

## WMQRS BOARD MEETING

Date: 22nd April 2016  
Time: 10.30 am – 12.00 pm  
Location: **Telephone Conference**

### AGENDA

1. Apologies for absence
2. Notes of the telephone conference held on 29<sup>th</sup> January 2016 Enclosure 1
3. Actions and matters arising from the last meeting Enclosure 2
4. Review programmes – progress report Enclosure 3
5. WMQRS host organisation Enclosure 4
6. WMQRS Annual Review 2015/16 and Plan 2016/17
7. WMQRS Principles and Approach
8. WMQRS Issues and Finance report Enclosure 5
9. Any other business
10. **Date of next meeting:**  
**15<sup>th</sup> July, 10.00am – 12.00pm** Room 2, Jubilee House, Bloxwich Lane, Walsall WS2 7JL

## ENCLOSURE 1 NOTES OF THE TELEPHONE CONFERENCE HELD 29TH JANUARY 2016

**Present:** Simon Hairsnape (Chair), Richard Kirby, Simon Collings, Rob Courteney-Harris, Rob Wilson, Andy Matthews, David Orme, Jane Eminson

In attendance: Sarah Broomhead

1 Apologies for absence were received from Salma Ali, Nick Flint, Vikki Tweddle, Roger Stedman, Andy Butters, Karen Deeny

2 Notes of the meeting held on 11<sup>th</sup> December 2015 were agreed as a correct record.

3 Actions from the last meeting were noted. All were completed except for monitoring usage of the WMQRS website. There were no other matters arising.

### 4 **UKAS Accreditation**

The Board welcomed the successful accreditation of WMQRS by UKAS and noted that a press release would be issued and that WMQRS would start to use the UKAS symbol on its communications.

### 5 **WMQRS Host Organisation**

The Board received the report on the WMQRS host organisation. The following points were discussed:

- Board members should send any detailed comments on the hosting specification to Jane Eminson by Wednesday 3<sup>rd</sup> February at the latest.
- The reason for inviting only NHS organisations to express interest in hosting WMQRS was mainly because the collaborative WMQRS model requires Trusts and CCGs to release reviewers and pay their travel expenses. The Board considered that Trusts and CCGs would be unlikely to do this if WMQRS was hosted by a private organisation. Setting WMQRS up as an independent social enterprise or similar organisation would not bring the business and strategic support which WMQRS needs at this stage of its development.
- The Board requested that Sandwell and West Birmingham Hospitals NHS Trust confirm in writing that the Trust has been part of the discussions about re-procurement of the WMQRS host organisation, understands the reasons why this is being pursued and has no concerns about the procurement process being followed.
- CCGs should be added to the list of organisations invited to express interest in becoming the WMQRS host organisation.
- Details of issuing an invitation to tender / express interest were still under discussion. Simon volunteered that NHS Redditch and Bromsgrove CCG would, if necessary, be prepared to issue these on behalf of NHS organisations in the West Midlands.
- Board Members on the Evaluation Panel should be one patient representative (Andy Matthews), one other Board member (Andy Butters if available) and the WMQRS Director, Jane Eminson.

The Board agreed that re-procurement of the WMQRS host organisation should take place using the specification (subject to any comments from Board members) and process outlined.

The Board discussed whether notice should be given to Sandwell and West Birmingham Hospitals NHS Trust at this stage or later. The Board agreed that the required six months' notice should be given when a decision on a new host organisation was made. The Board expected that a new host organisation (if not Sandwell and West Birmingham Hospitals NHS Trust) and Sandwell and West Birmingham Hospitals NHS Trust would work together during this time to expedite the transfer of WMQRS and to support its future development.

#### **Action:**

- WMQRS Board members to send any comments on the hosting specification to Jane Eminson by 3<sup>rd</sup> February at the latest.

- WMQRS should seek confirmation in writing from Sandwell and West Birmingham Hospitals NHS Trust that the Trust has been part of the discussions about re-procurement of the WMQRS host organisation, understands the reasons why this is being pursued and has no concerns about the procurement process being followed.
- Simon Hairsnape and Jane Eminson should liaise and agree detail of tender / expression of interest arrangements.
- Invitations to tender / express interest in becoming the WMQRS host organisation should be issued.

6 There were no other items of business.

7 It was agreed that the date of the next Board meeting would be changed so that the Board could receive the recommendation from the Evaluation Panel on the re-procured WMQRS host organisation.

**Action:**

- WMQRS to rearrange the next Board meeting.

## ENCLOSURE 2 ACTIONS & MATTERS ARISING FROM LAST MEETING

Note	Action / Matter Arising	Who	Progress
<b>Actions from 10<sup>th</sup> July meeting:</b>			
5	Monitor use of the WMQRS website and access to WMQRS standards and report to the next Board meeting.	WMQRS	Data on website activity have now been accessed but still require analysis.
<b>Actions from 29<sup>th</sup> January 2016:</b>			
5	WMQRS Board members to send any comments on the hosting specification to Jane Eminson by 3rd February at the latest.	WMQRS Board members	None received
5	WMQRS should seek confirmation in writing from Sandwell and West Birmingham Hospitals NHS Trust that the Trust has been part of the discussions about re-procurement of the WMQRS host organisation, understands the reasons why this is being pursued and has no concerns about the procurement process being followed.	WMQRS	Confirmation sought but no response received from Medical Director, Sandwell and West Birmingham Hospitals NHS Trust
5	Simon Hairsnape and Jane Eminson should liaise and agree detail of tender / expression of interest arrangements.	Simon Hairsnape and Jane Eminson	Done
5	Invitations to tender / express interest in becoming the WMQRS host organisation should be issued.	WMQRS & NHS Redditch & Bromsgrove CCG	Done
7	WMQRS to rearrange the next Board meeting.	WMQRS	Done

## ENCLOSURE 3 REVIEW PROGRAMMES – PROGRESS REPORT

### Purpose of Report:

This report updates the Board on progress with the WMQRS review programmes. Board comments and guidance are invited.

