

Commission for Health Improvement

Fareham & Gosport PCT Presentation

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Review manager

Date 18 March 2004

CHI☆☆

CHI's aim

To bring about demonstrable improvement
in the quality of NHS patient care
throughout England and Wales

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CHI's principles

- patient centred
- independent, rigorous & fair
- developmental
- evidence based
- open and accessible
- apply the same expectations to ourselves

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What is clinical governance?

The framework through which NHS
organisations and their staff are
accountable for the quality of patient care

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A CHI clinical governance review

- aims to test whether clinical governance arrangements are effective
- identifies best practice and areas for improvement
- interested in systems and processes needed to monitor and improve services and whether they are working and making a difference to patient care

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A CHI clinical governance review

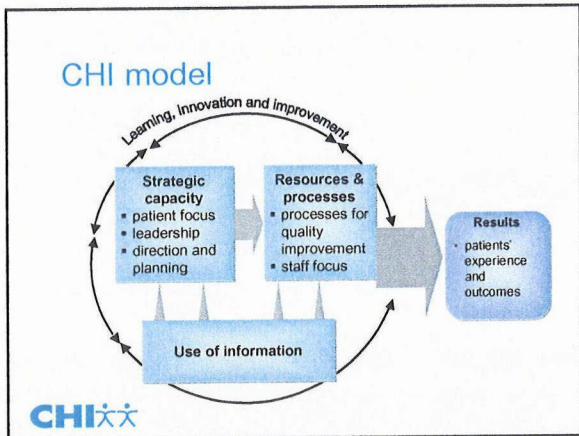
Looks at the PCT as a whole

- patients and carers
- service level (community health and primary care*)
- corporate level
- PCT functions eg commissioning, health improvement, prescribing and medicines management

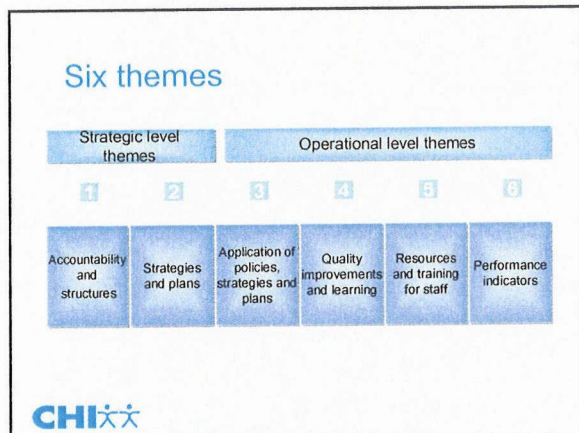
Does not

- assess individual performance or named practices
- examine every service area

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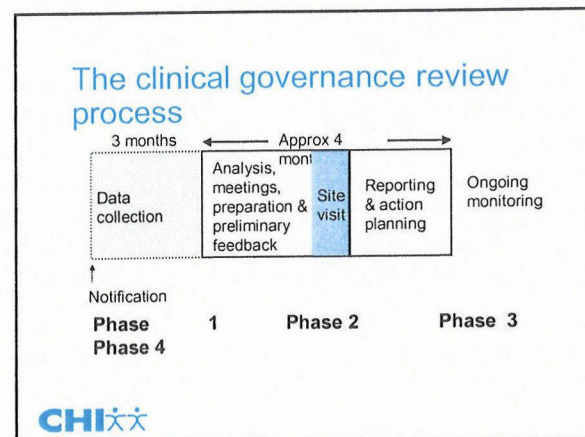


- ### Components
- clinical effectiveness
 - clinical audit
 - risk management
 - training and education
 - staffing
 - public involvement
 - use of information
 - patient experience
 - strategic capacity
- Assessed on i-iv scale
- Narrative assessment
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- ### Components of clinical governance
- Strategic capacity includes
- leadership
 - accountabilities & structures
 - direction and planning
 - health economy partnerships
 - patient and public partnerships
 - performance review
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- ### Components of clinical governance
- Dimensions of patients' experience include
- clinical effectiveness and outcomes of care
 - access to services
 - organisation of care
 - humanity of care
 - environment
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Phase 1

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- staff survey
- data analysis
- practice questionnaires
- support/advice

PCT

- appoint coordinator
- data & documents
- PCT questionnaire
- community hospital questionnaire*
- patient initiative

* if applicable

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The practice questionnaires

One questionnaire to each general practice, dental practice, optometry practice and community pharmacy in the PCT with questions on

- clinical governance activity
- PCT support for clinical governance

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Patient initiative

- Aimed at patients who have been referred to community services by their GP
- Letter inviting patients to stakeholder meetings sent to selected patients by their GP on behalf of CHI
- 200 letters sent to patients per PCT

