Title	Quality and Performance Report
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Report for	Wirral Place Based Partnership Board
Date of Meeting	21st December 2023

Report Purpose and Recommendations

The purpose of this report is to provide the Wirral Place Based Partnership Board with oversight of the Quality and Performance across Wirral Place since the last reporting period. The report focusses on some key areas of improvement including, Healthcare Associated Infections (HCAI) and Special Educational Needs and Disabilities (SEND).

The Wirral Place Based Partnership Board is asked to:
- Note the work underway across the system to monitor quality and performance, identifying areas for improvement.
- Note and endorse the further work underway to strengthen the governance around quality and safety across Health and Social Care.
- Receive assurance around the robust improvement plans in place to manage specific areas for improvement.

Key Risks

The report relates to the following key strategic risks identified in the Place Delivery Assurance Framework presented to the Wirral Place Based Partnership Board on 19th October 2023:

- *PDAF 1 Service Delivery:* Wirral system partners are unable to deliver the priority programmes within the Wirral Health and Care Plan which will result in poorer outcomes and greater inequalities for our population.
- *PDAF 2 Children and Young People:* The Wirral health and care system is unable to meet the needs of children and young people with complex and/or additional needs leading to long term health issues, increased inequalities and demands on services.
- *PDAF 3 Collaboration:* Leaders and organisations in the Wirral health and care system may not work together effectively to improve population health and healthcare.

There are operational risks arising from healthcare-associated infections (HCAIs) such as methicillin-resistant Staphylococcus aureus (MRSA) and Clostridium difficile (C. difficile). These risks will need to be defined in the Risk Register for the Quality and Performance Group.

There are also operational risks connected with the Written Statement of Action (WSOA) and the new SEND inspection framework. These will also need to be defined in the Quality and Performance Group's Risk Register.

1	Narrative
1.1	**HCAI rates**
1.1.1	*Background* Healthcare-associated infections (HCAIs) can develop either as a direct result of healthcare interventions such as medical or surgical treatment, or from being in contact with a health or care setting. The term HCAI covers a wide range of infections. The most well-known include those caused by methicillin-resistant Staphylococcus aureus (MRSA) and Clostridium difficile (C-difficile). The rate of C-Difficile within Wirral health care settings remains high. Based on several factors including the infection rate in the population for last year, a system tolerance has been set 2023/23. Whilst the figures for September 2023 have improved from 143% over the tolerance in July 2023 to 140% in September 2023, this remains concerning. A contributory factor of C-Difficile is antibiotic prescribing. Wirral has a history of high antibiotic prescribing and has previously been ranked nationally as the highest prescribing area. The data for June 2023 demonstrates improvement from this position to Wirral being ranked as 86/106 for total prescribing in Primary Care. Currently across NHS Cheshire and Merseyside rates of C. Diff and Escherichia coli (E-coli) are above the year to date (YTD) trajectory as set out by NHS England in *Minimising Clostridioides difficile and Gram-negative Bloodstream Infections.* Whilst improvement has been made to reduce the number of infections, Wirral remains an outlier.
1.1.2	*Management & Mitigations to date* • Trusts action plans have been scrutinised within the relevant fora and include actions which address priorities. • Review of the actions/outputs following the system Cdifficle review re effectiveness. • Focus session for the system coordinated by the Director of Public Health • Monitor vaccination uptake across Health & Social Care (Staff and patients). • Development communications plan with a focus on inclusion.
1.1.3	*On-going plans* To continue working in partnership at Place. Oversight of progress against priority areas will be monitored through Health Protection Board. Support including tips and advice to Primary Care has been circulated and discussed at meetings regarding back up prescriptions for antibiotics.
1.2	**Super Made Event November 2023**
1.2.1	The first Super Multi-Agency Discharge Event (SuperMADE) event was held in August 2023 and covered the Cheshire and Wirral footprint. The aim of this meeting is: • To support discharges of very long stayers (60 days+ for adult acute mental health wards, 90 days+ for older adult acute mental health wards). • To unblock delayed discharges via the weekly MADE and local escalation. • Regularly review the top ten cases by Length of Stay (LOS). • To deliver quick wins and rapid decisions through the senior multi-disciplinary team (MDT) presence, whilst being sensitive and respectful of service users' needs. • Gain an understanding of strategic themes and issues which require further

