

То:	The Board
For meeting:	12 December 2018
Agenda item:	8
Report by:	Richard Wilson, Director of Quality Intelligence and Insight
Report on:	Quality Dashboard

Purpose

1. This paper reports the key observations from the Quality Dashboard report. The Board is asked to note the key findings.

Context

2. The report provides a view of the performance of NHS trusts and foundation trusts, and hence some values may differ from other national statistics that include data from primary care and the independent sector.

Key findings

3. Key findings from the November Quality Dashboard are as follows:

CQC

 In the last year (22 October 2017 to 22 October 2018), 6 more trusts have moved to outstanding overall, 9 more to good, and there are 7 fewer inadequate trusts. However, since April 2018, 7 trusts have moved from good to requires improvement, which is more than in the whole of 2017/18.

Safe

• Over the past 9 months the number of Never Events reported has consistently exceeded the long-term average of 34. The increase in reporting is due to the introduction In Jan 2018 we introduced the airflow

meter Never Event category and also included wrong site blocks in the wrong site surgery definition.

- The assessment of patients for Venous thromboembolism (VTE) has recovered, with the most recent 6 months are above the 95% level of the retired Commissioning for Quality and Innovation scheme(CQUIN).
- There are no changes in the rates of methicillin-resistant Staphylococcus aureus (MRSA), Methicillin-sensitive Staphylococcus aureus (MSSA) and Escherichia coli (E. coli) infections. The number of E. coli cases is statistically high, with 3858 infections in September 2018. It is affected by seasonality with summer peaks, hence the incidence should decline with autumn. Public Health England have advised that the rise in overall E.coli cases is related to the heatwave. The hospital onset cases remain below last year's outturn. The focus of intervention remains at a system level with the Clinical Commissioning Groups (CCGs) with the highest rates and numbers.
- An investigation was undertaken into the historical downward shift in the rates of falls resulting in a hip fracture in hospital. It has been discovered that this was the result of a coding change. The indicator has hence been reset to the beginning of the revised measure in January 2016. The rate of falls resulting in a hip fracture is on average 31.6 per 100,000 for those aged 60 and over. Two out of the last three points are between 2 and 3 sigma (the measure of variation from the average), this is described as special cause variation and could indicate an improving situation if this pattern continues into the future.

Caring

- In general, patient experience is positive. The rate of written complaints is running statistically below average. For community services, the percentage of patients who would recommend the trust that treated them (friends and families test (FFT)) is at a statistically significant high of 96.5%.
- There is continued long-term improvement in mental health patient experience, the percentage of patients who would recommend the trust (FFT) is at a statistically significant high of 90.0%.

Effective

• The rate of emergency readmissions within 30 days of discharge had been averaging 7.7%, however since March 2017, the rate has increased and has been consistently above this level. The increase is confounded by the rise in 'in day' emergency care services, such as ambulatory care and clinical assessment units. Many trusts record this activity as emergency

admissions. There is no national guidance on how they should be recorded. It is hypothesised that a higher proportion of these patients will re-attend than those admitted to a ward, hence inflating the rate. NHS Improvement is working with NHS England to review the methodology used for calculating this indicator to reflect the evolving emergency pathway.

Responsive

- Mental health Out of Area Placements are currently running around 20,000 bed days per month. There is no trend in the performance.
- Mixed sex accommodation breaches rose sharply over winter 2017/18, with 2278 breaches in February 2018. The number of breaches per month have declined since then but with 1578 breaches in September 2018 they are statistically elevated compared to the mean value of 1211. The South East region is leading a collaborative focusing on reducing the number of breaches and the consistent application of the reporting guidance.

Well Led

- The staff friends and families test hit statistically new highs in quarter one of 2018/2019. 81.0% of staff would recommend their trust as a place to be cared for, and 65.3% of staff would recommend their trust as a place to work.
- Staff sickness averages around 4.2%. It is seasonal, with the winter of 17/18 being the highest, however it has since returned to a statistically low level. The peak in early summer for turnover is believed to relate to the transfer of staff in a series of trust mergers.

