



Birmingham and Solihull
Integrated Care System
Caring about healthier lives

Birmingham and Solihull ICB – Quality Update

Health and Adult Social Care Overview and Scrutiny Committee

7th May 2024

Birmingham and Solihull Integrated Care System (ICS) Quality Framework

Quality Framework:

- Ensures that the ICB is sighted on major system quality risk, concerns, mitigations and controls.
- Assures NHS England (NHSE) of quality governance within the ICS.
- Provides the foundation for system working around quality – based on collaboration, trust, transparency and ongoing learning.
- Champions the need to ensure that quality is a shared goal that requires us all to commit and act whilst respecting organisational needs.

The Quality Framework does not change the statutory responsibilities of individual organisations, nor undermine their independence, but highlights the strategic importance of working together to measure, champion and drive improvements in quality.

System Quality Group (SQG)

A weekly strategic, multi-stakeholder, system forum to share quality insight and intelligence, identify opportunities for improvement, and, on escalation, provide structured review and oversight of quality concerns. Levels of risk and concern, using a RAG rating (Slide 3) for risk and assurance drives discussion. Escalation and de-escalation mechanisms are established to guide proportionate oversight.

Members are: ICB Executive Quality Lead (chair), ICS partners, regional NHS England teams, Care Quality Commission (CQC), Health Education England, public health and Healthwatch.

The System Quality Group reports directly to both the NHSE Regional Quality Group (monthly) and to the BSOL ICB Quality Committee. The outputs and conclusions of this group are also reported to the BSol ICB Board.

Quality Framework - RAG Rating Approach

RAG Rating	Focus	Attendance	Considerations	Interventions
Red - targeted	Significant and serious concerns Significant Quality Concerns – consider need to act rapidly to protect patients or staff.	Provider, ICB, CQC, NHSE, WTE, GMC, NMC & Healthwatch	Contractual, regulatory/ enforcement action and/or provide improvement support and performance management. <i>(including actions at amber and green)</i>	Consideration of embedded external support to provide direct improvement support, wider stakeholder visits for insight and assurance.
Amber – enhanced	Quality concerns identified. Ensure action is taken to mitigate / resolve issues and drive improvement in quality.	Provider, ICB, NHSE & Healthwatch	Do we need to do more to address concerns, or collect more information? Provide improvement support <i>(building on green)</i>	ICB visit to agree practice standards with agreed audit. Clear agreed actions. Hold quality or practice summits.
Green – routine	Review quality of services; any concerns or risks to quality, ensure action is taken to mitigate resolve issues locally and drive improvement in quality.	Provider & ICB – <i>'business as usual approach'</i>	Triangulation of information and intelligence	Routine quality assurance, visits and audit.

Quality improvement support:

Quality Improvement Summit for deep dive into areas and tiered to levels of escalation. i.e. flow and discharge, mental health beds, workforce.

Once quality concerns have been addressed return providers to a 'routine' level of surveillance.

CQC BSoI System Overview

	Well-Led	Safe	Caring	Effective	Responsive	Overall	Date of Last Inspection
University Hospitals Birmingham NHS Foundation Trust	Inadequate	Requires Improvement	Good	Good	Requires Improvement	Requires improvement	29 August 2023, 24-26 October 2023
Birmingham and Solihull Mental Health Foundation Trust	Requires Improvement	Requires Improvement	Good	Requires Improvement	Good	Requires Improvement	11 to 26 October/ 8-10 November 2022, 13-15 December 2022
Birmingham Children's Hospital	Good	Good	Outstanding	Outstanding	Outstanding	Outstanding	5, 6 July 2022
Birmingham Women's Hospital	Good	Good	Good	Good	Good	Good	22 March 2023
Forward Thinking Birmingham (Including Parkview)	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	22 August 2023, 23 August 2023
Birmingham Community Healthcare NHS Foundation Trust (Overall Trust)	Requires Improvement	Requires Improvement	Outstanding	Good	Requires Improvement	Requires Improvement	13 January 2020 to 26 February 2020
Birmingham Community Healthcare NHS Foundation Trust (Community health services for children, young people and families)	Good	Good	Good	Good	Good	Good	17 May 2023, 18 May 2023
Royal Orthopaedic Hospital	Good	Good	Good	Good	Good	Good	15 October to 17 October, 12 November 2019
West Midlands Ambulance Service	Good	Good	Outstanding	Good	Good	Good	15-17 August 2023, 3-5 October 2023

Operational Management of Quality

The issues that have been received at SQG for oversight and assurance, which this report will focus on are:

1. Learning Disability and Autism – Learning from Lives and Deaths (LDA)
2. Mental Health Provider Collaborative
3. Working with regulators – University Hospital Birmingham NHS Foundation Trust (UHB)

Learning from Lives and Deaths (LeDeR)

LeDeR is a national service improvement programme learning from the lives and deaths of people with a learning disability and autism (LDA). People with a learning disability die on average significantly earlier than the wider population. The ICB is responsible for making sure LeDeR reviews are undertaken for deaths in our system.

