

**Agenda Item No: 6.3**

<b>REPORT TO:</b>	<b>PRIMARY CARE COMMITTEE</b>	
<b>MEETING DATE:</b>	<b>8 March 2017</b>	
<b>REPORT TITLE:</b>	<b>General Practice Dashboard Development and Quality Monitoring</b>	
<b>SUMMARY OF REPORT:</b>	This report provides an update on the progress on developing a General Practice Dashboard and outlines the approach to monitoring quality within primary care.	
<b>REPORT RECOMMENDATIONS:</b>	The committee are asked note the progress and accept that this will become part of the monitoring for quality in primary care.	
<b>FINANCIAL IMPLICATIONS:</b>		
<b>REPORT CATEGORY:</b>	Formally Receipt	<b>Tick</b> √
	Action the recommendations outlined in the report.	
	Debate the content of the report	
	Receive the report for information	
<b>AUTHOR:</b>	<b>Catherine Wright</b>	
	<b>Report supported &amp; approved by your Senior Lead</b>	<b>Y</b>
<b>PRESENTED BY:</b>	<b>Lisa Cunliffe</b>	
<b>OTHER COMMITTEES/ GROUPS CONSULTED:</b>	Primary Care Quality Assurance and Sustainability Group Pennine Lancs Quality Committee	
<b>EQUALITY ANALYSIS (EA) :</b>	Has an EA been completed in respect of this report?	<b>Y</b>
<b>RISKS:</b>	Have any risks been identified / assessed?	<b>N</b>
<b>CONFLICT OF INTEREST:</b>	Is there a conflict of interest associated with this report?	<b>Y</b>
<b>PATIENT ENGAGEMENT:</b>	Has there been any patient engagement associated with this report?	<b>N</b>
<b>CLINICAL ENGAGEMENT:</b>	Has any clinical engagement/involvement taken place as part of the proposal being presented.	<b>Y</b>
<b>PRIVACY STATUS OF THE REPORT:</b>	Can the document be shared?	<b>Y</b>
<b>Which Strategic Objective does the report relate to</b>		<b>Tick</b>
<b>1</b>	Commission the right services for patients to be seen at the right time, in the right place, by the right professional.	√
<b>2</b>	Optimise appropriate use of resources and remove inefficiencies.	√
<b>3</b>	Improve access, quality and choice of service provision within Primary Care	√
<b>4</b>	Work with colleagues from Secondary Care and Local Authorities to develop seamless care pathways	

**PRIMARY CARE COMMITTEE**  
**8 March 2017**

**General Practice Dashboard Development and Quality Monitoring**

**1. Introduction**

- 1.1 There is a wealth of information and data on General Practice performance and this can create a barrier to allowing focus on the most important quality assurance indicators. As a result NHE England (NHSE) has developed a Quality Concerns Trigger tool, and NHSE North has commissioned Midlands and Lancashire Commissioning Support Unit (MLCSU) to provide an automated general practice dashboard to support with the first stage of routine monitoring. This paper will provide an update as to the implementation of these.

**2. Purpose / Background**

The 'General Practice Dashboard Development' paper was presented to the Pennine Lancs Quality Committee on 14<sup>th</sup> December 2016 and this paper provides an update of the progress to date.

2.1 Quality Concern Trigger Tool

In December 2016 Lancashire CCG's attended training provided by NHS England to introduce the Quality Concern Trigger Tool and Quality Risk Profile (QRP). This process is being formally approved for roll out across England. The Quality Concern Trigger Tool is a standardised process for raising concerns about the quality of any provider, please see appendix 1. This approach will offer consistency to providers and is a welcome approach for Primary Care.

2.2 Primary Care Performance Dashboard (for General Practice)

The first stage of monitoring quality is to hold a range of routine quality information which can be regularly reviewed and concerns acted upon.

