Title	Quality and Performance Group Report	
Authors	Lorna Quigley Associate Director of Quality and Safety Improvement Julia Bryant, Head of Quality & Safety Improvement	
Report for	eport for Wirral Place Based Partnership Board	
Date of Meeting	7 th May 2024	

Report Purpose and Recommendations

The purpose of this report is to update Wirral Place Based Partnership Board of the discussion and outcomes of the meeting of the Quality and Performance Group held on 21st March 2024.

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.
- Receive assurance around the robust plans in place to manage specific areas for improvement.
- Note the effective use of data to understand population health need and improve equality and access to services.

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:

- *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 3 Collaboration:* Leaders and organisations in the Wirral health and care system may not work together effectively to improve population health and healthcare.

Governance journey			
Date	Forum	Report Title	Purpose/Decision
21 st March 2024	Quality and Performance Group	Quality & Performance Group Report	For Noting

1	Narrative
1.1	Standing Agenda Items
1.1.1	Previous minutes were approved by members.
1.1.2	Quality, Safety & Learning The Group received and noted the Learning from Lives and Deaths of People with a

	Learning Disability and Autism (LeDeR), NHS Cheshire and Merseyside Annual Report 2022- 2023.
	LeDeR is a national service improvement programme which aims to: Improve care
	 Reduce health inequalities and Prevent premature mortality of people with a learning disability or autistic people.
	The LeDeR reviews in Cheshire and Merseyside have shown pneumonia, cardiovascular diseases, covid, cancer and aspiration pneumonia to be the most common causes of death in people with learning disabilities and autism.
	The group also received details of the Wirral Safeguarding Annual Report 2023.
	There were no Place Quality Assurance escalations received.
1.1.3	Special Educational Needs and Disabilities (SEND) The Group received a verbal update regarding a local review of SEND Governance. This includes the development of the SEND dashboards and data sets.
	Interviews for an interim Designated Clinical Officer are set to take place week commencing 25 th March 2024.
	Work continues around the development of the new Neurodevelopment Model and diagnostic pathway, including the commissioning of a new service. Strategic Health partners had met on Friday 15 th March 2024 to agree short term management of waiting times.
	The group were informed of the progress in relation to the Single Point of Access for Mental Health Services.
1.2	Focused agenda
1.2.1	Mental Health- Improving Access to Psychological Therapies (IAPT)
	This focussed session was undertaken due to Wirral's performance relating to Access rates for talking therapies.
	A presentation from Talking Therapies (formerly known as Improving Access to Psychological Therapies, IAPT) provided details of the service which aims to improve the delivery of, and access to psychological therapies for depression and anxiety disorders within the NHS.
	The service receives an average of around 1,000 referrals per month with a mean of 7 appointments per individual. 81.5% of the referrals are self-referred.
	It was highlighted by the service that often-waiting times are extended to those who are choosing a face to face method of appointment, rather than a virtual appointment. This has shown to impact on positive outcomes and earlier intervention. It was suggested that a deeper analysis into the demographics of patients may support in understanding any access barriers or patients who may require reasonable adjustments.

An improvement plan is in place and being monitored with the provider. Performance for January 2024 has improved from 56% in December 2023 to 79% in January 2024. This is above NHS Cheshire and Merseyside's performance of 66%.

Following these discussions, the group were assured that the service being delivered and the improvement measure in place where both safe and appropriate.

1.2.2 Adult Attention Deficit Hyperactivity Disorder (ADHD)

Wirral continues to see a high prevalence in neurodiversity. Cheshire and Wirral Partnership NHS Foundation Trust's (CWP) ADHD Service reported the average waiting time on the waiting list in Jan 2024 was 1,204 days (172 weeks, or 3.3 years). The longest waiter has been waiting 2,958 days (422.6 weeks, or 8.1 years). There were a total of 625 people waiting in Jan 2024. This has reduced considerably in recent months due to risk stratification and discharge of those with a lower risk factor into the Lifestyle Enhancement for ADHD Programme (LEAP) within Primary Care. CWP also reported an average non-attendance rate of 34.6%, however it was recognised that this could indicate a challenge of being neurodiverse.

