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**Manchester City Council  
Report for Information**

**Report to:** Health Scrutiny Committee – 20 June 2017  
**Subject:** Quality Accounts 2016 / 2017  
**Report of:** Governance and Scrutiny Support Unit

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**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), the University Hospitals of South Manchester Foundation Trust (UHSM) and Greater Manchester Mental Health NHS Foundation Trust (GMMH) for comment.

**Recommendations**

To note the Health Scrutiny Committee responses to the Quality Accounts submitted by the University Hospitals of South Manchester Foundation Trust (UHSM) and Greater Manchester Mental Health NHS Foundation Trust (GMMH) appended to this report.

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**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); and
- 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.

- 3.2 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 Greater Manchester Mental Health NHS Foundation Trust (GMMH). 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.

Unfortunately a response to Central Manchester NHS Foundation Trust (CMFT) could not be provided within the prescribed time scale.

**Manchester City Council Health Scrutiny Committee - Response to Greater Manchester Mental Health NHS Foundation Trust Quality Account 2016/17**

15 May 2017

Dear Greater Manchester Mental Health NHS Foundation Trust,

Manchester City Council Health Scrutiny Committee - Response to Greater Manchester Mental Health NHS Foundation Trust Quality Account 2016/17

As Chair of the 2016/17 Health Scrutiny Committee, I would like to thank you for the opportunity to comment on the Greater Manchester Mental Health NHS Foundation Trust Quality Account for 2016/17. Copies of the draft quality account 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 recognises that the Greater Manchester Mental Health NHS Foundation Trust has recently been established following the successful acquisition of the Manchester Mental Health and Social Care Trust (MMHSCT) by Greater Manchester West Mental Health NHS Foundation Trust (GMW) in January of this year and welcomed the information provided. The committee were pleased to welcome you at a recent Health Scrutiny Meeting.

We noted that the report clearly describes the activities of GMW and MMHST during the previous year and through this provides the Committee with reassurance that a commitment is demonstrated to deliver an improved mental health service for the residents of the city.

The draft report clearly describes measurable outcomes, offering a clear comparison with activity and achievement against 2015/16 performance where available. The Committee noted that each section of the report provides the reader with a clear narrative.

The Committee welcomed that the Care Quality Commission had rated GMW as 'good' and that the report throughout described a commitment to sound governance, data quality and staff health and wellbeing. The Committee were pleased to learn that GMW were above the national target for patients followed up seven days after discharge from psychiatric inpatient care and above the national target for enhancing quality of life for people with long term conditions.

The Committee were pleased to note that GMW had achieved all of the Performance against Key National Priorities targets.

The Committee welcomes the reported national and international recognition that GMW has received for the various initiatives described and noted the continued commitment to participation in clinical research to improve patient outcomes and influencing academic understanding.

The Committee believes that staff are central to the successful delivery of efficient and caring services. The Committee welcomes the acknowledgement of, and commitment to employee engagement that has been demonstrated throughout the report. This is further demonstrated in the positive feedback obtained from staff via the independent staff survey that highlighted that GMW had scored above average on 21 of the 32 key findings when compared to other mental health trusts.

The Committee also noted that a consistent theme throughout the report is a commitment to positive experience of care. This is clearly demonstrated in the results of the Friends and Family Test and we noted the positive comments provided by service users and carers.

The Committee welcomed the information provided at Part 3 of the report that described the delivery of Quality Account Priorities for Improvement in 2016/17. The narrative provided is clear and the use of case studies adequately demonstrates the improvements achieved.

With regard to the six improvement priorities identified for the forthcoming year the Committee welcomes these, in particular priority 5 that seeks to reduce out of area placements; activities to reduce delays in patient discharge and the delivery of 24/7 community based treatments, and priority 6, Improving Access to Psychological Therapy. These are areas of improvement that the Committee has advocated for over the previous years and we will be keen to monitor the implementation of these. The challenge for the year ahead will be to ensure that progress is made and reported in these areas.

The Committee welcomed this document as a positive first draft Quality Account with evidence included so that chronological and organisational comparisons can be made. Overall the Quality Account is very positive and reflects the successful operation of an organisation serving many service users and patients in an efficient and compassionate manner.

Councillor Bev Craig  
Chair of the Health Scrutiny Committee

**Manchester City Council Health Scrutiny Committee - Response to University Hospital of South Manchester NHS Foundation Trust Quality Account 2016/17**

12 June 2017

Dear University Hospital of South Manchester NHS Foundation Trust,

Manchester City Council Health Scrutiny Committee - Response to University Hospital of South Manchester NHS Foundation Trust Quality Account 2016/17

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 NHS Foundation Trust Quality Account for 2016/17. Copies of the draft quality account 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 draft report submitted clearly describes measurable key outcomes, offering a clear comparison with activity and achievement against 2015/16 performance where available. The Statement from the Chief Executive sets a tone of directness and transparency in the Quality Account and the statement identifies key achievements.

The Committee noted that each section of the report provides the reader with a clear narrative and the inclusion of a list of acronyms is particularly useful to assist the lay reader to understand the document.

The Committee acknowledged that staff are central to the successful delivery of an efficient and caring service. The Committee welcomes the stated commitment to safe staffing levels and that the ongoing recruitment of nurses is reviewed monthly by the Board. The Committee further welcomes the sharing of staffing information with the public and noted that this was a positive initiative.

The Committee further noted that a consistent theme throughout the report is a stated and demonstrable commitment to positive experience of care and patient safety. The Committee welcomed the continued commitment to participating in the Ward Accreditation Scheme.

The report clearly describes the activities and initiatives undertaken to promote the 'Sign Up to Safety' scheme and further described the lessons learnt through adopting this approach to patient care. The positive outcome of this area of activity is further demonstrated in the reported findings of the Friends and Family Test that report an above national average outcome. The Committee were pleased to note that a range of methods had been utilised to capture this information to inform the finding.

Furthermore the Committee noted the positive ongoing work that is being undertaken in response to the issues identified by the Care Quality Commission following their inspection in 2016. With regard to the reported Performance against Key National Priorities in 2016/17 the Committee noted that the Trust had achieved the majority of the national acute targets. The Committee further noted that the Trust had set itself a very challenging target of 95% for the emergency access four hour wait in 2016/17;

and whilst the reported figures are slightly below this target it is acknowledged that this is a situation not unique to UHSM.

The Committee were pleased to learn that all of the performance against the Quality Improvements Priorities as described in the Quality Account for 2015/16 had been achieved or rated as close to target. The Committee recognised that this is an achievement and testimony to the commitment and dedication of all of the staff at the hospital to improve services for patients.

The Committee further welcomed the descriptions provided that clearly detail the actions agreed by UHSM to achieve the outcomes required by the 'NHS Outcomes Framework 2016/17'.

With regard to the priorities identified for the forthcoming year the Committee notes and welcomes these, in particular the inclusion of Dementia and Seven Day Services as priorities. In addition the Committee welcomed the stated commitment to improving Mental Health Services for those patients presenting at the Emergency Department and improving their patient care pathways. These are areas of improvement that the Committee has advocated for over the previous years and we will be keen to monitor the implementation of these.

The Committee welcomed this document as a positive draft Quality Account with evidence included so that chronological and organisational comparisons can be made. Overall the Quality Account is very positive and reflects the successful operation of an organisation serving many service users and patients in an efficient and compassionate manner.

Councillor Bev Craig  
Chair of the Health Scrutiny Committee