



North and Mid
Hampshire

ICP

Quality Partnership Committee

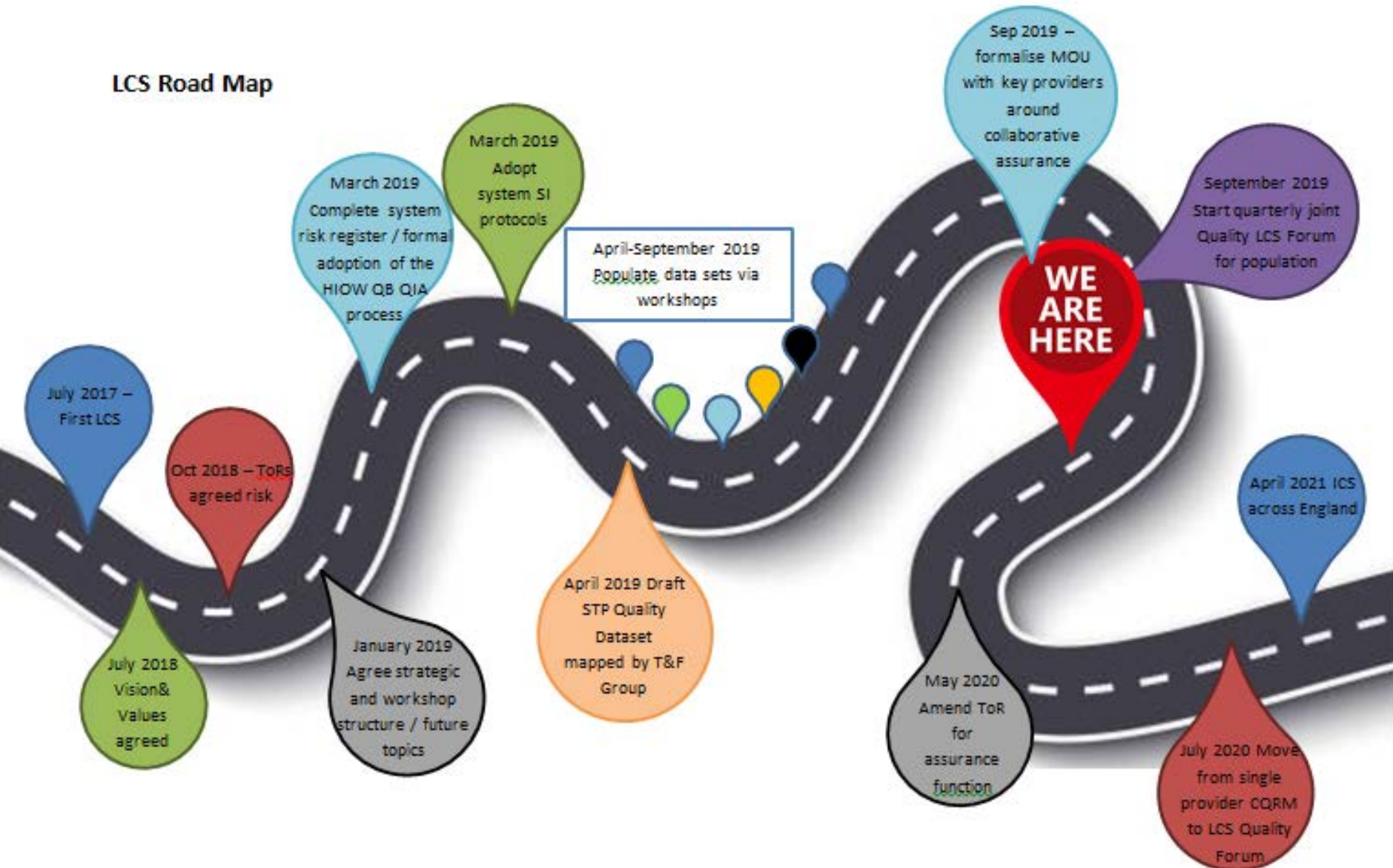
North and Mid Hampshire Integrated Care Partnership (ICP) Quality Partnership Committee





North and Mid Hampshire Integrated Care Partnership

LCS Road Map





North and Mid Hampshire Integrated Care Partnership

Vision

Delivering a high aspiring, self governing care system where patients and staff feel safe, prioritised and informed

Purpose

We will work to bring together all our partners to develop an integrated model of system quality and a shared commitment to a culture of continuous improvement in an environment of openness and honesty, in order to produce an effective, patient-centred and safe self-governing system for the future

Core values




North and Mid Hampshire Quality Partnership Committee

Terms of Reference

Vision

Delivering a high aspiring, self-governing care partnership where patients and staff feel safe, prioritised and informed.

