

<b>Title of meeting:</b>				<b>Primary Care Joint Commissioning Committee (JCC) Committee in Common (CIC)</b>			
<b>Date of Meeting</b>		12 July 2016		<b>Paper Number</b>		12	
<b>Title</b>				Primary Care Quality Report - Improving Patient Safety in Primary Care Medical Services for: <ul style="list-style-type: none"> <li>• Bracknell &amp; Ascot CCG</li> <li>• Windsor, Ascot &amp; Maidenhead CCG</li> <li>• Slough CCG</li> </ul>			
<b>Sponsoring Director</b> (name and job title)				Sarah Bellars, Director of Nursing & Quality			
<b>Sponsoring Clinical / Lay Lead</b> (name and job title)							
<b>Author(s)</b>				Jo Greengrass Associate Director of Nursing – Quality and Safety			
<b>Purpose</b>				This report is prepared to provide an update as to what the Quality and Safety Team have been doing and how NHS England and the CCG's have been working together to help drive improvements in quality and patient safety.			
<b>The Primary Care Joint Commissioning Committee Committee in Common is required to (please tick)</b>							
<b>Approve</b>		<b>Receive</b>		<b>Discuss</b>		<b>Note</b>	
						x	
<b>Risk and Assurance</b> <i>(outline the key risks / where to find mitigation plan in the attached paper and any assurances obtained)</i>				These are highlighted within the paper			
<b>Legal implications/regulatory requirements</b>				National Guidance			
<b>Public Sector Equality Duty</b>				None for this report			
<b>Links to the NHS Constitution (relevant patient/staff rights)</b>				The NHS provides a comprehensive service available to all.  Access to NHS services is based on clinical need, not an individual's ability to pay  The NHS aspires to the highest standards of excellence and professionalism  The NHS aspires to put patients at the heart of everything it does  The NHS works across organisational boundaries and in			

	<p>partnership with other organisations in the interest of patients, local communities and the wider population.</p> <p>The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources</p> <p>The NHS is accountable to the public, communities and patients that it serves</p>
<p><b>Strategic Fit</b> <i>Primary Care strategy? and Other relevant strategies</i></p>	Fits with Primary Care Co Commissioning
<p><b>Commercial and Financial Implications</b> <i>(Identify how the proposal impacts on existing contract arrangements and have these been incorporated?)</i></p> <p><i>Include date Deputy CFO has signed off the affordability and has this been incorporated within the financial plan. Include details of funding source(s)</i></p>	None for this report
<p><b>Quality Focus</b> <i>(Identify how this proposal impacts on the quality of services received by patients and/or the achievement of key performance targets)</i></p> <p><i>Include date the Director of Nursing has signed off the quality implications)</i></p>	Date Director of Nursing sign off.....
<p><b>Clinical Engagement</b> <i>Outline the clinical engagement that has been undertaken</i></p>	Quality Team
<p><b>Consultation, public engagement &amp; partnership working implications/impact</b></p>	Implicated in individual surveys
<p><b>NHS Outcomes</b> <i>Please indicate (highlight) which Domain this paper sits within by highlighting or ticking below:</i></p> <p><i>Please note there may be more than one Domain.</i></p>	<p>Domain 1 Preventing people from dying prematurely;</p> <p>Domain 2 Enhancing quality of life for people with long-term conditions;</p> <p>Domain 3 Helping people to recover from episodes of ill health or following injury;</p> <p>Domain 4 Ensuring that people have a positive experience of care; and</p> <p>Domain 5 Treating and caring for people in a safe environment; and protecting them from avoidable harm.</p>
<b>Co-Commissioning governance</b>	
Which CCG does this Paper relate to or potentially effect?	Slough <input checked="" type="checkbox"/> WAM <input checked="" type="checkbox"/> Bracknell & Ascot <input checked="" type="checkbox"/>

