

COVENTRY AND RUGBY CLINICAL COMMISSIONING GROUP

Report To:	Health and Wellbeing Board
Report From:	Jacqueline Barnes, Executive Nurse
Title of Report:	Francis Review – Response for Coventry and Rugby Clinical Commissioning Group

Purpose of the Report:

To inform the Health and Wellbeing Board of the CCG's response to the Francis Review and to outline the current position against the recommendations and actions being taken.

Key Points:

The Governing Body for Coventry and Rugby Clinical Commissioning Group (CCG) has previously received reports outlining the recommendations and the government response to the 2013 report by Robert Francis QC on the failings at Mid Staffordshire Hospital.

This report provides:

1. An outline of the recommendations applicable to the CCG and the actions being taken.
2. A current position statement against the applicable recommendations

A facilitated CCG Board development session is arranged for the CCG for Board members and the Senior Management Team on 1st July 2013 to discuss the recommendations in more detail and produce an action plan for the CCG of key gaps. Additionally, an assurance framework that outlines CCG meetings with all commissioned services for the assessment of quality and safety of services is being developed. This will report to the CCG Clinical Quality and Governance Committee on assurances received, gaps identified and actions planned in response to quality of services.

Recommendation(s):

The Health and Wellbeing Board is asked to:

1. Note the contents of this report
2. Note that a Board development session is arranged for 1st July 2013 where an action plan will be developed.

Approved by:

Committee / Meeting	Date

Implications:

Financial:	None to note at this time.
HR / OD:	Job Descriptions of employees need to be checked to ensure we comply the recommendations and a Board Development session is required to discuss the Position Statement more fully.
Board Assurance/ Use of Resources:	CCG vision for safe and quality services
Risk Rating:	Medium.
Equality & Diversity:	None to note at this time.
PPI:	Work on-going with the PPI Team with patients and the public.
Health Strategy:	Commissioning safe services.
Other	None to note at this time.

Francis Review – Response from Coventry and Rugby Clinical Commissioning Group.

OVERVIEW

The second and final report of the public inquiry into Mid Staffordshire NHS Foundation Trust published on the 6th of February 2013 provides detailed and systematic analysis of what contributed to the failings in care at the Trust. It identifies how the extensive regulatory and oversight infrastructure failed to detect and act effectively to address the Trust's problems for so long, even when the extent of the problems were known.

The report builds on the first independent inquiry, also chaired by Robert Francis QC and has a framework that focuses on the:

- Warning signs that existed and could have revealed the issues earlier
- Governance and culture
- Roles of different organisations and agencies present and future.

The report outlines that what happened in Mid Staffs was a system failure, as well as a failure of the organisation itself and concludes that a fundamental change in culture is required to prevent this system failure from happening again. It stresses the importance of avoiding a blame culture, and proposes that the NHS – collectively and individually – adopt a learning culture aligned first and foremost with the needs and care of patients. Citing 290 recommendations, the report requests a fundamental change in culture across the health system and focus on the patient.

RECOMMENDATIONS FOR CCGS

The Francis report highlights several recommendations that are applicable CCGs as commissioners of health care. Key actions are listed below and attached is a more detailed current position statement for the CCG in relation to the identified recommendations.

The CCG can demonstrate for the majority of the recommendations that action is being taken. However a fuller discussion at the CCG Board development session will bring together the collective expertise of the governing body members and the Senior Management Team to scrutinise actions to date and identify further work as part of the CCG response.

At a high level, key actions for the CCG are outlined below:

1	Undertake regular scrutiny of commissioned services using such methods as peer review, appreciate enquiry and walking the floor, so as to actively view how services are being delivered and have opportunities to talk to staff directly. The CCG will need to ensure subsequent actions are implemented and reviewed following
2	Be able to demonstrate that mechanisms are in place for receiving assurance from providers that, irrespective of financial pressures, the quality and safety of care remains of a high standard
3	Receive assurance from providers that demonstrates care is delivered by

	skilled and competent nursing staff within each organisation
4	Be assured that strong and accessible leadership within provider organisations is on place
5	Ensure that that the standards of local nurse training and on-going professional development are delivered to a high level to ensure highly skilled and prepared nurses are recruited in future times
6	Review the complaints system and the contents of complaints received, ensuring there are effective means of receiving comments about local health services
7	Ensure that there are ample opportunities for patient participation both at CCG level and within provider organisations
8	Demonstrate that despite reorganisation, there is time and suitable resources available to ensure the monitoring of quality and safety for commissioned services
9	Assure (externally) and be assured that systems and processes are in place to manage the inevitable risks that occur within a new system
10	Receive assurance that learning from this report reaches all areas of commissioned services and that all professionals are clear on their roles and responsibilities, for example, GPs play a valuable role in ensuring a patients hospital treatment was satisfactory
11	GP practices as members of a CCG should monitor patterns of concern which should be made known to the CCG who should share with the regulators of health care. GPs also have an obligation to their patients to keep themselves informed of any standards of service
12	Have in place a system whereby the progress made on agreed actions highlighted in the Francis report are published on an annual basis

Please see the attached current position statement for further details of the applicable recommendations and the CCGs actions to date in response. This is being presented to the Public Governing Body meeting on 12 June 2013.

A facilitated CCG Board development session is arranged for the CCG for Board members and the Senior Management Team on 1st July 2013 to discuss the recommendations in more detail and produce an action plan for the CCG of key gaps.

Additionally, an assurance framework that outlines CCG meetings with all commissioned services for the assessment of quality and safety of services is being developed. This will report to the CCG Clinical Quality and Governance Committee on assurances received, gaps identified and actions planned in response to quality of services.

ACTION REQUIRED BY THE HEALTH AND WELLBEING BOARD:

The Health and Wellbeing Board is asked to:

1. To note the contents of this report which provides the CRCCG's current position in response to the Francis recommendations pertinent to CCGs.
2. Note that a Board development session is arranged where the CCG action plan will be developed.