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Phase 2

Week 1

- handover to review manager
- initial meeting at the trust

Week 4

- stakeholder events (3-4 days)

Week 6

- briefing (1 day at the trust)

Week 7

- submit final timetable (Monday of week 7)

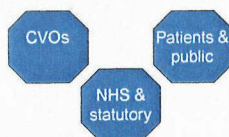
Week 8

- site visit

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Key aspects of phase 2

Stakeholder events



Site visit

- range of service settings
- observation and interviews
- focus on systems & processes

Review team

Multidisciplinary team of reviewers seconded from other parts of NHS. Every team also has a lay reviewer

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Analysis of Information

- Analysis by external contractor-Newchurch
- Confidentiality agreement
- Same process as internal analysts
- Team of analysts with a range of skills and expertise
- Newchurch have completed 15 PCT reviews

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What do the analysts produce

- An evidence base for:
 - Strategic capacity
 - Each of the seven components of clinical governance

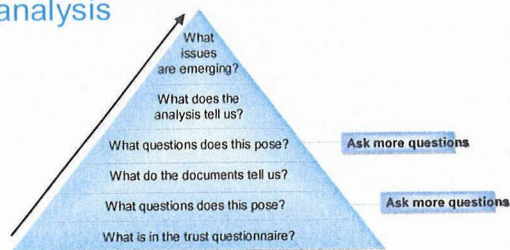


What is this used for?

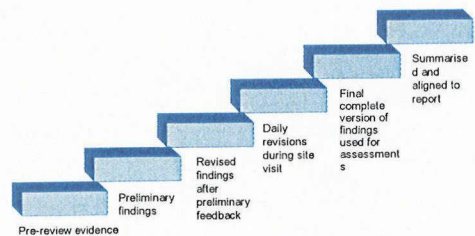
- Forms the basis of the briefing day
- A part of the body of evidence used in interview



Key questions asked during analysis



How the evidence base develops



Confidence table

Degree of confidence	Amount of evidence and sources	Reporting
Very confident	A number of sources: data; documents; interviews; observation	✓ Report ✓ Evidence base
Confident	Several items of information from the same source type (e.g. interviews) from different areas or organisations	✓ Report ✓ Evidence base
Some confidence	One interview or observation confirmed by an independent source Several items of information from the same source type (e.g. interviews) from the same area or organisation	? Report ✓ Evidence base
Little confidence	One interview or observation only	× Report ? Evidence base

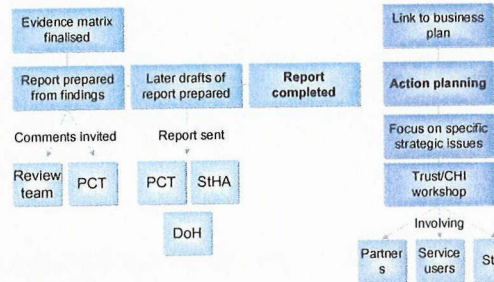


Assessment scale

- i. Little or no progress at strategic and planning levels or at operational level
- ii.
 - a) Worthwhile progress and development at strategic and planning levels but not at operational level or
 - b) Worthwhile progress and development at operational level but not at strategic and planning level or
 - c) Worthwhile progress and development at strategic and planning level and at operational level but not across the whole organisation
- iii. Good strategic grasp and substantial implementation. Alignment across the strategic and planning levels and the operational level of the organisation
- iv. Excellence – coordinated activity and development across the organisation and with partner organisations that is



Final report and action planning



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Role of CHI communications

- publicise review, local meetings and findings
 - explain the nature of a CHI review
 - encourage local people/staff to comment
 - promote balanced coverage of report findings
- edit and proof final report before publication
- discuss CHI press activities with trust
 - share press releases in advance
 - discuss and agree publication date for report
- provide advice/support on internal and media communications to trusts if needed

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Contacts at CHI

- | | |
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| <ul style="list-style-type: none"> ▪ Review Manager ▪ Margaret McGlynn <ul style="list-style-type: none"> ▪ 020 7448 9403 ▪ 07855464450 ▪ Analyst ▪ Paul Williamson <ul style="list-style-type: none"> ▪ 020 8783 3300 | <p>Review Coordinator</p> <ul style="list-style-type: none"> ▪ Karen Bartholomew <ul style="list-style-type: none"> ▪ 020 7448 0858 |
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Key dates

- initial meeting – 18 March 2004
- stakeholder meetings – 30 March – 1 April 2004
- preliminary feedback briefing – 15 April 2004
- site visit – 26 – 30 April 2004
- report to trust – 27 May 2004
- action planning & finalise report – June 2004

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Thank you

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