
**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee – 26 May 2016
Subject: Quality Accounts 2015 / 2016
Report of: Governance and Scrutiny Support Unit

Summary

All NHS healthcare providers must produce Quality Accounts as annual reports for members of the public, giving details about the quality of the services they provide. Health Scrutiny Committees are entitled to comment on draft Quality Accounts for each healthcare provider within their local authority area and these comments must be included within the final published version. Members were provided with copies of the draft Quality Accounts from Central Manchester NHS Foundation Trust (CMFT) and the University Hospitals of South Manchester Foundation Trust (UHSM) and Manchester Mental Health and Social Care Trust (MMHSCT) for comment.

Recommendations

To note the Health Scrutiny Committee responses to the Quality Accounts submitted by Central Manchester NHS Foundation Trust (CMFT), the University Hospitals of South Manchester Foundation Trust (UHSM) and Manchester Mental Health and Social Care Trust (MMHSCT) appended to this report.

Wards Affected: All

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

None

1. Introduction

- 1.1 Quality Accounts (QA) are reports about the quality of services provided by an NHS healthcare service. All healthcare providers must publish these. Each healthcare provider is required to make their QA available to the public every year in an easy to understand format.

2. Quality Accounts

- 2.1 The main purpose of the QA is to encourage leaders of healthcare organisations to assess quality across all of the services they provide, including community services and to encourage them to make ongoing improvements where necessary. QA are aimed at members of the public and as such, describe the quality of services beyond the regulatory requirements set out by the Department for Health. Quality is measured by looking at the following:
- patient safety
 - the effectiveness of treatments that patients receive
 - patient feedback about the care provided
- 2.2 The final published version of QA should include the following elements:
- A statement from the most senior manager of the organisation which describes a summary of the quality of healthcare provided by the organisation that they are responsible for. Within this statement senior managers should declare that they have seen the Quality Account and that they are happy with the accuracy of the data reported, and acknowledge of any, areas that need to be improved.
 - Information about how the healthcare provider measures how well it is doing, how it is continuously improving the services it provides and how it responds to regulatory inspections from bodies such as the Care Quality Commission (CQC).
 - A statement from the commissioning body on what they think of the provider's QA.

3. The role of the Health Scrutiny Committee

- 3.1 Health Scrutiny Committees are entitled to comment on draft Quality Accounts for each healthcare provider within their local authority area and these comments must be included within the final published version.
- 3.1 Members were provided with copies of the draft QA from Central Manchester NHS Foundation Trust (CMFT), the University Hospitals of South Manchester Foundation Trust (UHSM) and Manchester Mental Health and Social Care Trust (MMHSCT). The Committee were invited to consider the content of the QAs and agree a formal response, written by the Chair on behalf of the Committee.
- 3.2 Copies of the three responses are appended to this report.

Manchester City Council Health Scrutiny Committee - Response to Central Manchester Foundation Trust Quality Accounts 2015/16

As Chair of the Health Scrutiny Committee I would like to thank you for the opportunity to comment on the Central Manchester Foundation Trust Draft Quality Accounts for 2015/16. Copies of the draft quality accounts were circulated to members of the Committee for consideration and comments received have been included below. We would like to submit the following commentary to be included within your final published version.

The Committee noted that the statement from the Chief Executive and the Executive Medical Director sets a tone of directness and transparency in the Quality Accounts and that the statement identifies achievements around the issues of Mortality, Patient Safety and Harm Free Care and Medical Education.

The Committee welcomes the continued commitment to improvement to the quality of services and care, and welcomed the described outcomes of the Trust Quality Reviews and the measures identified to address issues identified. The Committee further welcomes and supports the Board of Directors' clinical objectives for 2016/17.

The Committee welcomed the results of the recent Care Quality Inspection that rated the Trust as 'Good' placing you in the top 10% of large acute Trusts in the country. The Committee were particularly pleased to note that the Child and Adolescent Mental Health Services received a rating of 'Outstanding'. The Committee further welcomed the recognition that patients presenting with both physical and mental health problems do not always receive the correct support and acknowledge that a plan has been implemented to address this. The Committee fully support this initiative and look forward to learning of the outcomes of this work at a future meeting of the Committee.

The members recognise that the Emergency Department experiences significant daily pressures upon the service, and the Trust highlights the increase in attendances, and the acuity and admission rates of attendees in the 2015/16 year. The Committee visited this Department during this municipal year and would once again like to extend its thanks for what was an insightful visit. The Committee were disappointed to note that the CQC had rated this area of activity as 'Requires Improvement', however note that a strategy has been identified to address this. The Committee noted that the reported percentage of patients readmitted to hospital within 28 days indicates that the numbers are below the expected figures for 2015/16, however it would assist the reader if comparative data against other local hospitals is provided.

