

CORPORATE GOVERNANCE COMMITTEE

17 NOVEMBER 2015

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

CLINICAL GOVERNANCE REPORT

Purpose of Report

1. The purpose of this report is to:
 - (a) Outline the approach taken by Public Health in assuming oversight of clinical governance
 - (b) Provide a summary of Leicestershire County Council's Clinical Governance Board's work in the past 12 months;

Background

2. This paper provides the Corporate Management Team with information and assurance on the clinical governance arrangements that have been established in Leicestershire County Council to ensure that its commissioned clinical services are of a high standard, continuously improving, cost-effective, safe and provide a good patient experience.

After 1st April 2013, upper tier local authorities acquired public health functions that included responsibility for commissioning a number of clinical services previously commissioned by the NHS.

It is a condition attached to the allocation of the public health grant that local authorities must have appropriate clinical governance arrangements to cover services commissioned with grant funds.

3. 'Clinical governance' is a systematic approach to maintaining and improving the quality of patient care within a health system. It was originally elaborated within the National Health Service (NHS), and its most widely cited formal definition is: *'A framework through which [NHS] organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish'*.

Clinical Governance embodies three key attributes: recognisably high standards of care, transparent responsibility and accountability for those standards, and a constant dynamic of improvement.

4. Clinical governance refers directly to 'clinical services'. Broadly speaking clinical services are services delivered by clinical staff i.e. healthcare professionals e.g. doctors, nurses, allied health professionals including physiotherapists and others. Clinical care involves diagnosing, treating and caring for patients. The main clinical services now commissioned by Public Health in Leicestershire County Council are as follows: (see **Appendix 1** for the full list):

- Substance misuse services including substance misuse shared care, criminal justice substance misuse pathway, alcohol brief advice, inpatient detoxification, alcohol liaison team
- Integrated Sexual Health Services including GP contraceptive services and pharmacy based emergency contraception
- NHS Health Checks
- School nursing service
- Health visiting service
- Community infection prevention and control service

The range of service providers includes NHS, non-NHS statutory and voluntary/private sector

Summary of progress-what we have done in Leicestershire County Council

5. Development of clinical governance arrangements in LCC has focussed on:
- Establishing clear lines of responsibility and accountability to promote the overall quality of clinical care.
 - Developing a comprehensive programme of quality improvement activities, including clinical audit.
 - Having effective awareness, and management of risks associated with the delivery/commissioning of clinical services
 - Putting in place effective governance of the processes in place for clinical audit/governance
 - Having clear procedures in place to identify and remedy poor performance
6. The overall clinical governance responsibility now sits with one of the public health consultants (delegated from the Director of Public Health). In terms of delivering on our requirements we have:
- Appointed a full time clinical governance manager
 - Appointed 2 full time contract managers/quality leads
 - Established a Quality and Clinical Governance Board that meets bi-monthly and is accountable to the council's corporate governance and

health scrutiny committees. The Quality & Clinical Governance Board has now been fully functional for two years.

- Established a work programme for the clinical governance team and board to systematically examine the cost-effectiveness, safety and patient experience of all its commissioned clinical services based on a proportionate approach determined by the level of clinical risk
- Created a new performance management framework to support assurance in relation to clinical governance. This provides a consistent approach for Contract Managers to follow when monitoring the performance of commissioned services
- Developed a clinical governance risk register with clear lines of accountability

7. A Leicestershire County Council internal audit report on the Public Health Clinical Governance Framework in July 2015 concluded:

‘Based on the answers provided during the audit and the testing undertaken, substantial assurance can be given that the internal controls in place to reduce exposure to those agreed risks currently material to the system’s objectives are adequate and being managed effectively’.

