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	7 th May 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 previously 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 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)				
	The February data for patients waiting more than 6 weeks for a diagnostic test shows a further improvement of 3.6%. Wirral is achieving both the local target of 14.9 % and national target of 10%				
	For the other cancer targets, against the 31-day combined metric Wirral is below the national target of 96% at 95.6%, however this is an improving picture from previous 4 months. The 28-day combined metric- this has been achieved. The 62 day combined metric- 72% this remains a challenge and below the 85% national target, however Wirral is above the NHS Cheshire and Merseyside trajectory of 70%.				
1.3	Mental Health				
	A further Super Multi Agency Discharge event (MADE) event took place on 23 rd April 2024. Super MADE brings together the local health and care system together across Cheshire and Wirral to recognise and unblock delays and to challenge, improve and simplify complex discharge processes.				
	Of the 40 patients that are clinically ready for discharge, 8 patients were Wirral residents. The longest delayed patient at the time of reporting is 730 days which is due to patient choice. This case is being supported legally to assist with discharge.				
	The themes for delays for other cases relate to housing issues with the availability of suitable accommodation in either nursing homes or supported living. Work across Cheshire and Wirral is being undertaken to work with existing housing providers to support them to accept people with mental health needs including training and wrap around care and support.				
1.4	HCAI rates				
1.4.1	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).				
	HCAI remain a priority for Wirral Place align with the priorities identified for NHS Cheshire and Merseyside for 2024/25 with a focus on local implementation. The thresholds for 2024/25 are expected. These will be included within providers contracts where appropriate to support improvement. Changes to COVID-19 testing from 1 April 2024 (BN 2024/007)				
1.4.2	The UK health Security agency (UKHSA) have announced changes to COVID-19 testing policy from 1 April 2024. These changes relate to testing for COVID-19 outbreak management in higher risk settings, routine asymptomatic testing on discharge from hospital to care homes and hospices, and symptomatic staff testing in hospices and NHS wards treating immunocompromised patients. Testing continues				

	to be available to support provision of COVID-19 treatments to individuals at greatest risk of severe outcomes. In line with the guidance, Wirral University Teaching Hospital have amended and their policy. This has been communicated to care homes within the Borough.				
2	Programmes				
2.1	SEND				
2.1.1	Management and Mitigations to date				
	SEND continues to be a priority for the partnership and has been included within the2024/25 planning round.				
	Following extensive engagement with partners, a model has been developed for children and young people with neuro development needs. This includes both support and diagnosis as required. Implementation of the model will commence quarter 2.				
	The interim role of the Designated Clinical Officer (DCO) has been appointed to and is due to start in post in May. This will mitigate some of the identified risk relating to the SEND programme.				
3	Measles (for assurance)				
3.1.1	Wirral system partners are working together to ensure that there is robust planning in regard to 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. To date no confirmed cases (Wirral residents) have been reported by UK Health Security Agency (UKSA).				

4	Implications			
4.1	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.			
4.2	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.			

4.3	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.
4.4	Resources
	There are no resource implications arising directly from this report.
4.5	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.
4.6	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.
4.7	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.
4.8	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.

5	Conclusion
5.1	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.

6	Appendices
6.1	Wirral performance report (April 2024)

Author	thor Lorna Quigley	
Contact Number (0151) 433 7651		
Email	Lorna.quigley@cheshireandmerseyside.nhs.uk	