

## WMQRS BOARD MEETING

Date: 6<sup>th</sup> April 2017  
 Time: 10.30am – 12.30pm  
 Location: Telephone Conference

### AGENDA

1.	Apologies for absence	
2.	Notes of the telephone conference held on 9 <sup>th</sup> February 2017 and 15 <sup>th</sup> December 2016	Enclosure 1
3.	Actions and matters arising from the last meeting	Enclosure 2
4.	Review Programmes – Progress Report	Enclosure 3
5.	Overview reports: Towards Children and Young People’s Emotional Health and Well-being Theatre and Anaesthetic Services Transfer from Acute Hospital and Intermediate Care Services	Enclosure 4 Attached Attached Attached
6.	Cancellation Policy	Enclosure 5
7.	Update on 2017/18 WMQRS Funding	Enclosure 6
8.	WMQRS Issues and Finance report	Enclosure 7
9.	Any other business	
10.	<b>Dates of next meetings:</b> <b>Thursday 13<sup>th</sup> July, 10.30 – 12.30</b> <b>Wednesday 27<sup>th</sup> September, 10.30 – 12.30</b> <b>Tuesday 12<sup>th</sup> December, 10.30 – 12.30</b>	

## ENCLOSURE 1

### NOTES OF THE TELEPHONE CONFERENCE HELD 9<sup>TH</sup> FEBRUARY 2017

Present: Simon Hairsnape, Nick Flint, Simon Collings, Jane Eminson

#### 1. PROPOSED COSTINGS FOR 2017/18:

##### a. Subscriptions per STP area

STP population	Annual Subscription (£)
<0.5 million	7,500
0.5 < 1 million	10,000
1 million +	12,500

Individual NHS Trust subscription (non-subscribing STP areas): £2,500 per annum

Subscriptions would give:

- Permission to use all WMQRS Quality Standards
  - Lower price review visits
  - New and updated Quality Standards as developed
  - Access to self-assessment forms and other WMQRS implementation tools
  - Free places on WMQRS training sessions, Good Practice Sharing Events and other workshops
  - Advice and support on how to use WMQRS products
  - Regular bulletins about WMQRS and its work
- b. Cost per review for organisations in subscribing STPs of £5,000 and for those in non-subscribing STPs of £7,500
- c. Agreement to national use of Quality Standards: £2,500 per service module (negotiable)
- d. Introduction of a cancellation policy (to be discussed further)

We have checked what the costs under the new model would be to areas that have already fully committed to WMQRS in 17/18. These areas will receive WMQRS support at a lower cost than they would under the new model. This was considered an appropriate financial reward for signing up to WMQRS early!

Assuming that all West Midlands STP areas take out a WMQRS subscription and WMQRS undertakes six additional commissioned reviews in 2017/18, this results in a balanced income and expenditure position (based on the staffing below). The unconfirmed subscriptions and reviews comprise £72,500 of unconfirmed income at this stage (ie financial risk).

**Action: WMQRS to publicise revised 2017/18 offer**

#### 2. WMQRS STAFFING

- a. WMQRS has checked the staffing capacity needed to deliver the 2017/18 work programme, including reviews already committed, Isle of Man review programme, updating of Quality Standards and six additional commissioned reviews. This showed a significant shortfall in senior staffing capacity. A revised staffing model is therefore proposed.

Director	Band 9	0.6 wte
Assistant Director	Band 8c	1.0 wte

Senior Quality Manager	Band 8b or 8c	1.0 wte
Administrator	Band 4	1.08 wte

Given previous difficulties in recruiting, WMQRS would initially seek a one year secondment to the new Senior Quality Manager post of someone with appropriate competences (hence the band flexibility).

The Band 4 post would be a job share of the two existing Administrators, with one reducing to 18 hours. This replaces the proposed redundancy consideration for one of these posts.

This staffing still leaves a senior staff capacity shortfall but WMQRS consider this can be managed by a) use of consultancy and b) possible deferment of revision of some Quality Standards to 2018/19.

- b. The WMQRS Business Manager has applied for the CSU voluntary redundancy scheme. This was supported as it allowed restructuring of the WMQRS team to take place more quickly. In particular, this change released resources to fund the additional senior capacity needed to deliver the 17/18 work programme.
- c. The WMQRS Director has given notice of her intention to retire by July 2017 at the latest. Recruitment to the Director post will be discussed at the next Board meeting.

## NOTES OF THE TELEPHONE CONFERENCE HELD 15<sup>TH</sup> DECEMBER 2016

**Present:** Simon Hairsnape (chair), Noreen Dowd, Rob Courteney-Harris, Nick Flint, Jane Eminson

1. Apologies for absence were received from Andy Matthews, Linda Izquierdo, Simon Collins, Chris Day, Richard Kirby, Helen Lancaster, Andy Butters, Peter Spilsbury, David Orme and Rob Wilson
2. Those present agreed to proceed with the meeting even though it was not quorate in terms of Trust representatives. All decisions made would need to be ratified by email as the meeting was not quorate. If other members do not support the decisions made then a further telephone conference will be arranged. Simon commented that Board telephone conferences are usually well attended but, if the next meeting has equally poor attendance, the Board will need to reflect on the reasons why this is happening.
3. Notes of the meeting held on 31<sup>st</sup> October 2016 were agreed as a correct record.