In August 2016 NHSE commissioned MLCSU to develop an automated dashboard to support the monitoring of primary care performance. This development was monitored through the Lancashire Primary Care Quality Forum hosted by NHSE. The first presentation of this dashboard was on 19<sup>th</sup> December 2016, at this point suggestions for improvements were welcomed and a second draft was presented on 13<sup>th</sup> February 2017. Please see appendix 2 for a draft. This second draft has been released to members of East Lancashire CCG (ELCCG) and Blackburn with Darwen CCG (BwDCCG) and following the meeting will be released to key members within all Lancashire CCG's for testing, comments and suggestions.

There is acknowledgement that the dashboard is phase 1 and suggestions for improvements are being collated for a future Phase 2 release as necessary.

There are still improvements to be made as part of phase 1. These include adding Flu uptake performance, adding timescales for the data, adding targets or averages where appropriate. Phase 1 will be complete and released for use by 1<sup>st</sup> April 2017.

The development and introduction of this dashboard is only part of the intelligence required for 'Routine Quality Monitoring', other aspects which will need to be considered are the CQC rating, any safeguarding concerns, any incidents, complaints, issues within contractual compliance etc.

### 2.3 Enhanced Quality Assurance

The second stage of the process is for practices that are being identified as having persistent or increasing quality concerns being raised. These practices will be reviewed through the CCG's Quality Review Groups where more in-depth analysis will be carried out and should the concerns be great enough, then a meeting with the practice will be arranged and the process followed through to a full Quality Risk Profile and single item QSG.

The Quality Risk Profile Tool is a tool which has been designed for using with a variety of NHS providers and has specific set of indicators for considering when concerned about a General Practice provider. The indicators are grouped into the five CQC domains of Safe, Effective, Caring, Responsive and Well-Led. The tool pre-populates performance data where it is available and then requires input from different teams within NHSE and CCG's to establish a risk score for each item, domain and an overall risk score which then supports the decision on whether the concerns are valid and where it needs to be taken next.

## 3. **Conclusion**

The introduction of the Quality Concerns Trigger Tool is a welcomed process for the CCG to follow and allows for the monitoring of general practice at an equitable and reasonable level which should ensure concerns are addressed at an early stage.

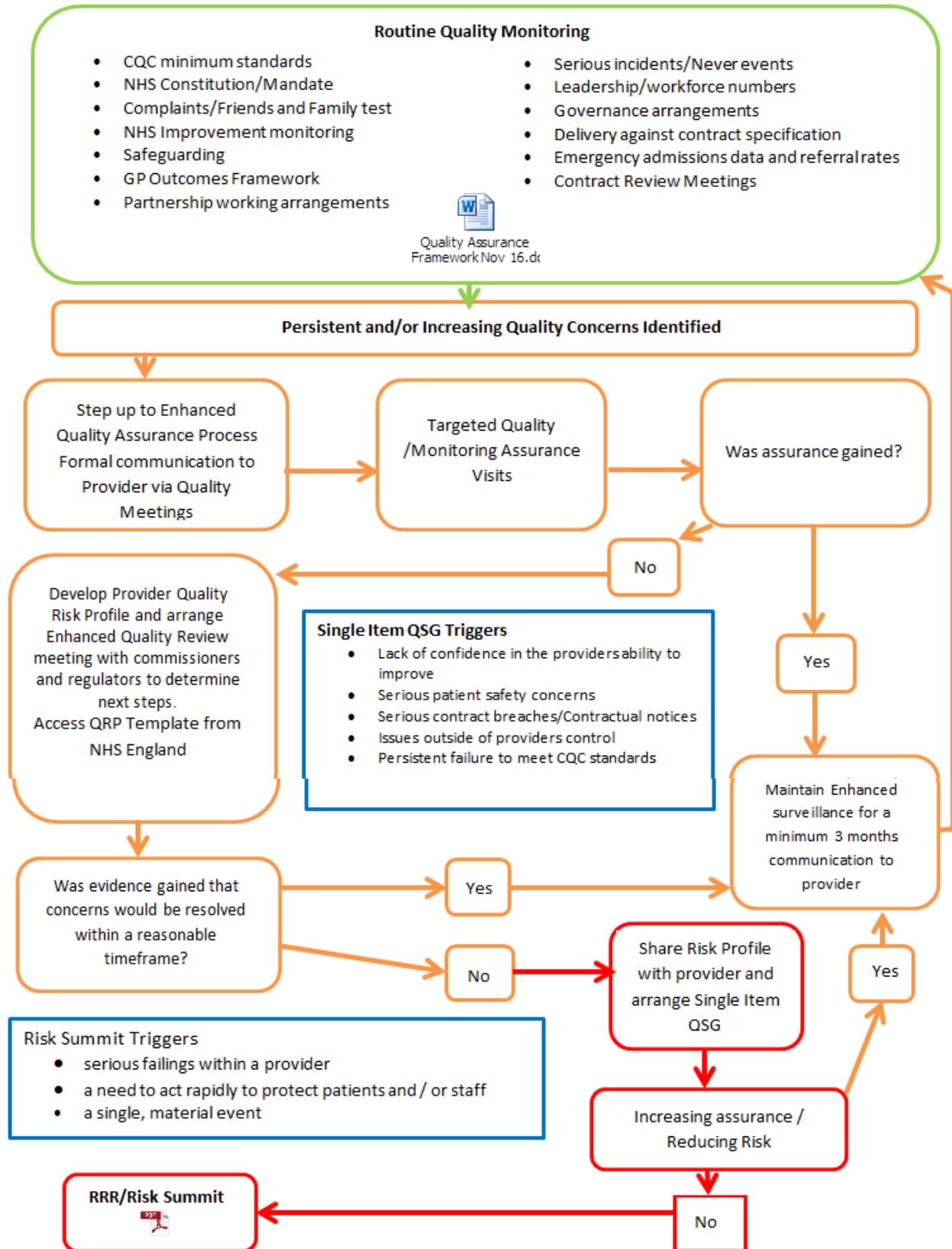
The Primary Care Performance Dashboard for General Practice is again a welcome tool to support the monitoring of quality in general practice, however, this dashboard only brings together information that is already available to CCG's. The important aspect of this process is to ensure the routine quality monitoring takes place and any concerns are addressed at an early stage through the enhanced quality assurance at Quality Review Groups.

