





Shropshire Clinical Commissioning Group

### Health and Wellbeing Board 21<sup>st</sup> April 2016

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## QUALITY PREMIUM AS PART OF THE BCF (ITEM 6)

#### 1. Introduction

This report identifies the 3 Local Quality Premium metrics the CCG has submitted to NHSE for inclusion within the overall Quality Premium award accessible to the CCG for the 2016/17 financial year.

#### 2. Recommendation

The Committee is asked to approve and support the chosen metrics.

#### REPORT

#### 3. Purpose of Report

The report identifies the 3 local metrics the CCG has submitted to NHSE as part of the QP award

#### 4. Background

Each year, NHSE enables CCGs to achieve additional funding based on performance against a number of measures indicating improvement in the quality achieved by health services. Most of the award is based on performance against nationally set targets and criteria measuring improvement in health status or achievement of specific policy objectives.

In addition to these, each CCG may select a number of local measures from a defined list for inclusion in the award calculation.

The maximum award to a CCG is £5 per head of population. This is offset by any failures against key operating requirements and NHS Constitution standards such as A&E Waiting times or Waiting Times for Elective treatment.

Together the 3 local measures account for 30% of the potential award.

#### 5. Engagement

The three chosen local measures are:

- A reduction in the rate of unplanned hospital admissions for people with chronic ambulatory care sensitive conditions;
- An improvement in the percentage of diabetes patients receiving the recognised 8 care processes;
- An improvement in the percentage of patients receiving IAPTcommencing a course of treatment.

These measures have been chosen on the basis of a combination of:

'fit' with the CCG's commissioning intentions;

Evidence that the CCG compares unfavourably with the 10 other most similar CCGs;

The measure is capable of being impacted by CCG based activity within the year;

There is reasonable data availability to measure progress.

#### 6. Risk Assessment and Opportunities Appraisal (including Equalities, Finance, Rural Issues)

The chosen measures are consistent with the CCG's commissioning intentions and provide for a reduction in inequality. They cover a spread of action across secondary care, primary care and mental health services.

# List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Cabinet Member (Portfolio Holder) Cllr Karen Calder

#### Local Member

#### Appendices

Appendix A: QP Measures