### 4. **Actions and matters arising from the last meeting**

Actions and matters arising from the notes of the last meeting were noted. There had been no feedback from the circulation of the critically ill children Overview Report. It was agreed that the circulation list should be emailed again to say that the Board hoped the report was useful and any feedback would be welcomed.

**Actions: WMQRS to email about the critically ill children Overview Report**

### 5. **Review Programmes – Progress Report**

The Board noted the Review Programmes Progress Report.

### 6. **Update on 2017/18 WMQRS Funding**

Simon reported that he had had further discussions with CCGs about their support for WMQRS. Sandwell and West Birmingham CCG had confirmed that they would support the service for a further year. Noreen Dowd said she did not know why Walsall had not responded and asked that the information be sent to her again. She expected that Walsall CCG would continue their support. [Confirmed in writing after the meeting.]

Jane updated the meeting on discussions with Peter Spilsbury of CSU Strategy Unit. Peter hoped that some CCGs would reconsider their position in order to support STP implementation. Agreement in principle on a revised structure for the Hosting Charge had been reached based on an accommodation charge, CSU costs of 5% on initial income expected plus required return to NHS England of 5% (which should be on actual income but, given the need to build the WMQRS funding base, may be possible to negotiate on only income above base funding for 2017/18).

Income assumptions were as follows:

Brought forward	£60,000
CCGs	£150,000
Commissioned reviews	£65,000
<b>Total</b>	<b>£275,000</b>

With Sandwell and West Birmingham and Walsall supporting WMQRS, this left an estimated £28,750 to be covered by actively marketing the 'retainer' approach to other CCGs, linked with the benefits of accessing WMQRS Quality Standards, good practice sharing and other events.

Jane considered that expenditure for 2017/18 could be brought down to £286,000 by reducing non-pay costs, reduced hosting costs and a reduction of one of the two Lead Administrator posts. The expected programme could be delivered within these resources.

This left a shortfall of £40,000. This level of risk was considered reasonable, with the expectation that funding from additional 'retainers' or commissioned reviews.

The Board agreed:

- a. WMQRS should continue into 2017/18
- b. The hosting cost should be renegotiated with the CSU
- c. Suitable alternative employment should be sought for one of the two Lead Administrators and, if not successful, one post should be made redundant. Any redundancy costs incurred should be taken from the WMQRS redundancy fund.
- d. WMQRS should actively pursue 'retainer' funding from CCGs which are not continuing with their subscription
- e. WMQRS should actively pursue commissioned reviews
- f. WMQRS should develop a different business model, built on 'retainers' plus commissioned reviews, for future years.

**Actions (subject to email ratification):**

- a. **WMQRS to renegotiate hosting cost**
- b. **WMQRS to work with the CSU HR Department to seek suitable alternative employment for one Lead Administrator post and, if not successful, to make one post redundant**
- c. **WMQRS to actively pursue 'retainer' funding from CCGs which are not continuing with their subscription**
- d. **WMQRS to actively pursue commissioned reviews**
- e. **WMQRS to write up new business model and circulate to Board members**

**7. WMQRS Issues and Finance report.**

The Board received the update on issues relating the WMQRS team. The Board discussed the issue of charging for accessing WMQRS Quality Standards which has not yet been implemented. Noreen asked if any assumptions on income from this had been included in the 2017/18 financial projections. The Board agreed that this should be linked with the new business model, rather than being pursued as a separate item. (ie. Income from Quality Standards use is equivalent to the 'retainer' model described above.)

**8. Any Other Business**

There were no other items of business and Simon wished all Board members well for the Christmas season and for the New Year.

## ENCLOSURE 2 ACTIONS & MATTERS ARISING FROM LAST MEETING

Note	Action / Matter Arising	Who	Progress
<b>28<sup>th</sup> September 2016</b>			
12a	Write to STP leads to invite a nomination for the WMQRS Board	WMQRS	Leads for three STPs confirmed.
12b	If required, Simon Hairsnape and Richard Kirby to agree change to Establishment Agreement on behalf of Trusts and CCGs when funding for 2017/18 clearer and STP nominations received.	Simon Hairsnape and Richard Kirby	Awaiting confirmation of nominations.
<b>15<sup>th</sup> December 2016</b>			
4	Email distribution list about the critically ill children Overview Report	WMQRS	Done
6a	Renegotiate hosting cost with CSU	WMQRS	Done
6b	Work with the CSU HR Department to seek suitable alternative employment for one Lead Administrator post and, if not successful, to make one post redundant	WMQRS	Alternative plan implemented (see Enclosure 7)
6c	Actively pursue 'retainer' funding from CCGs which are not continuing with their subscription	WMQRS	Completed (see Enclosure 6)
6d	Actively pursue commissioned reviews	WMQRS	In progress
6e	Write up new business model and circulate to Board members	WMQRS	Done
<b>9<sup>th</sup> February 2017</b>			
1	WMQRS to publicise revised 2017/18 offer	WMQRS	Done

## ENCLOSURE 3 REVIEW PROGRAMMES – PROGRESS REPORT

### Purpose of Report:

This report updates the Board on progress with the WMQRS review programmes.

