



CORPORATE GOVERNANCE COMMITTEE – 5 NOVEMBER 2021

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

CLINICAL GOVERNANCE ANNUAL REPORT

Purpose of the Report

1. The purpose of this report is to:
 - (a) Update the Committee on providing assurance around clinical governance since the last report to this Committee in November 2019. As previously raised with the Chairman and Spokespersons of the Committee, due to the impact of the COVID-19 pandemic and the additional pressures and priorities this created for the Public Health Department, the Annual Report on Clinical Governance was not provided to the Committee in November 2020.
 - (b) Update the Committee on key issues dealt with as part of Leicestershire County Council's clinical governance monitoring arrangements, roles, and responsibilities since November 2019.

Background

2. The Public Health function of the Council includes responsibility for 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 clinical services commissioned with grant funds.
3. This paper provides information and assurance on the clinical governance arrangements that have been established by the County Council to ensure its commissioned clinical services are of a high standard, continuously improving, cost-effective, safe and provide a good patient experience.
4. 'Clinical governance' is a systematic approach to maintaining and improving the quality of patient care within a health system. 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'* (Department of Health).

5. Clinical governance refers directly to 'clinical services' i.e. services delivered by clinical staff / healthcare professionals, e.g. doctors, nurses, allied health professionals and others.

The main clinical services commissioned (based upon contract value and criticality of service provision) by the County Council's Public Health Department are:

- Substance Misuse Treatment Services (SMTS). This includes: a community treatment service for adults and young people, inpatient detoxification, and residential rehabilitation services. The provider of community treatment services is Turning Point, whilst the provider of inpatient detoxification services is Framework – Edwin House. Residential rehabilitation services are provided via a framework of approved providers.
- Sexual Health Services (SHS). This includes: an integrated sexual health service and contraceptive services. The integrated sexual health service is provided by Midlands Partnership NHS Foundation Trust whilst contraceptive services are provided through Primary Care Services.
- NHS Health Checks - commissioned from local GPs
- 0-19 Healthy Together Service provided by Leicestershire Partnership Trust (LPT) across Leicestershire and Rutland. This covers the Health Visiting and School Nursing Service.
- Community Infection Prevention and Control Service

6. The range of service providers includes NHS and voluntary/private sector.

7. Clinical governance assurance necessitates regular and ad hoc contract monitoring with a specific focus on and clinical aspects of service provision to demonstrate cost effective and safe care that also delivers a good patient experience.

8. Examples of performance indicators specific to clinical governance include:

- Measures of cost effectiveness of services
- Reports of serious incidents and complaints
- Safeguarding reports
- General patient feedback - for example service user feedback on safety and experience.
- Reports of compliments
- Results of quality visits and clinical audits
- Staff training and capacity
- Care Quality Commission (CQC)
- National Institute for Health and Care Excellence guidance

