

Quality Accounts

Executive Summary

This item falls within the Social Care and Inclusion portfolio.

This report sets out the role of Overview and scrutiny Committee in Quality Accounts and the progress of NHS provider services in developing these Accounts.

1 Background

- 1.1 In *High Quality Care for All*, published in June 2008, Ministers set out the Government's vision for putting quality at the heart of everything the NHS does. The report sets out that a key component of the new Quality Framework would be a requirement for all providers of NHS services to publish Quality Accounts: annual reports to the public on the quality of health care services they deliver. The aim of Quality Accounts is to improve public accountability and to engage boards in understanding and improving quality in their organisations.
- 1.2 Over the last year the Department of Health has engaged widely with healthcare providers, Commissioners, patient groups and third sector organisations in the development of Quality Accounts.
- 1.3 During the consultation year round stakeholder engagement during the process of producing a Quality Account was seen as an important feature to ensure that Quality Accounts are locally meaningful and reflect local priorities.
- 1.4 As a first step it is intended that providers will have to share their Quality Accounts prior to publication each June with:-
 - Their commissioning PCT(or Strategic Health Authority)
 - The appropriate LINKs (Local Involvement Networks)
 - The appropriate Local Authority OSC (Overview and Scrutiny Committee)The PCT or SHA will have a legal obligation to review and comment on the providers Quality Account. LINKs and OSC will be offered the opportunity to comment on a voluntary basis.
- 1.5 The legal duty to publish a Quality Account will be brought in to force from April 2010. (Health Act 2009 - given royal assent on 12 November 2009). Providers will be required to publish their Quality Accounts each year -

starting in June 2010 reporting on their services for the previous financial year.

- 1.6 It is intended that for the first year the requirement to publish information relating to the quality of services will not apply to primary care services and community health care.

2 Voluntary Role of Overview and Scrutiny Committees

- 2.1 Providers will be required through regulations to send a draft of their Quality Account, to the appropriate OSC and to include any statement supplied in their published Quality Account. OSCs will be invited on a voluntary basis to: comment on a provider's Quality Account.

OSCs might like to comment on the following areas:

- whether the Quality Account 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 Accounts.
- 2.2 Any narrative provided (maximum 500 words) should be published verbatim as part of a provider's Quality Account. We recommend that OSCs should let the provider know if they do not intend to provide a statement.
 - 2.3 Providers should give OSCs at least 30 working days to prepare their comments on the Quality Account and send back to the provider, prior to publication. The statement should also be written if the OSC is of the view that the Quality Account is not representative and highlight any areas of concern.
 - 2.4 DH guidance will advise that providers and OSCs discuss at an early stage, the providers proposed content of their Quality Account to ensure that the report covers areas of importance to the local community. To ensure that the local relevance of the Quality Account is maintained, a year-round dialogue between OSCs and providers is envisaged.
 - 2.5 LINKs and OSCs are invited to comment on a provider's Quality Account on a voluntary basis. Depending on local arrangements, an OSC may wish to leave this role entirely to the LINKs (or vice versa) and this should be agreed between the two organisations.
 - 2.6 Before providing a statement on a provider's Quality Account, OSCs may wish to consult with other OSCs where substantial activity, for instance specialised services, is provided to patients outside their area.
 - 2.7 LINKs and OSCs already have an important role in providing information about providers, local Authorities and NHS organisations to Care Quality Commission. This information was previously provided to the Health Care Commission in the form of an annual health check. LINKs and OSC's can

now share information throughout the year with the Care Quality Commission and are able to do so through the local area manager at Care Quality Commission or through the website at www.cqc.org.uk/localvoices.

3. Local progress on Quality Accounts

- 3.1 Wirral University Teaching Hospital are currently working on the draft of their Quality Accounts, however the draft will not be able to be received by this committee in time for this report and as the proposed date of the next Overview and Scrutiny Committee is in late June the 30 day prior to publication date for comments will also be exceeded.
- 3.2 North West Ambulance Service are also developing their Quality Accounts, they will be writing to OSCs and Links during early March outlining their key priorities. They will be working closely with the OSC and LINKs close to their headquarters in Bolton to develop a commentary on their accounts.
- 3.3 Clatterbridge Centre for Oncology are also not in a position, as yet to share their Quality Accounts and the same issues are identified as with WUTH.
- 3.4 Cheshire and Wirral Partnership Trust, are also not in a position, as yet to share their Quality Accounts and the same issues are identified as with Wirral university teaching hospital.

4. Wirral Local involvement Networks

- 4.1 Wirral LINKs are aiming where possible to be able to provide a statement for each of the Quality Accounts.

5 Financial Implications

There are no financial implications from this report.

6 Staffing Implications

- 6.1 There are no staffing implications from this report.

7 Equal Opportunities Implications/Health Impact Assessment

- 7.1 There are no equal opportunity/health impact assessment implications from this report.

8 Community Safety Implications

- 8.1 There are no community safety implications from this report.

9 Local Agenda 21 Implications

- 9.1 There are no Local Agenda 21 implications from this report.

10 Planning Implications

10.1 There are no planning implications from this report.

11 Anti Poverty Implications

11.1 There are no anti-poverty implications from this report.

12 Social Inclusion Implications

12.1 There are no social inclusion Implications from this report.

13 Local Member Support Implications

13.1 This report applies to all wards across Wirral.

14 Health Implications

14.1 Overview and Scrutiny Committee will have an important role in the development of Quality Accounts and in commenting to the Care Quality Commission on the provision of health care services.

15 Background Papers

15.1 Letter from the Department of health dated 14 January 2010 re Quality Accounts.
Department of Health "frequently asked questions" on Quality Accounts.

16 Recommendations

16.1 That:

- (1) The contents of this report be noted
- (2) That Wirral Links will provide copies of their statements in respect of Quality Accounts for 2009/10 to the next meeting of this committee
- (3) That proposals for regular feedback on the priorities within the Quality Accounts are developed in order to be able to provide this committee with year round dialogue in preparation for the 2010/11 Quality Accounts
- (4) That a further report on progress is brought to the June 2010 meeting of this committee

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