- 1 Table 1 shows the position on the 2016/17 West Midlands work programme as at 22<sup>nd</sup> March 2016 with further detail in Appendix 1. Table 2 shows delivery of the 2016/17 work programme by CCG and STP area. WMQRS will deliver in full for Shropshire and Telford & Wrekin, Herefordshire, Wolverhampton, Walsall, South & Central Birmingham and Solihull. Health economies with significant under delivery due to not being able to agree a work programme or cancelled reviews include North and South Staffordshire, Coventry and Warwickshire, Worcestershire and Sandwell and West Birmingham.

**Table 1 West Midlands 2016 / 17 Work Programme**

Work programme items	Credit	'Pay as you go'
Completed	18	
Agreed	9.5	
Discussed but awaiting confirmation by health economy	17.5	
Deferred or Cancelled by health economy	6.75	1
Credits not yet committed	6.25	
<b>Total Available Credits</b>	<b>58</b>	<b>1</b>

**Table 2 West Midlands Work Programme by CCG & STP area**

Area	Completed	Agreed	Discussed not confirmed	Cancelled / Deferred	Under/over delivery	Total available
North Staffordshire	1	0	2.5	1.5	-0.5	5.5
South Staffordshire	0.5	0	1	2	-2	5.5
East Staffordshire	2	0	0	0	+0.5	1.5
<b>Staffordshire</b>	<b>3.5</b>	<b>0</b>	<b>3.5</b>	<b>3.5</b>	<b>-2</b>	<b>12.5</b>
<b>Shropshire &amp; Telford &amp; Wrekin</b>	<b>1.5</b>	<b>4.5</b>	<b>0</b>	<b>0</b>	<b>+0.5</b>	<b>5.5</b>
North Warwickshire	0	0	2	0	0	2
Coventry and Rugby	0	0	5	0	0	5
South Warwickshire	0	0	3	0	0	3
<b>Coventry and Warwickshire</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>10</b>
Worcestershire	2	0	2	3	0	7
Herefordshire	2	0	0	0.25	+0.25	2
<b>Herefordshire &amp; Worcestershire</b>	<b>4</b>	<b>0</b>	<b>2</b>	<b>3.25</b>	<b>+0.25</b>	<b>9</b>
Dudley	1.25	0	2	0	-0.25	3.5
Wolverhampton	1.75	1	0	0	-0.25	3
Walsall	3	0	0	0	0	3
Sandwell & W. Birmingham	1	0	0	0	-5	6
<b>Black Country</b>	<b>7</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>-5.5</b>	<b>15.5</b>
South & Central Birmingham	1	2	0	0	0	3
Birmingham CrossCity	0	0	0	1	+1	0
Solihull	1	2	0	0	+0.5	2.5
<b>Birmingham &amp; Solihull</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>+1.5</b>	<b>5.5</b>

- 2 The West Midlands Children and Young People’s Mental Health and Wellbeing Network and WMQRS will be hosting a Good Practice sharing Event on 31<sup>st</sup> March to share examples of good practice identified during the visits undertaken from 2014 – 2016.

**Commissioned reviews:**

- 3 Work on planning the two remaining visits to the Isle of Man has started. WMQRS will be visiting the Isle of Man on 27<sup>th</sup> April to plan the remainder of the programme.
- 4 Commissioned work for Walsall Healthcare NHS Trust has now been completed and a final, combined report issued.
- 5 Discussions are taking place in relation to:
- a. Support to the United Kingdom Haemophilia Centre Doctors’ Organisation (UKHCDO) for a peer review programme of services for people with haemophilia.
  - b. Support to the design of a programme of peer review visits to Canada’s services for people with haemoglobin disorders.
  - c. A further programme of reviews of UK services for people with haemoglobin disorders.

**Standards Development**

- 6 Eye care pathway and falls and fragility fractures pathway Standards have been published since the December meeting of the Board. Regional consultation on the updated stroke pathway Standards took place in December and January and comments are now being considered. Work has started on updating the dementia, ambulance and theatres quality Standards. In general, work on updating the Quality Standards is still behind schedule.

**7 WMQRS Standards**

Table 3 gives the current position on achievement of WMQRS standards. Some intermediate deadlines have not been achieved due to limited WMQRS capacity but all final reports have been issued on time apart from London renal reviews, where Trusts agreed that reports would be considered together, and the chronic pain strategic review, to which usual deadlines do not really apply. Additional detail is available in Appendix 2.

**Table 3 Achievement of WMQRS Standards**

Standard (IR= Immediate Risk)	% Met		
	At March 15	At Apr 16	At Apr 17
IR letter issued within 5 working days	88	80	100
IR response received	100	100	100
IR response received within 10 working days	71	50	75
IR response addresses issue/s raised	50	60	63
All IR actions completed within 15 working days or less	50	50	50
Draft report to reviewers within 10 working days	92	74	67
Draft report to health economy within 20 working days	91	65	93
Report considered by Steering Group (or QAG) within 35 days of receiving HE comments	100	83	75
Final report issued within 85 working days	100	80	80

<b>Financial, Human Resources &amp; Legal Implications:</b>	This report has financial implications for WMQRS budgets in 2017/18.
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<b>Equality impact:</b>	WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.
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**Recommendations:** The Board is recommended to note the contents of this report.

