

EXTERNAL SERVICES SCRUTINY COMMITTEE: PERFORMANCE REVIEW OF THE LOCAL NHS TRUSTS

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Appendix A: Central & North West London NHS Foundation Trust Quality Account 2015/2016

Appendix B: The London Ambulance Service NHS Trust Quality Account 2015/2016

Appendix C: The Hillingdon Hospitals NHS Foundation Trust Quality Account 2015/2016

Appendix D: Royal Brompton & Harefield NHS Foundation Trust Performance Report

REASON FOR ITEM

To enable the Committee to comment on the Trusts' Quality Account reports and submit comments to the Care Quality Commission (CQC) on the performance of the local NHS Trusts.

OPTIONS AVAILABLE TO THE COMMITTEE

1. That Members question the Trusts on their Quality Account reports for 2015/16 and identify issues that they would like included in the Committee's statement for inclusion in the final report.
2. That Members use information from their work during the course of the year to question the Trusts on issues measured by the CQC.
3. That Members decide whether to use this information to submit a commentary to the CQC.

INFORMATION

Introduction/background

Quality Account Reports

1. The Department of Health's *High Quality Care for All* (June 2008) set the vision for quality to be at the heart of everything the NHS does, and defined quality as centered around three domains: patient safety, clinical effectiveness and patient experience. *High Quality Care for All* proposed that all providers of NHS healthcare services should produce a Quality Account: an annual report to the public about the quality of services delivered. The Health Act 2009 placed this requirement onto a statutory footing.
2. Quality Account reports aim to enhance accountability to the public and engage the leaders of an organisation in their quality improvement agenda. The details surrounding the form and content of Quality Account reports were designed over a year long period in partnership between the Department of Health, Monitor, the Care Quality Commission and NHS East of England. This involved a wide range of people from the NHS, patient organisations and the public, representatives of professional organisations and of the independent and voluntary sector.
3. For the first year of Quality Accounts (2009/2010), providers were exempt from reporting on any primary care or community healthcare services. During the second year, the community healthcare service exemption was removed. We are now in the seventh year of Quality

Account reports and providers are expected to report on activities in the financial year 2015/2016 and publish their Quality Accounts by the end of June 2016.

4. Healthcare providers publishing Quality Accounts have a legal duty to send their Quality Account to the overview and scrutiny committee (OSC) in the local authority area in which the provider has a registered office and invite comments prior to publication. This gives OSCs the opportunity to review the information contained in the report and provide a statement of no more than 1,000 words indicating whether they believe that the report is a fair reflection of the healthcare services provided. Scrutiny Committee's can also comment on the following areas:
 - whether the Quality Account report is representative
 - whether it gives a comprehensive coverage of the provider's services
 - whether they believe that there are significant omissions of issues of concern that had previously been discussed with providers in relation to Quality Account reports.
5. The OSC should return the statement to the provider within 30 days of receipt of the Quality Account report to allow time for the provider to prepare the report for publication. Providers are legally obliged to publish this statement as part of their Quality Account report.
6. Providers must send their Quality Account report to the appropriate OSC by 30 April each year. This gives the provider up to 30 days following the end of the financial year to finalise its Quality Account report ready for review by its stakeholders.
7. The primary purpose of Quality Account reports is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer and encourage them to engage in the wider processes of continuous quality improvement. Providers are asked to consider three aspects of quality – patient experience, safety and clinical effectiveness. If designed well, the reports should assure commissioners, patients and the public that healthcare providers are regularly scrutinising each and every one of their services, concentrating on those that need the most attention.
8. It should be noted that Quality Account reports and statements made by commissioners, Healthwatch, OSCs and the newly formed Health and Wellbeing Boards will be an additional source of information for the CQC that may be of use operationally in helping to inform local dialogues with providers and commissioners.
9. Where available, draft copies of the Trusts' Quality Account reports have been appended to this report for consideration.

Witnesses

10. Senior officers from each Trust will be attending and will be able to go into more detail with regard to the contents of their Trust's draft report. Representatives have been invited from the following organisations:
 - The Hillingdon Hospitals NHS Foundation Trust
 - Central & North West London NHS Foundation Trust
 - Royal Brompton & Harefield NHS Foundation Trust
 - The London Ambulance Service NHS Trust
 - Care Quality Commission (CQC)
 - Hillingdon Clinical Commissioning Group

- Local Medical Committee
- Local Dental Committee
- Healthwatch Hillingdon

11. As Members will have read the Quality Accounts attached to this report, witnesses have been asked to ensure that they address the impact on residents of the outcomes for 2015/2016 and the proposals for 2016/2017.

SUGGESTED SCRUTINY ACTIVITY

12. Members review the evidence collected during the year and, following further questioning of the witnesses, decide whether to submit commentaries to the CQC.

13. To consider and agree the Committee's comments for inclusion in the Trusts' Quality Account reports.

BACKGROUND INFORMATION

None.