Is this paper related to a CCG statutory function?	Yes delegated
Is this paper related to a NHS England statutory function?	Yes, the commissioning of Primary Care services (Medical)
Potential conflicts of interest (who for?) <i>GP's, Practice Managers, Federations, Councils,</i>	GP's
Are all voting members eligible to vote?	YES
<p><b><u>Executive Summary</u></b></p> <p>The Quality Themed report provides an overview or the work undertaken by NHS England and the three CCG's (Windsor, Ascot and Maidenhead, Bracknell and Ascot and Slough CCG's) to help drive improvements in quality and patient safety.</p> <p>This report includes:</p> <ul style="list-style-type: none"> <li>• CQC inspections</li> <li>• Incident Reporting</li> <li>• Complaints</li> <li>• FFT</li> <li>• Safeguarding</li> <li>• Infection Prevention and Control</li> <li>• Quality Premium</li> <li>• GP Data Base</li> <li>• Quality Reporting</li> </ul>	
<p><b><u>Recommendation(s)</u></b></p> <p>The Joint Commissioning Committee in Common is asked to note the report .</p>	

<b><u>Chairs Use Only</u></b>	
Any known conflicted committee members from Declarations of Interest register?	No

# **Primary Care Quality Report**

**April to June 2016**

**For the Clinical Commissioning Groups  
(CCGs) in East Berkshire**

**July 2016**

## Contents

Glossary.....	6
Introduction.....	7
<b>CQC inspections.....</b>	<b>7</b>
<b>Incident Reporting.....</b>	<b>8</b>
<b>Complaints.....</b>	<b>8</b>
<b>FFT.....</b>	<b>9</b>
<b>Safeguarding.....</b>	<b>9</b>
<b>Infection Prevention and Control.....</b>	<b>9</b>
<b>Quality Premium.....</b>	<b>12</b>
<b>GP Data Base.....</b>	<b>12</b>
<b>Quality Reporting.....</b>	<b>14</b>
<b>Appendix 1.....</b>	<b>15</b>

## Glossary

Abbreviation	Full Term	Definition
CQC	Care Quality Commission	It is the independent regulator of health and adult social care services across England. Their responsibilities include registration, review and inspection of services and their primary aim is to ensure that quality and safety are met on behalf of patients.
FFT	Family and Friends Test	A national programme which asks patients whether they would recommend for example hospital wards maternity and A&E to their friends and family if they needed similar care or treatment
KPI	Key performance indicator	A type of performance measure which helps an organisation to define and measure their progress.
NRLS	National Reporting and Learning System	The National Reporting and Learning System (NRLS) is a central database of patient safety incident reports. All information submitted is analysed to identify hazards, risks and opportunities to continuously improve the safety of patient care
MRSA	Methicillin-resistant Staphylococcus aureus.	MRSA is a type of bacteria that's resistant to a number of widely used antibiotics. This means MRSA infections can be more difficult to treat than other bacterial infections.

## 1: Introduction

This report provides data where possible from April to June 2016. This is the first Quality Report prepared by the CCG Quality Team; previous reports have been prepared by NHS England. The report looks at the key issues in Primary Care. The report also highlights the different initiatives that are supporting the understanding of Quality in General practice by NHS England and the CCGs. It is envisaged that over the next year more Quality data will be able to be reported.

## 2: Care Quality Commission (CQC) Inspections

The table below identifies the position of all the Practices with reference to the CQC inspections. There are still a number of practices that are waiting for an inspection. Practices that were rated 'Requires Improvement' or 'Inadequate' will be re-inspection in 6 months from the time of the report publication. If the Practices are rated 'Requires Improvement' or 'Inadequate' they are provided with support from the Clinical Commissioning Group (CCG), NHS England and Royal College of GP's. There is 1 Practice that is rated 'Outstanding' and 2 that have moved from 'Inadequate' to 'Good'. In the 'General Practice Forward View' 2016 it states that CQC will be consulting on the future inspections of General Practice once this round of inspections has been completed.