Appendix 1: 2016/17 WMQRS West Midlands Reviews – Position at 22<sup>nd</sup> March 2017

Key:	x	Topic considered but not being pursued		Discussed but awaiting confirmation (NB. Provider & commissioner agreement needed for topic to go ahead)					Agreed		Completed		Deferred by health economy		Cancelled by health economy					
	Credits committed to date	Available Credits	Alcohol Use Problems	Care Homes	[Children & Young People] Critically Ill children	[Children & Young People] Emotional well-being	Community beds	End of Life pathway	Enhanced Community Offers	Frail elderly incl safeguard/falls	Imaging	Learning Disabilities [Mental Health] other	Obesity	Personal Health Budgets/ Tech Enabled Care	Quality & Safety	Support for STP	Stroke	Theatres	User involvement	Urgent Care
North Staffordshire	5	5.5			1.5	1	x	1			x		1.5							
South Staffordshire	3.5	5.5			2		x	1		0.5	x									
East Staffordshire	2	1.5					x		2		x									
Shropshire & Telford & Wrekin	6	5.5									1.5						1.5	2	1	
North Warwickshire	2	2													2					x
Coventry and Rugby	5	5													5					
South Warwickshire	3	3													3					
Worcestershire	7	7							1	1					1	2		2		
Herefordshire	2.25	2			1				1											0.25
Dudley	3.25	3.5	2									x								1.25
Wolverhampton	2.75	3								1								1	0.5	0.25
Walsall	3	3							2	x				1						
Sandwell & W. Birmingham	1	6													1					
South & Central Birmingham	3	3					2											1		
Birmingham CrossCity	0	0			1															
Solihull	3	2.5		2							1									
	51.75	58.00																		



**Appendix 2: 2016/17 Compliance with WMQRS Standards**

Visit Key: CIC: Critically Ill Children COPLwF: Care of Older People Living with Frailty ED: Emergency Department IP: Inpatient LD: Learning Disabilities FNOF: Fractured Neck of Femur	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
Chronic Pain strategic review	14,15 Apr 16	N/A	N/A	N/A	N/A	N/A	N/A	Y	N/A	N	Final report issued thirteen days late due to WMQRS capacity
Walsall - COPLwF	19-Apr-16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Isle of Man	26,27, 28 Apr 16	Y	Y	Y	N	N	N	Y	Y	Y	Draft report sent to reviewers five days late due to WMQRS capacity. Completion of Immediate risk actions delayed due to the need for further discussion with reviewers. Initial response addresses all risks apart from for the second young person being cared for on the adult older people ward.
Barts - Renal	11,12 May 16	Y	Y	Y	Y	Y	Y	Y	N	N	Late consideration by Steering Group due to agreement to consider all reports together. This delayed issue of final report by 24 days.
Royal Free - Renal	19,20 May 16	N/A	N/A	N/A	N/A	N/A	Y	Y	N	N	Late consideration by Steering Group due to agreement to consider all reports together. This delayed issue of final report by 18 days.
MidlandEye - Governance	17-May-16	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent two days late to reviewers due to WMQRS capacity
Kings - Renal	24,25 May 16	Y	Y	Y	Y	Y	Y	Y	N	N	Late consideration by Steering Group due to agreement to consider all reports together. This delayed issue of final report by 15 days.
GSTT - Renal	14,15 Jun 16	N/A	N/A	N/A	N/A	N/A	Y	N	N	N	Draft report sent one day late to Trust due to WMQRS capacity. Late consideration by Steering Group due to agreement to consider all reports together. This delayed issue of final report by one day.
Imperial - Renal	21,22 Jun 16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Hereford - CIC	28-Jun-16	Y	Y	N	Y	N	Y	Y	N	Y	Completion of immediate risk actions delayed due to awaiting further details from Trust and WMQRS capacity. Late consideration by Steering Group due to difficulties arranging meeting date.
Epsom & St Helier - Renal	29,30 Jun 16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Stafford - CIC	06-Jul-16	Y	Y	Y	N	N	Y	Y	Y	Y	Immediate risk actions completed two days late due to WMQRS capacity. No comments received from Trust.
St Georges - Renal	6,7 July 16	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent one day late to reviewers due to WMQRS capacity
Walsall - Sepsis (formative)	12-Jul-16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Dudley - Urgent Care	16-Sep-16	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent two days late to reviewers due to WMQRS capacity
Birmingham Women's - Theatres	20-Sep-16	Y	Y	Y	Y	Y	N	Y	Y	Y	Draft report sent two days late to reviewers due to WMQRS capacity
Wolverhampton - Imaging	21-Sep-16	Y	Y	Y	Y	Y	N	Y	Y	Y	Draft report sent one day late to reviewers due to WMQRS capacity
Walsall - ED, Maternity & Paediatrics	13-Oct-16	N/A	N/A	N/A	N/A	N/A	N	N	Y	Y	Draft report sent six days late to reviewers and one day late to Trust due to WMQRS capacity

