

Appendix

PUBLIC HEALTH DEPARTMENTAL MANAGEMENT TEAM COVERING REPORT

REPORT TITLE:	Quarter 1 2018/19 Clinical Governance Report – Provider A
MEETING DATE:	
REPORT BY:	
SPONSORED BY:	
PRESENTER:	

PURPOSE OF THE REPORT:
<ul style="list-style-type: none"> To detail clinical governance information provided for Q1 2018/19 by Provider A Turning Point relating to provision of the Services across Leicester & Leicestershire. To provide assurance of good clinical governance processes in relation to the Provider A Service contract.

RECOMMENDATIONS:
<p>The Public Health DMT are recommended to;</p> <ul style="list-style-type: none"> NOTE the content of this report COMMENT on the assurances provided by this report and identify any further assurances/clarifications required.

FINANCIAL IMPLICATIONS
Are there any financial implications and have they been considered in this report?

RISK ANALYSIS
Has a risk analysis been completed on this report?

EQUALITY AND HUMAN RIGHTS IMPACT ASSESSMENT
Has an equality and human rights impact assessment been completed on this report?

PEOPLE IMPLICATIONS
Are there any people implications? i.e. increased/reduced staffing

NATIONAL/LOCAL POLITICAL IMPLICATIONS

Are there any political implications and have they been considered in this report?

PROCUREMENT IMPLICATIONS

Are there any procurement implications and have they been considered in this report?

STATUTORY DUTY

Is this a statutory duty?

**Public Health
Departmental Management Team**

Quarter 1 2018/19 Provider A

Background

1. The X Service is provided by Provider A across Leicester & Leicestershire. Each authority holds a separate contract and separate contract management meetings. These meetings take place monthly. Every quarter, Provider A submits a quality report as part of the contract management process. The report is reviewed by commissioners and contract managers in advance of the meetings and queries are raised with the provider for further clarification if necessary.
2. This report details the clinical governance information provided for quarter 1 2018/19 by Provider A. The quality report as submitted to commissioners is provided in **Appendix A**. A separate report covering incidents and patient feedback is found in **Appendix B**.

Provider A Clinical Governance

3. The quarterly quality contract management meetings cover the following topics:
 - Incidents
 - Safeguarding
 - Training
 - Audit
 - Service changes/Review
 - Complaints and compliments

Incidents

4. Provider A uses system Y to report incidents. This system reports incidents by severity, type and location (**Appendix B**). Severity is determined by the impact the incident had on the person it applies to.
5. In addition to severity, incidents are categorised into the following types:
 - Access to services, admission, discharge
 - Aggressive/Challenging behaviour
 - Self-harm
 - Accidents
 - Administration / management
 - Consent, confidentiality or communication
 - Medical device/ equipment
 - Incident requiring treatment or medical intervention

- Service user death
- Security
- Financial loss
- Conveyance
- Diagnosis, failed or delayed
- Medication

Appendix C describes the types of incidents that fall under each category.

6. Location of incidents is categorised based on the site where the incident occurred.
7. Table 1 shows the number of incidents that occurred across the service in Q1 18/19 by severity and compares this with previous quarters.

Table 1 – Comparison of the number of incidents by severity

	High	Moderate	Low
17/18 Q3			
17/18 Q4			
18/19 Q1			

8. Table 2 shows that the types of incidents

Table 2 – Comparison of the number of incidents by category

All incidents	17/18 Q3	17/18 Q4	18/19 Q1
Access to services, admission, discharge			
Accidents			
Administration/ Management			
Aggressive/ Challenging Behaviour			
Consent, confidentiality or communication			
Diagnosis, failed or delayed			
Financial Loss			
Incident requiring treatment or medical intervention			
Medical device or equipment			
Medication			
Security			
Self-harm			
Service User Death			

9. There were Z high severity incidents reported in quarter 1 (table 3).

Table 3 – Number of high severity incidents by category

High severity incidents	17/18 Q3	17/18 Q4	18/19 Q1
Access to services, admission, discharge			
Aggressive/ Challenging Behaviour			
Incident requiring treatment or medical intervention			
Medication			
Security			
Self-harm			
Service User Death			

Safeguarding

10. The number of safeguarding incidents reported in quarter 1 2018/19 and compared to that of previous quarters (table 4).
11. Further information regarding these incidents (description and action) has been requested from the Provider.

Table 4 – Number of safeguarding incidents by category

Safeguarding incidents	17/18 Q3	17/18 Q4	18/19 Q1
Access to services, admission, discharge			
Administration/ Management			
Aggressive/ Challenging Behaviour			
Diagnosis, failed or delayed			
Incident requiring treatment or medical intervention			
Medical device or equipment			
Medication			
Security			
Self-harm			

Training

12. A training needs analysis (**Appendix D**) has been completed with the central training department to plan training for the coming year for the local service. Progress and compliance will be monitored quarterly via the Service Clinical Governance Meeting.

Audit

13. A comprehensive audit calendar is provided by Provider A (**Appendix E**) and reviewed on a quarterly basis through contract management meetings to ensure the audits are completed in a timely manner. Failure to complete audits that are timetabled are discussed at the meetings.

14. The service has recently undertaken its annual caseload audit where X% of the entire caseload is audited. The outcomes of this audit will be available at the next quality contract management meeting.

Service Changes/Review: Other

15. Provider A is expecting an unannounced CQC inspection within the next 3 months. Preparation is already underway for this.

Complaints and Compliments

16. Table 5 provides a summary of complaints and compliments and their associated outcomes.

Table 5 – Summary and outcomes of complaints and compliments

Type of Feedback	Summary	Outcome
Formal Complaint		
Informal complaints		
Compliments		

Summary

17. Overall, there are currently X areas of significant concern. The quality reports submitted by Provider A and information from contract management meetings provide/do not provide assurance of compliance with clinical governance standards and processes.

Next Steps

- Further information is awaited from the Provider on the description and resulting action following the high severity incidents and the safeguarding incidents.
- The next quarterly report will include a summary of findings from the caseload audit.
- The service will be subject to a CQC inspection within the next 3 months. The outcome of this inspection will be presented in a future report.