

Attachment

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| **Report to:** | NEL CCG Joint Co-Commissioning Committee |
| **Presented by:** | Cathy Kennedy, Deputy Chief Executive |
| **Date of Meeting:** | 28th July 2016 |
| **Subject:** | **Local Quality Scheme** |
| **Status:** | OPEN  CLOSED |
|  | Complies with latest CCG Strategy for Primary Medical Services, if not, please give a brief reason why: |

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| **OBJECT OF REPORT:** |
| The attached document is a copy of the final version of the Local Quality Scheme. The Joint Co-Commissioning Committee has previously approved the key components and the required investment in this scheme. A final version of the full document is attached for information. |

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| **STRATEGY:** |
| This is line with CCG strategy. |

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| **IMPLICATIONS:** |
| As has been previously reported to the Committee, a task and finish group met to develop a Local Quality Scheme for implementation during 2016/17. The task and finish group included GPs, lay rep, practice managers and CCG staff. Draft versions have also been shared with the GP Development Group and all GPs and Practice Managers, prior to being finalised and approved by the Co-Commissioning Committee.  The five components of the scheme are:   * **Management of Pre-diabetes**   The creation of a Register & On-going Monitoring of patients at risk of diabetes. From that register identify patients for referral to the National Diabetes Prevention Programme (NDPP) scheme.   * **Improvements in Prescribing – two parts**   To ensure effective antibacterial prescribing.  To ensure effective and efficient prescribing practice, using tools to support where appropriate (e.g. Optimise RX)   * **Addressing variation in outpatient activity**   A peer review between practices to understand variation in outpatient first and follow up activity. To identify and share best practice and guidance, to support enhanced care in the primary care setting and reduced variation across NEL.   * **Patient Experience**   To achieve an improvement in the quality of patient contact within the surgery. Two surveys will be conducted to monitor and assess patient experience at first point of contact within the practice. Working closely with their Patient Participation Group (PPG) practices will identify any issues and work to develop plans to address them.   * **Practice Audit – Quality Based**   A full cycle audit using a frame work of quality to be adopted and audited. Practices will have a choice of four Quality Areas to work from that support CCG quality initiatives in year, or they could select their own topic from NICE guidelines. By the end of the year, the practices would need to demonstrate the quality improvements brought about / to be implemented as a result of this audit.  The investment in this scheme is:   * £50k of PMS premium reinvestment has been placed into the funding for the scheme, as approved by the Committee * £300k has been provided from the previous PBC incentive scheme budget, as approved by the Committee   The scheme was offered out to Practices in June 2016. |

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| **RECOMMENDATIONS (R) AND ACTIONS (A) FOR AGREEMENT:** | |
|  | The Joint Co-Commissioning Committee is asked to: |
|  | * Note the final full version of the Local Quality Scheme. |
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|  |  | **Yes/**  **No** | **Comments** |
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|  | Does the document take account of and meet the requirements of the following: |  |  |
| i) | Mental Capacity Act |  |  |
| ii) | CCG Equality Impact Assessment |  |  |
| iii) | Human Rights Act 1998 |  |  |
| iv) | Health and Safety at Work Act 1974 |  |  |
| v) | Freedom of Information Act 2000 / Data Protection Act 1998 |  |  |
| iv) | Does the report have regard of the principles and values of the NHS Constitution?  [www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_113613](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_113613) |  |  |