Membership	Standing Agenda	Principles and Expectations
<p>Core Membership</p> <ul style="list-style-type: none">• Hampshire Hospitals NHS Foundation Trust• West and North Hampshire CCGs• Southern Health NHS Foundation Trust• South Central Ambulance Service• Primary Care• Hampshire County Council Social Care• Hampshire County Council Public Health• HealthWatch Hampshire• Patient representative	<ul style="list-style-type: none">✓ Welcome, Attendance, Previous Minutes✓ System Risk Register✓ Items from the ICP or HIOW Quality Board✓ Reports for the Task and Finish Groups✓ Population health Metrics✓ Patient pathway story✓ AOB and Close <hr/> <p>Frequency, Location & Duration</p> <p>Bimonthly Duration: 2 hours</p>	<ul style="list-style-type: none">• Shared vision and accountability• A supportive and willing environment• Focus on what we can achieve• Work in collaboration, removing duplication and breaking down silos• Curious, ambitious and different in what we do• Members have responsibility/accountability for the Quality/safeguarding portfolio, able to influence• Members must be able to take delegated decisions on behalf of their organisation or locality• Members must have access to resource and be able to delegate tasks relating to the quality and safeguarding portfolio to staff (e.g. to contribute resource to task and finish groups)• Minimum attendance of chair, host and 5 members• Deputies attend in case of member's absence• Core members must attend (or deputy) 4 out of the 6 annual meetings• Confidentiality respected at all times• Preparation - papers circulated & read in advance• Start & finish on time• Key points circulated within 10 days of the meeting
Governance	<p>The Committee is a sub-group of the Integrated Care Partnership Board with the ability to form task and finish sub-groups reporting the itself. The Committee members will feed into (as required):</p> <ul style="list-style-type: none">• North Mid ICP Board• HIOW Quality Board• Individual organisations Boards / Committees• NHS Improvement	<p>Inputs</p> <ul style="list-style-type: none">Identify good practiceShare learning and celebrate successAssess opportunity for collaborative workingAssess opportunity for aligned working
	<p>Outputs</p> <ul style="list-style-type: none">System risk registerSharing and LearningNetworking and Peer SupportAligned / collaborative planning and workingPathway designShared governance of integrated services	

System Risk Register

System Risk Register Principles:

1. Integrated Care Partnership (ICP) system quality risks need to affect multiple providers and have a system impact
2. The ICP system risk register should not duplicate risks already on local Clinical Commissioning Group/provider risk registers
3. Additions to the system risk register need approval through the ICP Strategic Quality and Safeguarding Forum.



Ref	Risk title	Risk description (quality impact)	Date opened	Initial risk rating	Current risk rating	Target risk rating	Quality Area
01_2019	Integration	If stakeholders within our system do not develop an integrated model of quality then we may not be ready to become a fully functioning and accountable integrated care system by 2021, which may impede optimisation of patient safety, experience and outcomes across pathways and the reputation of the North and Mid Hampshire Integrated Care Partnership (ICP)	30-Aug-19	4 (L) x 4 (C)= 16 Very high risk	4 (L) x 4 (C)= 16 Very high risk		Effective Safe Patient-centred Timely Efficient Equitable
02_2019	Workforce	If the system is unable to recruit and retain appropriately skilled and competent staff then this may impact the ability of the system to deliver current and new models of high quality care which may result in poor outcomes for patients, reduced resilience and morale in staff and poor workforce retention.	30-Aug-19	4 (L) x 3 (C)= 12 High risk	4 (L) x 3 (C)= 12 High risk	3 (L) x 3 (C)= 9 High risk	Safe Timely Person-centred
03_2019	Long Waits	If the system cannot design, implement and manage effective pathways of care then service users may experience harmful long waits which could result in poor patient outcomes, a negative experience and reputational damage to the system.	30-Aug-19	4 (L) x 3 (C)= 12 High risk	4 (L) x 3 (C)= 12 High risk		Timely Safe
04_2019	Unwarranted Variation	If we do not focus on shared opportunities for improving unwarranted variation in our local care partnership then members of our population may not receive the right care at the right time which could have a negative impact on their health outcomes.	30-Aug-19	4 (L) x 3 (C)= 16 High risk	4 (L) x 3 (C)= 16 High risk	2 (L) x 3 (C)= 6 Moderate	Equitable
05_2019	System Learning	If the North and Mid Hampshire integrated care partnership does not have systems in place to promote and maximise system-wide learning then opportunities to improve the quality of care delivered may not be taken which could result in the delivery of care pathways which are not safe, effective or person-centred.	30-Aug-19	3 (L) x 3 (C)= 9 High risk	3 (L) x 3 (C)= 9 High risk	2 (L) x 3 (C)= 9 Moderate risk	Safe Effective Timely Person-centred

Summary

- ICP has an ambitious but necessary trajectory towards its system assurance functions
- Challenges remain on a common understanding of system risk and ownership
- Standardised system dataset is being developed at the STP level to support ICPs but is delayed
- Challenge going forward is to move at pace whilst meeting everyone's current commitments.



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