

REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting: 3 July 2014

Subject: Harrow CCG Quality Premium
Increasing Medication Incident Reporting Rates

Responsible Officer: Javina Sehgal, Chief Operating Officer,
Harrow CCG

Public: Yes

Wards affected: All

Enclosures: Presentation Slides

Section 1 – Summary and Recommendations

This paper is being presented to the July 2014 Harrow Health and Wellbeing Board High Level for sign off to support the delivery of improvements across 3 service providers.

This paper has been issued to both the Hillingdon and Brent Health and Wellbeing Boards for sign off.

The details of the national Quality Premium requirement for CCGs was issued to the Health and Wellbeing Board Joint Executive in April 2014.

The High Level Implementation Plan is below where the bold highlight indicates today's discussion/sign off:

- Agree this document within the BHH CCGs and hold initial discussions with the specified providers (Jun/Jul 2014)
- **Present & agree at HWBBs & agree with NHSE (July 2014)**
- Establish reporting and monitoring processes including dispute resolution process (Jul 2014)
- Work with providers to establish scheme (Aug 14)
- Monitor & Report Progress Quarterly (Sep 14, Dec 14 & Mar 15)
- Make payment to providers when Quality Premium received by CCGs

Section 2 – Report

Background

All CCGs submit Operating Plans nationally to NHS England. An element of the Operating Planning process is the requirement to report on a set of national standards known as Quality Premiums.

The Quality Premiums are dictated to CCGs by NHS England but the mechanism for monitoring performance and demonstrating that the improvements have been delivered is proposed by the local CCG.

Domain 5 of the 14/15 Quality Premium includes an opportunity for CCGs to ultimately improve safety by increasing the rate of reporting for medication-related safety incidents within key providers.

To achieve Domain 5 of the Quality Premium the Harrow CCG (in collaboration across Brent, Harrow and Hillingdon CCGs) must agree a target for improvement for our specified local providers (The Hillingdon Hospital Foundation Trust, North West London Hospitals Trust and Central & North West London Foundation Trust) with both their local Health & Wellbeing Boards (HWBB) and NHSE. The CCGs will then also need to ensure that the provider achieves the specified increase.

The achievement of this target supports a financial stream, representing 15% of the Quality Premium and would accrue approximately £750k across the 3 CCGs. The CCG propose to share this on a 50/50 basis with the three specified providers meaning that each would receive a maximum of approximately £107k for service improvements.

In this document we have identified the baseline information taken from the NRLS database (Sep 13 Baseline) and proposed targets for improvement for each of the three providers.

The demonstration that there has been an increase in incident reporting related to medication incidents will be via data uploaded to the NRLS database. Providers are expected to upload incidents from their local incident management systems onto the NRLS database on a monthly basis.

There is a concern by NHSE that areas of poor performance within a provider organisation may be masked by the provider's overall reporting rate. To provide assurance that this is not the case providers are to be asked to produce a quarterly report for presentation at their CQG meetings that demonstrate not only an increase in the rate of reporting but also that the spread of reporting is equitable across the organisation.

This programme will be managed and monitored by Carole Mattock and Mark Eaton on behalf of the BHH CCGs.

Financial Implications/Comments

There are no negative financial implications for commissioning organisations (Harrow CCG and London Borough of Harrow). If reporting targets are met the National Quality Premium process supports a level of financial flow that will benefit the targeted 3 local providers and Harrow CCG.

This is a national process with national guidance on targeted providers.

Legal Implications/Comments

NHS England has issued directions setting out conditions relating to the Quality Premium process. To achieve Domain 5 of the Quality Premium the Harrow CCG (in collaboration across Brent, Harrow and Hillingdon CCGs) must agree a target for improvement for our specified local providers (The Hillingdon Hospital Foundation Trust, North West London Hospitals Trust and Central & North West London Foundation Trust) with both their local Health &

Wellbeing Boards (HWBB) and NHSE. The CCGs will then also need to ensure that the provider achieves the specified increase.

Risk Management Implications

All partners within the borough recognise the benefit in continued improvements on medication incident reporting.

This programme will be managed and monitored by Carole Mattock and Mark Eaton on behalf of the BHH CCGs.

Equalities implications

Harrow is committed to improving care for all residents and service users across all commissioned services. This plan will support improvements within medication incidents reporting and allow continued learning and best practice to be embedded across the targeted 3 service providers.

Corporate Priorities

This plan will support the Harrow CCG achieving elements of the National Quality Premium process set by NHS England, with a requirement for the plan to receive sign off at local Health and Wellbeing Boards.

Ward Councillors notified:	NO
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Section 4 - Contact Details and Background Papers

Contact:

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Background Papers: None