### Key Points:

#### West Midlands Work Programme

- 1 Tables 1 shows the position on the 2015/16 work programme as at 15<sup>th</sup> April 2016. This does not include the 23 2014/15 credits that were delivered in the first quarter of 2015/16. Only 37% of the 2015/16 work programme has been fully completed to date, including issue of final reports, reflecting the back-loaded nature of the work programme.

Work programme items	Credits	'Pay as you go'	Total	%
Completed	18.50		18.50	37
Agreed (including review visits up to end July 2016)	24.75	3	27.75	55
Cancelled by health economy	4.00		4.00	8
<b>Total WMQRS delivery</b>	<b>47.25</b>	<b>3</b>	<b>50.25</b>	<b>100</b>
Core programme credits available but not committed	7.75		7.75	
<b>Total available credits</b>	<b>58.00</b>	<b>3</b>	<b>61.00</b>	

- 2 The following health economies have one or more unused 2015/16 credits (excluding cancelled review visits):

Health Economy	Credits committed to date	Available Credits	Unused credits
North Staffordshire	3	5.5	2.5
North Warwickshire	1	2	1
Coventry and Rugby	2	5	3
Sandwell & W. Birmingham	3.75	6	2.25

- 3 Work has also started on the Overview Reports summarising the findings of the following review programmes:

- a. Care of critically ill and critically injured children
- b. Transfer from acute hospital care and intermediate care
- c. Towards emotional health and well-being for children and young people (CAMHS)
- d. Theatres and anaesthetics

As many Overview Reports as possible will be submitted to the next WMQRS Board meeting.

- 4 A 'good practice sharing event' about child and adolescent mental health services run jointly with the Strategic Clinical Networks was planned for 20<sup>th</sup> May 2016 but had to be cancelled as the Strategic Clinical Networks were not in a position to support the event as planned. The workshop is likely to be rescheduled for the autumn.

## Commissioned Reviews

### 5 Isle of Man:

- a. An appeal has been received on the report of the review of women's and children's services which took place 12th to 15th October 2015. An approach has been agreed with the Isle of Man Department of Health and Social Care with the aim of avoiding an appeal hearing. WMQRS is prepared to go to appeal on two of the three issues raised if the appeal is not withdrawn and, if this happens, an appeal panel comprised on WMQRS Board members will need to be called.
- b. The next Isle of Man review visit is taking place on 26, 27, 28 April 2016.
- c. The Isle of Man Department of Health and Social Care is tendering for the final year of the review programme. An invitation to tender has not yet been issued. Work on preparing for the proposed October visit has ceased at the request of the Isle of Man Department of Health and Social Care. If WMQRS is not successful in tendering for this work, there will be a significant reduction in the expected income for 2016/17 (see agenda item 8). If WMQRS is successful, there is now little time to prepare for the October visit and this may have to be deferred, with a possible knock-on-effect on completion of the remainder of the programme.

**6 Haemoglobin Disorders:** All 30 visits for this review programme have now been completed. The quality and consistency of the reports is still of concern. An appeal was received from University Hospitals Coventry and Warwickshire NHS Trust. WMQRS agreed to a re-wording of the report and confirmation that the appeal has been withdrawn is awaited. Work on the Overview Report for this review programme has started and this should be ready for consideration at the next WMQRS Board meeting.

**7 Neonatal surgery:** The report of this Strategic Review has been finalised and circulated.

**8 London renal services:** Seven review visits are planned to take place between 11<sup>th</sup> May and 30<sup>th</sup> June 2016. WMQRS has recruited additional support for running these reviews. Payments for this review programme were divided between 2015/16 and 2016/17 financial years. All 2015/16 payments have been received except for Barts Health NHS Trust and Epsom & St Helier University Hospitals NHS Trust and invoices for the 2016/17 payments will be raised shortly.

### 9 Guernsey:

- a. The proposal submitted to the Guernsey Health and Social Services Department for a strategic review of paediatric services was not successful. The Guernsey Health and Social Services Department chose the Royal College of Paediatrics and Child Health for this work, partly because it linked with the need for approval of some consultant posts.
- b. Discussions have taken place about a review of Guernsey's general medical services. An invitation to tender has not yet been issued and WMQRS will need to decide whether to respond when this is available.

## Standards Development

**10** A workshop to discuss the draft revised Urgent and Emergency Care Quality Standards took place on 13<sup>th</sup> April 2016 and was attended by over 70 delegates, including representatives from services in the East Midlands and East of England due to their interest in the approach being taken to the designation of Emergency Centres. The following West Midlands health economies are now involved in this work: Birmingham (all parts), Solihull, Sandwell and West Birmingham, Wolverhampton, Worcestershire and Herefordshire.

