

Meeting of Primary Care Commissioning Committee

Date: 26th November 2019

Time: 9:00 – 10:50

Location: Clevedon Hall, Elton Road, Clevedon, North Somerset

Agenda Number :	9
Title:	Primary Care Quality Monthly Report
Purpose: Discussion and For Information	
Key Points for Discussion:	
<p>This paper provides the following:</p> <ul style="list-style-type: none"> - Recently published Primary Care, Care Quality Commission (CQC) reports. - Friends and Family Test (FFT) results for September 2019. - Updates on Influenza management - Proposed Quality Calendar for 2020. 	
Recommendations:	<ul style="list-style-type: none"> • To note the monthly updates provided • To approve the proposed Quality Calendar for deep dives in 2020.
Previously Considered By and feedback :	Primary Care Operational Group 14 th November 2019.
Management of Declared Interest:	None declared
Risk and Assurance:	Actions to address any highlighted risks have been added to the paper in each section.
Financial / Resource Implications:	There are no specific financial resource implications highlighted in this paper.
Legal, Policy and Regulatory Requirements:	There are no specific legal implications in this paper.
How does this reduce Health Inequalities:	Monitoring of Primary Care Quality and Performance will highlight any areas of Health Inequalities within BNSSG which will then be addressed accordingly.

How does this impact on Equality & diversity	Monitoring of Primary Care Quality and Performance alongside practice demographic information will help to highlight areas of variation of service which will then be addressed accordingly.
Patient and Public Involvement:	Whilst there has not been any direct consultation and communication with the public in production of this paper, patient experience and public involvement is recognised as an important factor in reviewing and gaining assurances regarding Primary Care services.
Communications and Engagement:	This paper is being discussed in an open session of PCCC
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Sponsoring Director / Clinical Lead / Lay Member:	Julie Thallon, Director of Nursing and Quality

Agenda item: 9

Report title: Primary Care Quality Monthly Update

1. Background

Following an annual review of Primary Care Quality Reporting at Primary Care Commissioning Committee it was agreed that information regarding recent Care Quality Commission (CQC) inspection reports, Friends and Family Test (FFT) data and seasonal Influenza would be reported on a monthly basis. In addition to this updates would be provided regarding any specific quality escalations which had occurred.

This report also includes a proposed calendar for themes where deep dives will be undertaken in 2020.

2. Primary Care Monthly Quality Monitoring

a. Care Quality Commission (CQC) Published Reports

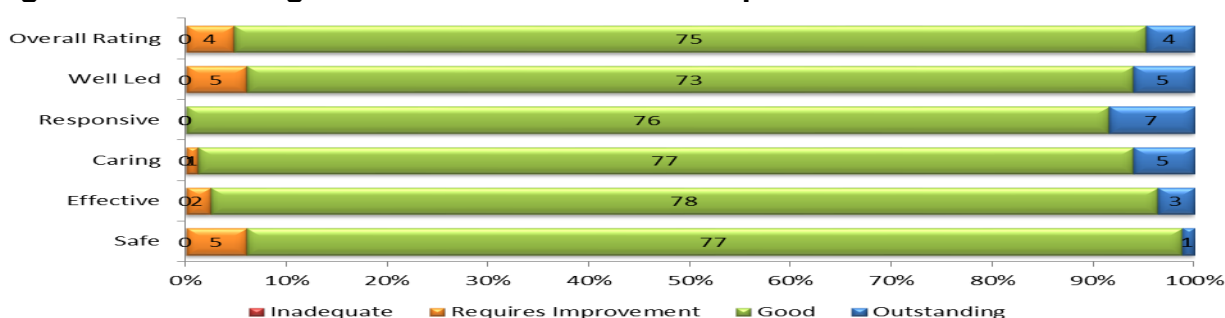
One BNSSG practice has had a CQC inspection report published since the last report. Broadmead Medical Centre received a 'Good' Overall rating and 'Good' for all domains.

Figure 1: Recently published CQC ratings for domains

Practice	Publication Date	Overall Rating	Well Led	Responsive	Caring	Effective	Safe
Broadmead	31/10/2019	Good	Good	Good	Good	Good	Good

The graph below shows the overall CQC rating position of all practices within BNSSG. There are currently no practices with a rating of 'Inadequate' in any domain.