Wirral has the highest reported ADHD rates in the country. These figures have been broken down into three age brackets:

- 0-17 years 66,866 (4.8% of the population vs the Cheshire and Merseyside (C&M) average of 2.5%)
- 18-25 years 27,567 (7.3% of the population vs C&M average of 3.5%)
- 26 and above 248,917 (1.26% of the population vs C&M average of 0.70%)

Data presented by the Medicines Optimisation team outlined the numbers of patients in receipt of ADHD medication, broken down by GP practices. The 2 wards with the highest number of 18–25-year-olds with ADHD are Bidston and St James (285 individuals, 8.9%) and Birkenhead and Tranmere (271 individuals, 8.5%) of the total for Wirral. 57.5% of the age 18–25-year-olds with ADHD live in the most deprived Index of Multiple Deprivation (IMD) quintile in Wirral.

It is recognised that there is limited provision for adults with neurodiversity, which could lead to further pressures on the mental health services. Whilst there is currently an issue with medication it was discussed that some people may fill this gap with risk taking behaviours, or substance misuse. The highest Quality Outcome Framework (QOF) register condition recorded for those age 26+ with ADHD in Wirral is Depression, with a prevalence of 26.3% compared to 17.9% of 18–25-year-olds without an ADHD diagnosis in Wirral.

The need to promote the peer-to-peer support groups which are available across Wirral but acknowledge that professional support is also essential. There are also a few groups and services across the Voluntary Community Faith and Social Enterprise (VCFSE) sector. Providers and services were reminded of the importance around Making Every Contact Count (MECC) and considering the whole person.

Healthwatch presented a report on their 'Sole Survivor' and Wirral ADHD Focus Groups. Residents reported concerns of MH crisis, especially in connection to issues around lack of medication and a delay in referring for trauma informed therapy for patients with Post Traumatic Stress Disorder (PTSD). Wirral residents have shared their concerns about the lack of communication in relation to the ADHD medication shortage and the inability to access their prescription. There is also a lack of alternative provision to support those individuals affected.

1.2.5	Nothing raised.
1.2.4	Any Other Business
1.2.2	Details of next meeting It was agreed the focus of the next Quality and Performance meeting would include data, insight and experiences within All Age Continuing Care, including local management of Enhanced Health in Care Homes.
	regards to mental health provision across VCFSE including access to many services and collaborative working offering a range of innovative services. There was also a lot of great recognition of NHS Services from the sector, including Secondary Mental Health Services, GP Out of Hours (OOH), Memory Assessment Services and good working relationships with IAPT. It was agreed that further insight and intelligence work would be undertaken into this area supported by Public Health into the prevalence rate, solutions would then be identified based on this. A further session will take place following this work.
	A survey was undertaken across the VCFSE Sector utilising Wirral Council for Voluntary Services (CVS) and the collaborative communication group, focusing on Mental Health provision and the relationships between the VCFSE, NHS and Wirral Council. 68.42% of those who responded reported good relationships between their organisation and the NHS and Wirral Council. When asked about the stumbling blocks when working with mental health, themes included Funding, waiting times, lack of consistency and lack of early intervention. There was good recognition with

2	Implications	
2.1	Risk Mitigation and Assurance	
	The work taken through the Quality and Performance Group provides controls for and support assurance of the management of the strategic risks PDAF 1 and PDAF 3. The Group is also developing a Risk Register that would feed into the PDAF and discussions at the Place Based Partnership Board around risk.	
2.2	Financial	
	Managing the performance of commissioned services is key. Medication costs remains a concern within Wirral, however this does reflect the population diagnosis rates.	
2.3	Legal and regulatory	
	Legal implications have been considered within this report relating to NHS constitutional standards which have been referenced within the report.	
2.4	Resources	
	Consideration around resource mitigations in relation to the gap in ADHD Medication.	
2.5	Engagement and consultation	
	This is a group that has been agreed as part of NHS Cheshire and Merseyside's governance for Wirral. The Group has a membership that includes Healthwatch Wirral and representation from the voluntary, community, faith, and social enterprise (VCFSE) sector. Partnership working remains a strength of the assurance and improvement	

	plans.
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. The business of the Quality and Performance Group is conducted with an awareness of the general duty requirements and place equality considerations. 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 the Quality and Performance Group.
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. The Quality and Performance Group supports this work in Wirral.

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4	Appendices
	No appendices included within the report.

Author	Julia Bryant
Contact Number	0151 651 0011
Email	Julia.bryant@cheshireandmersyside.nhs.uk