Mental Health

4. This is an area that remains under reported in the dashboard, however there are several workstreams working to address this. NHS Improvement has a year long funded post, ending in March 2019, at NHS England to develop a series of indicators that align to the Five Year Forward View for mental health for trusts. A pilot version has been shared with a group of stakeholders and a revised version will be shared with the regions before Christmas. This post is also working on a broader set of indicators in relation to care plans, self-harm, older people's mental health, dementia and physical health and the emergency pathway. These indicators are being developed with the clinical and policy leads across NHS Improvement and NHS England. Analytical leads from NHS Improvement are working with NHS England to consider whether this work will continue post April 2019.

5. In addition, NHS Improvement is in close communication with the Care Quality Commission and their work on safety and their Insight tool, to ensure everybody is aware of now quality is being reported across the health system.

Conclusion

6. The Board is asked to note the key findings in the Quality Dashboard report.



Quality Report

12 December 2018



Summary



CQC

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Responsive

- Mental health Out of Area Placements are currently running around 20,000 bed days per month. There is no trend in the data.
- The number of Mixed sex accommodation breaches remains high at 1578 in September 2018.

Effective

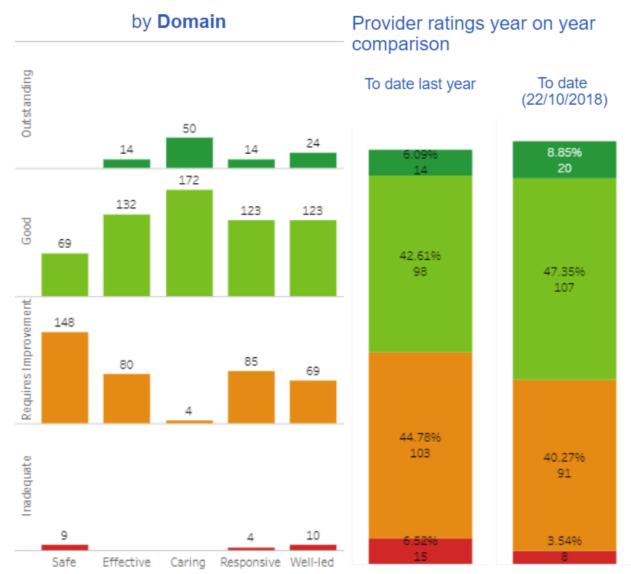
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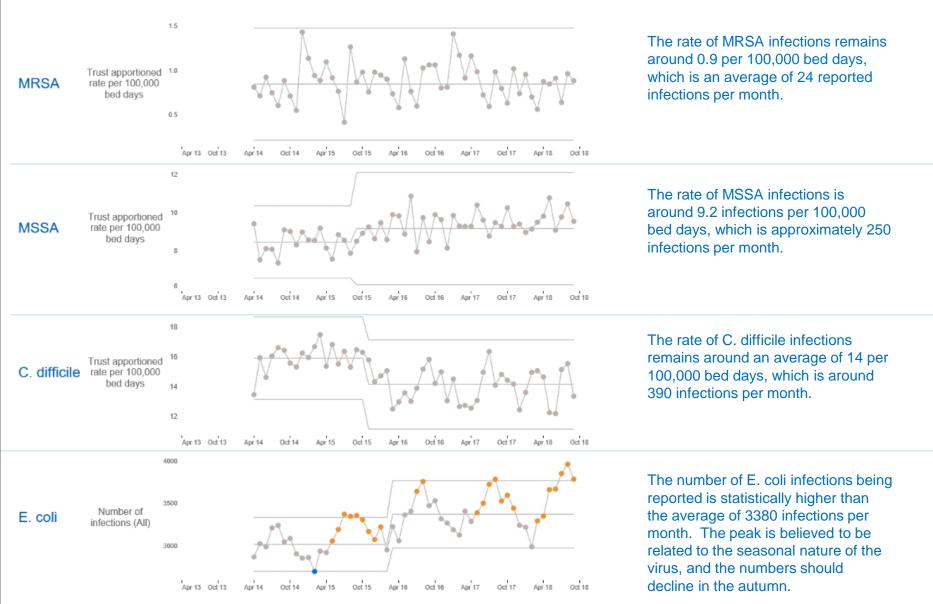
CQC Ratings