Visit Key: CIC: Critically Ill Children COPLWF: Care of Older People Living with Frailty ED: Emergency Department IP: Inpatient LD: Learning Disabilities FNOF: Fractured Neck of Femur	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
Walsall - IP Care & Medicines Management	18-Oct-16	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Y	
Burton - CoPLWF	31 Oct, 1 Nov 16	N/A	N/A	N/A	N/A	N/A	N	Y	Y	Y	Draft report sent one day late to reviewers due to WMQRS capacity.
Shropshire - LD (formative)	09-Nov-16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Solihull - Suicide	22-Nov-16	N/A	N/A	N/A	N/A	N/A	Y	N/A	N/A	Y	
Walsall - FNOF & Urology	01-Dec-16	N/A	N/A	N/A	N/A	N/A	Y	N/A	N/A	Y	
North Staffordshire - CAMHS	08-Dec-16	N/A	N/A	N/A	N/A	N/A	Y	Y	Y	Y	
Walsall - Respiratory	15-Dec-16	N/A	N/A	N/A	N/A	N/A	N/A	Y	N/A	Y	
SATH - Stroke	02-Feb-17	Y	Y	N	N	N	Y	Y	N/A	N/A	IR response received five days late from Trust. Response did not fully address the immediate risk and further advice sought from reviewers.
RJAH - Theatres & Anaesthetics	7 Feb.17	N/A	N/A	N/A	N/A	N/A	Y	Y	N/A	N/A	
Solihull - Care Homes	8,9 Feb 17	N/A	N/A	N/A	N/A	N/A	Y	Y	N/A	N/A	
Wolverhampton - Theatres & Anaesthetics	16 Feb.17	N/A	N/A	N/A	N/A	N/A	Y	Y	N/A	N/A	
SATH - Theatres & Anaesthetics	15,16 Mar17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
				% standards met							
	Yes	8	8	6	5	4	18	25	15	20	
	No	0	0	2	3	4	9	2	5	5	
	Total Yes + No	8	8	8	8	8	27	27	20	25	
	% Yes	100	100	75	63	50	67	93	75	80	

## ENCLOSURE 4 OVERVIEW REPORTS

**Purpose of Report:**

Three Overview Reports are presented for the Board's approval.

**Key Points:**

- 1 Since 2013/14 WMQRS work programmes have become more disparate with each health economy choosing the topics on which it wanted WMQRS to work. Some review topics have covered several health economies and so the production of benchmarking information is feasible. The Board previously agreed that Overview Reports should be produced as soon as possible.
- 2 Three Overview Reports have been prepared:
  - a. Transfer from Acute Hospital Care and Intermediate Care
  - b. Towards Emotional Health and Well-Being for Children and Young People (CAMHS)
  - c. Theatres and Anaesthetic Services
- 3 Each report starts with an Executive Summary which gives the key points of the report.
- 4 Overview Reports will be circulated throughout the West Midlands when approved.

**Financial, Human Resources and Legal Implications:**

No implications have been identified.

**Equality impact:**

WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.

**Recommendations:**

The Board is recommended to approve the three Overview Reports.

## ENCLOSURE 5 CANCELLATION POLICY

### Purpose of Report:

This report advises the Board on the frequency of cancellations of WMQRS work and recommends the implementation of a cancellation policy. Board comments and guidance are invited.

### Key Points:

- 1 In 2016/17, 6.75 reviews and workshops have been cancelled and one deferred. Reviews have often been cancelled at short notice and after WMQRS time has been spent on review planning, review team booking (and in some cases, reviewer training), provision of guidance and support, and preparation of review materials. In some cases, Individuals will have re-arranged their commitments to be part of the review teams.
- 2 It is proposed that cancellation charges are introduced from two weeks after the scoping and planning meeting at which the review is agreed. The following cancellation charges are introduced:

From two weeks after agreement up to one month before workshop / visit date	1/3 of cost
Less than one month before workshop / visit date	2/3 of cost

- 3 The cost will be calculated as a 'credit' or financial value depending on the funding arrangement with WMQRS.
- 4 If agreed by the Board, a section on cancellation charges will be added into the WMQRS *Principles and Approach*.

### Financial, Human Resources & Legal Implications:

This report has financial implications for WMQRS budgets in 2017/18.

### Equality impact:

WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.

**Recommendations:** The Board is recommended to agree the introduction of cancellation charges.

## ENCLOSURE 6 UPDATE ON 2017/18 WMQRS FUNDING

### Purpose of Report:

This paper updates the Board on a) the responses to the initial request to CCGs for confirmation of WMQRS funding for 2017/18 and beyond and b) the revised offer to non-supporting CCGs.

### Key Points:

- 1 An initial request for funding was issued to CCGs in June 2016. Seven CCGs responded with agreement to 'credit-based' funding (four for 2017/18 only). In March 2017, WMQRS issued a revised offer of a subscription with access to lower price reviews. All CCGs have now responded (Table 1).