Figure 2: CQC ratings for domains for all BNSSG practices



Within Primary Care the CQC also inspects the quality of care for six population groups. Broadmead Medical Centre received 'Outstanding' for the population group 'Vulnerable People' This relates to the nursing team having a programme of regular visits to a local hostel and a homeless centre to offer health screening and support people to access local health services. The close working with the homeless health service was also recognised.

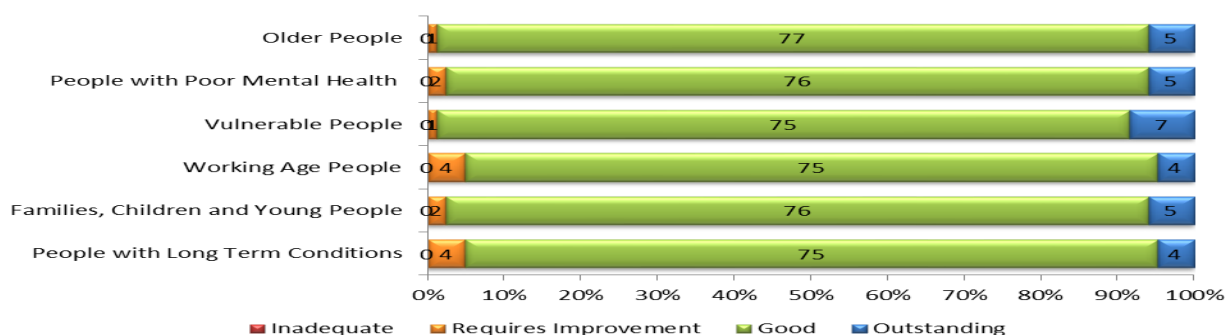
In the report it was noted that the practice should continue to implement ways to improve uptake for reviews of long-term conditions, childhood immunisation and for cancer screening programme.

Figure 3: Recently Published CQC ratings for population groups

Practice	Publication Date	Older People	Long Term Conditions	Families, Children & Young People	Working Age People	Vulnerable People	Mental Health
Broadmead	31/10/2019	Good	Good	Good	Good	Outstanding	Good

The below graph shows the overall rating position of BNSSG practices for the six population groups.

Figure 4: CQC ratings for population groups for all BNSSG Practices



Other actions regarding CQC:

- The CCG Quality, Resilience and Contracting team are meeting with the CQC on a bi-monthly basis, to discuss emerging issues and themes, alongside sharing intelligence regarding quality of care in Practices.
- In the October meeting ‘Exception Reporting’ was discussed and the CQC inspector confirmed that this was a particular area of focus within the current round of inspections. Where exception reporting is high, additional assurances regarding actions being taken will be required.
- The plan is for the CCG Quality Team to produce a regular briefing for practices on analysis of the published CQC reports, providing themes from the Requiring Improvement as well as sharing excellence in Outstanding and Good practices.
- The Local Medical Committee planned to host a CQC event on 14th November regarding how the CQC regulates Primary Care providers, what providers should expect from an inspection and themes from reports. Unfortunately due to CQC staff shortages this event was postponed. It is expected that this will be rescheduled in February 2020.

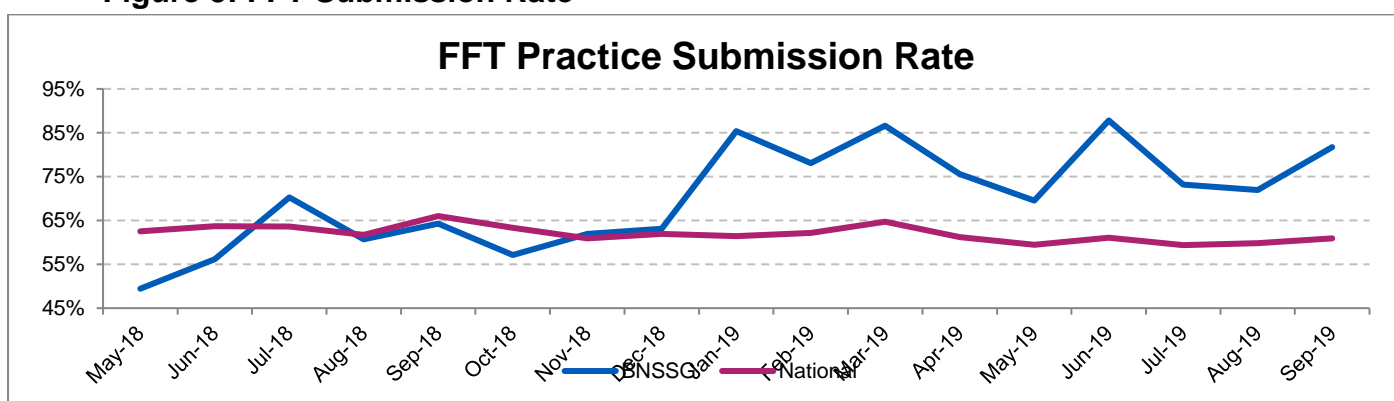
b. Friends and Family Test (FFT) September 2019 Data