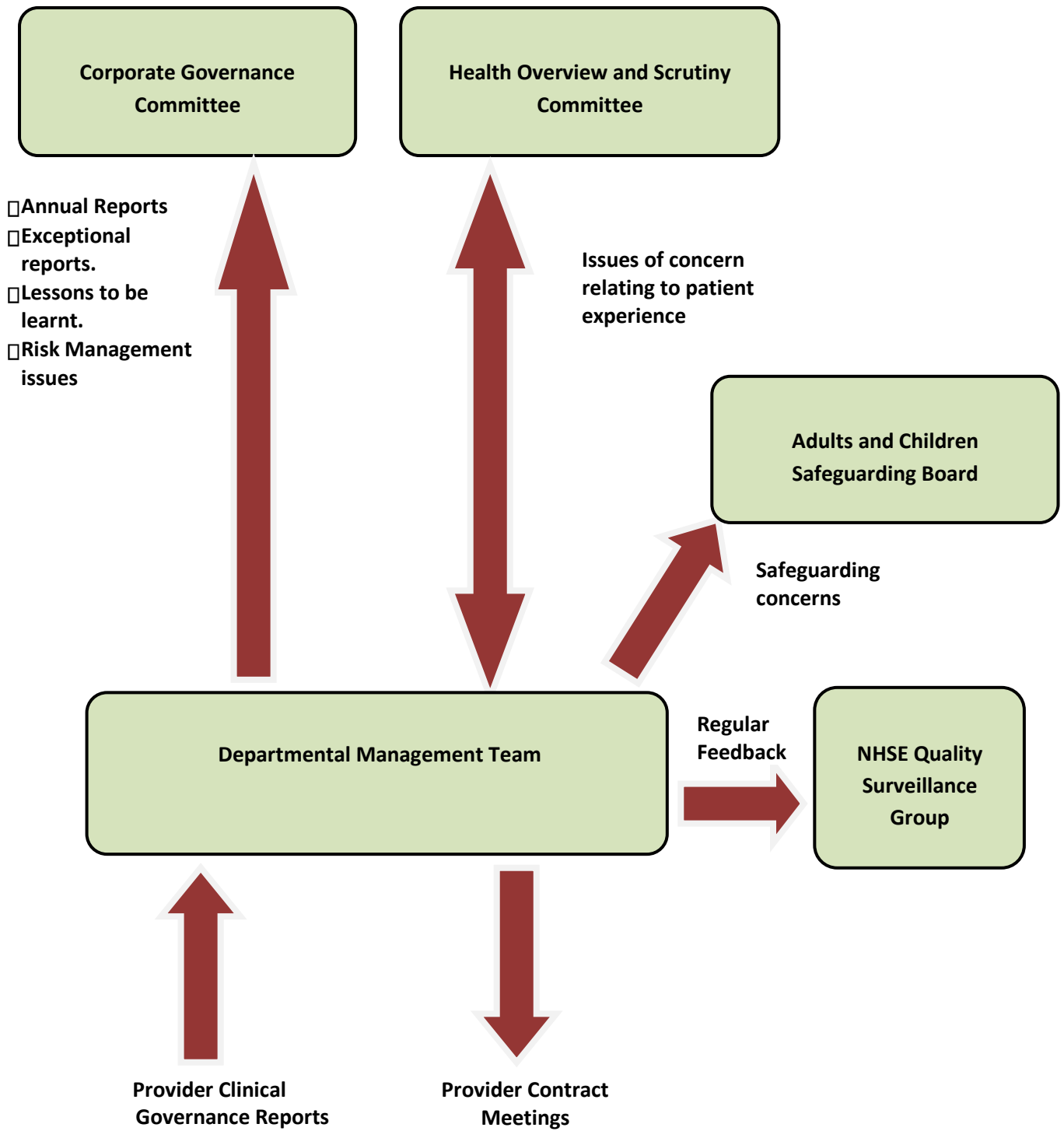
- Service changes/reviews
- Business Continuity arrangements during COVID-19

Leicestershire County Council's Clinical Governance Approach

9. From March 2020, the Public Health Team in the Council has been at the centre of managing the local response to the COVID-19 pandemic. This has had an impact on resources and on the ability of the team to develop this area. It has also meant that some of the commissioned services have been diverted to respond to the pandemic.
10. Ownership of clinical governance assurance for specific services sits with Strategic Leads and Consultant Leads for those services within the Public Health Department. Further oversight is provided by the Director of Public Health and the overall clinical governance consultant lead.
11. A Public Health Clinical Governance Group has recently been established comprising of the Clinical Governance Consultant Lead and Strategic Leads to oversee the clinical governance arrangements. Further work is being undertaken to agree the scope of work to be undertaken by the group.
12. A clinical governance and quality report is presented to the Public Health Departmental Management Team (DMT) on each of the key commissioned clinical service areas quarterly. The process around developing these reports involves the Contract and Quality Officer receiving a report from the provider that focusses on clinical governance and quality aspects. The appropriate Strategic Lead reviews these reports and summarises key findings for the DMT. The Strategic Leads also flag any issues /gaps in the information provided and go back to the provider if further clarity is required.
13. The additional pressures and priorities arising from the pandemic has meant that senior members of the Public Health Team have not been in a position to submit quarterly reports to Public Health DMT for the entire period that this report covers. The Public Health Team also had to pause some of its normal routine quality visits to commissioned services, although these have now been re-started. A schedule of reporting has now been re-instigated to ensure that the Public Health DMT receives provider clinical governance reports (including quality dashboards) on a quarterly basis for all key commissioned contracts.
14. The DMT examines provider performance from both general quality and clinical governance perspectives. DMT identifies signs of both good practice and of non-compliance at an early stage through the review of provider information and using comparison/benchmarking data where available. Planned quality assessments/audits are also undertaken using the Public Health Quality Assessment Tool for both departmental quality measures and for conducting scheduled contractual quality visits with our commissioned services.