**11** The following Quality Standards have been published since the last Board meeting:

- a. Care of Critically Ill and Critically Injured Children (published jointly with the Paediatric Intensive Care Society). These Standards now cover all levels of paediatric high dependency care as well as Emergency Departments, paediatric assessment units, paediatric in-patient units, Specialist Paediatric Transport

Services, paediatric anaesthesia and care in general intensive care units, paediatric high dependency care networks and commissioning.

- b. Problem Alcohol Use Pathway

12 The following Quality Standards have been issued for regional consultation:

- a. Musculo-skeletal Patient Pathway
- b. Gynaecology Patient Pathway
- c. Falls & Fragility Fractures Patient Pathway
- d. Urgent and Emergency Care

13 The following Quality Standards should be issued for regional consultation by the end of April 2016:

- a. Eye Care
- b. Stroke Services (revised version)
- c. Services for People with Progressive and Advanced Chronic Kidney Disease (revised version)

#### WMQRS Standards

14 Table 2 gives the current position on achievement of 2015/16 WMQRS standards. In summary:

Standard (IR= Immediate Risk)	% Met
IR letter issued within 5 working days	80
IR response received	100
IR response received within 10 working days	50
IR response addresses issue/s raised	60
All IR actions completed within 15 working days or less	50
Draft report to reviewers within 10 working days	74
Draft report to health economy within 20 working days	65
Report considered by Steering Group (or QAG) within 35 days of receiving HE comments	83
Final report issued within 85 working days	80

15 All the reports which did not achieve the 85 working day final deadline were from the haemoglobin disorders programme. Other non-achievement of expected standards was due to WMQRS capacity problems which are discussed in more detail under agenda item 8.

<b>Financial, Human Resources and Legal Implications:</b>	This report has financial implications for WMQRS budgets in 2016/17. There are also human resources implications in relation to WMQRS team capacity.
<b>Equality impact:</b>	WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.
<b>Recommendations:</b>	
The Board is recommended to note the contents of this report and advise on any action to be taken.	

Table 1: 2015/16 WMQRS West Midlands Reviews – Position at 15<sup>th</sup> April 2016

Key:	x	Topic considered but not being pursued	Discussed but awaiting confirmation (NB. Provider & commissioner agreement needed for topic to go ahead)	Deferred by health economy	cancelled by health economy	Agreed	Standards development involvement	Completed																									
Health Economy	Credits committed to date	Available Credits	Anticoagulant services	Problem Alcohol Use	Care Bundles	Continence Service	Community services	[Children & Young People] Community /network	[Children & Young People] Critically Ill children	[Children & Young People] Emotional well-being	[Children & Young People] Looked After Children	Chronic pain	Diabetes care	Discharge pathway / cty. hosp	End of Life pathway	Eye care	Frail elderly incl safeguard/falls	Imaging	Learning Disabilities	[Mental Health] Community centres	[Mental Health] Dementia	[Mental Health] Acute pathway	[Mental Health] other	[Mental Health] Crisis Teams	Musculo-skeletal	Primary care	Reducing follow up appts	Stroke	Strategy/system re-design	Theatres	Urgent Care		
North Staffordshire	3	5.5					1			1					x		x						x										
South Staffordshire (W)	3	3					1	x	1					x											x					1			
S. East Staffs & Seisdon	2	2.5					1	x																	1	x							
East Staffordshire	1	1.5															x													1			
Shropshire & Telford & Wrekin	5	5.5	0.5								x														5					x			
North Warwickshire	1	2										x	1	x																			
Coventry and Rugby	2	5										x	2	x																			
South Warwickshire	2.5	3											x																2		1		
Worcestershire	7	7															4					x			x				2	1			
Herefordshire	3	2											2						1														
Dudley	3	3.5								1											2												
Wolverhampton	3	3								1										1										1			
Walsall	3	3			1					1																				1			
Sandwell & W. Birmingham	3.75	6								1		1.25		x		1	x					x							x	0.5			
South & Central Birmingham	2.50	3		x								1.25		x																1	0.25		
N. & E. Birmingham (X city)	3	0						1				1																			1		
Solihull	2.50	2.5										0.25		x		1	1															0.25	
	50.25	58.0																															



