

Attachment 12

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| **Report to:** | NEL CCG Joint Co-Commissioning Committee |
| **Presented by:** | Julie Wilson, Assistant Director Co-Commissioning |
| **Date of Meeting:** | 16th February 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:** |
| This report has been prepared to update the Joint Co-Commissioning Committee regarding plans for the annual review of the ‘PBC Incentive Scheme’. The proposal is to review and revise the existing scheme, so that the 2016/17 scheme has a greater emphasis on quality of care, and is more targeted at specific areas of variation in practice. In recognition of the shift of emphasis, it would become known as a local quality improvement scheme. The Joint Co-Commissioning Committee is asked to note the progress so far, suggest any potential additional areas, and endorse the approach. The final scheme will be presented back to the Committee for approval at the next meeting in April 2016. |

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| **STRATEGY:** |
| The proposed quality scheme would support the local strategy. |

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| **IMPLICATIONS:** |
| The intention is to select some new areas for inclusion within the quality scheme that would have the most impact in terms of quality of care and improved outcomes for the local population, in addition to focusing on reducing variation and improving consistency of approach. A task and finish group has already been established to progress work on the development of the scheme. Membership of the task and finish group includes Community rep, GP, Practice Managers, CCG Nursing and Quality rep, CCG commissioning and service redesign reps and CCG finance rep.  The task and finish group considered a list of potential areas that had been collated following discussions at various groups and/or committees. The list of proposedareas that are being worked up in more detail are:   * Pre-diabetes registers – some practices have these, some do not. A QOF indicator on this is being developed but is unlikely to be brought into effect for at least 2 years. The CCG has an opportunity to get ahead of the curve on this and improve the outcomes for patients at risk of diabetes. This would support the fact that the CCG has been accepted on to the First Wave of the National Diabetes Prevention Programme * Targeting variation in the management of other chronic diseases * A patient experience measure – the community rep will be engaging with Patient Participation Groups to identify potential areas for inclusion * More specific focus on the appropriate prescribing of broad spectrum antibiotics * More specific focus on consistency in other prescribing areas, subject to review of current year information * More targeted focus on variation in referrals (by speciality), with greater emphasis on peer review and working across Practices   There is the potential to increase the remuneration for this scheme through the use of PMS reinvestment monies, as proposed in the paper regarding PMS reinvestment. The monitoring requirements will also be reviewed and refreshed in order to link payment, as far as is possible, to service user outcomes as well as achievement of improved performance.  The task and finish group is planning two further meetings, with a view to having a draft scheme available by mid-March 2016. The Joint Co-Commissioning Committee will be asked to approve the final draft in April 2016. |

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| **RECOMMENDATIONS (R) AND ACTIONS (A) FOR AGREEMENT:** | |
|  | The Joint Co-Commissioning Committee is asked note the progress so far, suggest any potential additional areas, and endorse the approach. |
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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) |  |  |