Title	Quality and Performance Report
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Report for	Wirral Place Based Partnership Board
Date of Meeting	23 rd November 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. The report focuses 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.

Governance Journey			
Date	Forum	Report Title	Purpose/Decision
19 th October 2023	Quality and Performance Group	Quality and Performance Report	For scrutiny and decision regarding next steps.
3 rd November 2023	Health Protection Board	Quality and Performance Report	For scrutiny and decision regarding next steps.
6 th November 2023	SEND Transformation Board	Quality and Performance Report	For scrutiny and decision regarding next steps.

	Hext steps.
1	Narrative
1.1	Health Care Associated Infections
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 priorities for Wirral place are: The reduction in C- Difficile due to the high prevalence of infection. Support improvements in Urinary Tract Infections to reduce the numbers of community Gram Negative Blood Stream Infections
	The rate of C-Difficile within Wirral health care settings remains high. Based on several factors including population last year's infection rate. A system tolerance has been set 2023/23. Whilst September's figures have improved from 143% over the tolerance in July to 140% in September, 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. June's data demonstrates improvement from this position to Wirral being ranked as 86/106 for total prescribing in Primary Care.
	Several projects are underway to support antimicrobial stewardship, the effectiveness of the projects is being monitored both locally and through the Cheshire and Merseyside joint Oversight Board.
	Across NHS Cheshire and Merseyside, rates of Clostridium difficile (C. difficile) and Escherichia coli (E. coli) are above the year to date (YTD) trajectory as set out by NHS England in the publication <i>Minimising Clostridium difficile and Gram-negative Bloodstream Infections</i> . Whilst improvement has been made to reduce the number of infections, Wirral remains an outlier.
1.1.2	Management and Mitigations to date
	 NHS provider action plans have been scrutinised within the relevant fora and include actions which address priorities.
	 Review of the actions/outputs following the system C. difficile review of infection prevention control effectiveness.
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• Focus sessions for the system have been coordinated by the Director of Public

Health.

- Monitoring of vaccination uptake across health and social care staff and in patients.
- Development of a communications plan with a focus on inclusion.
- Delivery of the 2023-24 Primary care quality incentive scheme for antimicrobial stewardship.

1.1.3 **On-going plans**

To continue working in partnership at Place to ensure system engagement, including communications campaign.

Oversight of progress against priority areas will be monitored locally through Health Protection Board and the Cheshire and Merseyside AMR Joint Oversight Board

1.2 Patient Safety Incident Response Framework (PSIRF)

1.2.1 **Background**

The Patient Safety Incident Response Framework (PSIRF) sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety.

1.2.2 Management and Mitigations to date

NHS Cheshire and Merseyside (Wirral) offers continuous support to our main providers whilst going live with PSIRF in line with the national policy. Regular correspondence takes place to ensure that all policies and plans are reviewed and signed off, whilst ensuring that the final documentation will be publicly available on the websites of NHS provider organisations. Progress is also being made with our smaller and independent providers to support them through the PSIRF process. Face to face meetings and virtual catch ups are scheduled on a regular basis, offering support, whilst also offering support from NHS Cheshire and Merseyside's Lead for PSIRF.

1.2.3 **On-going plans**

NHS Cheshire and Merseyside will be working with partners on:

- Strengthening of governance, assurance and monitoring.
- Establishing engagement sessions with smaller providers including primary care and the independent sector.
- Providing the Wirral Place Based Partnership Board with further information around progress and impact.

1.3 Special Educational Needs and Disabilities (SEND)

1.3.1 **Background**

In 2021 a joint inspection team reviewed SEND provision in Wirral. 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 issued 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. Preparedness work is 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
- Neuro-Development Pathway
- Emotional Health & Wellbeing Transformation

1.3.2 | Management and Mitigations to date

In addition to making improvements in relation to the Written Statement of Action, partners in Wirral are also participating in the Delivering Better Value (DBV). Focus work continues around the development and roll out of the graduated approach and neurodevelopmental pathway.

The development of the neurodevelopmental pathway has highlighted waiting time issues within core services including Speech and Language Therapy (SALT), Child and Adolescent Mental Health Services (CAMHS) and Community Paediatrics. There are also gaps in commissioning of some services have led to the 0-19 services carrying additional risk.

Additional Support has been identified to support the SEND agenda due to the high risk the WSOA poses for our system. Transformational work is underway, focusing on the creation of a single point of access (SPA) to a full breadth of emotional health and wellbeing resources and services.

1.3.3 **On-going plans**

System partners will continue to monitor improvements, impact and outcomes through the SEND Transformation and Strategic Boards. Improvement work will continue around engagement and coproduction with people with lived experience. We will also further strengthen the data within the SEND dashboard. There will also be focused work in Wirral around SEND inspection readiness.

1.4 Quality and Performance Group Update

1.4.1 **Background**

The Quality and Performance Group meets bi-monthly and provides a forum at which place-based partners from across health, social care, public health and voluntary faith section can routinely share insight and intelligence into local quality matters, identify opportunities for improvement and concerns/risks to quality, and develop place-based responses to support ongoing quality and performance improvement for the local population.

1.4.2 | Monthly update

At the meeting on 19th October 2023, the Quality and Performance Group:

- Received timely evidence of provider and place-based quality performance in relation to priorities outlined within this report as well as commissioned quality indicators.
- Reviewed the membership of the Group to ensure wider representation, including from Adult Social Care and Childrens Services.
- Reviewed current performance metrics to ensure deliverables are set for each programme and are scrutinised through the appropriate governance route.
- Discussed the outcomes of a national review that had been undertaken by the Newborn Hearing Screening Programme, who reviewed the data of every newborn baby born in England between 2018 and 2023. This had identified four NHS Trusts who had diagnosed significantly fewer babies with a permanent childhood hearing impairment (PCHI) than expected following initial

	hearing screening assessment. In response to this each service has undertaken a review based on a set of criteria. Wirral University Teaching Hospital NHS Foundation Trust (WUTH) have completed their return and where not one of the trusts identified in the review.
1.4.3	On-going Plans The Group will continue to work on agreeing data metrics to provide and monitor the effectiveness of quality and performance management structures to support performance reporting to the Place Based Partnership Board.
	The Group will also consider how quality is addressed as part of the wider governance groups across Wirral and to ensure consistency with a Cheshire and Merseyside approach.

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, PDAF 2 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 The financial consequences of the identification of service gaps in the neurodevelopmental pathway will be considered within the 2024/25 planning round.
2.3	Legal and regulatory The legal implications that have been considered within this report include NHS constitutional standards and the SEND Code of Practice.
2.4	Resources There are no resource implications arising directly from this report.
2.5	Engagement and consultation Engagement with system partners has taken place in the development of the Terms of Reference for the Quality and Performance Group. 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 these groups will be 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.

3	Conclusion
3.1	The purpose report has focused on some key areas of improvement including, Healthcare Associated Infections (HCAI) and Special Educational Needs and Disabilities (SEND). The report has also highlighted that work is underway across the system to monitor quality and performance, identifying areas for improvement and to strengthen the governance around quality and safety across health and social care.
	Each area of work has detailed project plans in place, which are monitored closely, and interventions made to rectify adverse variation from plans.
	The Board is asked to note this report.

4	Appendices
	There are no appendices included within this report.

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