Summary of issues dealt with in the past 12 months by Leicestershire County Council’s Clinical Governance Board (Table 1):

Table 1:

Heading	Issue	Action
General	It is important to regularly measure indicators of effectiveness, safety and patient experience	The Clinical Governance Board considers reports covering effectiveness, safety and patient experience from each provider on a bi-monthly basis. These reports cover e.g. performance activity, untoward events, complaints and compliments
Clinical Audit	Clinical audit is a means of finding out if healthcare is being provided in line with established standards of best practice. It lets care providers, commissioners and patients know where their service is doing well, and	Our main contracts require our providers to choose and agree several clinical audits each year aimed at improving quality of patient care. The Clinical Governance Board oversees the process of carrying out

	where there could be improvements.	and acting upon the results of clinical audit. Audits carried out in 2014/15 included on Emergency Contraception, insertion of Intra-Uterine Contraceptives and on screening for health and wellbeing issues in patients attending substance misuse services
Medication	Importance of establishing robust mechanisms for reporting and acting on medication errors	Detailed assurance arrangements have been established with providers to ensure medication errors are swiftly and comprehensively reported. Providers now keep a log of medication related incidents and inform PH of any incidents and themes or trends that appear.
Patient Group Directions (PGDs)	PGDs provide a legal framework that allows the supply and/or administration of a specified medicine(s) to a group of patients, who may not be individually identified prior to presentation for treatment.	The clinical governance lead agreed to work with the providers to update the relevant PGDs. PGDs are then signed off by the Clinical Governance Board
Safeguarding including Child Sexual Exploitation (CSE)	<p>The Clinical Governance Board oversees safeguarding arrangements in our providers and must be assured that robust arrangements are in place.</p> <p>Nationally CSE has been identified as an issue of growing concern and the Clinical Governance Board is particularly focussed on its implications for our providers</p>	<p>Regular checks are carried out into safeguarding policies and their application. The Clinical Governance Board requested assurance that all our providers are fully compliant with their requirements in relation to tackling CSE. A CSE audit was carried out on all providers of public health services in February, 2015. All providers were found to</p>

		be either fully compliant or working towards full compliance.
Re-procurement	Re-procurement of clinical services creates opportunities to update and improve the clinical quality and safety of new services	The Clinical Governance Board has sought regular assurance and reports during the period of re-procurement of new services to ensure that clinical effectiveness, safety and patient experience are central considerations during the process. The current re-procurement of integrated substance misuse services is under regular review by the Clinical Governance Board

8. Resource Implications

A proportion of the public health grant is needed to support the council's obligations in relation to clinical governance e.g. in terms of staffing (clinical governance managers and contract managers).

9. Recommendation

That the contents of the report be noted.

Appendix

Appendix 1 - List of services commissioned by Public Health Directorate

Appendix 2 - Quality and Clinical Governance Board Terms of Reference

Officer to Contact

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Appendix 1

LCC PH Commissioned PH Services

Commissioned PH Services (higher value and higher clinical risk)				
Contract Title / Service	Provider	Current Contract Type	Annual Value (approx.)	Quality/Clinical Governance Issues
Substance misuse treatment service	Swanswell	Standard LA Contract	£2.9 million	Relatively high risk contract due to prescribing and safeguarding issues.
Integrated Sexual Health Service	Staffordshire & Stoke on Trent Partnership Trust	Service started January 2014	£2.96 million	Relatively high risk service-prescribing, IUCD, unwanted pregnancy, management and contract tracing of Sexually Transmitted disease including HIV, contact tracing etc.
School Nursing	Leicestershire Partnership Trust	Standard NHS Contract	£2.75 million	Medium-high risk due to safeguarding issues.
Health Visiting	Leicestershire Partnership Trust	Standard NHS Contract	£6.3 million	Medium-high risk due to safeguarding issues.
Stop smoking service	QUIT 51	Standard NHS Contract	£1.1 million	Low-medium risk
NHS Health Checks	Community Based Service-GPs	Standard PH Contract	£750k	Low-medium risk
Criminal justice substance misuse pathway	LiFT	Standard NHS Contract	£888k	High risk area due to prescribing and safeguarding issues. Jointly commissioned with Leicester City Councils
IUCD (Inter-Uterine Contraceptive Device) & Implanon	Community Based Service-GPs	Standard PH Contract	£520k	Moderate to high risk-misplacement of, failure of device, infection etc .Multiple providers
Inpatient detox	Nottinghamshire Healthcare Trust	Standard NHS contract (CCG)	£217k	High risk area due to nature of conditions treated.
Substance misuse shared care	Community Based Service	Standard PH Contract	£335k	High risk area due to prescribing and safeguarding issues etc. Multiple providers