Safe - Infections





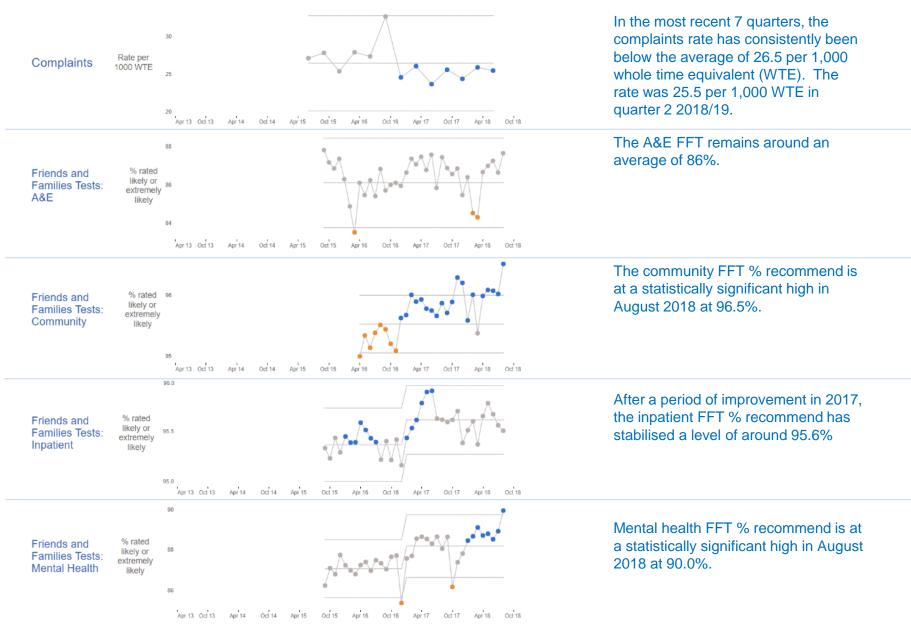
Safe - other



Improvement

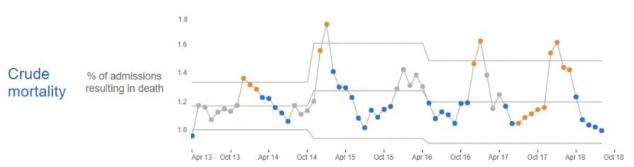
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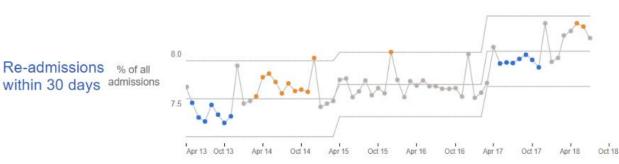


Effective





The crude mortality rate for all admissions is averaging 1.2%. It is seasonal and hence the recent downward trend is expected to reverse and to trend upwards as we move into winter.



The emergency readmission rate within 30 days has averaged 7.7% since 2014 although from April 2017 onwards the average has been 8.0%.

within 30 days admissions

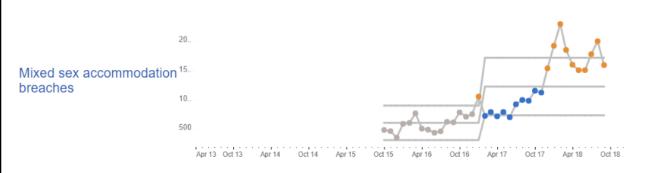


There are 13 trusts that have a SHMI higher than expected and 15 that are lower than expected.