Practice	Rating
<b>Slough CCG</b>	
40 Ragstone Road	<b>CQC have not inspected this service yet</b>
240 Wexham Road	<b>Inadequate (special measures)</b>
242 Wexham Road	<b>CQC are currently carrying out checks using the new way of inspecting services – report to be published.</b>
The Avenue Medical Centre	<b>Requires Improvement</b>
Bharani Medical Centre	<b>Good</b>
Slough Walk in Health Centre (BHFT)	<b>Good</b>
Crosby House Surgery	<b>Requires Improvement</b>
Farnham Road Surgery	<b>Not rated but passed routine inspection</b>
Cippenham Surgery	<b>Good</b>
Hershal Medical Centre	<b>Requires Improvement</b>
Kumar Medical Centre	<b>CQC have not inspected this service yet</b>
Langley Health Centre	<b>Outstanding</b>
Manor Park Medical Centre	<b>Good</b>
The Orchard Practice	<b>Good</b>
Shreeji Medical Centre	<b>Not rated but passed routine inspection</b>
Upton Medical Partnership	<b>Requires Improvement</b>
The Village Medical Centre	<b>Requires Improvement</b>
<b>Bracknell &amp; Ascot CCG</b>	
Forest End Medical Centre	<b>Good</b>
Binfield	<b>Good</b>
Boundary House Medical Centre	<b>Good</b>
Crownwood Medical Centre	<b>Good</b>
Easthampstead Surgery	<b>Inadequate (special measures)</b>
ergreen Practice	<b>Good</b>
Gainsborough Practice	<b>Good</b>

Great Hollands Practice	CQC are currently carrying out checks using the new way of inspecting services – report to be published.
Green Meadows Practice	Good
Heath Hill Surgery	Good
Kings Corner Surgery	Good
Magnolia House Surgery	Good
Ringmead Medical Practice	Not rated but passed routine inspection
The Sandhurst Group Practice	Good
The Waterfield Practice	CQC have not inspected this service yet
<b>Windsor, Ascot &amp; Maidenhead CCG</b>	
Radnor House Surgery and Ascot Medical Centre	Inadequate (special measures)
Cedars Surgery	Not rated but passed routine inspection
Claremont Surgery	CQC have not inspected this service yet
Holyport Practice	CQC have not inspected this service yet
Clarence Medical Centre	Good
Cookham Medical Centre	Good
Cordwallis Road Surgery (Bharani Medical Centre)	Good
Datchet Health Club	Good
Linden Medical Centre	CQC have not inspected this service yet
Lee House Surgery	CQC have not inspected this service yet
Redwood House Surgery	Good
Ross Road Medical Centre	Good
Rosemead Surgery (Dr Hutchings and Partners)	Requires Improvement
Runnymede Medical Practice	CQC have not inspected this service yet
Sheet Street Surgery	Good
Symons Medical Centre	Good
South Meadow Surgery	Good
Dedworth Medical Centre	CQC have not inspected this service yet
Woodlands Park Surgery	CQC have not inspected this service yet

### 3: Incident Reporting

General Practice has an internal reporting system but these incidents are very rarely reported to the National Reporting and Learning system (NRLS) through the General Practice Patient Safety Incident Report Form. There has been 1 incident reported on this system in the reporting period. This was a medication incident which was flagged to the surgery from Healthwatch. The CCG has agreed to fund an Incident reporting system for General Practice and a number of practices have agreed to support the development and piloting of this. The incidents will be viewed by the CCG and NHS England and will be uploaded to the NRLS.

### 4: Complaints

Patients, who wish to make a complaint about their practice, can make complaints directly with their practice or to NHS England. The majority of patients choose to do this directly with the practice., the numbers below are the numbers of complaints received by NHS England from 1 Jan 2016 to now. There have been;

Bracknell & Ascot – 6 complaints relating to GP practices

Slough – 5 complaints relating to GP practices



Windsor, Ascot and Maidenhead – 3 complaints relating to GP practices

Unfortunately due to Information Governance issues no other information was able to be shared from NHS England for this report.

## 5: Family and Friends Test (FFT)

The Quarter 4 data for the will be available in August.

Across the three CCGs the incidence of reporting the friends and family test varies quite substantially; typically Bracknell & Ascot CCG have the most practices reporting on a consistent basis from month to month, Slough CCG has nearly all of its practices reporting regularly but not consistently and Windsor, Ascot and Maidenhead CCG is probably the least consistent across the CCG for practice reporting with some practices failing to report at all or only once or twice throughout the year.