15. DMT identifies concerns and recommendations and suggested actions which are then relayed through contract and commissioning leads into routine contract and performance meetings. Progress against recommendations and action is monitored at subsequent DMT meetings.
16. Regular DMT Lead Member briefings are held at which an update on the key clinical services commissioned is provided including any significant events identified.
17. DMT also reports into the following:
 - Corporate Governance Committee
 - Health Overview and Scrutiny Committee
 - Adults and Children Safeguarding Board
 - East Midlands NHSE Quality Surveillance Group
18. A diagram setting out the overview arrangements for clinical governance is set out overleaf.

Overview of arrangements



19. The County Council's Public Health Department collaborates with Leicester City Council's Public Health clinical governance colleagues in relation to those services that are commissioned jointly by the two authorities.
20. Where services are jointly commissioned, the lead Commissioning Organisation takes responsibility for overall governance, however, where incidents or issues of concern arise within Leicestershire, the Public Health Team respond to these in line with arrangements described above.
21. Additional support is also available through collaboration with local Clinical Commissioning Groups (CCGs) e.g. through a memorandum of understanding covering the joint public health/CCG serious incident procedures that relate to providers from whom both public health and CCGs commissioned services (predominately primary care and Leicestershire Partnership NHS Trust).
22. Table 1 provides a summary of significant issues considered and managed by the County Council's Public Health's Departmental Management Team (November 2019 - October 2021) across the main clinical services commissioned.

Table 1

Clinical Governance Summary November 2019 – October 2021		
Heading	Area	Assurance (November 2019 – October 2021)
Quality Visits	Site visits to providers of clinical services provide valuable insights into the quality, safety and likely patient experience that is being delivered.	<p>Providers are routinely visited by Public Health contracting and quality staff at least annually, however this has been impacted by the pandemic.</p> <p>Providers are also subject to visits from the Care Quality Commission (CQC).</p> <p>0-19 Healthy Child Programme (Leicestershire Partnership NHS Trust): July 2019: The 'Healthy Together' programme was broadly commended in the CQC report: <i>'Effective delivery of the Healthy Child Programme in Leicestershire is ensuring that children at risk of neglect, abuse, and harm, with low protective factors are being provided with early help and support that they need to reduce the likelihood of harm and health inequalities</i></p>

Heading	Area	Assurance (November 2019 – October 2021)
Quality Visits		<p>Quality visits were scheduled in January 2021 however, due to Covid-19 pressures and the national lockdown measures that followed this did take place.</p> <p>Furthermore, in September 2021, due to the current contract ending in August 2022 combined with the current recommissioning exercise it was not feasible to undertake an audit and then expect the existing provider to implement any changes if the contract was awarded to a different provider.</p> <p>Substance Misuse Treatment Services (Turning Point)</p> <p>Turning Point was inspected by the CQC in November 2018 and overall was found to be 'outstanding'.</p> <p>The last formal quality visit took place in 2018 with all actions and recommendations completed. There is a desktop review planned for December 2021.</p> <p>Sexual Health Services (Midlands Partnership NHS Foundation Trust).</p> <p>The CQC inspected this service in October 2019 as part of a wider review of health services in safeguarding and looked after children services in Rutland and made a list of recommendations to follow up on, these actions from the report have now been completed.</p> <p>In line with Public Health Quality Assessment Tool, a quality visit has been conducted in September 2021 and the report is yet to be finalised. Prior to this no quality visits were undertaken from 2019 due to the Covid-19 pandemic.</p>

Heading	Area	Assurance (November 2019 – October 2021)
Clinical Audits	<p>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 where there could be improvements.</p> <p>Our main contracts require the Council's providers to choose and agree clinical audits each year aimed at improving quality of patient care.</p>	<p>DMT oversees the process of carrying out and acting upon the results of clinical audits. Examples of audits carried out in 2019/21 included:</p> <p>Sexual Health Services delivered by Midlands Partnership NHS Foundation Trust (MPFT) Audits:</p> <ul style="list-style-type: none"> • Management of trichomonas vaginalis • Re-audit of fitting of Intrauterine System/Device (IUS/D) and subdermal implant contraception • Audit of clinical training requirements for Long Acting Reversible Contraception (LARC) • Audit of the Pre-exposure prophylaxis (PrEP). Impact trial completed July 2021 using 2019 data (PrEP is used to protect individuals from the transmission of HIV) • Internal Quality Assurance visit completed October 2019 • Infection control Audit • Covid-19 Development and Pathways Audit – August 2020 • Clinical Audit by GP Registrar from City at Haymarket in January 2021 • A quarterly quality report is completed by MPFT which reviews the key areas of the service – Infection, Prevention and Control (IP&C), patient safety, incident reporting <p>Sexual Health - Community Based Services</p> <ul style="list-style-type: none"> • On-going Audit of IUS/D training requirements • Emergency Hormonal Contraception (EHC) Annual audit for pharmacy delivery

