

Agenda Item 7

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

**Open Report on behalf of Andrew Crookham
Executive Director - Resources**

Report to	Health Scrutiny Committee for Lincolnshire
Date:	15 March 2023
Subject:	Arrangements for the Quality Accounts 2022-2023

Summary

The Health Scrutiny Committee for Lincolnshire is invited to consider its approach to the *Quality Accounts* for 2022-23 and to identify its preferred option for responding to the draft *Quality Accounts*, which will be shared with the Committee, by local providers of NHS-funded services.

Actions Required:

- (1) To determine which draft *Quality Accounts* for 2022-23 from the local providers of NHS-funded services where the Committee would wish to make a statement.
- (2) To consider the arrangements for drafting statements in response to *Quality Accounts* for 2023.

1. Legal Framework for Quality Accounts

The legal framework for *Quality Accounts* requires each significant provider of NHS-funded services is required to submit their draft *Quality Account* to:

- their local health overview and scrutiny committee;
- their local healthwatch organisation; and
- their relevant clinical commissioning group.

The regulations define 'local' as the local authority area, in which the provider has their principal or registered office. Whilst there is a requirement for local providers to submit their draft *Quality Account* to their local health overview and scrutiny committee, there is no obligation on such a committee to make a statement in response.

2. **What is a *Quality Account*?**

The content of a *Quality Account* is prescribed by regulations and must include:

- three or more **priorities for improvement** for the coming year;
- progress on the **priorities for improvement** in the previous year; and
- details of:
 - the types of NHS funded services provided;
 - any Care Quality Commission inspections;
 - any national clinical audits;
 - general performance and the number of complaints; and
 - mortality-indicator information.

Statements need not be limited to the content of the draft *Quality Account*, but could also reflect the views of the Committee on the quality of services provided during the course of the year by the provider. Each provider's final *Quality Account* has to be published by 30 June each year.

No Financial Content

The term *Quality Account* has been used by the Department of Health and Social Care since 2010 and has caused some confusion. For the purposes of clarity, a *Quality Account* does not focus on finances, but represents an account of the quality, as opposed to an account of the finances, of a particular organisation. Overall financial information on a particular trust is found in their annual report.

Organisations Required to Prepare a *Quality Account*

Organisations are required under the Health Act 2009 and the Health and Social Care Act 2012 to produce *Quality Accounts* if they:

- deliver services under a standard NHS contract, commissioned by an integrated care board or by NHS England; OR
- have over 50 members of staff and income from the NHS greater than £130,000 per annum.

Organisations providing primary care, such as GP practices, NHS dentists, community pharmacies and high street optometrists, are excluded from this requirement. Providers of NHS continuing care are also exempt.

3. **What Should a Statement on a *Quality Account* Cover?**

The Department of Health and Social Care has previously issued guidance to those making statements to focus on the following questions: -

- Do the priorities in the *Quality Account* reflect the priorities of local people?
- Have any major issues been omitted from the *Quality Account*?
- Has the provider demonstrated involvement of patients and the public in the production of the *Quality Account*?
- Is the *Quality Account* clearly presented for patients and the public?
- Are there any comments on specific issues, where the Committee has been involved?

The Health Scrutiny Committee is entitled to make a statement (up to 1,000 words) on the draft *Quality Account*, which has to be included in the final published version of the *Quality Account*.

4. **National Review of Arrangements**

NHS England has commissioned a review of *Quality Accounts* to determine how they could be improved and updated. This review will not affect the 2022-23 *Quality Account* process, but NHS England anticipates that changes may come into effect for next year, 2023-24.

5. ***Quality Account* Arrangements in 2022**

In 2022, the Committee agreed to provide statements on the draft *quality accounts* for the following three providers and established a working group for this purpose:

- East Midlands Ambulance Service NHS Trust
- North West Anglia NHS Foundation Trust
- United Lincolnshire Hospitals NHS Trust

As the requirement to share the draft quality account is stated in the regulations, other local providers have continued to share them, and their receipt is acknowledged by the Chairman on behalf of the Committee.