The Committee noted that despite these pressures upon the Emergency Department improved services are reported at the Emergency Gynaecology Unit, the Paediatric Emergency Department and the Emergency Eye Department.

The Committee found the detail of the Trust's divisional reports in Section 13 helpful and clear in setting out the priorities, outcomes, challenges and risks for each of CMFT's 9 divisions. The Committee also noted that a number of thematic priorities

and challenges exist across more than one division, and that these remain consistent with last year's report.

The Committee welcomes the reported work of the Transformation Team, and the report details the many areas of ongoing work, such as the development of the 'patientrack' system and integrated care. The Committee recognise and support the continued development of an integrated Health and Social Care model to improve the health outcomes for all the residents of Manchester. The Committee further noted the improvements reported in the documentation available in community settings, such as the information regarding pressure ulcers that have improved the standards of care within the community care setting.

The Committee remain concerned about the impact of staffing across the Trust, a problem no means unique to the Trust, but highlighted by the CQC as a concern. The Committee therefore welcomes the significant work that has been put in to developing medical education standards for Junior Doctors, ensuring that staff are well developed and retained.

The members further supported the development of the recording system, shared amongst a range of health professionals to develop care plans to prevent those patients identified as being at risk of being admitted to unscheduled or unplanned care.

The Committee welcome the improvements described to reduce the number of incidents of Acute Kidney Injury and congratulate the team noting that they had been recognised nationally for this work.

The Committee were disappointed that the Trust's priority around improving Medication Safety was not met, but are reassured that the Trust has a strong focus on implementing lessons learned.

The Committee were also disappointed that the number of reported Never Events was 6 against the target of 0, however noted that none of these had resulted in serious harm and that measures have been implemented to address and monitor this situation.

The Committee welcomes the continued work underway to improve End of Life Care, as highlighted in last year's comments also.

The Committee welcomed the Trust's response to the CQC's reporting that more work needed to be done to improve the standard of care experienced by young people transitioning into adulthood.

Overall the Quality Accounts are positive and reflect the successful operation of a large and complex organisation serving many thousands of patients in an efficient and compassionate manner. Throughout the document numerous examples are provided that demonstrate that the organisation is committed to, and actively encourages and responds to feedback from patients, staff and carers across a range of services.

Manchester City Council Health Scrutiny Committee - Response to Manchester Mental Health and Social Care Trust Quality Accounts 2015/16

As Chair of the Health Scrutiny Committee, I would like to thank you for the opportunity to comment on the Manchester Mental Health and Social Care Trust Quality Accounts for 2015/16. Copies of the draft quality accounts were circulated to members of the committee for consideration and comments received have been included below. We would like to submit the following commentary to be included within your final published version.

The Introduction clearly describes the purpose and content of the Quality Account and the Chief Executive's Statement identifies achievements and milestones of the previous twelve months and further describes the ambitions and challenges for the coming year.

The Committee felt that throughout the report information is well presented and understandable to the lay reader, for example the 'Performance against the agreed 2015/16 Priorities' summary is accessible and the accompanying commentary provided is concise and clear and refrains from the use of jargon, again making this an accessible document.

The report clearly describes the priorities that the Trust has identified for 2016/17. The Committee welcomes these and the assurance stated that these had been agreed following feedback and engagement with a range of stakeholders including service users and carers. The description provided against each priority clearly sets out the rationale, targets and the governance and reporting arrangements for each priority. The Committee welcomes the decision to monitor the development of each work stream by reporting this to the monthly meetings of the Service Users and Carer Forum, and regularly updating the information that will be available on line.

In regard to performance the Committee welcomes the information provided that reports the Trust's performance against the seven Mandated Quality Indicators. The Committee welcomes the reported rates of those patients on the Care Programme Approach who were followed up within 7 days after discharge from psychiatric in-patient care and the reported low incidents of patient readmissions.

The Committee recognises the challenges facing the Trust, and notes that while the Care Quality Commission rated the Trust as 'Requires Improvement' a clear action plan has been put in place to address the issues identified.

The Committee welcomes the positive findings of the Entry and Exit Questionnaires for service users and that the Care Quality Commission reported that care was 'Good' throughout the organisation.

The Committee further notes that where areas for improvement had been identified, such as ongoing issues around staff satisfaction, strategies have been developed to address these. The report clearly describes these actions and a narrative is provided to describe how improvements will be implemented.

The Committee welcomes the actions described and commitment stated to improving patient experience. The Committee particularly welcomes the stated commitment that the patient experience is to be considered during transformational change and service development.

The Committee welcomes and supports the Trust's recognition of the important and essential role of carers in supporting people with mental health problems. We note the commissioned Manchester Carers Forum and support the ongoing programme of work and activity to support carers across the city. Similarly the Committee notes the opportunities described to improve patient engagement and supports the continued approach to involving both patients and carers in the development and delivery of services.