**Table 2: 2015/16 Compliance with WMQRS Standards**

Visit Key: CAMHS: Child & Adolescent Mental Health Services CIC: Critically Ill Children CMHS: Community Mental Health Services COPLwF: Care of Older People Living with Frailty ED: Emergency Department HD: Haemoglobin Disorders MH: Mental Health Services MIU: Minor Injuries Unit MSK: Musculo-skeletal TACIC: Transfer from Acute Hospital Care & Intermediate Care	Visit date	IR letter issued within 5 working days	IR response received	IR response received within 5 working days (10 days post-visit)	IR response addresses issue raised	All IR actions completed within 15 working days or less	Draft report to reviewers within 10 working days	Draft report to HE within 20 working days	Report considered by Steering (or QA) Group within 35 working days of receiving HE comments	Final report issued within 85 working days	Notes
North Staffordshire -TACIC	14,15 Apr 15	N/A	N/A	N/A	N/A	N/A	N	N	Y	Y	Draft report was sent to reviewers eleven days late and to health economy six days late. Capacity within WQMRS caused by the number of visits deferred by HE in 2014/15 programme to March to July
Wolverhampton - TACIC	21,22 Apr 15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
North Staffordshire - LTV	29-Apr-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Walsall - TACIC	5,6 May 15	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report was sent three days late to reviewers Capacity within WQMRS caused by the number of visits deferred by HE in 2014/15 programme to March to July
Newcastle and South Tees HD	6,7 May 15	N/A	N/A	N/A	N/A	N/A	Y	Y	N	N	Final report sent eleven days late to Trust. Delayed due to handover of work.
Robert Jones & Agnes Hunt - CIC	13-May-15	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Shrewsbury and Telford - CIC	12-May-15	Y	Y	Y	N	Y	Y	Y	Y	Y	
Shrewsbury and Telford - CIC: Additional IR	12-May-15	N	Y	Y	N	N	N/A	N/A	N/A	N/A	Immediate risk not identified until draft report prepared
Shrewsbury, Telford & Wrekin - TACIC	12,13,14 May 15	Y	Y	Y	Y	Y	N	N	Y	Y	Draft report sent late to reviewers (seven days) and health economy (one day). Capacity within WQMRS caused by the number of visits deferred by HE in 2014/15 programme to March to July
St Georges - HD	13-May-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	N	Final report issued eighteen days late. Delayed due to outstanding Trust query.
Coventry & Warwickshire - CMHS	19-May-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Dublin - HD	21-May-15	N/A	N/A	N/A	N/A	N/A	Y	Y	N	Y	Late consideration by SG due to cancellation of August meeting by leads.
Lewisham & Greenwich - HD	02-Jun-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Walsall - Chronic Pain	09-Jun-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
North Staffordshire - Theatres & Anaesthetics	10-Jun-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Sandwell & West Birmingham - TACIC	16, 17 Jun 15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Guys & St Thomas' - HD	17-Jun-15	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent one day late to reviewers
Sandwell & West Birmingham - CIC	01-Jul-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	

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Birmingham Community Healthcare - Chronic Pain	02-Jul-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Kings - HD	08-Jul-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	N	Final report sent to Trust three days late due to inconsistencies in report requiring clinical lead decisions.
Royal Wolverhampton - CIC (ED)	14-Jul-15	Y	Y	N	Y	Y	Y	Y	Y	Y	IR response received one day late from Trust
Herefordshire - LD	08-Sep-15	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent to reviewers five days late due to team capacity and number of reviews scheduled.
Wolverhampton - MH	15-Sep-15	N	Y	N	Y	Y	N	Y	Y	Y	IR letter sent one day late to health economy. Draft report sent to reviewers two days late due team capacity and number of reviews scheduled.
Sandwell & Wolverhampton - CAMHS	22,23 Sept 15	N/A	N/A	N/A	N/A	N/A	N	N	Y	Y	Draft report sent to reviewers and health economy twelve days late due to team capacity and number of reviews scheduled.
Liverpool - HD	24-Sep-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Manchester - HD	29-Sep-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Dudley - Dementia (Formative Review)	29,30 Sept 15	N/A	N/A	N/A	N/A	N/A	N	N	Y	Y	Draft report sent to reviewers twenty days late and health economy ten days late due to team capacity and number of reviews scheduled.
North Warwickshire - TACIC	07-Oct-15	N/A	N/A	N/A	N/A	N/A	N	N	Y	Y	Draft report sent to reviewers four days late and health economy one day late due to team capacity and number of reviews scheduled.
Coventry & Warwickshire - HD	13,14 Oct 15	N/A	N/A	N/A	N/A	N/A	Y	N	Y	Y	Draft report sent to Trust two days late due to six visits within eight working days.
Sandwell - HD		N/A	N/A	N/A	N/A	N/A	Y	N	Y	Y	Draft report sent to Trust five days late due to six visits within eight working days.
Wolverhampton - HD		N/A	N/A	N/A	N/A	N/A	Y	N	Y	Y	Draft report sent to Trust eight days late due to six visits within eight working days.
Birmingham Children's - HD		N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Isle of Man	13-16 Oct 15	Y	Y	Y	N	N	N	N	Y	Y	Draft report sent to reviewers eight days late and Isle of Man three days late due to complexity of report. Second response to immediate risk still does not fully address the risk identified for children being cared for by surgeons.

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North West London – HD	15-Oct-15	N/A	N/A	N/A	N/A	N/A	N	N	N	N	Draft report sent to reviewers two days due to workload with four other reports (W Mids.) and leave. Report sent to Trust six days late due to iterations between Clinical Leads on network section. February Steering Group meeting cancelled due to Junior Doctor strike resulting in late consideration of report by Steering Group and delays in issuing final report.
Neonatal Surgery (strategic review)	20,21 Oct 15	N/A	N/A	N/A	N/A	N/A	N/A	Y	N/A	N/A	Draft report sent to review panel ten days late due to complexity of report and team capacity.
Croydon - HD	22-Oct-15	N/A	N/A	N/A	N/A	N/A	Y	N	N	N	Draft report sent to Trust three days late due to six visits within eight working days. Draft report sent 24 days late to Trust - report had to be resent to new nhs.net email addresses. Initial copy sent had not been received. February Steering Group meeting cancelled due to Junior Doctor strike resulting in late consideration of report by Steering Group and delays in issuing final report.
South Warwickshire - MIU	22-Oct-15	N/A	N/A	N/A	N/A	N/A	Y	N	Y	Y	Draft report sent to health economy five days late due to WMQRS error. No Trust comments received despite chasing.
Imperial - HD	05-Nov-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	N	February Steering Group meeting cancelled due to Junior Doctor strike resulting in delays in issuing final report.
Nottingham - HD	10-Nov-15	N/A	N/A	N/A	N/A	N/A	Y	Y	N	N	Final report sent eleven days late to Trust due to capacity issues. February Steering Group meeting cancelled due to Junior Doctor strike resulting in late consideration of report by Steering Group and delays in issuing final report.
Burton - Theatres & Anaesthetics	18-Nov-15	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Oxford - HD	19-Nov-15	N/A	N/A	N/A	N/A	N/A	Y	Y	N	Y	February Steering Group meeting cancelled due to Junior Doctor strike resulting in late consideration of report by Steering Group
UCLH - HD	26-Nov-15	N/A	N/A	N/A	N/A	N/A	Y	N	N	N	Draft report sent to reviewers two days late. Draft report sent to Trust four days late due to late response from reviewers. February Steering Group meeting cancelled due to Junior Doctor strike resulting in late consideration of report by Steering Group and delays in issuing final report.

