

Agenda Item 6

Report to: Primary Care Commissioning Committee

Date of Meeting: 29 January 2019

Subject: Primary Care Commissioning Policy on Monitoring and Evaluation

Presented by: Rachel Singyard – Service Manager

**STATUS OF THE REPORT (auto check relevant box)**

- For Information
- For Discussion
- For Approval / Ratification
- Report Exempt from Public Disclosure  No  Yes

**PURPOSE OF REPORT:**

This paper describes the Primary Care Quality Assurance process that the CCG proposes to adopt in order to meet our statutory duty relating to the quality assurance of primary care medical service provision. This includes the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation.

The approach is designed in such way to address quality assurance, support improvement in General Practice and provide a systematic process for managing unwarranted variation.

**Recommendations:**

**The Primary Care Commissioning Committee is asked to:**

- support the establishment of a Primary Care Quality and Performance Sub Committee to oversee implementation of the process.
- note that the Primary Care Quality and Performance Sub Committee will report to the Primary Care Commissioning Committee and Clinical Governance Committee
- support the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation

**Sub Committee Process and Assurance:**

Primary Care Quality and Performance Sub Committee to be established to oversee this process, reporting to this Committee and sharing information with the Clinical Governance Committee where quality or safety concerns are identified.

<b>Implications:</b>	
<b>Risk Assurance Framework Implications:</b>	<p><b>Key Issues:</b> The CCG Primary Care Quality Assurance process is designed to operate in tandem with NHS England’s quality assurance processes. As well as provide a robust systematic process for supporting quality improvement in general practice.</p> <p><b>Key Risks:</b> Implementation of this process and policy should mitigate against instances where a practice may not meet defined minimum core standards of primary care provision, there are potential issues of safety or there is non-engagement from the practice over a range of areas.</p>
<b>Legal Implications:</b>	There is a possibility that contractual sanctions may be enacted should it be deemed that any GP Practice is not fulfilling its legal obligations.
<b>Equality Impact Assessment implications:</b>	<p>An Equality Impact Analysis/Assessment is not required for this report  <input checked="" type="checkbox"/></p> <p>An Equality Impact Analysis/Assessment has been completed and approved by the EIA Panel. As a result of performing the analysis/assessment there are no actions arising  <input type="checkbox"/>  from the analysis/assessment</p> <p>An Equality Impact Analysis/Assessment has been completed and there are actions arising  <input type="checkbox"/>  from the analysis/assessment and these are included in section ____ of the enclosed report</p>
<b>Finance Implications:</b>	Implementation of the process and policy should support the CCG to identify outlying practices and provide the appropriate support to reduce unwarranted variation. Thereby improving quality by reducing waste and hitherto delivering financial savings.
<b>Quality Implications:</b>	<p>This report details a positive impact on quality.  <input checked="" type="checkbox"/>  The proposal put forwards, if agreed, would have a positive impact in terms of enabling providers to meet safe staffing targets. Retention and recruitment is forecast to be improved, which would have a positive impact on the safe delivery of local services.</p> <p>This report details a neutral impact on quality.  <input type="checkbox"/>  The report will not make any impact on experience, safety or effectiveness.</p> <p>This report details a negative impact on quality.  <input type="checkbox"/>  The report details the need for budgets to be significantly reduced. It is clear that the report summarises that quality will be negatively impacted by this as decisions to remove services/provide a lower level of provision to solely meet the ‘must do’s’ of provision in terms of meeting people’s needs has to be made. It is forecast that service user experience will be negatively impacted by this position.</p>
<b>Procurement Decisions/Implications (Care Contracting Committee):</b>	N/A



## **Introduction**

From 1st April 2018 North East Lincolnshire CCG has the delegated authority for contracting primary care medical services, as well as the existing statutory duty to assist and support NHS England with the quality assurance of primary care medical service provision.

The CCG also has a responsibility for improving and developing the quality of primary care general practice, reducing variation and in supporting their member practices.

This paper describes the approach that the CCG will be adopting in respect of Quality Assurance, Performance and monitoring of the local primary care medical services designed in such way to address quality assurance, support improvement in general practice and provide a systematic process for managing unwarranted variation.

## **Background**

Practices, as providers of primary care services, are accountable for the quality of service, and are required to have their own quality monitoring processes in place. The CCG as commissioner has a responsibility for quality assurance. The principle is to be supportive whilst enhancing quality and preventing harm to patients. Through the duty of candour and the contractual relationship with commissioners, practices are required to provide information and assurance to commissioners and engage in system wide approaches to improving quality. The CCG is committed to improving the quality of care for our patients and therefore assessing, measuring and benchmarking quality and supporting general practice to deliver high quality care is a key focus.

The Primary Care Commissioning Policy on Monitoring and Evaluation describes our proposed approach to monitoring and assuring quality and improvement in all Primary Care commissioned medical services. This process is also designed to support improvement in general practice and provide a systematic process for managing unwarranted variation.

## **Quality Assurance process**

The CCG must have in place robust systems and processes to regularly monitor and evaluate primary care commissioning provision in terms of:-

- Activity
- Quality; safety; effectiveness and experience (inclusive of both patient and staff experience)
- Sustainability

The approach will cover the areas described above and the monitoring will take place through routine internal contractual processes and clinical governance structures and external sources such as CQC, peer reviews, national surveys etc.

The governance arrangements will include the routine monitoring of a primary care quality dashboard by the members of the Primary Care Quality and Performance Committee. This Committee will have membership from across the CCG directorates; Service Redesign and Planning Primary Care Leads, Nursing and Quality, Business Intelligence and NHS England in order to identify potential or actual risks to quality, agree a response and to ensure that concerns about quality are reported to the CCG Clinical Governance Committee and risks are escalated appropriately to the Primary Care Commissioning Committee. In line with sub-committee requirements, any decisions arising from a practice visit would be brought to this committee for a decision on appropriate action, e.g. contract sanctions.

The Terms of Reference are attached at Appendix 1 and it should be noted that the advice from the CCG Governance team is that consideration is given to appointing a lay member as the chair .

The process is described in detail in the Primary Care Commissioning Policy on Monitoring and Evaluation which is attached at Appendix 2. This includes routine quality assurance monitoring visits, Quality Surveillance and formal contract action. A two year cycle of routine practice visits will take place alongside any other identified monitoring required. Prior to any practice visit, a Pre-practice visit questionnaire will be sent to the GP practice and requested that it is completed and returned before the visit takes place.

**The Primary Care Commissioning Committee is asked to:**

- support the establishment of a Primary Care Quality and Performance Sub Committee to oversee implementation of the process.
- note that the Primary Care Quality and Performance Sub Committee will report to the Primary Care Commissioning Committee and Clinical Governance Committee
- support the introduction of the Primary Care Commissioning Policy on Monitoring and Evaluation