Across the 12 months there has been a gradual decline in the FFT data submitted across all three CCGs and as a result the number of patients 'extremely likely' or 'likely' to recommend a family member or friend to their practice if they needed similar care or treatment has decreased over the 12 months from January 2015 – January 2016. There has also been an increase throughout the year of the number of patients 'unlikely' or 'extremely unlikely' to recommend their practice to a family member or a friend. There are exceptions, for example, Slough CCG reported its best month of FFT scores in October however this was followed by a substantial reduction in patients stating that they would recommend the practice to a friend or family member the following month. It is recommended that practices are encouraged to distribute and collect FFT data going forward with a particular focus on those practices reporting substantially less than others.

## 6: Safeguarding

CQC inspections across primary care have taken place during 2015 – 2016. The CCG safeguarding team led by the Designated Nurse and Associate Director for safeguarding have an important role in supporting practices to prepare for their inspections and assist any improvements following inspections where safeguarding issues have been highlighted by the inspectors. The safeguarding team have good and effective relationships with primary care colleagues and the level of commitment demonstrated by primary care to improve their safeguarding practices has been good. There are no Practices involved in Serious Case reviews at present.

## 7: Infection Prevention and Control

The Infection Prevention and Control Nurse has been supporting Practices if there have been any issues raised by CQC. This has in some cases involved observational visits. The Nurse has also set up learning sets for the infection and Prevention leads in General Practice. The CCG Infection Prevention and Control Nurse also chairs the Root Cause Analysis investigation for *Clostridium difficile* infections and MRSA.

### 7.1: *Clostridium difficile* infections

#### ***Clostridium difficile* objectives in 2015/16 and 2016/17**

*Clostridium difficile* objectives for the three CCGs are shown in **Error! Reference source not found.** below.

**Table 1: *Clostridium difficile* objectives for three CCGs within East Berkshire 2015/16 and 2016/17**

CCG	<i>C. difficile</i> objective (number of cases) 2015/16 <sup>1</sup>	<i>C. difficile</i> ACTUAL (number of cases) 2015/16	<i>C. difficile</i> objective (number of cases) 2016/17 <sup>2</sup>	<i>C. difficile</i> ACTUAL (number of cases) 2016/17 YTD
Bracknell and Ascot CCG	18	15	18	4
Slough CCG	22	19	22	5
Windsor, Ascot and Maidenhead CCG	33	22	33	6

Source: Public Health England<sup>3</sup>; YTD:Year -to-date

**Table 2: Number of actual *Clostridium difficile* cases in 2016/17 in Bracknell and Ascot CCG along with monthly limits, YTD actual and YTD limits**

<i>C. difficile</i> cases	2016/17											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual	0	3	1									
Limit	1	2	1	2	2	3	2	1	1	1	1	1
YTD actual	0	3	4									
YTD Limit	1	3	4	6	8	11	13	14	15	16	17	18

Source: Public Health England<sup>4</sup>; YTD:Year -to-date

**Table 3: Number of actual *Clostridium difficile* cases in Slough CCG in 2016/17 along with monthly limits, YTD actual and YTD limits**

<i>C. difficile</i> cases	2016/17											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual	2	1	2									

<sup>1</sup> CDI Objectives for normal, teaching and specialist acute trusts and CCGs for 2015/16

<https://www.england.nhs.uk/patientsafety/wp-content/uploads/sites/32/2015/02/clostridm-difficile-infect-objct-15-16-guid-feb152.pdf>

<sup>2</sup> *Clostridium difficile* infection objectives for NHS organisations in 2016/17 and guidance on sanction implementation

<https://www.england.nhs.uk/patientsafety/wp-content/uploads/sites/32/2016/05/c-diff-objectives-guidance-16-17-v2.pdf>

<sup>3</sup> <https://hcaidcs.phe.org.uk/WebPages/HomePage.aspx>

<sup>4</sup>

<https://hcaidcs.phe.org.uk/WebPages/HomePage.aspx>

Limit	1	2	2	2	2	3	2	2	1	1	2	2
YTD actual	2	3	5									
YTD Limit	1	3	5	7	9	12	14	16	17	18	20	22

