
HEALTH AND WELLBEING BOARD

Date: 9 July 2015

Report Title: Quality Premium Indicators 2015/16

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a) SUMMARY

Under the National Health Service Act 2006 (as amended by the Health and Social Act 2012), NHS England has the power to make payments to CCGs to reflect the quality of services that they commission, the associated health outcomes and reductions in inequalities. This is known as a Quality Premium.

The potential value of the Quality Premium for Bromley CCG is £1.6m payable, non-recurrently, in Q3 2016/17.

b) REASON FOR REPORT GOING TO HEALTH & WELLBEING BOARD

The CCG should, in conjunction with the Health and Wellbeing Board, agree the proposed quality premium indicators from the CCG outcomes indicator set with NHS England (NHSE). Indicators must be sufficiently challenging to be agreed by NHSE.

c) SPECIFIC ACTION REQUIRED BY HEALTH & WELLBEING BOARD AND ITS CONSTITUENT PARTNER ORGANISATIONS

The board is asked to:

1. Note the analysis of potential quality indicators which has been undertaken by the CCG with support from public health.
2. Note that the indicators are recommended for approval by the Health and Wellbeing Board by the CCG's Clinical Executive.
3. Agree the two local measures proposed (see summary table section 18)
4. Agree the proposed weightings for the two composite indicators;
 - i. Urgent and Emergency Care
 - ii. Mental Health

Health & Wellbeing Strategy

1. Related priority: Diabetes, Hypertension, Obesity, Anxiety & Depression, Children with Complex Needs and Disabilities, Children with Mental & Emotional Health Problems, Dementia,

Financial N/A

1. Cost of proposal:
 2. Ongoing costs:
 3. Total savings (if applicable):
 4. Budget host organisation:
 5. Source of funding:
 6. Beneficiary/beneficiaries of any savings:
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Supporting Public Health Outcome Indicator(s)

The Quality Premium indicators are complementary to the Public Health Outcomes Framework with particular overlap around years of life lost and dementia.

d) COMMENTARY

National guidance on 2015/16 Quality Premium Indicators was issued to CCGs on 27th April 2015. NHS England (London) required an agreed set of indicators to be proposed in the May submission of the operating plan.

The CCG Clinical Executive agreed a proposed set of indicators following analysis of the CCG outcomes indicator set by the performance team and with input from LBB Public Health. The analysis was effectively a feasibility study of which outcomes had measurable and timely datasets and which linked in with the strategic outcomes in the CCG's Operating Plan and the Bromley Health and Wellbeing Strategy.

e) FINANCIAL IMPLICATIONS

NHS Regulations set out that any quality premium payments should be used in ways that improve quality of care or health outcomes and/or reduce health inequalities.

f) LEGAL IMPLICATIONS

Insert text here

g) IMPLICATIONS FOR OTHER GOVERNANCE ARRANGEMENTS, BOARDS AND PARTNERSHIP ARRANGEMENTS, INCLUDING ANY POLICY AND FINANCIAL CHANGES, REQUIRED TO PROGRESS THE ITEM

Quality Premium indicators need to be agreed by NHSE (London) with the CCG. Health and Wellbeing Board engagement is part of this process.

h) COMMENT FROM THE DIRECTOR OF AUTHOR ORGANISATION

The Quality Premium is a payment to CCGs based on improvements in the quality of services commissioned and associated improvements in health outcomes and reduction in health inequalities. NHS guidance requires that Health and Wellbeing Boards are involved in the process of identifying key indicators for the year. Guidance was issued on 27th April to the CCG with an Operating Plan submission required in May. Although public health and the CCG Clinical Executive have been involved in consideration of the possible indicators, formal ratification of the indicators has not been possible until now.

Non-Applicable Sections:	[List non-applicable sections here]
Background Documents: (Access via Contact Officer)	Quality Premium 2015/16: Guidance for CCGs http://www.england.nhs.uk/wp-content/uploads/2015/04/qual-prem-guid-1516.pdf