	discussion and work.
1.2.2	**_Monthly Performance report – November 2023_**

On 20th November 2023 there were the following number of patients who are Clinical Ready for Discharge (CRFD) patients per locality

| CRFD patients						Period	longest
		patients	Delay reason			Delayed	delay
East Cheshire		2	Awaiting Nursing home			104	56
		2	Supported housing			281	172
		1	Care package			99	99
West Cheshire		2	Awaiting Nursing home			140	71
		8	Supported Housing			1,350	471
		1	Care package at home			229	574
Wirral		3	Supported housing			330	147
		1	Care Package at Home			27	27
		20				2,560	

Note - period delayed in this financial year

There were 32 patients currently on inpatients wards that are identified as red under the Trust red to green policy. This means that the patient is no longer gaining any benefit of residing on an inpatient ward. These patients will eventually either be discharged or become the next cohort of CRFD. Lack of appropriate supported housing is the biggest factor specifically for patient with multiple complex needs.
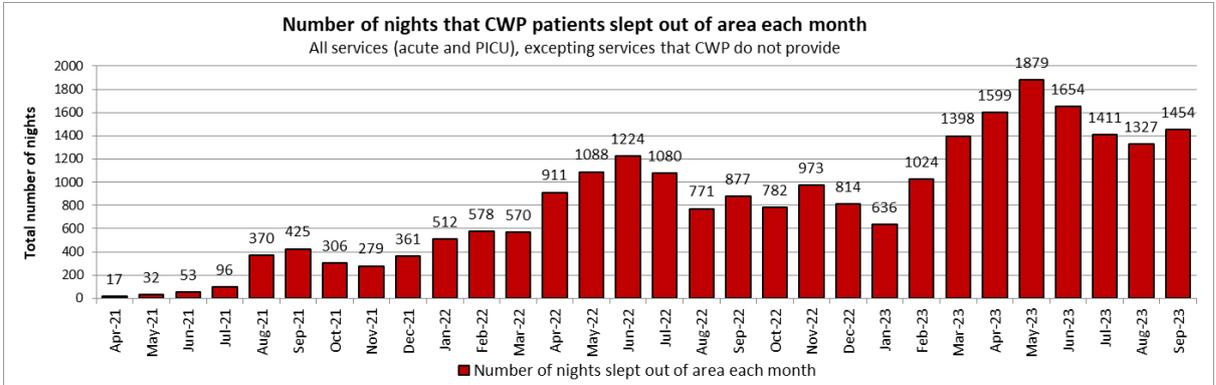
Red patients (red2green)

	East	West	Wirral	Total
Housing	6	5	8	19
Nursing Home		2	2	4
Assessment		1	2	3
Rehabilitation		3	1	4
On leave		5		5
Total	6	16	13	35

The graph below highlights the increase in the breach of 4hr and 12hr targets from decision to admit (DTA). There are high numbers of patients waiting longer than 72hrs in emergency departments and acute wards and within community settings. There are significant clinical risks in ensuring that patients are kept safe whilst waiting for admission and there is a negative impact on patient safety and experience. Although the number of 72 hour delays has reduced over the last three months overall there remain significant delays >4 hours and 12 hours.