Source: Public Health England; YTD:Year -to-date

**Table 4: Number of actual *Clostridium difficile* cases in Windsor, Ascot and Maidenhead CCG in 2016/17 along with monthly limits, YTD actual and YTD limits**

C. difficile cases	2016/17											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual	2	2	2									
Limit	2	2	2	4	4	5	3	3	1	3	2	2
YTD actual	2	4	6									
YTD Limit	2	4	6	10	14	19	22	25	26	29	31	33

Source: Public Health England; YTD:Year -to-date

**Table 5: Number of *Clostridium difficile* cases within the three CCGs in 2016/17 compared to the same month in 2015/16**

Year	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Year end
2015/16	4	4	4	7	6	4	10	4	4	3	1	5	56
2016/17	4	6	5										

Source: Public Health England

- All 'community acquired' *Clostridium difficile* cases are now being reviewed at Post Infection Reviews.

## 7.2: MRSA infections

**Table 6: Monthly count of MRSA bacteraemia CCG PIR assigned cases from April 2016 to March 2017 in the three CCGs within East Berkshire.**

CCGs	2016/17											
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Bracknell & Ascot	0	0	0									
Slough	0	0	0									
Windsor, Ascot & Maidenhead	0	0	0									
<b>Total YTD</b>	<b>0</b>	<b>0</b>	<b>0</b>									

Source: Public Health England

- The case previously allocated to Slough CCG was assigned to third party following arbitration as the patient had no healthcare intervention prior to the diagnosis.

## **8: Quality Premium 2016/17 – Good Experience of making an appointment**

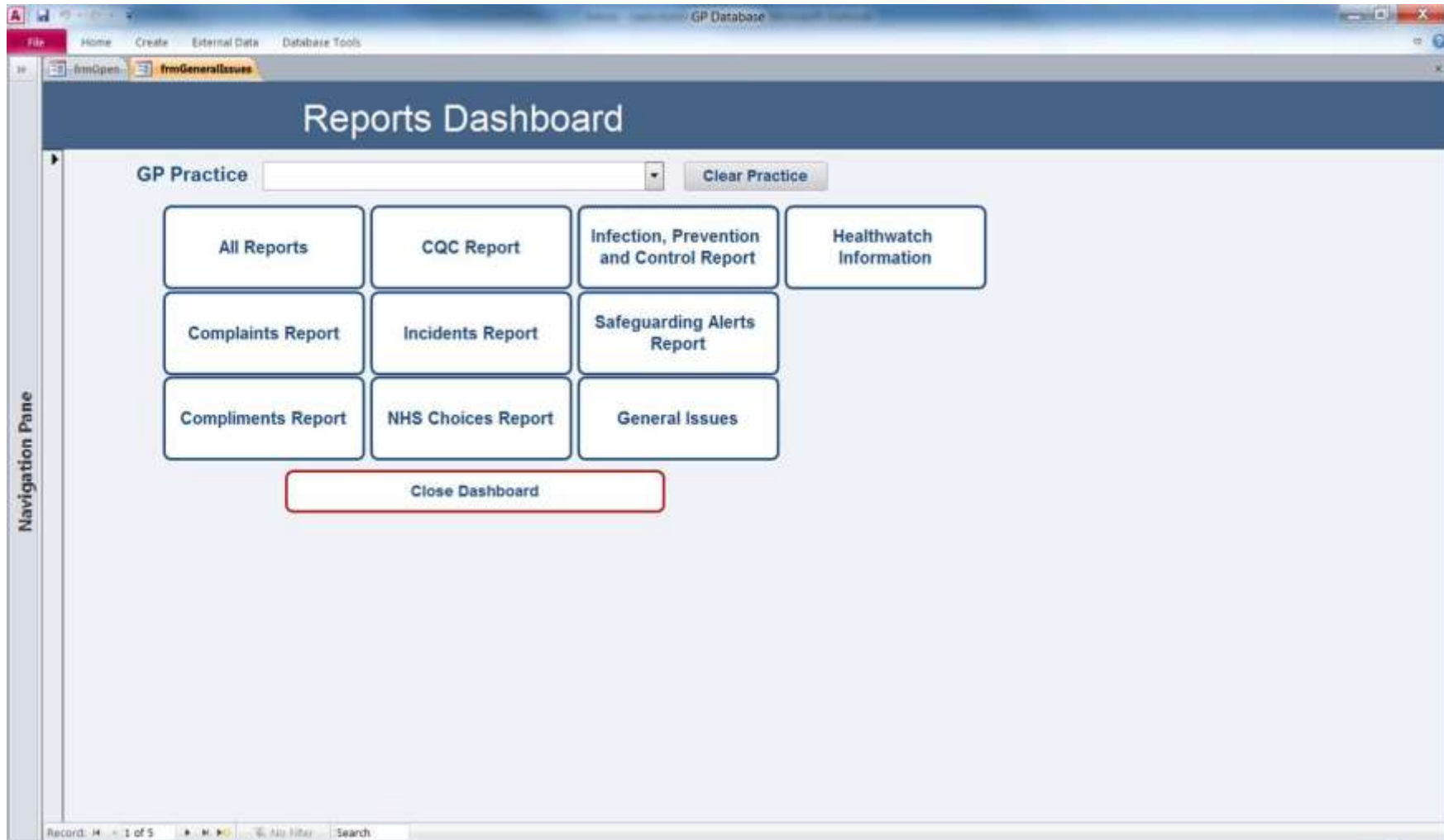
The target is for a 3% point increase from the July 2016 publication on the percentage of respondents who said they had a good experience of making an appointment