The Friends and Family Test (FFT) is a feedback tool that supports the principle that those who use NHS services should have the opportunity to provide feedback on their experience which can

be used to improve services. FFT is only one method of feedback that GPs receive; there are other robust mechanisms, such as the national annual GP Patient Survey and outcome measures which can also be utilised. FFT for each practice can help inform current and prospective patients about the experiences of those who use the practice’s services and help mark progress over time. FFT data is published on the NHS England website.

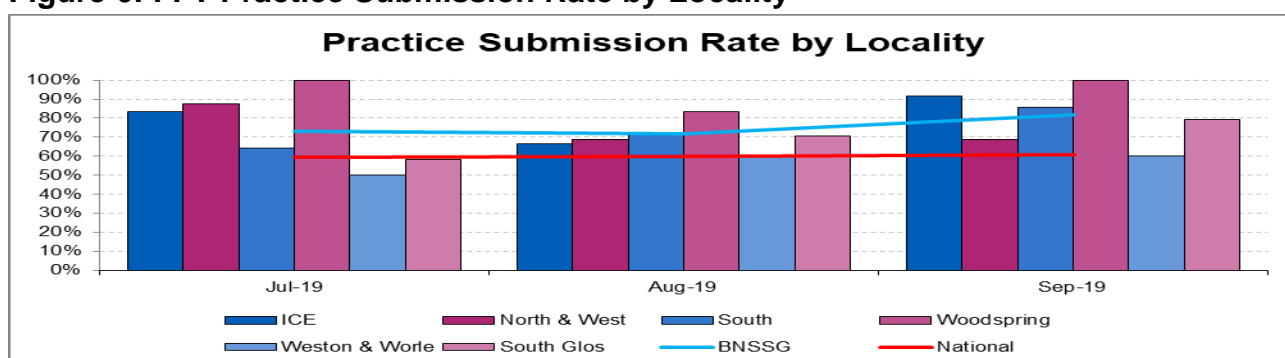
Submission Rate: The most recent results for the Friends and Family Test (FFT) data are for September 2019. This shows that 67 BNSSG CCG practices submitted their data to NHS England as contractually required. This is a compliance rate of 81.7% which is above the national rate of 61.0%. The Quality and Contracting teams continue to contact practices on a monthly basis where they have not submitted FFT data to ensure that submission rates remain high.

Figure 5: FFT Submission Rate



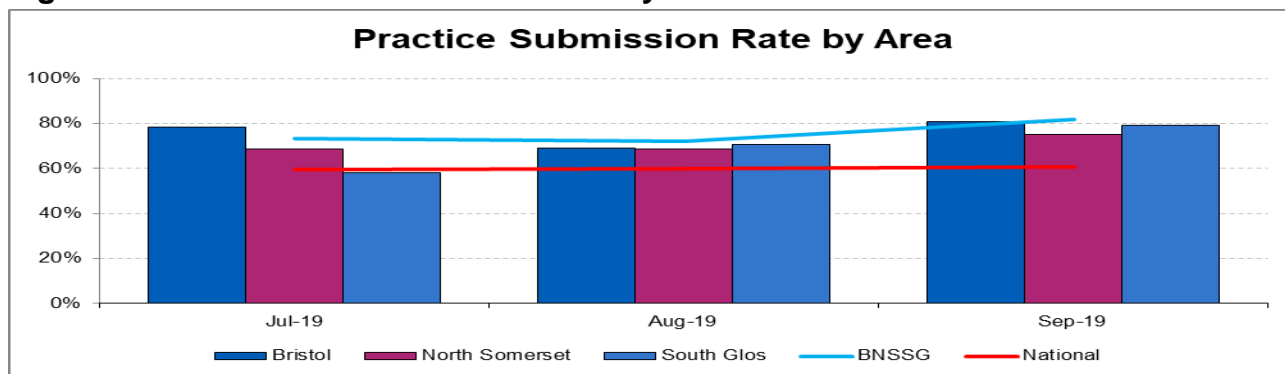
We have also presented the last three months data by both area and locality to show the variation. These are presented in the following two charts and include the overall BNSSG and the national averages in both.

