

1. Introduction

- 1.1 This paper sets out the proposed approach that Brent CCG will adopt to address Domain 5 of the CCG's 14/15 Quality Premium and the targets associated with three key providers relevant to Brent CCG.
- 1.2 The aim of this paper is to give the Health & Wellbeing Board the opportunity to discuss and comment upon the proposed targets.

2. Background

- 2.1 Domain 5 of Brent CCG's 14/15 Quality Premium sets out a requirement for the CCG to work with key providers to increase the number of medication related incidents that are reported with the aim of capturing more of the estimated 80% of medication incidents that go unreported. The long term aim of this action is to reduce the overall risk to patients through improving the controls that are put in place following the subsequent investigation
- 2.2 It has been proposed, and accepted by NHS England, that Brent CCG work in concert with both Harrow and Hillingdon CCG's in delivering this element of the Quality Premium.
- 2.3 The BHH CCGs have identified four key providers to focus upon: Imperial, NWLHT, CNWL and The Hillingdon Hospital. Only the first three are relevant to Brent CCG and therefore it is only these three that are presented to the HWBB for consideration. In addition, the targets for Imperial are written into the contract so they will be managed slightly differently to the other two providers we have put forward for consideration.
- 2.4 Prior to the presentation of this paper to the HWBB we have gained agreement on the targets and approach with NHS England, the Exec Committees of each of the three BHH CCGs and with the providers themselves.

3. Proposed Approach

- 3.1 The Quality Premium requires CCGs to use the data from the National Reporting and Learning System (NRLS) and to baseline providers against the latest data from this system (currently this being the data for the six months to September 2013).
 - 3.2 Providers that are below the average for their cluster are to be required to increase to at least the average whilst those above the average are asked to maintain their position as a minimum. With the exception of Imperial, we are asking all providers to increase the rate of medication related incidents that they report.
 - 3.3 The approach proposed also requires the named providers to demonstrate that they have a robust approach to reporting incidents, to put together a
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communications programme to encourage people to report incidents and also to undertake a risk review associated with the medication elements within three major pathways. Finally, providers are also asked to demonstrate an increase in the number of reported incidents.

- 3.4 Through this approach we will capture more of the unreported incidents and also put in place additional controls within three major pathways within each provider therefore improving the overall quality and safety of the services delivered.

4. Additional Information

- 4.1 The baseline and targets associated with each of the three providers relevant to Brent CCG are shown in the attached presentation.
- 4.2 The programme will be managed for Brent CCG by Carole Mattock (Head of Quality for the BHH CCGs) and Mark Eaton (Head of Performance and Delivery for the BHH CCGs) with the support of Brent CCG staff.

5. Next Steps

- 5.1 The HWBB are invited to review the proposed targets, discuss the proposed approach and provide comment as appropriate.
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