6. **Handling *Quality Accounts* in 2023**

In the table below is a list of providers of NHS-funded services, on which the Committee has previously made a statement. In recent years the Committee has concentrated on those providers, with identified quality issues, by principally focusing on the overall Care Quality Commission (CQC) rating of the provider. The table below includes the latest CQC rating and the date of the most recent CQC report. As the CQC has changed its approach to inspections as a result of the pandemic, it should be noted that several of the latest ratings are from 2019 or earlier.

Provider	Current CQC Rating	Date of Latest CQC Rating
East Midlands Ambulance Service NHS Trust	Good	17 July 2019
Lincolnshire Community Health Services NHS Trust	Outstanding	27 Sept 2018
Lincolnshire Partnership NHS Foundation Trust	Good	22 June 2020
Northern Lincolnshire and Goole NHS Foundation Trust	Requires Improvement	2 Dec 2022
North West Anglia NHS Foundation Trust	Requires Improvement	20 Dec 2019 ¹
St Barnabas Hospice	Outstanding	7 Nov 2019
United Lincolnshire Hospitals NHS Trust	Requires Improvement	8 Feb 2022

Other Health Overview and Scrutiny Committees

Three of the providers have their principal office located outside the administrative county of Lincolnshire. Two of the acute hospital providers, Northern Lincolnshire and Goole NHS Foundation Trust and North West Anglia NHS Foundation Trust, have been and continue to be willing to share their draft quality accounts with this Committee. Northern Lincolnshire and Goole NHS Foundation Trust would also expect statements on their draft quality account to be provided by the health overview and scrutiny committees from North Lincolnshire, North East Lincolnshire and the East Riding of Yorkshire. Similarly, North West Anglia NHS Foundation Trust would expect statements on their draft quality accounts to be provided by the health overview and scrutiny committees from Cambridgeshire and Peterborough.

Although the principal office of the East Midlands Ambulance Service (EMAS) is located in the City of Nottingham, EMAS shares its draft quality accounts with all twelve health overview and scrutiny committees in the area where it operates.

7. Arrangements for Making Statements in Response to Draft Quality Accounts

If the Committee were to choose to make statements on draft *Quality Accounts*, it could use one or both of the following options:

- working group arrangements (held virtually, potentially with representatives of the provider in attendance); or

¹ Peterborough City Hospital's urgent and emergency care services were inspected on 28 February and 1 March 2022, with the report published on 24 June 2022. As this was a focused (and therefore partial) inspection the services were not rated.

- the circulation of draft *Quality Accounts* on email, with a request for comments to be sent by email.

8. Conclusion

The Committee is invited to consider the arrangements for the *Quality Account* process for 2022-23. This includes the Committee making a decision on which quality accounts it would wish to review, and to consider whether to set up a working group.

9. Consultation

This is not a consultation item. However, as part of the annual *Quality Account* process, the Health Scrutiny Committee for Lincolnshire is entitled to make a statement up to 1,000 words on the content of each local provider's draft *Quality Account*.

10. Appendices

These are listed below and attached to this report.

Appendix A	Quality Accounts 2021-22 – Summary of the Priorities of the Main Providers of NHS-Funded Services for Lincolnshire Residents
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11. Background Papers - No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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SUMMARY OF THE PRIORITIES FOR IMPROVEMENT OF THE MAIN PROVIDERS OF NHS-FUNDED SERVICES IN THE QUALITY ACCOUNTS

East Midlands Ambulance Service NHS Trust

Priorities for Improvement

- (1) We will work with the National Ambulance Service Patient Experience Group to develop a metric to enable us to measure dignity and compassion.
- (2) We will continue to promote the safe and appropriate use of alternatives to emergency departments, by ensuring that our staff have the necessary knowledge, skills, experience and confidence to do so. This will include ensuring that staff have digital access to shared records and to senior clinical support where required.
- (3) We will improve our performance against the nationally reported ambulance system indicators and clinical outcomes, with a particular focus on cardiac arrest. We will do this through a robust audit programme, effective clinical leadership, sharing learning and implementing improvement strategies.
- (4) We will continue to learn from when things go well, as well as when they go wrong; ensuring that learning is shared both internally and externally to improve the quality of care we provide to our patients. We will work collaboratively with partners to identify and mitigate risks across the system, in particular those associated with hospital handover delays and resulting delayed responses and implement the Patient Safety Incident Response Framework once published.
- (5) We will improve the timeliness and efficiency of managing safeguarding referrals raised by our staff by fully automating the referrals process ensuring that relevant third parties are alerted in real time.

