

HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE



Report subject	Scrutiny Process for NHS Quality Accounts
Meeting date	18 th November 2019
Status	Public Report
Executive Summary	<p>All NHS Trusts are required to produce an annual Quality Account which summarises performance and the quality of service they have provided over the past year.</p> <p>Following the Francis Inquiry from 2010-13 into serious failings of care at Mid Staffordshire NHS Foundation Trust, the inquiry made a recommendation that Quality Accounts should contain the observations on performance and quality from commissioners, Overview and Scrutiny Committees and Local Healthwatch.</p> <p>More recent guidance from NHS Improvement 2018 has advised that Overview and Scrutiny Committees should be sighted on Quality Accounts and have been offered the opportunity to comment on them on a voluntary basis.</p> <p>The proposal is for the Committee to consider their scrutiny role for local NHS Trusts and also consider where they should focus their efforts. It is recommended that Quality Accounts are scrutinised for Dorset Healthcare, Poole Hospital NHS Foundation Trust, The Royal Bournemouth and Christchurch Hospital NHS Foundation Trust (RBCHFT) and South Western Ambulance Service NHS Foundation Trust; and for two members to work over the year with nominated officers from Adult Social Care Commissioning to lead the scrutiny process for each of the above Trust's Quality Accounts.</p> <p>This includes visiting each Trust and also offering a detailed response to each Trust's annual Quality Account report, considering good practice and requesting updates on any areas of concern through the year. Members are asked to consider if they wish to proceed with this process.</p>
Recommendations	<p>It is RECOMMENDED that:</p> <ul style="list-style-type: none"> • The Committee agree the proposed approach to scrutiny of NHS Quality Accounts • The Committee nominate two members per Trust to represent and act on behalf of the Committee in visiting Trusts and scrutinising the NHS Quality Accounts. These members will take responsibility for reporting back to the Committee on key relevant issues related to the individual Trust.

Portfolio Holder(s):	Cllr Lesley Dedman, Adults and Health
Corporate Director	Jan Thurgood, Corporate Director, Adult Social Care
Contributors	Elaine Stratman, Principal Officer, Adult Social Care Commissioning
Wards	All
Classification	For Decision

1. Background

- 1.1 All NHS Trusts are required to produce an annual Quality Account which summarises performance and the quality of the service they have provided over the past year.
- 1.2 Following on from the Francis Inquiry from 2010-13 into serious failings of care at Mid Staffordshire NHS Foundation Trust, a recommendation from the inquiry specified that *“The Department of Health/ the NHS Commissioning Board/ regulators should ensure that provider organisations publish their annual Quality Accounts information in a common form to enable comparisons to be made between organisations, to include a minimum of prescribed information about their compliance with fundamental and other standards, their proposals for the rectification of any non-compliance and statistics relating to mortality and other outcomes. Quality Accounts should contain the observations of commissioners, overview and scrutiny committees and Local Healthwatch.”*
- 1.3 More recent guidance dated December 2018 from NHS Improvement has advised that overview and scrutiny committees should be sighted on Quality Accounts and have been offered the opportunity to comment on Quality Accounts on a voluntary basis.

2. Proposed approach for scrutinising NHS Quality Accounts

- 2.1 It is proposed the Committee that scrutiny is focussed on Quality Accounts for Dorset Healthcare, Poole Hospital NHS Foundation Trust, The Royal Bournemouth and Christchurch Hospital NHS Foundation Trust (RBCHFT) and South Western Ambulance Service NHS Foundation Trust.
- 2.2 It is proposed that the Committee nominates two members for each of the four Trusts and that these members work over the year with nominated officers from Adult Social Care Commissioning to lead the scrutiny process for each of the above Trust's Quality Accounts as described below.
- 2.3 In April/ May each year, the Trusts issue a draft Quality Account for the Committee to scrutinise and respond in writing. The responsible officer and the 2 nominated members read the report and visit the Trust to gain further clarification on issues of interest. The responsible officer then prepares a draft letter of

response on behalf of the Chair of the committee, collating comments from the two members.

- 2.4 A detailed response is then sent to each Trust commending them for any good practice and requesting updates on any areas of concern through the year. A copy of the Chair's response letter is published towards the end of the Quality Account report. Copy of 2018/19 Trust Quality Accounts are included as background papers for members' information.
- 2.5 Mid year update reports are issued from the Trusts in the same way and arrangements are made to visit the Trusts mid year. These visits involve the two members of the Committee and the responsible officer reading the update reports and visiting the Trusts to gather further evidence, clarify any queries and to check on progress against issues identified at the previous year end.
- 2.6 These visits should enable a better understanding of the issues faced by the Trusts so that at the year end the Committee would be better informed and able to offer a formative response when draft Quality Accounts are issued by the Trust to the Committee.
- 2.7 Members are asked if they wish to proceed with this process.

3. What a Quality Account should contain

- 3.1 NHS Trusts are required in their Quality Accounts to report back on a number of mandated areas:
- 3.2 They must report on a prescribed set of quality indicators; report back on at least three priority areas where Trusts have tried to deliver improvements over the past year and also prioritise and describe at least three priority areas for improvement for the year ahead; report back on clinical audits and suggestions for improvement; advise on clinical research undertaken; provide statement from the Care Quality Commission on registration and inspection. Finally, the report must include information on the accuracy of data including information governance compliance.

4. Overview of Quality Account Highlights for 2018/19

- 4.1 Below is a summary of the four Quality Accounts scrutinised in 18/19, this is to give the Committee an overview of the kinds of issues and improvement priority areas where members may need to scrutinise in the future:
- 4.2 Dorset Healthcare had made real progress in regards the work undertaken to improve mental health services over the year including the opening of the Retreat in Bournemouth, also the national recognition of the work to support the armed forces and the work to enhance mental health wards for older people.
- 4.3 In regards to Quality Improvement areas they had made good progress in developing methods to listen to the voice of young people using CAMHS services particularly in a qualitative way; and that service improvement continues in

regards to implementing the necessary change to meet the Dementia Friendly Hospital Charter.

- 4.4 The Royal Bournemouth and Christchurch Hospital achieved most of its objectives in key quality improvement areas including urgent and emergency care 'First 24 hours'- the Trust had improved its approaches to care within the first 24 hours in particular how admission avoidance performance has improved through good triaging in same day emergency care, reducing duplication in the clerking process from entrance into the emergency department through to a patient seeing a speciality consultant and that it is having a real positive impact on reducing timescales by up to four hours and reducing duplication of effort by 50%.
- 4.5 Poole NHS Foundation Trust's focus was around maternity by reducing 'term' admissions to Neo Natal Unit (NNU) the Trust are working hard to buck the national trend of an increasing proportion of babies needing to be admitted to NNU after birth; good progress is being made in this area, and that Poole is performing well in achieving below the national target of 6%. Also Saving Babies Lives- trying to achieve another national ambition in reducing the number of still births with a 20% reduction by 2020.
- 4.6 South Western Ambulance Trust has undertaken extensive work to stratify risk in order to prioritise and respond appropriately to any emergency calls. Responses need to be proportionate and focussed on patients experiencing life threatening incidents. The Trust is also taking steps to better understand patient experience for those experiencing mental health difficulties. Conveyances are being directed away from emergency departments to more appropriate settings such as crisis cafes. The trust was also piloting having specialist mental nursing support in a locality clinical hub in order to offer support to staff and patients during peak hours.

5. Next Steps

- 5.1 If members agree with the above process, Officers will schedule dates with relevant Members and Officers from BCP Council and the respective Trusts to visit and review progress on Quality Improvement Areas before draft Quality Accounts are issued and prior to written responses from the Council being requested.

6. Conclusion

- 6.1 The process will enable Members to gain a good insight, provide credibility of scrutiny and enable relationships to be built with the Trust. The Committee is asked to consider and agree the proposed approach.

7. Summary of equality implications

- 7.1 The work of the Overview and Scrutiny Committee contributes to protecting and enriching the health and well-being of the Council's most vulnerable

Background papers

[Quality Account South Western Ambulance Service](#)

[Quality Account for Dorset Healthcare](#)

[Quality Account for Royal Bournemouth and Christchurch Hospital](#)

[Quality Account for Poole Hospital](#)