A task and finish group has been set up which is focusing on the quality premium target of the above. The national average for the amount of patients reporting a positive experience is 73% whilst 12% reported a poor experience (GP Patient Survey January 2016 publication). The average in Bracknell & Ascot CCG is 71% and 14% respectively (ranging from 59% - 92%), Slough CCG is 54% and 23% respectively (ranging from 38% - 82%) and Windsor, Ascot and Maidenhead CCG has 71% of patients reporting a positive experience and 12% poor (ranging from 56% - 89%).

The focus of the group is to take the learning from the practices which are performing the best in each CCG and sharing the knowledge across other practices. A guide will then be developed for practices to improve the overall experience of making a GP appointment indicator. The underperforming Practices will be targeted and supported the CCG and it is envisaged that this should increase the overall average across all three CCGs. The above steps need to be implemented by September if there is to be an improvement in the next survey in February.

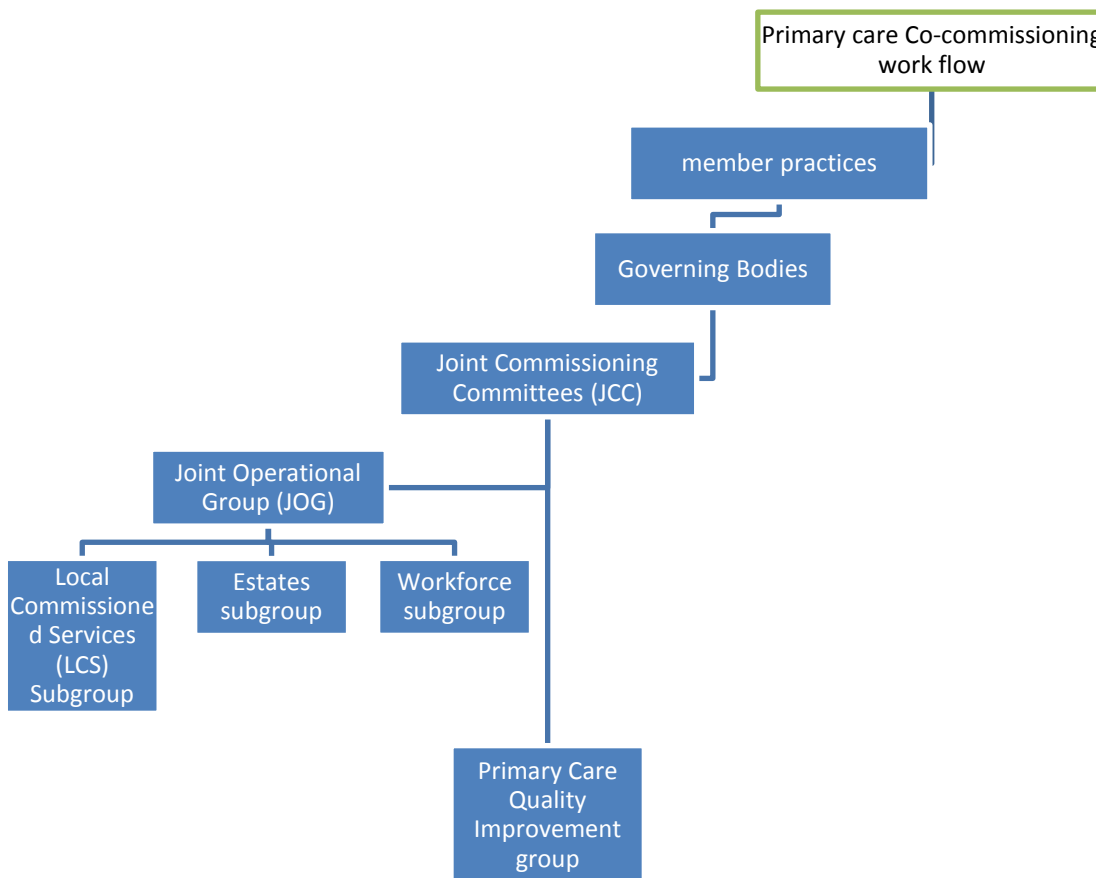
## **9: GP Data Base**

The Quality Team have developed a GP data base that holds all the Quality information in place concerning practices. It will be able to provide reports to support the Quality function in the future and identify any themes and trends. The screen shot below shows the different areas where data is being collected.



## 10: Quality Reporting

The flow chart below shows how the different groups feed in to the Joint Commissioning Committee and Governing Bodies. The Joint Operational Group and Primary Care Quality Improvement Group are working closely together to ensure that Quality issues are discussed and actions taken for improvement. A number of CCG and NHS England staff are members of both groups. The Terms of Reference for the Primary Care Quality Improvement Group are discussed as a separate agenda item. The business plan for the Primary Care Quality Improvement Group is attached as Appendix 1.