The quality account for 2021/22 is available at the following link:

<https://www.emas.nhs.uk/about-us/trust-documents/>

Lincolnshire Community Health Services NHS Trust

Priorities for Improvement

- (1) Improving the quality and personalisation of Recommended Summary Plan for Emergency Care and Treatment
- (2) Patient needs are identified with them at first contact.
- (3) Celebrating good practice, learning from excellence.

The quality account for 2021/22 is available at the following link:

<https://www.lincolnshirecommunityhealthservices.nhs.uk/about-us/our-publications/quality-accounts>

Lincolnshire Partnership NHS Foundation Trust

Priorities for Improvement

- (1) Improve the involvement of carers and families in patient/service users' care
- (2) Make it easier for people who use our services to share their experiences of care by providing a range of methods to provide feedback across the services. This feedback will inform service development and improvement.
- (3) Improve the involvement of carers and families in patient/service users' care.
- (4) Establish a Memory Assessment Digital Pathway to support widening of the offer for patients with cognitive issues

The quality account for 2021/22 is available at the following link:

<https://www.lpft.nhs.uk/about-us/accessing-our-information/annual-reports-and-accounts>

Northern Lincolnshire and Goole NHS Foundation Trust

Priorities for Improvement

- (1) *Mortality Improvement* - This priority seeks to support further improvement with advanced care planning for patients who are at end of life and require individual plans to ensure care is provided at the right time and in the right place.
- (2) *Deteriorating Patient* - This priority continues the focus on improving the processes and systems around escalation.
- (3) *Sepsis* - This priority continues the focus on the delivery of the sepsis six standards within agreed timeframes.
- (4) *Increasing Medication Safety* - This priority focuses on the safety around prescribing for drugs that require a 'weight for dosing'.
- (5) *Friends and Family Test and PALS* - This priority aims to support improvement in responding to PALS complaints within set timescales and improving patient and family feedback rates to enable direct patient driven improvements.
- (6) *Safety of Discharge* - This priority focuses on continued improvements in patient flow through the Trust's hospitals. They also focus on performance with issuing discharge communications to the patient's GP Practice within defined timescales.

The quality account for 2021/22 is available at the following link:

<https://www.nlg.nhs.uk/resources/quality-accounts/>

North West Anglia NHS Foundation Trust

Priorities for Improvement

- (1) To transition from current patient safety incident investigation process and practices to thematic and shared learning.
- (2) To relaunch the friends and family test to provide real-time feedback.
- (3) To use patient and carer stories as an integral feedback method, to highlight any successes, challenges and gaps.
- (4) To enhance the patient experience through the use of volunteers in emergency departments support flow and capacity.
- (5) To develop the non-medical workforce, including advanced clinical practitioners and allied health professionals.
- (6) To improve the care of the deteriorating patient.
- (7) To provide front line staff with the IT infrastructure and resources to support the safeguarding of children and vulnerable adults.
- (8) To provide a safe maternity service.
- (9) To reduce clostridium difficile infections.
- (10) To undertake quality improvement work following the receipt of any reports from the integrated care system and the Care quality Commission.

The quality account for 2021/22 is available at the following link:

United Lincolnshire Hospitals NHS Trust

Priorities for Improvement

- (1) *Discharge and Compliance with the SAFER* - To identify further opportunities for harm-free care and improved discharge processes, including:
 - care closer to home
 - working together
 - prevention
 - person centred care
- (2) *Diabetes Management* – To review of all incidents and identified outputs, including:
 - new insulin prescription pathway and development of diabetes e-passport
 - diabetes inclusion in the ward safety huddle
 - diabetes in-reach service
- (3) *Improving the Safety of Medicines*
 - to reduce avoidable medicine errors and serious incidents
 - to improve staff training and skill to support to improve the quality of service
 - to reduce medication waste
 - to improve education and competency with drug administration and *storage*.

The quality account for 2021/22 is available at the following link:

[Annual reports and plans - United Lincolnshire Hospitals \(ulh.nhs.uk\)](https://www.ulh.nhs.uk/annual-reports-and-plans)