Title	Quality and Performance Report					
Authors	Lorna Quigley, Associate Director of Quality and Safety Improvement, NHS Cheshire and Merseyside Julia Bryant, Head of Quality and Safety Improvement, NHS Cheshire and Merseyside					
Report for	Wirral Place Based Partnership Board					
Date of Meeting	21 <sup>st</sup> March 2024					

## **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 19<sup>th</sup> 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	Performance by Exception
1.1	Urgent Care
	These metrics are managed through the Unscheduled Care Programme Delivery and included within the agenda.
1.2	Planned Care (including Cancer Targets)
	Work is being undertaken to ensure that the performance report will include the ambitions within the planning guidance regarding waiting times.
1.3	Mental Health
	A further Super Multi Agency Discharge Event (MADE) is taking place on 5 <sup>th</sup> March 2024. The outputs of this will be reported within the next report.  Staffing remains fragile and risk to service continuity remains significant for the provision of the Assessment and Treatment Unit for Adults with Learning Disabilities (LD), Greenways in Macclesfield and Eastway in Chester.
	The availability of LD nurses is a main risk factor to business continuity. The Trust has been creative in use of preceptorships to secure newly qualified LD nurses.
	Sickness across all staff roles and grades is challenging. Sickness in Eastway has improved. Long term agency staff remain in use.
	The Transforming Care Programme (TCP) continue to support NHS Cheshire and Merseyside with oversight of weekly discharge planning meetings with placing commissioners for every person who is experiencing a delay in their discharge from both Cheshire and Wirral Partnership NHS Foundation Trust (CWP) Assessment and Treatment Units. This has been an effective means of sustaining flow despite complexity of discharge requirements.
	There is one Wirral resident currently in the unit for 400+ days and ready for discharge. Providers are still being sought to support discharge.
	The services remain open and continue to admit people from Cheshire and Wirral and Greater Manchester.
	Quality review visits to Eastway in November 2023 and Greenways in February 2024 have been undertaken. Compassionate care was observed.
	There is joint visit planned in April with NHS Cheshire and Merseyside and NHS England leaders.
	The Quality Performance group in March will be undertaking their focus session on two aspects of waiting times:  • Improving access to Psychological Therapies (IAPT).
1.4	Adult ADHD waiting times.  HCAI rates
	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).

Priorities for Wirral Place align with the priorities identified for Cheshire and Merseyside ICB however focus on local implementation. Additionally, Wirral has identified reduction of C. difficile as a priority due to high prevalence of infection. The priorities are:

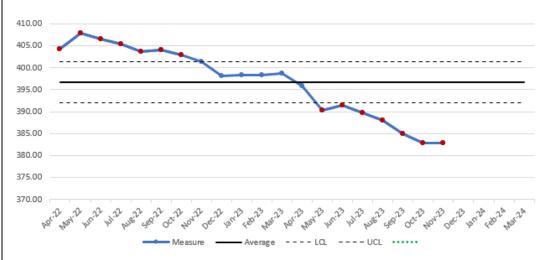
- Urinary Tract Infection (UTI) improvement to support reduction of community onset gram negative bloodstream infections (GNBSI).
- Optimise use of antimicrobials. Focus on Primary Care where Wirral Place has been an outlier in national outcomes framework (NOF) prescribing indicators.
- Containment of C- difficile period of increased incidence at Wirral University Hospital NHS Foundation Trust (WUTH).

The delivery of the UTI and hydration training to care homes is in line with trajectory to complete training in all older person's care homes by March 2024.

	Q3'22	Q4'22	Q1'23	Q2'23	Q3'23	Q4'23	Q1'24	
								Increase in rolling total of UTI
								admissions but lower than
UTI Admissions	308	302	283	265	259	263	283	baseline

Combined Antibacterial items prescribed 1,000 list size for age 70+ population

Wirral has the highest prescribing rates in Cheshire and Merseyside, this has significantly reduced.