## Appendix 1:

Item	Frequency	Lead	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
<b>Quality Governance</b>														
Quality Strategy	Annual	CCG						✓						
Clinical Concerns Report	Quarterly			✓Q3		✓Q4		✓Q1		✓Q2				✓Q3
HCAI update	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Infection Prevention and Control Annual Report	Annual	CCG		✓										
Quality Committee Risk Register (Review)	Quarterly	CCG		✓			✓			✓			✓	
<b>Provider Quality Report</b>														
Quality Focus	Bi-monthly			✓		✓		✓		✓		✓		✓
Quality Report (Incidents, CQC, QOF, Safeguarding, Infection Control)	Quarterly	NHSE with CCG support	✓			✓			✓			✓		
Incident Report														
Quality Premium	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Performance – Quality Exception Report	As required	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Patient Experience</b>														
GP Patient Survey	Quarterly	CCG												
Patient experience report (FFT, NHS Choices,	Quarterly	CCG with NHSE				✓Q4		✓Q1				✓Q2		✓Q3

Item	Frequency	Lead	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Complaints/Complaints)		support												
Patient Story	Quarterly	CCG		✓		✓		✓		✓		✓		✓
Observational Quality Assurance Visit Reports	Bi-monthly			✓		✓		✓		✓		✓		✓
Healthwatch Agenda Item	Monthly	Healthwatch	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Safeguarding</b>														
Safeguarding update	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Safeguarding Cases of Concern	Quarterly	CCG			✓			✓			✓			✓
Safeguarding Scorecard	Quarterly			✓Q4				✓Q1				✓Q2		✓Q3
Annual Safeguarding Report	Annual	CGG		✓										
<b>Quality Committee Governance</b>														
Minutes from previous meeting	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Terms of Reference	Annual	CCG	✓											
Business Plan	Annual	CCG	✓											
Assurance from other meetings (JOC, Working Group)	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Review JOG part one minutes for quality issues and themes and trends from part two	Monthly	CCG	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓