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Glasgow – HD	12-Jan-16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	N/A	
Shropshire, Telford & Wrekin - MSK (facilitated self-assessment)	18, 21, 25 Jan 16	N/A	N/A	N/A	N/A	N/A	N/A	Y	N/A	Y	
Wales - HD	03-Feb-16	N/A	N/A	N/A	N/A	N/A	Y	N	N/A	N/A	Draft report sent two days late to Trust due to date miscalculation.
North Middlesex - HD	04-Feb-16	N/A	N/A	N/A	N/A	N/A	Y	N	N/A	N/A	Draft report sent to Trust one day late due to date miscalculation.
Leicester - HD	11-Feb-16	N/A	N/A	N/A	N/A	N/A	N	N	N/A	N/A	Draft report sent ten days late to reviewers and five days late to Trust due to delays in drafting by clinical lead and annual leave.
Walsall & Dudley - CAMHS	23, 24 Feb 16	Y	Y	N	N	N	N	N	N/A	N/A	Immediate risk response received two days late from Trust. Immediate risk actions completed 6 days late as response was sent to Reviewers for comment.. Draft report sent to reviewers two days late and four days late to health economy - Capacity within WQMRS caused by the number of visits deferred by HE in 2015/16 programme to March to July
Walsall - Theatres & Anaesthetics	25-Feb-16	Y	Y	N	Y	N	Y	Y	N/A	N/A	Immediate risk response received four days late from Trust. Immediate risk actions completed two days late as a result.
Wolverhampton - Theatres & Anaesthetics	1, 2 Mar 16	Y	Y	N	Y	N	Y	Y	N/A	N/A	Immediate risk response received six days late from Trust. Immediate risk actions completed three days late as a result.
Worcestershire - COPLwF	8, 9 Mar 16	N/A	N/A	N/A	N/A	N/A	Y	Y	N/A	N/A	
North Staffordshire - Integration of Health & Social Care Teams (formative review)	15-Mar-16	N/A	N/A	N/A	N/A	N/A	Y	N	N/A	N/A	Report late to HE. Capacity within WQMRS caused by the number of visits deferred to March to July
Herefordshire - TACIC	22, 23 Mar 16	N/A	N/A	N/A	N/A	N/A	Y	Y	N/A	N/A	
% standards met											
Yes		8	10	5	6	5	37	34	34	33	
No		2	0	5	4	5	13	18	7	8	
Total Yes + No		10	10	10	10	10	50	52	41	41	
% Yes		80	100	50	60	50	74	65	83	80	

## ENCLOSURE 4 WMQRS HOST ORGANISATION

### Purpose of Report:

This report presents the findings of the tender and evaluation process for the re-procurement of the WMQRS host organisation.

### Key Points:

- 1 Invitations to tender to become the WMQRS host organisation were issued on 10<sup>th</sup> February 2016 with responses requested by 4<sup>th</sup> March 2016.
- 2 Only one tender was received, from the Midlands and Lancashire Commissioning Support Unit (CSU). Copies of the Midlands and Lancashire CSU proposal are available to Board members on request.
- 3 The current host organisation, Sandwell and West Birmingham Hospitals NHS Trust did not tender to continue to be the host organisation.
- 4 As agreed by the WMQRS Board at its last meeting, an Evaluation Panel consisting of three Board members (Nick Flint and Andy Butters) and the WMQRS Director, supported by the WMQRS Assistant Director and Business Manager, met with Derek Kitchen, Midlands and Lancashire CSU Managing Director, and Peter Spilsbury, Director of the Strategy Unit, on 12<sup>th</sup> April 2016 to discuss their proposal.
- 5 The non-financial evaluation of the Midlands and Lancashire CSU proposal is given in Appendix 1. The CSU is well able to meet nearly all of the requirements of the hosting specification.
- 6 The cost of hosting WMQRS was proposed as £65,000 plus 5% of commissioned income. This is £5,000 lower than the hosting cost charged by Sandwell and West Birmingham Hospitals NHS Trust. The Evaluation Panel discussed with the Midlands and Lancashire CSU that this approach was appropriate with the current funding arrangements for WMQRS, that is, where the majority of WMQRS core funding is by CCG subscriptions. A change to these arrangements, for example, a lower core subscription and a larger 'pay as you go' element, could make this approach difficult. The CSU responded that they would be prepared to negotiate an alternative pricing structure. This could be either a revised structure for a 'hosting' cost or a 'partnership' approach.
- 7 The Evaluation Panel considered that the Midlands and Lancashire CSU would provide a host organisation more able to support that future development of WMQRS than Sandwell and West Birmingham Hospitals NHS Trust.
- 8 The Midlands and Lancashire CSU will need to complete a 'due diligence' process prior to agreeing to host WMQRS. The Evaluation Panel also recommended that the Midlands and Lancashire CSU risk register is reviewed by WMQRS staff so that the WMQRS Board can be assured that the CSU is not subject to any unexpected organisational risks. Subject to these two processes being completed satisfactorily by 30<sup>th</sup> April 2016, the Evaluation Panel recommends to the WMQRS Board that:
  - a. The Board gives notice to Sandwell and West Birmingham Hospitals NHS Trust that it wishes to cease the WMQRS hosting arrangement on 31<sup>st</sup> October 2016.
  - b. The Board enters into a 'heads of agreement' with Midlands and Lancashire CSU for the hosting of WMQRS from 1<sup>st</sup> November 2016.
  - c. Processes for the transfer of WMQRS staff and assets, including electronic storage, intellectual property and redundancy funding, to the Midlands and Lancashire CSU are started with the aim of transfer by 1<sup>st</sup> November 2016 at the latest.
  - d. *Pro rata* hosting costs are paid to Sandwell and West Birmingham Hospitals NHS Trust and to the Midlands and Lancashire CSU, based on the CSU hosting proposal, for 2016/17.
  - e. Revised proposals for the cost of 2017/18 and beyond hosting by, or partnership with, Midlands and Lancashire CSU are brought to the next meeting of the WMQRS Board. These will need to align with proposals for WMQRS funding for 2017/18 and beyond which will be considered at the same meeting.

<b>Financial, Human Resources and Legal Implications:</b>	<p>This report has financial implications for:</p> <ul style="list-style-type: none"> <li>• The future development of WMQRS</li> <li>• The cost of hosting WMQRS</li> <li>• Negotiation of WMQRS core funding for 2017/18 and beyond</li> </ul> <p>It has human resources implications for the WMQRS team. A change of host would require transfer of employment for WMQRS staff under TUPE regulations.</p>
<b>Equality impact</b>	<p>WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care. Re-procurement of the host organisation will impact, hopefully positively, on the ability of WMQRS to carry out this function.</p>
<p><b>Recommendations:</b></p> <p>the Board is recommended to agree that, subject to satisfactory completion of the ‘due diligence’ processes outlined above by 30<sup>th</sup> April 2016:</p> <ol style="list-style-type: none"> <li>a. Give notice to Sandwell and West Birmingham Hospitals NHS Trust that it wishes to cease the WMQRS hosting arrangement on 31<sup>st</sup> October 2016.</li> <li>b. Enter into a ‘heads of agreement’ with Midlands and Lancashire CSU for the hosting of WMQRS from 1<sup>st</sup> November 2016.</li> <li>c. Agree that processes for the transfer of WMQRS staff and assets, including intellectual property and redundancy funding, to the Midlands and Lancashire CSU are started with the aim of transfer by 1<sup>st</sup> November 2016 at the latest.</li> <li>d. Agree that <i>pro rata</i> hosting costs are paid to Sandwell and West Birmingham Hospitals NHS Trust and to the Midlands and Lancashire CSU, based on the CSU hosting proposal, for 2016/17.</li> <li>e. Agree that revised proposals for the 2017/18 and beyond cost of hosting by, or partnership with, Midlands and Lancashire CSU are brought to the next meeting of the WMQRS Board.</li> </ol>	

## ENCLOSURE 4 APPENDIX 1: NON-FINANCIAL EVALUATION

Requirements		Comments
<b>ETHOS, CULTURE AND VALUES</b>		
1	<b>Support for NHS</b> <ul style="list-style-type: none"> <li>Understanding of NHS culture and values</li> <li>Understanding of NHS policy and priorities</li> <li>Support for collaborative quality improvement</li> </ul>	Strong commitment.
2	<b>Understanding of and commitment to WMQRS</b> <ul style="list-style-type: none"> <li>Understanding of and commitment to the work of WMQRS and its potential contribution to quality improvement of health services</li> <li>Understanding of peer review</li> <li>Commitment to the development of WMQRS</li> </ul>	Very good, including involvement in establishing WMQRS in 2008/9.
3	<b>Strategic fit</b> <ul style="list-style-type: none"> <li>Alignment of organisation's and WMQRS goals</li> <li>Provision of quality assurance, quality improvement or related services which may complement the work of WMQRS</li> </ul>	WMQRS aligns well with the work of the Midlands and Lancashire CSU Strategy Unit and with the Clinical Services Teams.
4	<b>Customer reputation and relations</b> <ul style="list-style-type: none"> <li>Good working relationships with commissioners and providers of health services</li> <li><i>Desirable: Good relationships with senior managers and senior clinical staff in West Midlands CCGs and Trusts</i></li> </ul>	Yes, as shown by increase in Midlands and Lancashire CSU turnover since it was established.
5	<b>Organisational stability</b> <ul style="list-style-type: none"> <li>Organisation which is likely to be in existence for several years in order to provide a stable base for WMQRS</li> </ul>	Less stable than an NHS Trust but stable enough for WMQRS, especially given the uncertainty of its future funding.
<b>OPERATIONAL SUPPORT</b>		
6	<b>Financial systems</b> Robust Standing Orders, Standing Financial Instructions and financial management arrangements suitable for: <ul style="list-style-type: none"> <li>Purchasing of goods and services</li> <li>Invoicing for WMQRS income</li> <li>Accounting for income and expenditure</li> <li>Monthly reporting on budget position</li> <li>Financial forecasting</li> <li>Financial advice and support</li> <li>Payment of staff and expenses</li> <li>Payment of some reviewer expenses</li> <li>Ability to carry funding over the end of the financial year</li> </ul> Financial systems should be easy to use with minimal WMQRS staff time needed for budget management. <ul style="list-style-type: none"> <li><i>Desirable: Financial management which helps WMQRS to function as a business financially including access to investment</i></li> </ul>	Yes for essential criteria with the exception of carry forward of funding over the end of the financial year which is limited and available only with specific prior agreement. A willingness to discuss ways of developing WMQRS.