System approach	What's Next
<p>BSol ICB undertook a total of 94 reviews over the past 12 months, which is an increase of 18 from the previous year. Of these reviews, six out of the 94 were for patients with autism only, the remainder were for people who had a learning disability. 75 of those reviews were for people who had died in hospital and there continues to be a disproportionate number of reported deaths for those from ethnic minorities, with only 31 of the 94 relating to non-white people.</p> <p>The LeDeR programme evaluates some of the reasons behind this health inequality and considers how we can deliver improvements in the quality of health and social care across our system. The key learning from the reviews in the last 12 months include:</p> <ul style="list-style-type: none"> • Quality of annual health checks • Lack of consideration around how to utilise and consider the Mental Capacity Act • Consideration and timely support for people making choices about end of life care <p>The 20 LeDeR priorities are well recognised throughout Birmingham and Solihull and we continue to strengthen our partnership working. The 2022/23 LeDeR annual report was produced in a cinema graphic, /programmes-work/leder</p>	<p>To ensure that the learning from the 20 key priorities are being reflected across Birmingham and Solihull, the ICB has commissioned the 'Capturing Change' project, where an independent organisation will be capturing the voices of those with lived experience, families and carers to understand the individual experiences. This will support the identification of areas which require further improvement work and inform future commissioning intentions.</p> <p>The ICB is working closely with the LDA Lead from BSMHFT to improve the reporting of deaths to the LeDeR programme for those patients who have autism only. This will give greater understanding of the lives of those patients who have autism and their experience of health services.</p> <p>The ICB is focussed on ensuring LeDeR learning is embedded and shared across the BSol system.</p>

Mental Health Provider Collaborative (MHPC)

System approach	What's Next
<p>The Mental Health Provider Collaborative (MHPC) was formed in April 2023 and is hosted by the lead provider, Birmingham and Solihull Mental Health Trust.</p> <p>Over the last 12 months there has been a supported transition of quality oversight from the ICB to the MHPC ensuring that quality and safety concerns are shared promptly with assurance provided for both NHS and independent providers.</p> <p>The MHPC attends System Quality Group (SQG), providing a written report including quality assurance, improvements and concerns on all areas within their remit.</p>	<p>The Learning Disabilities and Autism Team will be transitioning to the MHPC in June 2024.</p> <p>There is continued work with the MHPC to develop and oversee a safe transition with quality and safety reporting via the SQG.</p> <p>Preparation is underway for quality oversight arrangements with the delegation of the specialised services portfolio from NHS England to the ICB in April 25.</p>
<p>In August last year, a mental health quality summit was held, and actions agreed including:</p> <ul style="list-style-type: none"> - All Age Mental Health Strategy – which includes the work commenced on children and young people’s transformation, the associated clinical model, crisis pathway and escalation models, bed capacity and workforce. - Progress updates are received at SQG. 	

Working with Regulators – University Hospitals Birmingham (UHB) NHS Foundation Trust

System approach	Next Steps
<p>System wide conversation through SQG with CQC, NHSE and other regulators to support UHB to meet CQC conditions:</p> <ul style="list-style-type: none"> • The Section 29A Warning Notice in relation to the medical services at Good Hope Hospital. • The Section 29A Warning Notice in relation to the maternity services at Birmingham Heartlands Hospital. <p><u>Good Hope Hospital (GHH) Medical Care:</u> <i>Sufficient qualified, competent, skilled experienced staff to provide safe care and treatment to patients on all medical wards.</i></p> <ul style="list-style-type: none"> • SQG receives written updates showing continued improvement to workforce position with structured measurement of the effects of staffing on patient care. <p><i>Emergency Department ensure all safeguarding training is up to date in line with national guidance.</i></p> <ul style="list-style-type: none"> • UHB have demonstrated improvements in response to CQC Safeguarding concerns in the Emergency Department resulting in de-escalation from SQG with monitoring via System Safeguarding Board. <p><u>Birmingham Heartlands Hospital (BHH) Maternity</u> <i>Pregnancy Assessment Emergency Room (PAER) operates is in place to support the triage process</i></p> <ul style="list-style-type: none"> • In January 2024 comprehensive overview received. PAER has been renamed the Maternity Urgent Assessment Unit (MUAU) and the new MUAU opened in January '24. Daily compliance with time for patient triage reviewed on a daily basis demonstrating consistent improvement. Agreed de-escalation from SQG 	<p>SQG will continue to act as a forum for rapid escalation of concerns for wider stakeholder discussion and assurance in other areas when required.</p> <p>Monthly monitoring to continue through SQG.</p> <p>In relation to the CQC at Good Hope, discussions are taking place for UHB to make representations to CQC for removal of the CQC condition regulations with CQC.</p>

Summary

BSol ICB has established a working framework to ensure that the ICB is aware of quality concerns and their mitigations, and to oversee and co-ordinate improvement where needed.

The Quality Framework works alongside provider governance and supported governance within emerging provider collaboratives, to ensure the oversight and assurance received is consistent. This approach, and System Quality Group in particular, has received positive feedback from regulators.

We will continue to focus and develop oversight and assurance to ensure clinical effectiveness, good quality services, patient safety and experience are in place to improve outcomes for the population we serve.