Heading	Area	Assurance (November 2019 – October 2021)
Clinical Audits		<p>Substance Misuse Treatment Services (Turning Point) Audits:</p> <ul style="list-style-type: none"> • Full Caseload audit • Dependent Alcohol case audit • Safeguarding Audit • Service level death audits • NICE audits - Naltrexone, Methadone/Buprenorphone, Alcohol management, Psychosocial Interventions • Prescription process audit (6 monthly) • Supervised consumption audit (monthly) • Blood Borne Virus testing audit <p>0-19 Healthy Child Programme (Leicestershire Partnership NHS Trust) Audits:</p> <ul style="list-style-type: none"> • Mandated Checks were requested recently (2 ½ year check) • Perinatal mental health
Patient Group Directions (PGDs)	<p>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.</p> <p>Leicestershire County Council must help develop and ultimately authorise use of these drugs by commissioned clinical services.</p>	<p>PGDs were developed/authorised as follows:</p> <p>Substance Misuse Treatment Services:</p> <ul style="list-style-type: none"> • Hepatitis B to use by Turning Point (developed by Public Health England) • Pabrinex® Intramuscular High-Potency Injection, for use by Turning Point in treatment of severe depletion or malabsorption of the water-soluble vitamins B and C in service users diagnosed with Alcohol Use Disorders. <p>Sexual Health Services:</p> <ul style="list-style-type: none"> • Levonorgestrel for use in community pharmacies (EHC) • Ulipristal for use in community pharmacies (EHC) <p>The EHC Patient Group Directions (PGDs) documents, which allow for the dispensation of specific medications without a doctor present, are due for expiry end of June 2022.</p> <p>A multi-disciplinary group shall be set up to work through the PGD process.</p>
Heading	Area	Assurance

		(November 2019 – October 2021)
Safeguarding	<p>As commissioners of clinical services, the Public Health Team must be unequivocally assured that the providers of commissioned clinical services are fully compliant with their responsibilities to safeguard their patients against harm.</p> <p>DMT oversees provider safeguarding arrangements and must be assured that robust arrangements are in place.</p>	<p>0-19 The Healthy Child Programme (HCP) sets out the good practice framework for prevention and early intervention services. The safeguarding element is designed to translate into practice in two ways.</p> <ul style="list-style-type: none"> ○ At the individual level, practitioners need to possess relevant knowledge and skills (for example, regarding risk factors and signs and symptoms of child abuse, and how to follow local safeguarding procedures). ○ At the institutional level, the emphasis is on sharing information and collaborating with other agencies; for instance, schools are expected to work closely with adult services to identify children with parents whose needs could put the child at risk. <p>Safeguarding is a standing agenda item at meetings with the commissioned provider and any issues are monitored and actions are tracked through monthly contract monitoring meetings to ensure a safe service is operational and children are referred as part of the safeguarding protocols as appropriate.</p> <p>As part of safeguarding, a Serious Incidents process is in place which reviews actions of cases that have resulted in a death of a child.</p> <p>The Public Health Team review the report submitted by the provider via the Strategic Executive Information System (STEIS - NHS system for reporting and monitoring the progress against incidents and investigations) and provide challenge as part of the partnership response and this is also followed up in contract management meetings.</p>
Heading	Area	Assurance (November 2019 – October 2021)
Serious Incidents	SIs in clinical settings are adverse events,	Leicestershire Public Health SI Protocol