Community infection prevention and control	In house (LCC) service	Standard NHS Contract	£90k	Potentially risky area-risk of outbreaks if service not delivered properly.
Contracts of lower value (below £200k)				
Contract Title / Service	Provider	Current Contract Type	Annual Value	Quality/Clinical Governance Issues including clinical risk
Alcohol brief advice	Community Based Service	Standard PH Contract	£100k	Moderate risk.
Alcohol liaison team	UHL	NHS Standard Contract	£54k	Moderate risk.
Chlamydia Screening	Community Based Service	Standard PH Contract	£25k	Moderate risk. Multiple providers
Emergency hormonal contraception	Community Based Service	Standard PH Contract	£48k	Moderate to high risk. Clinical and safeguarding issues. Multiple providers
Pharmacy Chlamydia	Community Based Service	Standard PH Contract	£0.25k	Moderate risk Multiple providers
HIV - Positive People	Voluntary Sector	Standard PH Contract	£20k	Relatively low risk
HIV - MSM	Voluntary Sector	Standard PH Contract	£40k	Relatively low risk
HIV - African Heritage	Voluntary Sector	Standard PH Contract	£5k	Relatively low risk.
HIV – Sex Workers	Voluntary Sector	Standard PH Contract	£20k	Relatively low risk.
Older People Activity	Voluntary Sector	Pilot	£30k	Low clinical risk (prevention). Will require standard contract performance monitoring
Commercial Weight Management	Weightwatchers	Short LCC Contract	£70k	Low clinical risk (prevention)
Master Gardeners	Garden Organic	Short LCC Contract	£70k	Low clinical risk (prevention). Will require standard contract performance monitoring

Physical Literacy 5-11	SAQ International	Short LCC Contract	£50k	Low clinical risk (prevention). Will require standard contract performance monitoring
Additional exercise on referral (heartsmart)	Leicestershire & Rutland Sport	District Commissioned	£50k	Low clinical risk (prevention). Will require standard contract performance monitoring
Travellers health ambassadors	Leicestershire Partnership Trust	NHS Standard Contract	£46k	Low-Medium risk due to vulnerability of client group, safeguarding etc CCG monitoring on our behalf Issues around data from LPT
Travelling families service	Leicestershire Partnership Trust	NHS Standard Contract	£50k	Medium risk due to vulnerability of client group, safeguarding etc
Probation Health trainers	Probation Service	LCC Contract	75K	Medium risk due to vulnerability of client group, safeguarding etc Leicester City Council monitoring on our behalf
Healthy Workplaces	Leicester Fit for Work	New Service	£75k	Low-Medium risk in terms of advice and services delivered to patients/public
Teenage Mediation Service	The Bridge, Loughborough	LCC Contract	£36k	Medium risk due to vulnerability of client group, safeguarding etc
Contracts of Higher value (over £100k) but relatively low clinical risk				
Contract Title / Service	Provider	Current Contract Type	Annual Value	Quality/Clinical Governance Issues
Food for life	Food For life Partnership	New Service	£100K year 1, £200K year 2 & 3	Low clinical risk (prevention). Will require standard contract monitoring
Additional exercise on referral	District Councils	District Commissioned	£170K	Low clinical risk (prevention). Will require standard contract monitoring