Requirements		Comments
7	<b>Human resources support</b> <ul style="list-style-type: none"> <li>• Employment of WMQRS staff</li> <li>• Appropriate range of HR policies and procedures</li> <li>• HR advice and support for implementation of all HR policies and procedures</li> <li>• Appropriate range of mandatory training</li> <li>• Access to training and development opportunities</li> <li>• Ability quickly to flex WMQRS capacity through consultancy support or short-term secondments quickly</li> </ul>	Yes
8	<b>Accommodation</b> <ul style="list-style-type: none"> <li>• Appropriate office accommodation for WMQRS staff (currently six desk spaces, two storage cabinets and three filing cabinets)</li> <li>• Office base reasonably central to the West Midlands with easy public and private transport links with the rest of the West Midlands</li> <li>• Easy access to a high speed, high volume, multifunctional photocopier</li> <li>• Access to meeting rooms (ideally with car parking)</li> <li>• Storage space for training materials, visit evidence until reports are finalised, office supplies and equipment</li> </ul>	The Midlands and Lancashire CSU is looking to move from its base at Kingston House, Sandwell, possibly to a Birmingham location. This would be central to the West Midlands (although less convenient for current WMQRS staff). Appropriate accommodation for WMQRS would be available although the details are not yet known.
9	<b>Operational support</b> <ul style="list-style-type: none"> <li>• Appropriate arrangements for supplies, postal services and other operational support</li> <li>• Responsive operational support systems</li> </ul>	Yes
10	<b>IT support</b> <ul style="list-style-type: none"> <li>• Appropriate IT support including for remote and home working</li> <li>• Appropriate IT governance including arrangements for back-up, threat protection</li> <li>• <i>Desirable: Access to nhs.net emails for WMQRS staff</i></li> </ul>	Yes
11	<b>Corporate governance and risk management</b> <ul style="list-style-type: none"> <li>• Appropriate corporate governance and risk management arrangements</li> <li>• Providing access to legal advice, as required, in support of WMQRS work</li> <li>• Providing access to PII insurance relevant to the work of WMQRS</li> </ul>	Yes. The Midlands and Lancashire CSU is legally part of NHS England.
12	<b>Feasibility</b> <ul style="list-style-type: none"> <li>• Ability to support transfer of WMQRS within six months of agreement</li> </ul>	Yes
<b>BUSINESS SUPPORT</b>		
13	Ability to devise and negotiate WMQRS core funding	Yes
14	Staff with competences in business development, market intelligence, pricing, communication, marketing and profile raising	Yes. Substantial new business proposals would incur additional costs in relation to innovation, marketing and monitoring.
15	Ability to expand WMQRS operations while maintaining quality	Commitment to this approach.



Requirements		Comments
16	Availability to start work with WMQRS from April 2016	Yes
<b>Other points:</b> <ul style="list-style-type: none"> <li>The Midlands and Lancashire CSU intends that WMQRS will keep its specific identify and branding.</li> </ul>		

## ENCLOSURE 5 WMQRS ISSUES AND FINANCE REPORT

### Purpose of Report:

The purpose of this report is to update the Board on issues relating to the WMQRS team.

### Key Points:

#### Staffing

- 1 WMQRS continues to have a vacant Quality Manager post and one of the Lead Administrators will be on maternity leave from May 2016. A temporary replacement Quality Manager was recruited in January 2016 but this trial was not successful and the post has been vacant since February.
- 2 WMQRS capacity has been insufficient for the workload expected since, at least, September. As a result, WMQRS standards are not being achieved consistently (agenda item 4) and WMQRS staff are working under significant pressure. The associated risks have been reported to the Sandwell and West Birmingham Hospitals NHS Trust Medical Directorate in accordance with Trust policy. Actions taken to mitigate the risk include:
  - a. Additional days worked by WMQRS Director
  - b. Consultancy support commissioned to:
    - i. run the haemoglobin disorders review programme
    - ii. run the London renal review programme
    - iii. provide temporary support for administrative work
- 3 Bringing in consultancy support to run review programmes helps WMQRS capacity but significant WMQRS core team work is still required, including for preparation, training, dealing with queries and checking reports. It is also not a good use of WMQRS resources as the cost of consultancy support sometimes exceeds the income received.

