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To: Health and Wellbeing Board, 28 January 2015

Subject: **Update on Quality and the Health and Wellbeing Board**

Classification: Unrestricted

Summary:

This paper updates the Board on progress regarding producing a Quality Report that fulfils the requirements set out in the Francis report and gives an overview of quality issues in Kent.

Issues affecting the quality of health and social care service to the public are often complex and rely on effective partnership working with other parts of the system. Whilst issues for individual services are addressed by their commissioners, there is a potential role for the Board in addressing the complex issues that affect the experiences of patients and service users.

Many of those issues are already known and there is activity to address them. This report would identify the highest priority issues, what activity is happening to address them, and how this could be enhanced by involvement from the Board.

The Board is asked to agree:

- (a) The Quality Report highlights the complex systemic issues that have the most impact on providing quality services in Kent**
- (b) Healthwatch Kent contact representatives from commissioners, providers and working groups to gather feedback on main issues of concern**
- (c) Healthwatch Kent present a further report analysing the issues and identifying key trends**

1. Introduction

The quality of health and social care service members of the public receive can be impacted by a range of complex factors. A paper was presented to the Kent Health & Wellbeing Board (KHWBB) in September 2014 recommending a regular report coordinated by Healthwatch Kent (HWK) that fulfilled the requirements set out in the Francis report and gave an overview of quality issues in Kent.

The aim of the report is to assist forward planning by Board membership organisations and agree priorities for consideration by the Board.

Discussions at the Board meeting in September raised concerns about the risk of duplication of existing performance management processes and getting further clarity about the purpose and format of the report.

Since the Board meeting two further Quality Report meetings have been held involving Healthwatch Kent, KCC Officers, NHS England and Public Health. There has also been a discussion at the Quality Surveillance Group. The outcome of these discussions is described below.

2. Intelligence Approach

At the meetings it was agreed that the report should not use existing performance data as it was agreed the accuracy and performance management implications were already being addressed in existing commissioning processes.

It was therefore agreed that the report should draw on intelligence rather than data.

It was also agreed it should not be administratively onerous or duplicate existing work, rather it should be an analysis of existing intelligence.

3. Sources of Intelligence

A key source of intelligence is the Quality Surveillance Group (QSG), whose function was outlined in the September paper. More detail about the QSG can be found [here](#).

Discussions at the Quality Report meetings and the QSG agreed that there may be a role for the QSG to escalate issues that are complex and involve more than one provider or system, or may be a county wide area of concern impacting on provider quality. It was discussed that the Health & Wellbeing Board could be a place where such system issues could be raised.

Similarly wider system issues arising out of the deliberations of the Health Overview & Scrutiny Committee could be fed into the report.

During discussions at the September HWBB meeting members expressed that many of the complex system issues are already known. Providers are also able to identify system issues which are barriers to providing high quality services. The report could incorporate these known issues.

Public Health could feed in concerns arising from areas of underperformance in the Assurance Framework.

The Quality in Care Project is coordinated by Kent County Council and provides a framework to enable local authority staff and partners to monitor quality and practice in the delivery of services, highlight and disseminate good practice, and support services to address identified issues and prevent poor provision in residential and home care services. The partner members of the steering group would be able to identify systemic issues that impact on the quality of those services.

Although the Pioneer Steering Group is addressing longer term challenges to providing quality services, it would be able to contribute issues that it sees but are not within its remit.

Local HWBB understand the quality challenges in their area and are already working on many of them. Getting their feedback on those issues and their activities would be essential.

Frequently Healthwatch Kent raises concerns from the public with commissioners and providers and makes recommendations. Invariably there are recommendations that an organisation can address directly, but other issues involve the cooperation of other organisations within the health and social care systems and cannot be so easily addressed.

HWK would also ensure that the issues raised correlate with concerns raised by the public.

HWK works with soft intelligence and qualitative feedback and so would be well placed to coordinate this report.

4. Format and process

It is proposed that the report be a short document summarising the issues raised from the sources above and identifying the key themes.

These issues would be gathered by Healthwatch Kent via conversations with the appropriate contact in each commissioning organisation, provider or group. It would be made clear that issues raised would be presented at the KHWBB and every effort will be made to ensure that issues cannot be attributed to individuals or organisations.

Discussion at the KHWBB would identify what work is already happening re the issues identified and some will be seen as a greater priority to address. It is proposed that a very short list of issues be agreed as priorities which the KHWBB feel are having significant impact on the provision of quality services. AND can only be addressed by a cross-county, system-wide approach.

These issues will be very complex and need exploring in more depth including:

- Understanding work currently being undertaken that involves KHWBB members or groups such as QSG, Quality in Care, Pioneer etc.
- What might be needed to enhance that work including how partnership with Local HWBBs could effect change
- Understanding progress made and how progress is measured
- How progress might be reviewed in the future

Healthwatch Kent will report back to the KHWBB regularly with these findings.

5. Value Added by the Health & Wellbeing Board network

As described above, raising these complex system issues with the KHWBB is an opportunity for information sharing by representatives of many aspects of the health and social care system, extending to the insights provided by District Council colleagues.

It is not currently clear how discussions occur regarding these systemic issues and the KHWBB offers an open, transparent and public forum for these issues to be discussed.

The network of Local HWBBs offer an opportunity to coordinate a drill down to local level to explore an issue and how it is being addressed in each Clinical Commissioning Group area, offering an opportunity to share good practice.

6. Conclusion

Recommendation(s)

The Board is asked to agree:

(a) The Quality Report highlights the complex systemic issues that most impact on providing quality services in Kent

(b) Healthwatch Kent contact representatives from commissioners, providers and working groups to gather feedback on main issues of concern

(c) Healthwatch Kent presents a further report analysing the issues and identifying key trends

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