**Table 1 2017/18 West Midlands CCG funding for WMQRS**

<b>Coventry and Warwickshire</b>	<b>2017/18 Funding</b>
NHS Coventry and Rugby CCG	None
NHS South Warwickshire CCG	None
NHS Warwickshire North CCG	None
<b>Birmingham</b>	
NHS Birmingham CrossCity CCG	Subscription
NHS Birmingham South and Central CCG	Subscription
NHS Solihull CCG	Credits
<b>Black Country</b>	
NHS Dudley CCG	Subscription
NHS Walsall CCG	Credits
NHS Sandwell and West Birmingham CCG	Credits
NHS Wolverhampton CCG	Credits
<b>Herefordshire &amp; Worcestershire</b>	
NHS Herefordshire CCG	Credits
NHS Redditch and Bromsgrove CCG	Credits
NHS South Worcestershire CCG	Credits
NHS Wyre Forest CCG	Credits
<b>Shropshire</b>	
NHS Shropshire CCG	Subscription
NHS Telford and Wrekin CCG	Subscription
<b>Staffordshire</b>	
NHS Cannock Chase CCG	None
NHS East Staffordshire CCG	None
NHS North Staffordshire CCG	None
NHS South East Staffs and Seisdon Peninsular CCG	None
NHS Stafford and Surrounds CCG	None
NHS Stoke-on-Trent CCG	None

- 2 This will result in reduced income for WMQRS for 2017/18. This situation also means that WMQRS will need to implement arrangements for restricting access to WMQRS Standards and self-assessments for STP areas that have not agreed a subscription. WMQRS has not yet communicated this situation to provider Trusts in Coventry and Warwickshire and Staffordshire.
- 3 The latest projected 2017/18 income and expenditure position is shown in table 2. Unconfirmed income represents the previous assumptions of five commissioned reviews from subscribing areas and four commissioned reviews from other areas. The shortfall in CCG income means that the commissioned income target will need to increase by £25,000 (equivalent to five more reviews from subscribing areas)

**Table 2 2017/18 Income**

<b>Income Source</b>	<b>£</b>
Brought forward	79,000
CCGs income (confirmed)	135,194
Commissioned reviews (confirmed)	65,000
QS income (confirmed)	5,000
Unconfirmed income (previous assumption)	55,000
<b>Total Income</b>	<b>339,194</b>
<b>INCOME - EXPENDITURE</b>	<b>-24,895</b>

- 4 This commissioned income target is achievable with additional effort to marketing WMQRS services, but carries some risk.
- 5 Capacity projections show a shortfall of £63,000 equivalent in the capacity available to deliver the work, including nine unconfirmed reviews. The capacity estimate for revision of Quality Standards is over £180,000. Capacity is therefore manageable by deferring some of the Standards work which could be linked to a reduction in consultancy expenditure. An additional five reviews would result in additional pressure on the Standards revision process.

<b>Financial, Human Resources and Legal Implications:</b>	This report has significant implications for the future of WMQRS.
<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 updated position on WMQRS funding for 2017/18 and agree any further action to be taken.	

## ENCLOSURE 7 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:

- 1 As discussed at the February Board telephone conference, it is proposed that WMQRS now advertises for:
  - a. Director Band 9 0.6wte
  - b. Quality Manager / Assistant Director Band 8b / 8c 1.0 wte

Board representatives will be invited to be part of the interview process for these posts. It is hoped that interviews for the Quality Manager / Assistant Director will take place as soon as possible.

- 2 The WMQRS Business Manager has taken voluntary redundancy. Hours of work for the two (part-time) administrators have been reduced by agreement. WMQRS therefore has 1.08 wte administrative support, including some handover time.
- 3 These changes will give significantly more senior capacity for WMQRS work and will reduce the service's administrative overhead. Capacity planning assumptions include that 50% of the Director's time will be 'non-product related' as recommended by the 2015 customer review.
- 4 The WMQRS Annual Review 2016/17 and Plan for 2017/18 will be brought to the July Board meeting for approval.
- 5 Table 1 summarises the WMQRS 2016/17 spend to date and the forecast end of year position. The projected £79,000 underspend is reflected in the 2017/18 funding assumptions.
- 6 Table 2 shows progress with the WMQRS Annual Review and Plan 2016/17 actions. As previously reported, WMQRS will not achieve the expected progress on revision and updating Quality Standards. Some other areas of the 2016/17 will also not be achieved due to shortage of WMQRS capacity in 2016/17. The 2017/18 Annual Review and Plan will be more closely linked to the available staff capacity.