Figure 6: FFT Practice Submission Rate by Locality



The submission rate for practices within Weston & Worle remains the lowest across the CCG. This data has been shared with the Locality Team and will be discussed at the next Locality Forum. Feedback from this meeting has been requested and an update will be provided to the committee

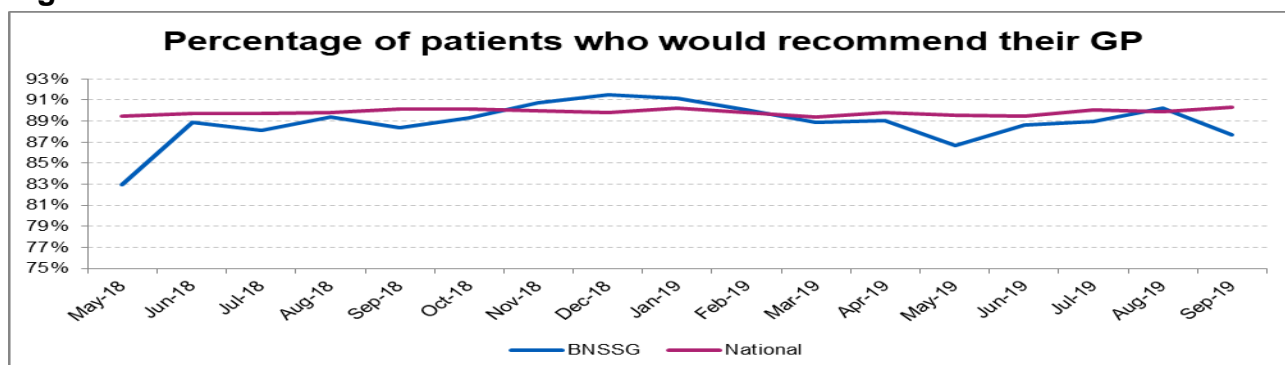
Figure 7: FFT Practice Submission Rate by Area



The submission rates across the areas remains relatively equal in September.

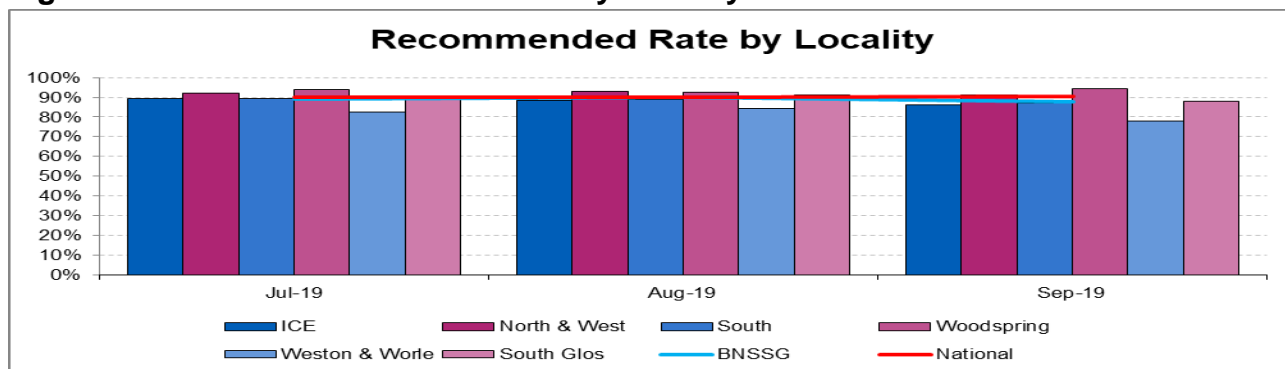
Recommendation Rate: Across BNSSG CCG 87.7% of respondents would recommend their GP Practice; this is 2.6% below the national average and a 2.5% decrease on the previous month. The percentage of patients who would not recommend their GP practice was 7.9%. This is 1.4% higher than the national average and a 0.9% increase on the previous month.