Oct 18

Responsive





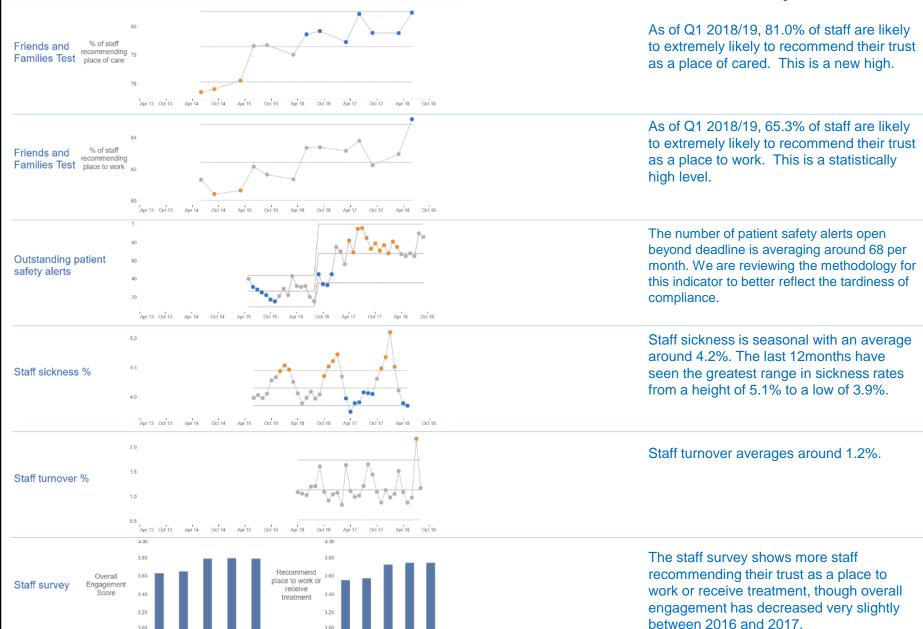
Mixed sex accommodation breaches rose sharply over winter 2017/18, with 2278 breaches in February 2018. The number of breaches at 1578 in September 2018, remains statistically outliers elevated to the mean value of 1,211.



The number of bed days attributed to inappropriate out of area placements average around 20,000 in the 8 months for which data is available.

