

<b>Title</b>	Quality and Performance Report
<b>Authors</b>	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
<b>Report for</b>	Wirral Place Based Partnership Board
<b>Date of Meeting</b>	17 <sup>th</sup> October 2024

<b>Report Purpose and Recommendations</b>	
<p>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 the key area of improvement including Healthcare Associated Infections (HCAI).</p> <p>The Wirral Place Based Partnership Board is asked to:</p> <ul style="list-style-type: none"> <li>• Note the work underway across the system to monitor quality and performance, identifying areas for improvement.</li> <li>• Note and endorse the further work underway to strengthen the governance around quality and safety across Health and Social Care.</li> <li>• Receive assurance around the robust improvement plans in place to manage specific areas for improvement.</li> </ul>	

<b>Key Risks</b>	
<p>The report relates to the following key strategic risks identified in the Place Delivery Assurance Framework.</p> <ul style="list-style-type: none"> <li>• <i>PDAF 1 Service Delivery:</i> 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.</li> <li>• <i>PDAF 2 Children and Young People:</i> 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.</li> <li>• <i>PDAF 3 Collaboration:</i> Leaders and organisations in the Wirral health and care system may not work together effectively to improve population health and healthcare.</li> </ul> <p>There are operational risks arising from healthcare-associated infections (HCAs) 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.</p> <p>There are also strategic risks associated with the lack of progress against Written Statement of Action (WSOA) which has led to the issuing of the Improvement Notice. SEND. These are defined and overseen within the SEND Improvement Board.</p>	

<b>1</b>	<b>Performance by Exception</b>
<b>1.1</b>	<b>Urgent Care</b>

	These metrics are managed through the Unscheduled Care Programme Delivery and are reported separately.
<b>1.2</b>	<b>Planned Care (including Cancer Targets)</b>
	<p><u>Patients waiting more than 6 weeks for a diagnostic test:</u></p> <p>There is no change in July 2024 performance (this is positive) to the previous month of 4.2% and achieving both the local and national trajectory of 10%.</p> <p><u>Cancer targets</u></p> <p>31 day* combined metric- Wirral is below the national target of 96% at 95.9% (this is an increase on the previous months of 94.5%).  28 day combined metric- this has been achieved.  62 day* combined metric- 80.8% this remains a challenge and below the 85% - however an improvement from June 2024 performance of 76.6% national target. Wirral is above the ICB trajectory of 70%.</p> <p>*these measures are in line with the Government changes to the 62 day waiting time standard.</p>
<b>1.3</b>	<b>Mental Health</b>
	<p>A new mental health metric has been included for 2024-25. The national standard set is 75% for people with a severe mental illness receiving a physical health check.</p> <p>Quarter One 2024/25 performance against this metric is 64.7% against a national target of 75%. As this is a new metric data capture systems and reporting mechanism will be improved within Primary Care.</p> <p>The dementia diagnosis rate for July 2024 increased for the second successive month from 66.7% to 67.1% therefore achieving the national target.</p> <p>Due to operational pressures within Cheshire and Wirral Partnership NHS Foundation Trust, the October Multi-agency Discharge Event (Super MaDE) was deferred. This has been replaced by thrice weekly MaDE meetings in each of the three localities during this period of high escalation.</p>
<b>1.4</b>	<b>HCAI rates</b>
	<p>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).</p> <p>HCAI remain a priority for Wirral Place due to minimal impact in infection rates for C-difficile and Ecoli infections. The focus on local implementation aligns with the priorities identified for NHS Cheshire and Merseyside for 2024/25. There is a correlation with Antibiotic prescribing and C-difficile rates. the total volume of antibiotic prescribing in Primary care is above both the Cheshire and Merseyside and national rate.</p> <p>Since the previous reporting period, the 2024/25 NHS Standard Contract 2024/25: minimising Cdiff and Gram Negative Blood Stream Infections (GNBSI) has been</p>

published. The quality requirements are for ICBs and NHS Trusts to minimise infection rates to thresholds levels set by NHS England. This equates to a 5% reduction on the previous year's rates.

Organisation	Cdifficile	Ecoli	P.aerushnoma	klebesla
NHS C&M	900	2124	172	605
Wirral University Teaching Hospital	103	85	8	16

To support this ambition the Wirral system have worked on a C-Difficile Strategy. This has been approved at Septembers Health Protection Board (Appendix Two).

### 1.5 Primary Care

A new quarterly primary care metric has been included for 2024/25 - percentage of appointments made with General Practice seen within 2 weeks. The national standard for this is 85% Wirral's performance is above this at 88.3%.

## 2 Programmes

### 2.1 All Age Continuing Care (AACC)

NHS Cheshire and Merseyside are aiming to undertake a management of change process to a new target operating model for All Age Continuing Care. Wirral All Age Continuing Care service is hosted by Cheshire and Wirral Partnership NHS Foundation Trust (CWP) this is not part of the process. Performance in July 2024 against national standards:

28-day performance (from referral to decision made) July 83% there are 2 patients who are the longest cases waiting for a CHC assessment 38 days- these assessments has been booked.

Conversion rate (number of referrals to those who are eligible for CHC) 22.8%, this was a decrease from the previous reporting period of 35%.

Fast track approvals (those referred within the last 3 months of life and approved within 48hrs) -100%

Decision Support Tool (DST) Completed in hospital (national standard <5%) 0%

There were 4 appeals received in July regarding the outcome of the decision made. There are 10 outstanding cases.

## 3 Implications

### 3.1 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 about Quality and Safety seeks to provide controls and assurances around these risks.
3.2	<b>Financial</b> There are financial implications relating to SEND and the improvement notice, AACC, due to the cost of packages of care and Mental Health patients who have an extended length of stay. These have been included as part of the 2024/25 planning for consideration and prioritisation.
3.3	<b>Legal and regulatory</b> Legal implications have been considered within this report relating to NHS constitutional standards, NHS Continuing Care Framework and the Care Act, which have been referenced within the report.
3.4	<b>Resources</b> There are no resource implications arising directly from this report.
3.5	<b>Engagement and consultation</b> Partnership working remains a strength of the assurance and improvement plans. Engagement with all key stakeholders has been included within the governance components.
3.6	<b>Equality</b> 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.
3.7	<b>Environment and Climate</b> 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.
3.8	<b>Community Wealth Building</b> 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.

<b>4</b>	<b>Conclusion</b>
4.1	Detailed project plans are 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.

<b>5</b>	<b>Appendices</b>
----------	-------------------

5.1	Appendix 1 Appendix 2	Wirral performance report (June 2024) C-Difficile Strategy
-----	--------------------------	---

<b>Author</b>	Lorna Quigley
<b>Contact Number</b>	07774335465
<b>Email</b>	Lorna.quigley@cheshireandmerseyside.nhs.uk