Figure 8: FFT Recommendation Rate



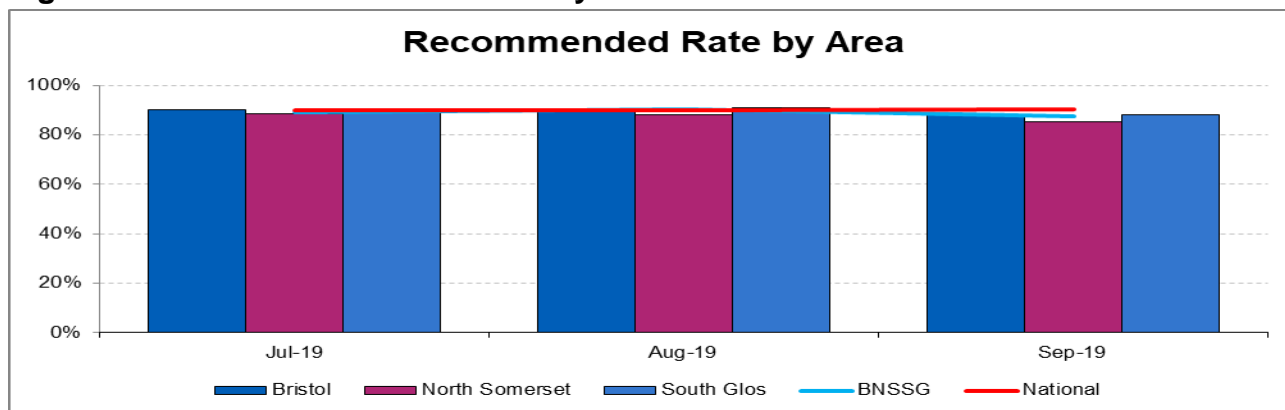
Again this data has been presented by both area and locality for the last three months to show variation. These are presented in the following two charts and include the BNSSG and the national averages.

Figure 9: FFT Recommendation Rate by Locality



The recommendation rates across the localities is relatively even, although rates for Weston & Worle are slightly lower than in other localities. Again this data has been shared with the Locality Team for information and discussion at the next Locality Forum.

Figure 10: FFT Recommended Rate by Area



The recommendation rates across the three areas are very similar with a marginally lower rate in North Somerset.

The total number of FFT response received in September for BNSSG was 3580. This is an increase from August. For those practices who submitted a response the number ranged from 0 to 317. On average there were 55 response per submitting practice.

It is therefore important that Primary Care FFT recommendation rates should be triangulated with other patient experience data including complaint and the annual GP Patient Survey rather than viewed in isolation. The number of respondents for each practice on a monthly basis is small and therefore it is not possible in most cases to draw statistical significance at an individual practice level. However, practices use FFT as one of several patient feedback mechanisms which feed into their Patient Participation Groups.

Following a national review of the FFT Guidance and process NHS England have published amended guidance which will take effect from 1st April 2020. <https://www.england.nhs.uk/wp-content/uploads/2019/09/using-the-fft-to-improve-patient-experience-guidance-v2.pdf> This information has been shared with practices in order to help preparations for the changes that need to be put in place. The main change to be implemented in Primary Care is a change to the standard question. This will now be “Thinking about your GP practice overall, how was your experience of our service?” this is a change from the current question “How likely would you be to recommend this service to your friends and family?” The new response scale will be:

- Very Good
- Good
- Neither good nor poor
- Poor
- Very poor
- Don't know.

This information has been circulated to Practices via the GP Bulletin.

c. Seasonal Influenza Preparations

GP practices are submitting flu uptake figures on a weekly basis. BNSSG CCG is currently above the national average for both 'At risk (6months – to under 65 years)' and '65 and over'. The latest position for BNSSG relates to Week 44, week ending Sunday 4th November 2019.

Figure 14: Flu Vaccination Uptake Rates

At Risk - (6 months - to Under 65 years)			65 and Over		
National end of season ambition	National Uptake	BNSSG	National end of season ambition	National Uptake	BNSSG
55%	22.6%	23.7%	75%	58.0%	61.0%

The overview of the BNSSG Influenza work plan and the outbreak pathways are included in a separate paper which is being presented to this committee.

