrated report.

Further work has been carried to make the reporting of measures easier to understand, especially in relation to benchmarking and ratings.

The CCG has committed to improvement in Always Events defined as “those aspects of the patient and family experience that should always occur when patients interact with healthcare professionals and the health care delivery system.”

1.3. Areas to celebrate

- Tissue viability Service commences in care Homes with Nursing and links to elements of the complex wound CQUIN
- Home Oxygen service extended to include assessment for patients with non-respiratory needs
- Improvement in A&E 4-hour performance at MPH, and YDH ranked as the top performer nationally despite a significant increase in demand
- Reduction in the number of long stay patients in hospital (>7 days (Stranded Patients) and >21 days (Super Stranded Patients) leading to a reduction in consumed beds

1.4. Challenges

- Increase in the number of patients on an incomplete pathway and waiting times for treatment
- Deterioration in the waiting time for MRI and Echocardiography diagnostic tests at MPH
- Deterioration in 2-week cancer waiting times at YDH in June following implementation of the Direct to Test pathway
- Increase in use of restraint at Sompar noted; increase in ligature use at Sompar noted when comparing 2017/18 to 2016/17. Situation continues to be monitored monthly
- Five Primary Mental Health link workers have been served redundancy notice by Local Authority; their posts will be vacant from 31 December 2018

1.5. CCG local quality & safety priorities

- A range of indicators for the NHS 111 service including the 60 second call answering and A&E / Ambulance dispositions remain behind the national standard and local improvement trajectory with performance most challenged during the weekend periods
- Increase in Call Stack at SWAST during periods of high demand has the potential to adversely affect patient safety
- 10% reduction in all E coli BSIs through focused review of repeat infection cases, CQUIN in primary care, and hydration and urinary catheter

- campaign
- Workforce retention, recruitment and development of new roles

1.6 Quality & Performance Improvement Priorities

- Development of quality metrics within urgent care including MIU
- Improving the quality and effectiveness of the Ward Round
- Focus upon suicide prevention and joint working to reduce the level of people who try to kill themselves in Somerset
- Implementation of transformational change within the IAPT Service, linking with IST Recommendation
- Reduction in elective demand in line with the 0% planning ambition
- Continued reduction of long stay patients (stranded and super patients) to reduce length of stay and bed utilisation

2. Issues for consideration / Recommendations

2.1. Scrutiny committee are asked to note this paper as assurance of the health performance reviews.

2.2. The key area of focus within the report include:

- **High Quality Hospital Care:** *Number of Restraints: Number of ligature incidents: E. coli incidents: Workforce*
- **NHS 111:** *60 Second Calls Answering Performance: 74.9%, Ambulance Dispatch 11.2%, A&E 7.8%*
- **Ambulance:** *Category 1: 7.4 mins, Category 2: 29.2 mins, Category 3: 77.6 mins*
- **Emergency Demand and Performance:** *Increase in Emergency Admissions: 7.2%, Increase in A&E Attendances: 7.9%*
- **Elective Demand and Performance**
- *Apr-Jul18: Increase in New Clock Starts: 5.0%, Increase in Incomplete Pathways: 3,565 against March baseline*
- **Diagnostic 6 Week Waits:** *Decline in 6 week waiting time performance: 80.0%*
- **Cancer:** *Increase in 2 Week Waits: 20.7%, Increase in 62 Day Pathways: 20.8%*
- **Dementia diagnosis & post diagnostic support:** *Decline in dementia diagnosis rate 61.8%*
- **IAPT / Talking Therapies service:** *Improvement in IAPT access rate 15.6%. Improvement in IAPT recovery rate 42.2%*
- **Child and Adolescent Mental Health Services:** *Children and Young People Mental Health access rate 31.3% (performance will drop as the financial year progresses, this is due to counting rules). Improvement in RTT 6 weeks 78.5%*