Inpatient admission waiting time breaches - last 13 months
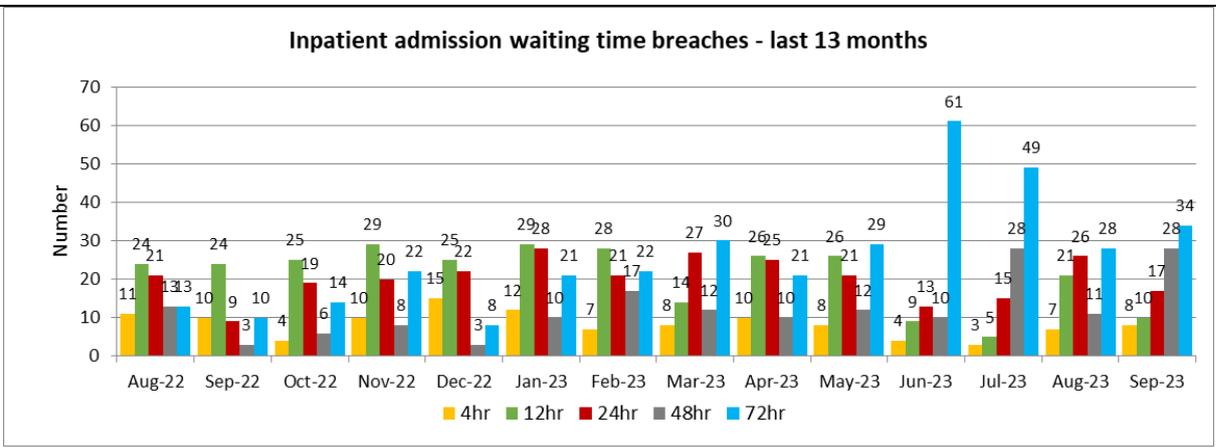
Cheshire and Wirral Partnership NHS Foundation Trust (CWP) had their first out of area (OOA) patient admitted in January 2021 and this number has increased over the last two years peaking in May 2023. However, since June this has been reducing and October and November have seen lower levels of OOA placements.

Number of nights that CWP patients slept out of area each month
All services (acute and PICU), excepting services that CWP do not provide

On 20th November 2023 there were 24 patients out of area which was a reduction of 18 since the last report:

West	3
Wirral	13
East	8

1.2.3	***On-going plans*** • Fully established Discharge flow team with lead consultant - focus discharging OOA patients • Bowmere accepting more admissions – bed occupancy increased due to improved staffing. • Increase in discharges from CWP beds. • Improvements from "side by side" triage in emergency departments and gatekeeping impacting the number of overall admissions and provision of alternatives to admission. • Joint strategic meetings to continue with housing providers to support safe discharge to community settings with the aim of stimulating the market across Cheshire and Merseyside.
1.3	**SEND**

1.3.1	**_Background_** Special Educational Needs and Disabilities (SEND) provision in Wirral was last inspected in 2021. The joint inspection team included representation from the Care Quality Commission (CQC) and the Office for Standards in Education, Children's Services and Skills (OFSTED). Following the inspection, the system was provided with a Written Statement of Action (WSoA). Work is underway to manage the improvements required within a transformation governance framework. Progress against improving waiting times against the neurodevelopmental pathway is underway. From January 2024, Wirral could be inspected on a new SEND inspection framework. Work is also underway to ensure strategic oversight against the new standards. Specialist provision for children with SEND has risen by 63% in the last 6 years. This is impacting the capacity across services, resulting in long waits or difficulties accessing provision. The focus of the WSoA is on the following priorities: • Speech and Language • Neurodevelopment (ND) Pathway • Emotional Health & Wellbeing Transformation
1.3.2	**_Management and Mitigations to date_** Around 75% of the actions within the WSoA have been achieved. Discussions will be taking place in the new year with the Department for Education (DfE) regarding how the residual actions should be managed. A Quality Improvement Project is to be commenced to test an MDT approach for children and young people being referred to services to ensure that they are directed to the correct service. While being tested a long-term solution by undertaking transformational work and identifying some new ways of working. A health group has also been established to focus attention on the ND pathway and performance against current metrics.
1.3.3	**_On-going plans_** • Monitoring of improvements, impact and outcomes through both SEND transformation and Strategic Boards. • Improvement around engagement and coproduction with people with lived experience. • Further strengthening of the data within the SEND dashboard. • Focused work at Place around SEND inspection readiness. • Regular reporting to the Wirral Place Partnership Board. • SEND to be a focus during the 204/25 planning round.
1.4	**Guiding Principles for people residing in Non-Emergency Department (ED) areas**
1.4.1	**_Background_** The Cheshire and Merseyside Acute and Specialised Trusts Provider Collaborative (CMAST) organised a round table event for Chief Nurses to attend to discuss patient safety and comfort whist waiting in Emergency Departments (EDs) during times of escalation. Following this event a number of guiding principles where drafted and discussed with wider partners at a recent Cheshire and Merseyside Quality and Safety Oversight Group.
1.4.2	**_Draft Principles_** It is acknowledged that Trusts will have their own systems processes and documentation in place to assess and review safety in place. The principles are aimed to bring consistency across Cheshire and Merseyside and support clinical decision makers. The principles fall into 4 categories:

