

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

20 JUNE 2023

MEDWAY NHS FOUNDATION TRUST – QUALITY ACCOUNT 2022/23

Report from: Lee-Anne Farach Director of People

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Summary

Medway NHS Foundation Trust has requested comments on their Quality Account 2022/23 by 22 June. This report set out a suggested response for approval.

1. Budget and policy framework

1.1. The Committee is responsible for reviewing and scrutinising any matters relating to the planning, provision, and operation of health services in Medway.

2. Background

2.1 Quality Accounts are annual reports to the public from providers of NHS healthcare services about the quality of services they provide. The primary purpose of Quality Accounts is to encourage boards and leaders of healthcare organisations to assess quality across all the healthcare services they offer and encourage them to engage in the wider processes of continuous quality improvement. Providers are asked to consider three aspects of quality – patient experience, safety, and clinical effectiveness.

2.2 All providers of NHS healthcare services in England, whether they are NHS bodies, or private or third-sector organisations must publish an annual Quality Account. Providers are exempt from reporting on any primary care or NHS Continuing Health care services.

2.3 Healthcare providers publishing Quality Accounts have a legal duty to send their Quality Account to the Overview and Scrutiny Committee in the local authority area in which the provider has its registered office, inviting comments on the report from the Committee prior to publication. There is no requirement to comment on a Quality Account.

- 2.4 Receiving the Quality Account enables the Committee to review the information contained in the report and provide a statement on their view of what is reported and whether they believe, based on the knowledge they have of the provider, that the report is a fair reflection of the healthcare services provided.
- 2.5 Government Guidance suggests Overview and Scrutiny Committees could comment on the following issues:
- does a provider's priorities match those of the public;
 - whether the provider has omitted any major issues;
 - has the provider demonstrated they have involved patients and the public in the production of the Quality Account; and
 - any comment on issues the Committee is involved in locally.
- 2.6 Providers are legally obliged to publish this statement (of less than 1000 words) as part of their Quality Account.
- 2.7 Medway NHS Foundation Trust have requested a response on their Quality Account 2022/23 (Appendix 1).
- 2.8 Usually there is not an opportunity for the Committee to agree a response due to the timings of when Quality Accounts are received from providers. Therefore, there is a delegation to the Director of People to agree responses to Quality Accounts, in consultation with the Committee Chairman, Vice-Chairman and Opposition Spokesperson. On this occasion though the Committee has an opportunity to agree a response. The Committee are also asked to re-affirm this delegation.

3. Proposed response

- 3.1 There are several gaps in Medway NHS Foundation Trust's Quality Account that needs further clarification:
- Whilst 2 out of its 6 priorities for 2022/2023 were achieved, no actions were mentioned to improve the 4 that were not achieved.
 - It has stated the number of research studies completed (including NIHR studies) however there is no mention of study outcomes or impacts in terms of service delivery and how these benefit the local population.
 - 2 out of 9 CQUIN (Commissioning for Quality and Innovation) targets were achieved. Whilst there is mention of its commitment to achieving the other targets, it would be helpful if the Trust shared their improvement plan for the targets not achieved.
 - In the last CQC inspection, the overall trust rating is "room for improvement". It is noted and welcome the work in critical care, end-of-life, maternity and gynaecology has been rated good and outstanding. It would however be helpful to specify actions being taken to improve the other departments.

- Learning from Deaths: 48% of the 1605 adults were noted to have received good or outstanding care with 151 cases referred for structured judgement reviews. Considering the trust's hospital standardised mortality ratio is "higher than expected", the % of reviews (under 10%) the trust may wish to consider additional work in this area given the vast majority of deaths had no explanation or learning actions. This may also help to inform wider preventative action within the community.

3.2 The Quality Account does not include actions from the Kent & Medway (K&M) Integrated Care Strategy (ICS). This strategy has been ratified by the K&M Integrated Care Board, Medway Council & Kent County Council & undergone extensive public consultation. An interim version of this strategy was approved by Medway's Overview and Scrutiny Committee on 1st December 2022. Given the trust were also party to this consultation it maybe they could better align the Quality Account through referencing the ICS strategy.

- For 2023/24 the Quality Account do not mention K&M's ICS's priorities or actions. There also does not appear to be any mention of trust wide work to facilitate health improvement or positive behavioural change interventions within the trust and/or collaboration with external partners to undertake wider preventative work.
- Through aligning the Quality Account with the ICS strategy, greater synergy may have been achieved in terms of both identifying areas requiring improvement and the actions to improve them.

4. Options

4.1 The Committee can agree the proposed response, amend the proposed response or decide not to respond.

5. Advice & Analysis

5.1 It is advised that MFT consider points 3.1 and 3.2 above and resubmit a revised Quality Account addressing these points. Being more aligned with the K&M ICS will assist MFT in focusing on improving standards and quality of care for Medway's residents whilst simultaneously reducing staff pressures.

6. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk rating
If MFT's Quality Accounts aren't aligned with the K&M ICS, the success of both will be reduced	The public will ultimately not get the highest standards of care & preventative measures will have worse	Collaboration on the K&M ICS, combining resources in preventative measures to reduce requirements for	C3

Risk	Description	Action to avoid or mitigate risk	Risk rating
	outcomes than expected	medical interventions	

Likelihood	Impact:
A Very high B High C Significant D Low E Very low F Almost impossible	1 Catastrophic (Showstopper) 2 Critical 3 Marginal 4 Negligible

7. Financial implications

7.1 There are no financial implications arising from this report.

8. Legal implications

8.1 The National Health Service (Quality Accounts) Regulations 2010 specify the information required, content and format of quality accounts, including any statements provided by Overview and Scrutiny Committees.

9. Recommendations

9.1 Members are asked to approve the draft response to Medway NHS Foundation Trust Quality Account, as set out in paragraph 3 above.

9.2 Members are asked to re-affirm the delegation to the Director of People to agree responses to Quality Accounts, following consultation with the Committee Chairman, Vice-Chairman and Opposition Spokespersons, where the timings do not allow the Committee to agree a response.

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Appendices

Appendix 1 - Medway NHS Foundation Trust Quality Account 2022/23.

Background papers

None