### Meeting
Health Overview and Scrutiny Committee

### Date
9 May 2013

### Subject
NHS Quality Accounts 2012/13

### Report of
Scrutiny Office

### Summary
This report presents the Quality Accounts from NHS health service providers. The attached documents set out the quality of service provided by each provider. The committee is asked to scrutinise the Quality Accounts and to provide a statement to be included in the Account of each health service provider.

### Officer Contributors
Andrew Charlwood, Overview and Scrutiny Manager

### Status (public or exempt)
Public

### Wards Affected
All

### Reason for urgency / exemption from call-in
N/A

### Function of
Health Overview and Scrutiny Committee

### Enclosures
- Appendix 1 – North London Hospice Quality Account 2012/13 (*To Follow*)
- Appendix 2 – Royal Free Hospital NHS Foundation Trust Quality Accounts 2012/13
- Appendix 3 – Community London Healthcare NHS Trust Quality Account 2012/13
- Appendix 4 – Barnet and Chase Farm Hospitals NHS Trust Quality Account 2012/13 (*To Follow*)
- Appendix 5 – Barnet, Enfield and Haringey Mental Health NHS Trust Quality Account 2012/13 (*To Follow*)
- Appendix 6 – Barnet Health OSC 2012 Quality Accounts Submissions

### Contact for Further Information:
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1. **RECOMMENDATIONS**

1.1 That, noting the requirement of NHS health service providers to produce quality accounts for 2012/13, the Committee provide a statement for inclusion in each of the Quality Accounts of the Health providers as set out in Appendices 1 to 5.

2. **RELEVANT PREVIOUS DECISIONS**

2.1 Health Overview and Scrutiny Committee, 19 May 2011, Agenda Item 7 – Quality Accounts – the Committee received and made formal comments on the Quality Accounts of health partners.

2.2 Health Overview and Scrutiny Committee, 16 May 2012, Agenda Item 8 – Quality Accounts – the Committee received and made formal comments on the Quality Accounts of health partners.

3. **CORPORATE PRIORITIES AND POLICY CONSIDERATIONS**

3.1 The Overview and Scrutiny Committees must ensure that the work of Scrutiny is reflective of the Council’s priorities.

3.2 The three priority outcomes set out in the 2013 – 2016 Corporate Plan are: –

- Promote responsible growth, development and success across the borough;
- Support families and individuals that need it – promoting independence, learning and well-being; and
- Improve the satisfaction of residents and businesses with the London Borough of Barnet as a place to live, work and study.

3.3 The work of the Barnet Health Overview and Scrutiny Committee supports the delivery of the following outcomes identified in the Corporate Plan:

- To sustain a strong partnership with the local NHS, so that families and individuals can maintain and improve their physical and mental health; and
- To promote a healthy, active, independent and informed over 55 population in the borough to encourage and support our residents to age well.

4. **RISK MANAGEMENT ISSUES**

4.1 None in the context of this report.

5. **EQUALITIES AND DIVERSITY ISSUES**

5.1 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the role of the Committee is to perform the Overview and Scrutiny role in relation to:

- The Council's leadership role in relation to diversity and inclusiveness; and
The fulfilment of the Council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.

5.2 Equality and diversity issues are a mandatory consideration in decision-making in the council pursuant to the Equality Act 2010. This means the council and all other organisations acting on its behalf must have due regard to the equality duties when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

6.1 None in the context of this report.

7. LEGAL ISSUES

7.1 Section 244 of the National Health Service Act 2006 and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013/218; Part 4 Health Scrutiny by Local Authorities provides for the establishment of Health Overview and Scrutiny Committees by local authorities.

7.2 Health and Social Care Act 2012, Section 12 – introduces section 2B to the NHS Act 2006 which imposes a new target duty on the local authority to take such steps as it considers appropriate for improving the health of people in its area.

8. CONSTITUTIONAL POWERS (Relevant section from the Constitution, Key/Non-Key Decision)

8.1 The scope of the Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Council’s Constitution.

8.2 The Terms of Reference of the Scrutiny Committees are included in the Overview and Scrutiny Procedure Rules (Part 4 of the Council’s Constitution). The Health Overview and Scrutiny Committee has within its terms of reference responsibility:

i) To perform the overview and scrutiny role in relation to health issues which impact upon the residents of the London Borough of Barnet and the functions services and activities of the National Health Service (NHS) and NHS bodies located within the London Borough of Barnet and in other areas.
ii) To make reports and recommendations to the Executive and/or other relevant authorities on health issues which affect or may affect the borough and its residents.

iii) To invite executive officers and other relevant personnel of the Barnet Primary Care Trust, Barnet Clinical Commissioning Group, Barnet Health and Wellbeing Board and/or other health bodies to attend meetings of the Overview and Scrutiny Committee as appropriate.

9. BACKGROUND INFORMATION

9.1 Quality Accounts are annual reports to the public from providers of NHS healthcare services about the quality of services they provide, mirroring providers’ publication of their financial accounts. All providers of NHS healthcare services in England, whether they are NHS bodies, private or third sector organisations must publish an annual Quality Account. Providers are exempt from reporting on any primary care or NHS Continuing Health care services.

9.2 The primary purpose of Quality Accounts is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer, and encourage them to engage in the wider processes of continuous quality improvement. Providers are asked to consider three aspects of quality – patient experience, safety and clinical effectiveness. The visible product of this process – the Quality Account – is a document aimed at a local, public readership. This both reinforces transparency and helps persuade stakeholders that the organisation is committed to quality and improvement. Quality Accounts therefore go above and beyond regulatory requirements which focus on essential standards.

9.3 If designed well, the Accounts should assure commissioners, patients and the public that healthcare providers are regularly scrutinising each and every one of their services, concentrating on those that need the most attention.

9.4 Quality Accounts will be published on the NHS Choices website and providers will also have a duty to:

- Display a notice at their premises with information on how to obtain the latest Quality Account; and
- Provide hard copies of the latest Quality Account to those who request one.

9.5 The public, patients and others with an interest in their local provider will use a Quality Account to understand:

- Where an organisation is doing well and where improvements in service quality are required;
- What an organisation’s priorities for improvement are for the coming year; and
- How an organisation has involved service users, staff and others with an interest in the organisation to help them evaluate the quality of their services and determine their priorities for improvement.
Commissioners and healthcare regulators, such as the Care Quality Commission, will use Quality Accounts to provide useful local information about how a provider is engaged in quality and tackles the need for improvement.

Scrutiny committees have been given the opportunity to comment on a provider’s Quality Account before it is published as it is recognised that they have an existing role in the scrutiny of local health services, including the ongoing operation of and planning of services.

The powers of overview and scrutiny in relation to the NHS enable committees to review any matter relating to the planning, provision and operation of health services in the area of its local authority. Each local NHS body has a duty to consult the local overview and scrutiny committee(s) on any proposals it may have under consideration for any substantial development of the health service in the area of the committees’ local authorities, or on any proposal to make any substantial variation in the provision of such service(s).

10. LIST OF BACKGROUND PAPERS

10.1 None.