3. Quality Deep Dive Calendar 2020

At the October Primary Care Commissioning Committee, it was agreed that a Quality Calendar for 2020 would be developed, including quarterly deep dives. The Quality Team have met with colleagues from the Primary Care Development Team and the below Quality Schedule is proposed:

Month	Report Type
January	Deep Dive Report 1 – Equality and Provision of Care
February	Quarterly updates
March	Monthly Data only
April	Deep Dive Report 2 – The Safety Culture
May	Quarterly updates
June	Monthly Data only
July	Deep Dive Report 3 – Leadership Culture and Learning from Excellence
August	Quarterly updates
September	Monthly Data only
October	Deep Dive Report 4 – Patient Experience and Access
November	Quarterly updates
December	Monthly Data only

Every month the report will include the following information:

- Information regarding recently published CQC reports.
- Updates on actions following 'Requires Improvement' or 'Inadequate' CQC reports.
- Friends and Family Test results.
- Seasonal Influenza updates (during the Flu season)

- Any specific quality escalations.

In addition to the monthly data the quarterly updates will include:

- Health Care Associated Infections (HCAI) and Antimicrobial Resistance (AMR) data
- Medicines Optimisation update.
- Patient experience and complaints information.
- Incidents data
- Updates on any Quality Improvement projects.

Below is a proposal for the four deep dive topics, these will be produced in collaboration with colleagues across the CCG, including input from Localities and GP forums.

Deep Dive 1 - Equality and Provision of Care

This will be based around the concerns that have been raised through recent CQC reports regarding high exception reporting for Quality Outcomes Framework (QOF). Alongside details of exception reporting across BNSSG the report will also look further into some of the QOF areas where exception reporting is high, including, care for Long Term Conditions, Immunisations and Cancer Screening.

Deep Dive 2 - The Safety Culture

This report will be based around Quality Improvement projects, sharing of learning and incident reporting.

Deep Dive 3 – Leadership Culture and Learning from Excellence

This report will look into some of the areas highlighted within CQC reports regarding practice visions and strategies as well as leadership management. As well as sharing learning from those practices that have been rated by CQC as ‘Outstanding’.

Deep Dive 4 – Patient Experience and Access

This report will be based on the annual GP patient survey and other forms of patient experience, looking at areas where there has been improvement since 2019 and identifying areas of focus going forwards.

4. Financial resource implications

There are no specific financial resource implications highlighted in this paper.

5. Legal implications

There are no specific legal implications in this paper.

6. Risk implications

Actions to address any highlighted risks have been added to the paper in each section.

7. How does this reduce health inequalities

Monitoring of Primary Care Quality and Performance will highlight any areas of Health Inequalities within BNSSG which will then be addressed accordingly.

8. How does this impact on Equality and Diversity?

Monitoring of Primary Care Quality and Performance alongside practice demographic information will help to highlight areas of variation of service which will then be addressed accordingly.

9. Consultation and Communication including Public Involvement

Whilst there has not been any direct consultation and communication with the public in production of this paper, patient experience and public involvement is recognised as an important factor in reviewing and gaining assurances regarding Primary Care services.

Appendices

Glossary of terms and abbreviations

Please explain all initials, technical terms and abbreviations.

Care Quality Commission	The independent regulator for all health and social care services in England.
Friends and Family Test	A quick and anonymous way for any patient to give their views after receiving care or treatment across the NHS.
Long Term Conditions	Long Term Conditions can be defined as any ongoing, long term or recurring conditions that can have a significant impact on people's lives.
Primary Care Networks	Primary Care Networks are groups of GP practices working collaboratively in a formalised structure, typically covering a population of 30,000 to 100,000 patients, and combining with other primary and community services and local organisations to ensure an integrated approach to health and care for that population.
Quality Outcomes Framework	The Quality and Outcomes Framework is a system for the performance management and payment of general practitioners. It was introduced as part of the new general medical services contract in April 2004, replacing various other fee arrangements.
EMIS	EMIS is an electronic patient record system used in Primary Care.
Health Care Associated Infection	Health care associated infections, are infections that are acquired as a result of health care.

**Antimicrobial
Resistance**

Antimicrobial Resistance is the ability of a microbe to resist the effects of medication that once could successfully treat the microbe i.e. anti-biotics.