	Escalation • Visible leadership in ED Medical and Nursing Staff • Safety Huddles for all the patients within the ED. • Regular Board Rounds. • Patient boarding, accelerated transfers based upon risk assessments. *Care and Comfort* • Intentional rounding, comfort rounds (Hydration and Nutrition). • Privacy screens and call bells. • Staff advocates. • Gaining patient experience. *Evidence Care is being delivered* • ED safety checklist. • How do we know we are making a difference? *De- escalation* • Visible leadership and strong decision making. • Governance.
1.4.3	**Next steps** Further work will be undertaken to harness and agree the principles across Cheshire and Merseyside, it is likely that once agreed these will be included with the quality schedule of the NHS standard contract for 2024/25

2	Implications
2.1	**Risk Mitigation and Assurance** The report relates to key strategic risks PDAF 1 Service Delivery, PDAF 2 Children and Young People and PDAF 3 Collaboration. The work of the system in regard to Quality and Safety seeks to provide controls and assurances around these risks.
2.2	**Financial** There are financial implications relating to SEND and Mental Health patients who have an extended length of stay. These will form part of the 2024/25 planning for consideration and prioritisation.
2.3	**Legal and regulatory** Legal implications have been considered within this report relating to NHS constitutional standards and the Care Act, which have been referenced within the report.
2.4	**Resources** There are no resource implications arising directly from this report.
2.5	**Engagement and consultation** Partnership working remains a strength of the assurance and improvement plans. Engagement with all key stakeholders has been included within the governance components.
2.6	**Equality** Wirral Council and NHS Cheshire and Merseyside have a legal requirement to make sure their policies, and the way they carry out their work, do not discriminate against

anyone. In line with the Health and Wellbeing strategy, the focus of quality and safety improvement is to strengthen health and care action aiming to reduce inequalities and address differences in health outcomes. All workstreams consider equality and protected characteristics. No Equality Impact Assessment (EIA) is required for this report.

2.7	**_Environment and Climate_** Wirral Council and NHS Cheshire and Merseyside are committed to carrying out their work in an environmentally responsible manner, these principles will be followed by our work in the area of quality, safety and performance.
2.8	**_Community Wealth Building_** Community Wealth Building in Wirral focusses on partnerships and collaboration. These partnerships are led by Wirral Council with external partners and stakeholders, including residents. NHS Cheshire and Merseyside will support the Council in community wealth building by ensuring health and care organisations in the borough have a focus on reducing health inequalities and contribute to the development of a resilient and inclusive economy for Wirral.

3	**Conclusion**
3.1	There are detailed project plans in place for all the above areas with identified timescales and responsible leads, however scale of pace is critical. All project plans and the delivery of those plans will continue to be monitored closely, through strategic oversight groups.

4	**Appendices**
	There are no appendices to the report.

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