## JOINT CITY AND COUNTY HEALTH SCRUTINY COMMITTEE

### **15 JANUARY 2013**

# REPORT OF THE HEAD OF DEMOCRATIC SERVICES (NOTTINGHAM CITY COUNCIL)

## NHS SERVICE PROVIDERS - QUALITY ACCOUNTS

## 1 SUMMARY

This report introduces the Committee to Quality accounts and to the role of the Joint Health Scrutiny Committee to ensure quality services and public accountability. Representatives of a number of healthcare service providers will attend today's meeting to inform the Committee of proposals for their Quality Accounts 2012/13 and their plans for public engagement for developing these: Nottingham University Hospitals NHS Trust, Nottinghamshire Healthcare NHS Trust, East Midlands Ambulance Service NHS Trust and Nottinghamshire Hospice.

# 2 MATTERS FOR CONSIDERATION

The Committee is asked to consider and comment on the information presented at the meeting, focusing on how each healthcare service provider will determine its priorities for its Quality Account and how it will involve its stakeholders in doing so.

# 3 BACKGROUND AND SUPPORTING INFORMATION

- 3.1 A Quality Account is an annual report to the public from providers of NHS healthcare services about the quality of their services. It aims to enhance accountability to the public and engage the organisation in its quality improvement agenda, reflecting the three domains of quality: patient safety, clinical effectiveness and patient experience.
- 3.2 Since April 2010, all providers of acute, mental health, learning disability and ambulance services have been required to produce an annual Quality Account. Community providers were asked to develop Quality Accounts from 2011 and it is intended that primary care providers will need to provide Quality Accounts in the future.

## 3.3 A Quality Account should:

- improve organisational accountability to the public and engage boards (or their equivalents) in the quality improvement agenda for the organisation;
- enable the provider to review its services, show where it is doing well, but also where improvement is required;
- demonstrate what improvements are planned;
- provide information on the quality of services to patients and the public;

- demonstrate how the organisation involves, and responds to feedback from, patients and the public, as well as other stakeholders.
- 3.4 Quality Accounts are both retrospective and forward looking. They look back on the previous year's information regarding quality of services, explaining what is being done well and where improvement is needed. But, they also look forward, explaining what has been identified as priorities for improvement.
- 3.5 Guidance from the Department of Health requires that a Quality Account should include:
  - **priorities for improvement** clearly showing plans for quality improvement within the organisation and why those priorities for improvement have been chosen and demonstrating how the organisation is developing quality improvement capacity and capability to deliver these priorities;
  - review of quality performance reporting on the previous year's quality performance offering the reader the opportunity to understand the quality of services in areas specific to the organisation;
  - an explanation of who has been involved and engaged with to determine the content and priorities contained in the Quality Account; and
  - any statements provided from commissioning Primary Care Trust, Local Involvement Networks (LINks) or Overview and Scrutiny Committees including an explanation of any changes made to the final version of the Quality Account after receiving these statements.
- 3.6 Quality Accounts are public documents, and while their audience is wide ranging (clinicians, staff, commissioners, patients and their carers, academics, regulators etc), Quality Accounts should present information in a way that is accessible for all. For example, data presentation should be simple and in a consistent format; information should provide a balance between positive information and acknowledgement of areas that need improvement. Use of both qualitative and quantitative data will help to present a rounded picture and the use of data, information or case studies relevant to the local community will help make the Quality Account meaningful to its reader.
- 3.7 As a first step towards ensuring that the information contained in Quality Accounts is accurate (the data used is of a high standard), fair (the interpretation of the information provided is reasonable) and gives a representative and balanced overview, providers have to share their Quality Accounts prior to publication with:
  - their commissioning Primary Care Trust (PCT)
  - the appropriate LINk (Local Involvement Network)
  - the appropriate local authority Overview and Scrutiny Committee
- 3.8 The commissioning PCT has a legal obligation to review and comment on a provider's Quality Account, while LINks and Overview and Scrutiny Committees are offered the opportunity to comment on a voluntary basis. Any statement provided should indicate whether the Committee believes, based on the knowledge they have of the provider, that the report is a fair reflection of the

- healthcare services provided. The organisation then has to include these comments in the published Quality Account.
- 3.9 The Committee has requested that organisations attend this meeting to discuss their early thoughts on priorities for their Quality Account and on how they would engage the public in the process. They will be invited to return to the Committee's 16 April meeting to present their Quality Accounts in their most upto-date form, at which point the Committee can decide to put forward any comments for inclusion.
- 4 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> THOSE DISCLOSING EXEMPT OR CONFIDENTIAL INFORMATION

None.

## 5 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

<u>Quality Accounts: Department of Health</u>
<a href="http://www.dh.gov.uk/en/Healthcare/Qualityaccounts/index.htm">http://www.dh.gov.uk/en/Healthcare/Qualityaccounts/index.htm</a>

## **CONTACT DETAILS**

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### **5 January 2013**