<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 1: 2016/17 Financial position

<b>INCOME</b>					
Source	Annual Budget £	Income Year to Date <sup>1</sup> £	Variance Year to Date £	Estimated end year position	Notes
Carry forward from 2014/15	57,091	57,091	0	57,091	
<b>CCGs</b>	<b>305,976</b>	<b>305,976</b>	<b>0</b>	<b>305,976</b>	
<b>Commissioned reviews:</b>					
Isle of Man	31,733	31,733	0	31,733	
Haemoglobin Disorders	4,438	4,438	0	4,438	
Renal	22,750	22,750	0	22,750	
Walsall	20,500	20,500	0	20,500	
<b>Commissioned review subtotal</b>	<b>79,421</b>	<b>79,421</b>	<b>0</b>	<b>79,421</b>	
<b>SUBTOTAL</b>	<b>442,488</b>	<b>442,488</b>	<b>-</b>	<b>442,488</b>	Redundancy fund excluded from total
Income from reclaimed reviewer costs incurred 15/16	2,700	2,700	0	2,700	For costs incurred in 15/16 which could not be reclaimed until 16/17
<b>TOTAL</b>	<b>445,188</b>	<b>445,188</b>	<b>0</b>	<b>445,188</b>	

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

<b>EXPENDITURE</b>						
Allocated funds	Annual Budget £	Budget Year to Date £	Spend Year to Date £ <sup>2</sup>	Variance Year to Date £	Estimated end year position	Notes
Pay	298,867	274,672	216,605	58,067	235,634	Underspend due to Band 8a vacancy and Band 4 maternity leave
Hosting costs	72,000	72,000	43,639	28,361	71,794	
Non-Pay	74,321	74,321	54,231	20,090	58,823	
<b>SUBTOTAL</b>	<b>445,188</b>	<b>420,993</b>	<b>314,475</b>	<b>106,518</b>	<b>366,251</b>	
					<b>78,937</b>	

<sup>2</sup>Spend at month 11

Commissioned reviews: income & expenditure on reviewers <sup>3</sup>	Annual Budget £	Budget Year to Date £	Income Year to Date <sup>3</sup> £	Notes
Income	0	0	7094	
Expenditure	0	0	7094	

<sup>3</sup> Expenditure incurred on reviewer costs relating to commissioned reviews is recovered



**Table 2 WMQRS Annual Review and Plan 2016/17 Actions – Progress Report**

ACTION	PROGRESS March 2017
<b>General and WMQRS Board</b>	
<p>1 Pursue discussions with CCGs about WMQRS funding for 2017/18 and beyond.</p> <p>2 Continue work to agree and deliver core West Midlands programme. Improve 'credit' planning through more careful planning of each health economy's work programme.</p> <p>3 Work with Midlands and Lancashire CSU Strategy Unit on building links with STP areas, including for agreeing work programmes for some STP areas.</p> <p>4 Develop improved links with WMQRS Leads in CCGs and Trusts, especially through review meetings when WMQRS is on site.</p> <p>5 Develop and implement a programme of work to improve service user and carer involvement across all aspects of WMQRS work, including appropriate involvement of young people</p>	<p>1 In progress.</p> <p>2 Work programmes were not agreed for Coventry and Warwickshire, Staffordshire and Sandwell and West Birmingham. Programmes were agreed for other areas although Worcestershire had a high rate of cancellations.</p> <p>3 Some discussions have taken place.</p> <p>4 Not achieved due to limited WMQRS capacity and changes of personnel in CCGs and Trusts</p> <p>5 Not yet achieved in 2016/17. Will be carried forward to 2017/18 Annual Review and Plan.</p>
<b>Quality Standards</b>	
<p>6 Implement the Quality Standards development and updating plan for 2016/17 (Appendix 1).</p> <p>7 Develop and implement a feedback mechanism for Quality Standards (content, format and usage).</p> <p>8 When agreed by the WMQRS Board, implement the charging policy for use of WMQRS Quality Standards outside the West Midlands and market the availability of WMQRS Quality Standards.</p> <p>9 Take advantages of opportunities to publicise WMQRS Quality Standards and their use, including offering local training.</p>	<p>6 This plan is behind schedule and will not be completed in 2016/17.</p> <p>7 A mechanism has been agreed and will be implemented over the next few weeks.</p> <p>8 Policy agreed. Website changes made. Will be implemented from 1st April 2017.</p> <p>9 As much as possible done within capacity available</p>
<b>Reviewer Recruitment</b>	
<p>10 Identify a new venue for training from September 2016.</p> <p>11 Complete planned work on introducing video clips to the WMQRS website and to reviewer training.</p>	<p>10 Done</p> <p>11 Done</p>
<b>Review Preparation</b>	
<p>12 Improve the documentation available:</p> <ul style="list-style-type: none"> <li>a. Revise and update the WMQRS 'Preparing for Review' document, including making it shorter and simpler. Ask Trust staff who are involved in organising reviews to comment on the draft document.</li> <li>b. Implement a 'preparing for review' section of the WMQRS website with all materials available to download easily</li> <li>c. Include the preparation checklist in the notes of scoping meetings</li> </ul> <p>13 Continue to offer new WMQRS leads the opportunity to take part in a review visit</p> <p>14 Increase the amount of face to face and telephone support to organisations preparing for review</p>	<p>12 Not yet done. Will be carried forward to the 2017/18 Annual Review and Plan</p> <p>13 Ongoing</p> <p>14 Done</p>