#### WMQRS Financial Position

- 4 Table 3 summarises the WMQRS 2015/16 month 11 financial position and Table 4 gives the 2015/16 estimated end of year position and forecast for 2016/17. £57,000 WMQRS funding has been carried forward to the 2016/17 financial year.
- 5 The 2016/17 forecast assumes £69,500 of income from the Isle of Man. This figure is based on the original quotation. £32,700 of this income, covering the period April to August, is guaranteed. The remaining £36,800 is not. If WMQRS submits a successful tender for the remainder of the programme it could, however, be higher. The 2016/17 forecast includes a £29,500 carry forward which could, if necessary, be used to offset loss of Isle of Man income. The current forecast also does not include an estimate of further commissioned review income. The overall forecast for 2016/17 is therefore satisfactory.
- 6 WMQRS was asked by Sandwell and West Birmingham Hospitals NHS Trust to accept an 'additional income target' of £30,000 over and above the existing hosting agreement. WMQRS has not accepted this target.

<b>Financial, Human Resources and Legal Implications:</b>	This report includes financial and human resources implications for the WMQRS team.
<b>Equality impact</b>	No equality implications have been identified.
<b>Recommendation:</b>	
The Board is recommended to note the contents of this report.	

**Table 3: 2015/16 Month 11 position**

<b>INCOME</b>				
<b>Source</b>	<b>Annual Budget £</b>	<b>Income Year to Date<sup>1</sup> £</b>	<b>Variance Year to Date £</b>	<b>Notes</b>
Carry forward from 2014/15	52,500	52,500	0	
<b>CCGs</b>	308,469	308,469	0	
<b>Other</b>	146	146	0	
<b>Commissioned reviews:</b>				
Isle of Man	55,603	55,603	0	
Haemoglobin Disorders	19,200	19,200	0	
Dublin	3,250	3,250	0	
Neonatal surgery	11,531	11,531	0	
London renal	26,250	17,500	-8,750	Barts, Epsom outstanding
Urgent Care (Bham CrossCity)	5,200	5,200	0	
Chronic Pain (Bham CrossCity)	5,200	5,200	0	
Public Participation QS (NHS England)	5,000	5,000	0	
Pre-assurance checklist (CSU)	2,250	2,250	0	
<b>Commissioned review subtotal</b>	<b>133,484</b>	<b>124,734</b>	<b>-8,750</b>	
<b>TOTAL</b>	<b>494,599</b>	<b>485,849</b>	<b>-8,750</b>	Redundancy fund excluded from total

<sup>1</sup>Total value of carry forward and invoices paid

<b>EXPENDITURE</b>						
<b>Allocated funds</b>	<b>Annual Budget £</b>	<b>Budget Year to Date £</b>	<b>Spend Year to Date £</b>	<b>Variance Year to Date £</b>	<b>Estimated end year variance £</b>	<b>Notes</b>
Pay	231,981	210,169	202,382	7,787	7,856	Expect to spend £224,125 at end year
Hosting costs	76,000	69,667	69,859	-192	0	Expect to spend £76,000 at end year
Non-Pay	186,618	150,118	149,290	828	13,368	Expect to spend £173,250 at end year
Carry forward from 2014/15			-35,800	35,800	35,800	
<b>Subtotal</b>	<b>494,599</b>	<b>429,954</b>	<b>385,731</b>	<b>44,223</b>	<b>57,024</b>	

Note: Excludes income and expenditure related directly to reviewer expenses for commissioned reviews

**Table 4: 2015/16 estimated end of year position and 2016/17 forecast**

	<b>2015/16 Estimated end year position</b>	<b>2016/17 Forecast</b>
<b>INCOME</b>		
Brought forward	52,500	57,000
Core funding (CCG)	308,500	306,000
Isle of Man	55,600	69,500
Haemoglobin Disorders	19,200	4,400
Other commissioned reviews	58,800	28,000
<b>Total Income</b>	<b>494,600</b>	<b>464,900</b>
<b>EXPENDITURE</b>		
<b>Pay</b>	<b>224,100</b>	<b>292,900</b>
Hosting	76,000	75,000
Non-pay expenditure	69,250	47,500
Non-recurring expenditure	104,000	20,000
Brought forward	-35,800	0
<b>Total Non-pay</b>	<b>213,500</b>	<b>142,500</b>
<b>Total Expenditure</b>	<b>437,600</b>	<b>435,400</b>
<b>Income - Expenditure</b>	<b>57,000</b>	<b>0</b>
<b>Carry forward</b>	<b>57,000</b>	<b>29,500</b>

**Notes:**

- 1 All years:** Excludes income and expenditure related directly to reviewer expenses for commissioned reviews.
- 2 Income 2016/17:**
  - a. CCG income is lower in 2016/17 due to an error in the 2015/16 invoices to CCGs which could not be corrected at the time.
  - b. The figure for income from the Isle of Man review programme is based on the original quotation. £32,700 of this income, covering the period April to August, is guaranteed. The remaining £36,800 is not. If WMQRS submits a successful tender for the remainder of the programme it could, however, be higher.
  - c. Includes commissioned income known to date. Does not include an estimate of further commissioned reviews.
- 3 Expenditure 2015/16:** Director post substantive from Sept 2015 (5 months consultancy, 7 months substantive)
- 4 Expenditure 2016/17:**
  - a. Pay is at 2015/16 pay levels and does not include incremental or cost of living increases.
  - b. Band 8a Quality Manager included in pay for 2016/17 although some will, in practice, be used on a non-recurring basis for consultancy support.
  - c. 2016/17 hosting costs have been included at the Sandwell and West Birmingham Hospitals NHS Trust rate. There will be a part-year saving if WMQRS transfers to the Midlands and Lancashire CSU from 1<sup>st</sup> November.