(SIs)	<p>where the consequences to patients, families and carers, staff or organisations are so significant in terms of actual or potential harm and/or the potential for learning is so great, that a heightened level of response is justified.</p> <p>NHS SI Framework Supporting learning to prevent recurrence: https://www.england.nhs.uk/wpcontent/uploads/2015/04/seriousincident-framwrk-upd.pdf The Leicester, Leicestershire, and Rutland (LLR) SI Report</p> <p>Protocol outlines the County Council and partner responsibilities in relation to serious incidents and summarises the key information and requirements for reporting and management. This protocol is imbedded within council contracts for Public Health commissioned services to ensure a consistent approach across the Department.</p>	<p>Robust systems are in place for the reporting, management and learning from SIs so that lessons are learned, and the appropriate action is taken to prevent future harm.</p> <p>Arrangements are in place to monitor and deal with serious incidents daily through the Public Health Team's in-house serious incident mailbox. This is coordinated by the administration team and overseen by consultants, senior public health managers and the consultant clinical governance lead.</p> <p>The vast majority of SIs related to deaths of patients who are under the care of Turning Point.</p> <p>SIs which were received between October 2019 and September 2021 are logged in Table 2 below.</p> <p><u>Substance Misuse Treatment Services</u></p> <p>Turning Point carried out a Thematic Death Review (2018 - 2021) on behalf of LLR, which analysed service user overdoses and suicides and compared the results to the regional picture.</p>
Heading	Area	Assurance (November 2019 – October 2021)
Serious Incidents (SIs)	Details regarding individual SIs that were considered by the Department in line with the	

	Leicestershire Public Health SI Protocol have not been included in this report for reasons of confidentiality.	
Re-procurement	Re-procurement of clinical services creates opportunities to update and improve the clinical quality and safety of new services.	<p>Sexual Health Services</p> <p>The most recent re-procurement was for Sexual Health Services with the new provider (Midlands Partnership NHS Foundation Trust) commencing delivery of the service in January 2019. The Council's Public Health team is currently working to extend service contracts for another year, which will include some alterations and additions to the service delivery model aimed at improving access and patient choice.</p> <p>0-19 Healthy Child Programme</p> <p>The 0-19 HCP is currently being re-procured. The current contract is due to end on 31/08/22 with a new contract to commence on 01/09/22 to align with the academic year. The current contract was extended for a five month period from 31/03/21 to ensure a thorough review of the service and so that consultation and engagement with partners and the wider public could be undertaken to inform the service specification.</p>
Heading	Area	Assurance (November 2019 – October 2021)
Re-procurement		<p>Substance Misuse Treatment Services</p> <p>The Substance Misuse Treatment Service is in the process of being re-procured. The tender has closed, and the winning bid will be awarded</p>

		shortly. The mobilisation process will take effect from November 2021. The contract will commence from April 2022 for four years with the option to extend for two further years. The service will include Detox and Rehabilitation from April 1 st 2022.
Partnerships	Clinical governance arrangements, expertise and knowledge are enhanced by sharing good practice across the wider health and care systems.	Leicestershire, Leicester City and Rutland CCGs Serious Incident Panel review cases of serious incidents that relate to the Healthy Child Programme on behalf of Leicestershire County Council. The Multi Agency Substance Misuse Death Panel is being re-established to ensure that deaths can be reviewed, and best practice is put in place.
Patient Feedback		<p>Sexual Health Services</p> <p>Patients' feedback is obtained by MPFT monthly which is reported to the commissioner/contract officer and discussed during the contract meetings</p> <p>0-19 Healthy Child Programme</p> <p>Service user feedback is reported at contract monitoring meetings alongside complaints. Positive responses have been received from those who have accessed the universal service and universal partnership plus.</p> <p>Substance Misuse Treatment Services</p> <p>Compliments, complaints, and survey feedback are a regular agenda item at the Contract Management Meetings. The Peer Mentors are utilised to gain anonymous feedback and a continuous improvement process is in place; again, updated via contract management</p>
Heading	Area	Assurance (November 2019 – October 2021)
Complaints and Compliments		<p>Sexual Health Services</p> <p>Patients' feedback is obtained by MPFT monthly which is reported to the commissioner/contract officer and discussed</p>

		<p>during the contract meetings</p> <p>0-19 Healthy Child Programme</p> <p>Service user feedback is reported at contract monitoring meetings alongside complaints. There have been a number of complaints about missed visits by service users. The national guidance stipulated that the 10-12 month check could be digital during the pandemic - this resulted in a number of complaints about lack of face to face contact. Arrangements were put in place via Recovery and Restoration meetings to enable the service to be fully operational again.</p>
Business Continuity arrangements during COVID-19		<p>Sexual Health Services (SHS)</p> <p>SHS – During the pandemic regular walk-in services delivered across GPs and SHSs were paused or greatly reduced. To ensure continued provision of care, online contraception and EHC were commissioned through the provider under direction of the County Council, and expansion and communications for the STI/BBV (Sexual transmitted infections/Blood Borne Viruses) online postal testing services were delivered to ensure access to services was maintained.</p> <p>Telephone triage and consultations for the ISHS were introduced as the pandemic lockdown levels decreased and face to face consultations started up again</p>
Heading	Area	Assurance (November 2019 – October 2021)
Business Continuity arrangements during COVID-19		<p>Sexual Health - Community Based Services</p> <p>GPs provided online and telephone consultation services throughout the</p>