RED points indicate above or below the Upper or Lower Control Limits

While WUTH remain over their cumulative trajectory, there have been 31 patients less compared to the same time 2022/23

Clostridioides difficile cases													
	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total
Threshold 2023/24	6	6	6	6	6	6	6	6	6	6	6	5	71
2019/20	19	9	11	5	6	7	8	6	7	4	4	3	89
2020/21	6	5	5	1	4	1	5	10	8	4	7	6	62
2021/22	5	7	5	1	6	13	6	5	3	18	12	13	94
2022/23	7	8	16	17	15	13	12	12	10	13	5	14	142
2023/24	8	8	11	9	10	7	10	13	3			·	79

## **Programmes** 2.1 SEND Management and Mitigations to date Work continues since the last reporting period in relation to Special Educational Needs and Disabilities (SEND) provision in Wirral: A model has been developed for children and young people with neuro development needs. This is based on both support and diagnosis as required, working with the graduated response. Engagement continues. A Quality Improvement project is underway with using a multi-disciplinary approach to children and young people who have been referred into the service. The outcomes from this are to be evaluated. Work in underway on reviewing the current governance arrangements in relation to the SEND transformation board and the re-fresh of the SEND strategic partnership. A SEND summit for Special Education Needs Coordinators in schools took place on 16<sup>th</sup> February 2024. A NHS partners event is taking place on 15<sup>th</sup> March 2024. The aim of this is agree the implementation of the Neuro Development model. SEND continues to be a priority for the partnership and has been included within the 2024/25 planning round. Active recruitment is underway for the role of the Designated Clinical Officer (DCO) during their period of planned absence. 3 Measles (for assurance) Wirral system partners are working together to ensure that there is robust planning 3.1 regarding containment and incident management in relation to measles. This is being led by Wirral Health Protection Team with oversight by the Director of Public Health. Reporting mechanisms and cells have been established including Primary Care and each NHS provider. This replicates the model that has been adopted across Cheshire and Merseyside. Oversight and assurance is through the Health Protection Board which has increased its regularity of meeting. At the time of writing, no confirmed cases (Wirral residents) have been reported by UK Health Security Agency (UKSA). Wirral's vaccination uptake for MMR1 in 2022/23 was 91.7% (measured at 24m) and is slightly higher than Regional (89.4%) and national (89.3%). When measured at 5 years of age, Wirral's MMR1 is 94.5% (compared to 93.4% Regional and 92.5% national) and for MMR2, Wirral's uptake is 88.7% compared to 85.1% Regional and 84.5% nationally). Despite being higher than regional and national levels, uptake is well below the 95% target set by the World Health Organization (WHO), which is

necessary to achieve and maintain elimination.

A national catch-up campaign for children aged between 1 to 5 years old and 6 to 11 years old has been launched. This has been extended to include people aged 12 to 25 years old in London and West Midlands.

Health care workers have been advised to check their status and get vaccinated.

Anyone over the age of one who has not had 2 doses of the MMR vaccine can contact their GP to check their vaccination status and book a free appointment. The Live Well bus has also been at several sites to support the vaccination campaign and administering vaccinations.

National communications have been sent to GPs and Trusts to raise awareness of signs and symptoms, and to advise of updated infection prevention and control guidance and testing requirements. Triage and isolation are key factors in limiting transmission.

A National Childhood Immunisation campaign has been launched on 4<sup>th</sup> March 2024, this will be targeted and localised.

## Quality Impact Assessments

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4.1 To support the 2024/25 planning round partners are developing a system Quality Impact Assessment process.

A Quality Impact Assessment (QIA) is a process of identifying the anticipated, actual or potential impact of a strategy, policy, plan or proposed plan, service change or intervention, on the areas of quality (safety, effectiveness, experience),to ensure any risks identified as part of the changes are mitigated.

A small project team of partners from the statutory and voluntary, community, faith and social enterprise (VCFSE) sector organisations have met to discuss implementation and the philosophy and approach is being tested with the 2024/25 bids that have been developed.

5	Implications
5.1	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 regarding Quality and Safety seeks to provide controls and assurances around these risks.
5.2	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.
5.3	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.

5.4	Resources There are no resource implications arising directly from this report.
5.5	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.
5.6	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.
5.7	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 quality, safety and performance.
5.8	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.

6	Conclusion
6.1	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.

7	Appendices
7.1	There are no appendices to this report.

Author	Lorna Quigley					
Contact Number	(0151) 651 0011					
Email	lorna.quigley@cheshireandmerseyside.nhs.uk					