## 4. **Recommendations**

The Primary Care Committee are asked to approve the implementation of this process for Pennine Lancashire.

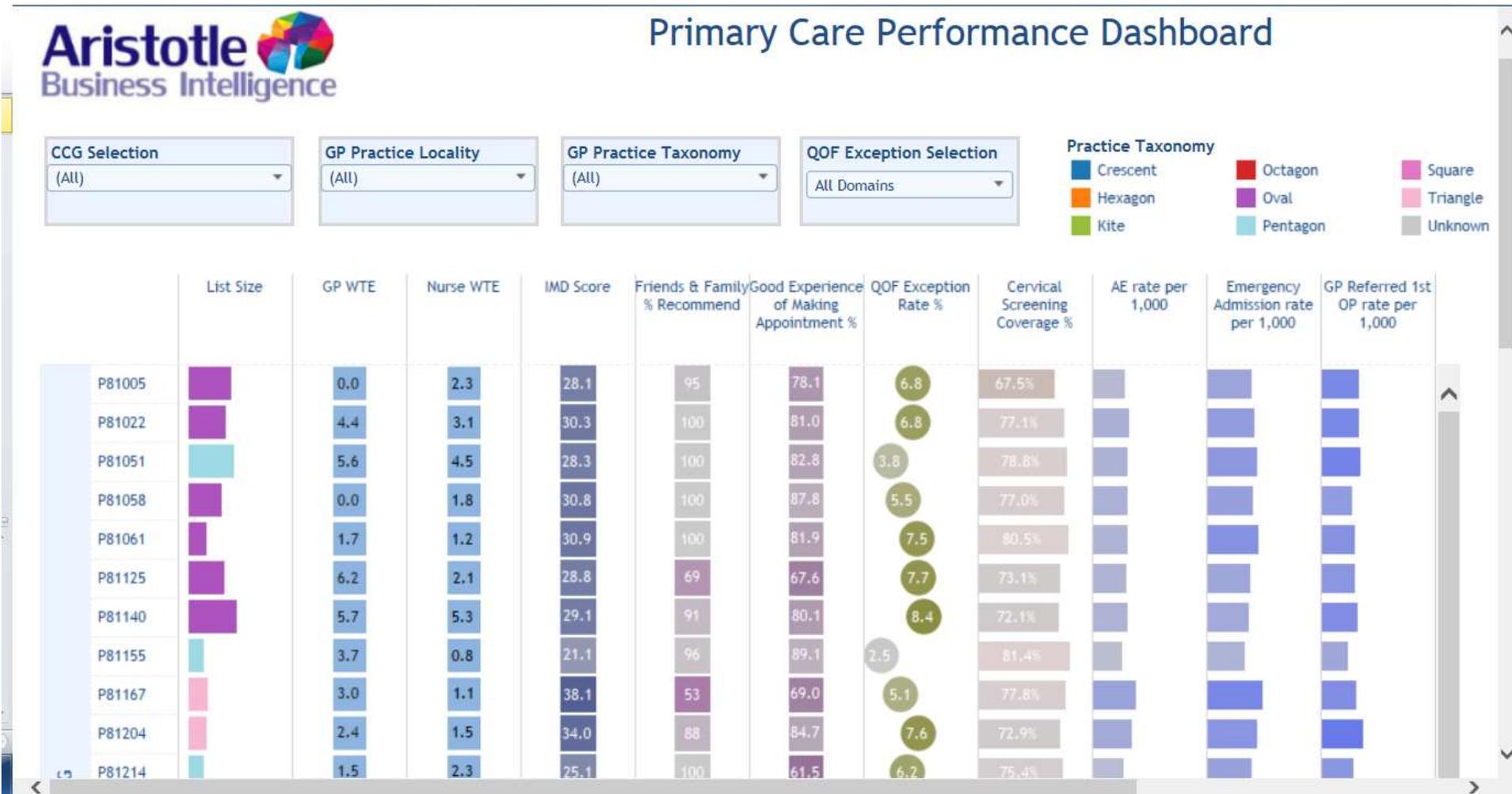
**Catherine Wright**  
**Primary Care Commissioning Manager**

# APPENDIX 1: Quality Concerns Trigger Tool



the escalation to a rapid response review or risk summit could be instigated at any point in the process if patient safety concerns require urgent action.

APPENDIX 2: General Practice Dashboard



# Primary Care Performance Dashboard

CCG Selection: (All) | 
 GP Practice Locality: (All) | 
 GP Practice Taxonomy: (All) | 
 QOF Exception Selection: All Domains

**Practice Taxonomy**  
 Crescent, Hexagon, Kite, Octagon, Oval, Pentagon, Square, Triangle, Unknown

	List Size	GP WTE	Nurse WTE	IMD Score	Friends & Family % Recommend	Good Experience of Making Appointment %	QOF Exception Rate %	Cervical Screening Coverage %	AE rate per 1,000	Emergency Admission rate per 1,000	GP Referred 1st OP rate per 1,000
P81005		0.0	2.3	28.1	95	78.1	6.8	67.5%			
P81022		4.4									
P81051		5.6									
P81058		0.0									
P81061		1.7									
P81125		6.2									
P81140		5.7									
P81155		3.7									
P81167		3.0									
P81204		2.4									
P81214		1.5	2.3	25.1	100	61.5	6.2	75.4%			

**GP Practice Code: P81005**  
 GP Practice Name:  
 CCG Name:  
 GP Practice Taxonomy Group: **Oval**  
 List Size: **11,523**  
 GP Whole Time Equivalent: **0.0**  
 Nurse Whole Time Equivalent: **2.3**  
 Friends & Family % Recommend: **95**  
 IMD Score: **28.1**  
 Cervical Screening Coverage %: **67.5%**  
 Good Experience of Making Appointment %: **78.1**  
 QOF Exception All Domains: **6.8**  
 AE rate per 1,000: **292.1**  
 Emergency Admission rate per 1,000: **106.5**  
 GP Referred 1st OP rate per 1,000: **232.7**