		<p>pandemic, to allow for continuity of low-risk symptoms and issues to be assessed. For higher more complex cases, face to face consultations were delivered with full personal protective equipment (PPE) and IP&C measures undertaken.</p> <p>The SHS has provided detailed business continuity plans (BCPs) detailing foreseeable future events and mitigating actions planned to ensure business continuity. These have been shared with the Public Health Team.</p> <p>Substance Misuse Treatment Services</p> <p>The Service has an exemplary Business Continuity Plan in place which has been shared as best practice to other areas.</p> <p>The Service has remained open throughout the pandemic. Minimal face to face interaction took place where possible. Although prescriptions continued to be prepared for service users and relationships with pharmacies were called upon to avoid unnecessary travel into Eldon Street.</p> <p>Staff had been split into teams to avoid contamination and allow Covid-19 rules to be followed. Peer Mentors were utilised to add additional support for service users that were isolated. Face to face meetings were re-introduced as soon as it was safe to do so.</p> <p>0-19 Healthy Child Programme</p> <p>The BCPs were agreed and submitted as part of the contract.</p>
Heading	Area	Assurance (November 2019 – October 2021)
Care Quality Commission (CQC)	Independent regulator of clinical health and social care systems in England conducting monitoring of services	<p>Sexual health services (Rutland):</p> <p>The CQC inspected this service in October 2019 as part of a wider review of health services in safeguarding and looked after</p>

	to ensure services are safe, effective, compassionate and provide high-quality care	<p>children services in Rutland and made a list of recommendations to follow up on, these actions from the report have now been completed.</p> <p>Substance Misuse Treatment Services</p> <p>The last CQC inspection was conducted in November 2018 and all recommendations were carried out.</p> <p>0-19 Healthy Child Programme</p> <p>CQC visited the provider at the end of May (2021) and returned for another visit again in September 2021 to conduct a mental health review and the final outcome is awaited.</p>
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23. **Table 2 (below)** sets out the serious incidents that have taken place and been responded to during the period under review.

To date there have been fewer serious incidents reported in the period from October 2020 to September 2021 (16 incidents) compared to the number of serious incidents reported in the period from October 2019 to September 2020 (33 incidents).

This may be a reflection of the impact of the Covid-19 pandemic during lockdown periods when services tended to provide less face to face provision.

24. The majority of serious incidents reported are by the Substance Misuse Service and are related to deaths of service users who are or were previously receiving treatment. The number of serious incidents reported by the Substance Misuse Treatment Service is on par with other substance misuse services across the country.
25. The service provider has a robust process of notifying the Public Health Team of all serious incidents. This includes a detailed narrative of the events leading up to each incident and any lessons learned. Alongside this, the service provider also conducts an annual review of all serious incidents to identify key themes. This is followed by a detailed action plan which is reviewed as part of contract management activity.
26. In addition, the Public Health Team is in the process of setting up a multi-agency Drug and Alcohol Deaths Review Panel to review all deaths occurring

as a direct result of substance misuse. The benefit of this Panel is that it will review deaths of residents not known to treatment services and identify broader lessons learned across wider health, social care, and criminal justice services.

Table 2

Serious incidents reported to the County Council's Public Health (PH) Team 1/10/2019 – 30/09/21			
Month	Number of Serious Incidents Reported into dedicated PH SI inbox	Month	Number of Serious Incidents Reported into dedicated PH SI inbox
October 2019	5	October 2020	2
November 2019	3	November 2020	1
December 2019	4	December 2020	0
January 2020	3	January 2021	2
February 2020	1	February 2021	2
March 2020	1	March 2021	0
April 2020	2	April 2021	1
May 2020	3	May 2021	0
June 2020	1	June 2021	1
July 2020	5	July 2021	2
August 2020	3	August 2021	3
September 2020	2	September 2021	2
Total	33		16

Resource Implications

27. 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).

Equality and Human Rights Implications

28. None arising directly from this report.

Recommendation

29. The Committee is asked to note this report.

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