The Committee notes the powerful impact of the patient story used at Trust Board meetings, we recognise that this is an effective and valuable tool to highlight themes and develop awareness around the impact of services as experienced by service users.

The Committee previously highlighted the number of readmissions within 28 days, and recognises the impact continued work has had, which now sees this figure to be cumulatively below the national average in this financial year.

Throughout the report the Trust demonstrates its commitment to Quality Performance and the report provides clear examples of this across a range of services. These examples provide the reader with a description of the service and describes achievements to date, as well as initiatives and programmed activity for 2016/17. The Committee particularly welcomes the improvements described around Inpatient and Urgent Care services.

The Committee welcomes the assurances given that activity around performance will continue to be monitored and reviewed. This is demonstrated by the production of the Quality Dashboard that is to be reviewed and monitored by the Quality Board. The Committee further welcomed the reported implementation of the 15 Step Challenge to assist healthcare teams deliver the best possible care to patients visited in their home setting. The Committee acknowledges the involvement of the Trust's Patient Experience Committee in the development of the schedule and future monitoring of its implementation.

The Quality Account is a document concentrating on challenges and responses relating to 2015/16. Overall the Quality Account is positive and reflects the successful operation of a complex organisation serving many service users and patients in an efficient and compassionate manner.

Manchester City Council Health Scrutiny Committee - Response to University Hospital of South Manchester Foundation Trust Quality Accounts 2015/16

As Chair of the Health Scrutiny Committee I would like to thank you for the opportunity to comment on the University Hospital of South Manchester Foundation Trust Draft Quality Accounts for 2015/16. Copies of the draft quality accounts were circulated to members of the committee for consideration and comments received have been included below. We would like to submit the following commentary to be included within your final published version.

The Introduction and Chief Executive's Statement clearly outlines what the Quality Account is to include and outlines achievements with regard to a range of initiatives such as Patient Safety and delivery of the Trust's Dementia Strategy. The draft report clearly describes measurable outcomes, offering a clear comparison with activity and achievement against 2014/15 performance. Each section of the report provides the reader with a clear narrative and the inclusion of a list of acronyms is useful to assist the lay reader to understand the document.

The described performance against Quality Improvement Priorities demonstrates that UHSM has achieved or are close to achieving the majority of the targets set in relation to Patient Safety, Clinical Effectiveness and Staff Engagement. This is to be congratulated.

The Committee acknowledge the ambitious target set by the Trust to be within the top twenty percent of acute hospitals trusts in England for positive recommendations via the Friends and Family Test, and although this target was not achieved your results demonstrate a higher than national average figure and an improvement on the previous year.

The Committee welcomes the reported successful implementation of the Ward Accreditation Scheme across patient areas and congratulates all staff involved. In particular we note that Ward F15 has been awarded Diamond Status. The Committee further welcomes and supports the successful implementation of the Accreditation Scheme in the nine community nursing settings that the Trust has responsibility for.

The Committee welcomes the acknowledgement of, and commitment to employee engagement that has been demonstrated throughout the report. This is further demonstrated by the positive feedback obtained from staff via the staff survey.

The Committee welcomes the Trust's stated commitment to reducing incidences of avoidable harm. We note that the UHSM had achieved the objective for *Clostridium difficile* but failed the zero tolerance objective for MRSA. However we acknowledge the measures described to monitor and review this across all hospital activity.

With reference to performance against Key National Priorities the Committee were disappointed to note the four hour A&E wait target had not been achieved and that the recorded performance for 2015/16 is significantly worse than for 2014/15. The Committee is concerned about the poor and worsening performance in relation to A&E waits, and hopes to see the Trust meet the national target of 95% by April 2017.

We further note that the numbers of reported re-admissions within 28 days is higher than the national average and has increased in the last 12 months.

The Committee welcomes the reported figures regarding activity around cancer referrals and treatment and note that this is higher than the national threshold in all categories.

The Committee welcomes and supports the priorities for 2016/17 that are laid out clearly and note that these have been agreed in consultation with a number of stakeholders. The themes of clinical safety and patient outcomes are welcome, particularly around 'Sign up to Safety' and the work to improve the care pathway for those presenting with mental ill-health. We further welcome that all identified priorities will be monitored and measured.

The Committee welcomes the designation of the Trust as an early implementer site of the NHS work to improve the ten clinical outcomes and patient experience across a seven day a week service. The Committee looks forward to hearing about the work of the Steering Group in the Future.

The Committee acknowledges that this is a positive and transparent draft Quality Account with evidence included so that chronological and organisational comparisons can be made. It is also a forward looking document identifying evidence of achievement or risk as the basis for future plans.

It has been important to highlight areas of some concern where we expect UHSM to improve over the next year. Overall the Quality Account is positive and reflects the successful operation of a complex organisation serving many thousands of patients in an efficient and compassionate manner.