

HEALTH AND WELLBEING BOARD

REPORT OF EAST LEICESTERSHIRE & RUTLAND CCG

NHS QUALITY PREMIUM 2016/17

Purpose of report

1. The purpose of this report is to provide H&WBB with information on specific indicators that relate to the Quality Premium 2016/17 and confirm specific indicators, where choices have been made in agreement with NHS England.

Link to Better Care Together

Workstream	Relevance	Workstream	Relevance
Maternity, neonates, children and young people		Mental health	✓
Long term conditions	✓	Frail and older people	✓
Urgent care	✓	Planned care	✓
Learning disabilities		End of life	

Policy Framework and Previous Decisions

2. East Leicestershire & Rutland CCG Operational Plans 2016/17.
East Leicestershire & Rutland CCG Commissioning for Value Packs

Background

3. The Quality Premium for 2016/17 has been published, and is intended to reward CCGs for improvements in the quality of the services that they commission and for associated improvement in health outcomes. This premium will be paid to CCGs in 2017/18, and covers a number of national and local priorities. Monies will be awarded for the achievement of the following:
- Improving anti-biotic prescribing in primary care 10%
 - Cancer diagnosed at early stage 20%
 - Increase in the proportion of GP referrals made by e-referrals 20%
 - GP Patient Survey 20%
 - Three local measures 30%

There are also a number of NHS Constitution indicators that will also impact on the Quality Premium. Monies will be deducted for non-achievement. These are:

- Referral To Treatment incomplete - 92% standard
- Maximum four hour waits for A&E departments – 95% standard
- Cancer 62 Day Wait – 85% standard
- Maximum 8 minutes responses for Category A (Red 1) ambulance calls – 75% standard

There are choices and decisions that Health & Wellbeing Boards should be made aware of. The choice of these indicators will be submitted, with the agreement of NHS England, on 29th April 2016. Given the timeframe of information being supplied by NHS England this is the first opportunity the CCGs have had to submit to H&WBB.

Proposals/Options

4. There are a number of indicators that CCGs are able to choose as part of their Quality Premium. It should be noted that at the time of writing this paper (15th April 2016) these are subject to confirmation by NHS England.

The H&WBB members are asked to support the following:

3 Local Priorities:

- Cancer - % of lung cancers detected at an early stage (1 or 2)
- Mental Health - Access to IAPT services: People entering IAPT services as a % of those estimated to have anxiety/depression
- Mental Health – Reported numbers of dementia on GP registers as a % of estimated prevalence

Improving the early detection of Lung cancer will have an impact on improving outcomes for Potential Years Life Lost (PYLL).

ELRCCG recognise the need to focus on Parity of Esteem. Increasing IAPT referrals is critical to maintaining people accessing the service and serving the population of ELRCCG, and the service has been proactive in disseminating information to the public, community groups and voluntary organisations.

Improving early diagnosis and treatment of people with dementia continues to be a key priority for ELRCCG.

REPORT NO. 126/2016

As in previous years, the three local priorities will be reported to the ELRCCG Quality & Performance sub group as part of the monthly Performance report.

Consultation/Patient and Public Involvement

5. N/A

Resource Implications

6. N/A

Timetable for Decisions

7. N/A

Conclusions/Recommendations

8. H&WBB are asked to support the options made by ELRCCG in Section 4.

Background papers

<https://www.england.nhs.uk/resources/resources-for-ccgs/ccg-out-tool/ccg-ois/qual-prem/>

Circulation under the Local Issues Alert Procedure

N/A

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List of Appendices

A) UNIFY submission for ELRCCG

Relevant Impact Assessments

Equality and Human Rights Implications

9. N/A

Crime and Disorder Implications

10. N/A

Environmental Implications

11. N/A

Partnership Working and associated issues

12. WL CCG, LCCCG, UHL, EMAS, LPT & Rutland County Council, Leicestershire
County Council

Risk Assessment

13. N/A