Well led

Improvement





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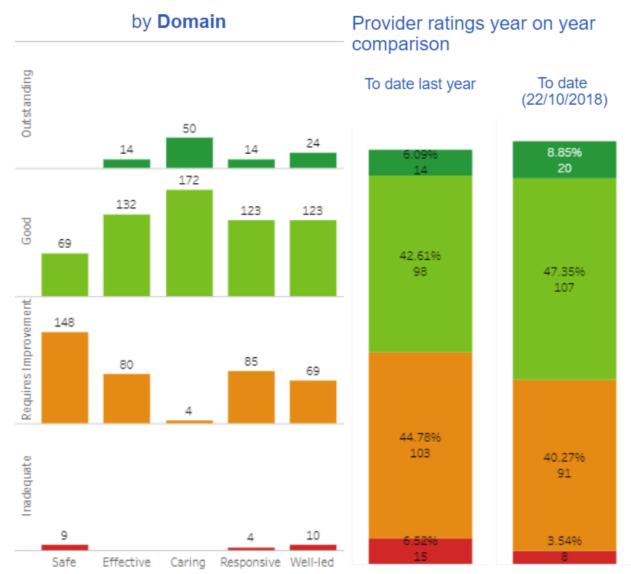
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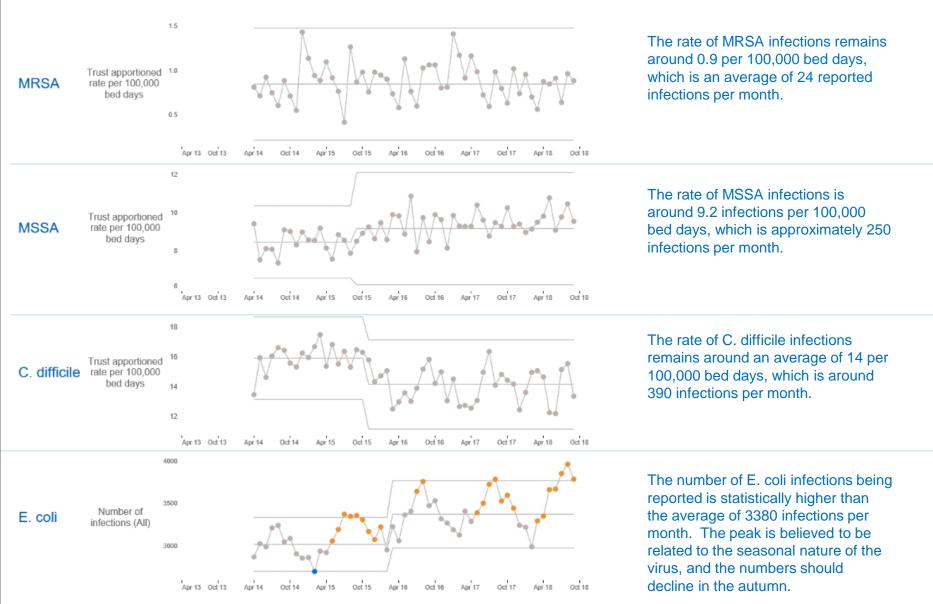
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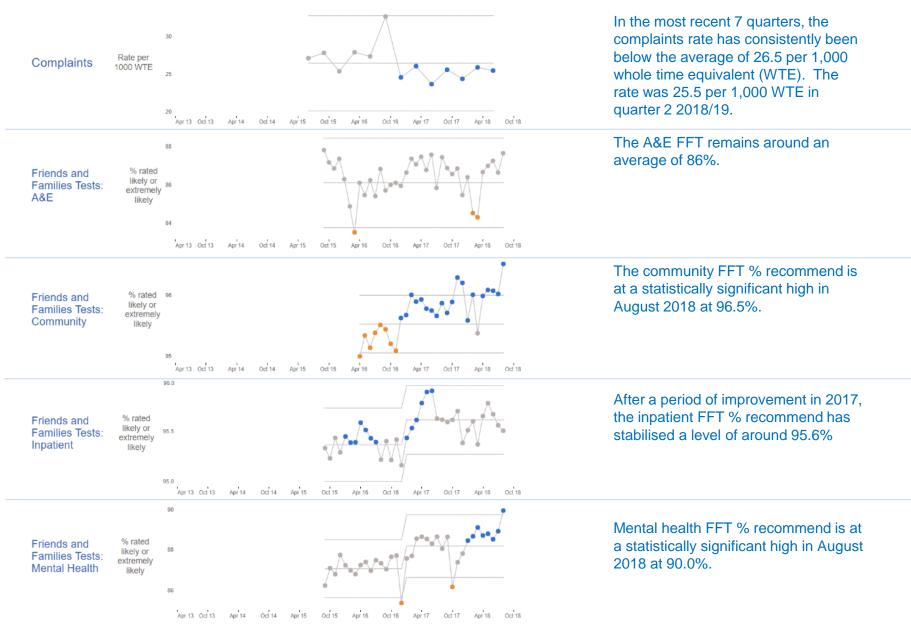
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Improvement

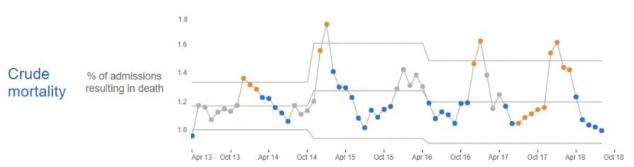
Caring



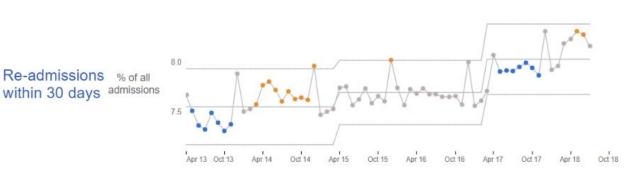


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Summary Hospital-level Outliers Mortality Indicator (SHMI)

Apr 13 Oct 13

Apr 14

Oct 14

Apr 15

Oct 15

Apr 16

Oct 16

Apr 17

Oct 17

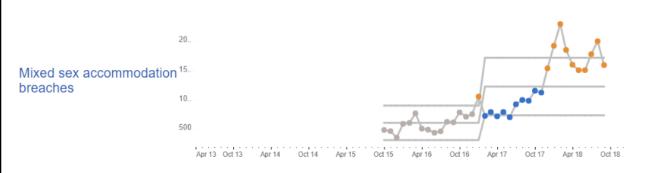
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