ACTION	PROGRESS March 2017
<b>Review Visits</b>	No specific actions
<b>Reports (including handling of immediate risks)</b>	No specific actions
<b>Evaluation</b>	
15 Better ongoing monitoring of issuing & return of health economy & product evaluations	15 Done
16 More rigorous follow up of requests for health economy and product evaluations, including follow up during meetings with WMQRS lead contacts (see below).	16 Done
17 Review of all WMQRS evaluation forms	17 Not yet started. Will be carried forward to the 2017/18 Annual Review and Plan
<b>WMQRS Team</b>	
18 Complete transfer to Midlands and Lancashire CSU.	18 Done
19 Refresh and re-introduce work planning and capacity management system.	19 Done
20 Review 'credit' charging structure with the aim of increasing the proportion of non-product-related time for senior WMQRS staff.	20 Done for 2017/18
21 Implement improved systems for contacts management.	21 Not yet done. Will be carried forward to the 2017/18 Annual Review and Plan
22 Introduce standardised WMQRS Word templates.	22 Done
23 Implement more rigorous performance management of WMQRS administrative processes.	23 Done as far as possible. Will be kept under review.
24 Identify and implement programme of work to improve WMQRS 'customer service'.	24 Not yet done. Will be carried forward to the 2017/18 Annual Review and Plan
25 Further develop the use of WMQRS Associates in order to supplement WMQRS senior capacity.	25 Done
26 Review WMQRS team responsibilities in order to: <ul style="list-style-type: none"> <li>a. Align WMQRS Standards development and updating with similar work undertaken by Midlands &amp; Lancashire CSU</li> <li>b. Release additional time to support organisations preparing for review and for booking reviewers</li> <li>c. Provide additional senior capacity for networking and engaging with WMQRS</li> </ul>	26 Restructuring agreed and partially implemented. Recruitment to additional senior post will take place in April.

**Appendix 1 Quality Standards with Action Required in 2016/17**

Quality Standards	No. topics	Latest V/D	Published	Revision due	Current status	QS Work plan
Acquired Brain Injury (Care of Adults with ...)	4	1.1	2014.07	2017.07	Final	Y
CAMHS: See: Towards Emotional Health and Well-Being for Children and Young People						
Critically Ill & Critically Injured Children (Care of...)	12	5.1	2015.12	2020.12	Final	N/A
Children and Young People's Palliative Care	2	1.1	2012.11	2017.12	Final	Y
Chronic Pain (Care of People with...)	3	1.3	2014.08	2016.12	Past review date	Y
Clinical and Quality Governance	9	1.2	2015.10	2018.10	Final	N/A
Critical Care Services	3	3	2013.11	2018.11	Final	N/A
Dementia Services	4	1.3	2011.06	2015.12	Past review date	Y
Enhanced Primary Care Services	2	1.2	2014.09	2018.07	Final	N/A
Eye Care Pathway	7	1	2016.12	2019.12	Final	N/A
Falls and Fragility Fractures Pathway	4	1	2016.12	2019.12	Final	N/A
Generic Patient Pathway	3	1.2	2014.10	2017.07	Final	Y
Gynaecology Patient Pathway	3	1	2016.11	2019.11	Final	N/A
Haemoglobin Disorders (Health Services for People with ...)	3	2.3	2014.07	2017.06	Final	Y
Imaging Services	2	1.2	2013.12	2016.11	Past review date	Y
Learning Disabilities (Health Services for People with....)	3	1.3	2010.12	2015.12	Past review date	Y
Long-Term Conditions (Care of People with...)	9	1.2	2012.08	2016.12	Past review date	Y
Long-Term Ventilation for Children and Young People [Services providing..]	3	3.1	2015.04	2018.04	Final	N/A
Mental Health Services	5	1.3	2011.02	2015.12	Past review date	Y
Musculo-Skeletal Patient Pathway	3	1	2016.11	2019.11	Final	N/A
Older People Living with Frailty: Assessment and Coordination of Care (Care of ..)	7	2.1	2015.11	2018.11	Final	N/A
Out-Patient Procedures		1.1	2015.10	2018.10	Final	N/A
Palliative Care: See: Children and Young People's Palliative Care						
Problem Alcohol Use Pathway	4	1.1	2015.11	2018.11	Final	N/A
Progressive & Advanced Chronic Kidney Disease (Services for People with..)	6	2.2	2012.04	2016.12	Past review date	Y
Renal: See: Progressive & Advanced Chronic Kidney Disease (Services for People with..)						
Stroke & Transient Ischaemic Attack Patient Pathway	7	2 D9	2016.11	2017.03	Draft for comment	Y
Theatre and Anaesthetic Services	1	1.6	2013.11	2017.03	Final	Y
Towards Children and Young People's Emotional Health and Well-Being	3	1.1	2014.10	2016.10	Past review date	Y
Transfer from Acute Hospital Care & Intermediate Care	4	1.5	2016.03	2018.09	Final	N/A
Transition between Services	1	1.1	2015.07	2017.07	Final	N/A
Urgent & Emergency Care	8	3	2016.11	2019.11	Final	N/A
Vascular Disease (Services for People with ...)	2	1.5	2010.04	2015.06	Past review date	Y