



North Staffordshire Clinical Commissioning Group has considered the findings and recommendations made within the Francis Inquiry 2013. We accept the report in its entirety and the recommendations in principle. Our Vision is “**Quality care, best value, better outcomes**”. Our Quality Strategy sets out our plan to embed quality.

North Staffordshire CCG commits to: Build Our Capacity & Capability to Commission High Quality Care.

- ✓ We **have** an established a Quality Committee, with quality and clinical expertise, which dedicates time to detailed scrutiny of information and generates summaries about quality for the Board.
- ✓ We **will** enhance the Quality Committee by including public health, secondary care doctor and patient representatives.
- ✓ We **will** review the quality functions and activities that we perform and/or commission from the Commissioning Support Unit.
- ✓ We **will** build capacity through partnership working and collaboration with other organisations to secure the necessary skills and resources.
- ✓ We **will** proactively collaborate and share information with regulatory and local commissioning bodies of any concerns we have about our providers at the Quality Surveillance Group.
- ✓ We **will** aim to bring the energy and flavour of the subcommittee to the Governing Board so everyone is fully engaged in quality.

North Staffordshire CCG commits to: Listen to Our Patients & Nurture a Patient Centred Culture.

- ✓ We **have** a Patient Congress to seek the views of patients and involve patients in the decision making process.
- ✓ We **have** used and reported on the Friends & Family Test question in 2012/13 and **will** continue to use it.
- ✓ We **will** listen to, seek out and act on patient and carer feedback, ensuring the patient and carer voice is heard and at the heart of our meetings and reports describing their experience of the services we commission.
- ✓ We **will** actively support the development of the Customer Insight Database to capture soft intelligence from clinicians so that this can be considered along with patient feedback to provide a more systematic early warning system to identify any potentially failing service.
- ✓ We **will** use soft intelligence and other forms of patient feedback to drive quality improvements.
- ✓ We **will** review our culture, based on the views of patients and staff and will publish the results.

North Staffordshire CCG commits to: Identify Early Warning Signs & Learning Lessons.

- ✓ We **have** strengthened quality requirements in all NHS contracts to reflect the findings from the Francis Inquiry with more focus on learning from complaints and incidents and **will** continually monitor outcomes.
- ✓ We **have** reported on NHS Safety Thermometer and harm-free care in 2012/13 and **have** reaffirmed our commitment to eliminate avoidable pressure ulcers.
- ✓ We **will** develop an assurance programme of quality visits to ‘go and look’ which are clinically led, influenced by soft intelligence and include talking to patients and staff.
- ✓ We **will** triangulate information we receive with regard to quality from providers and regulators to challenge proportionately.
- ✓ We **will** contribute to national setting of fundamental standards and support NHS England in developing enhanced quality standards.
- ✓ We **will** engage the CCG Board, membership and Patient Congress in developing quality standards/CQUIN for inclusion in future contracts.

North Staffordshire CCG commits to: Provide System Leadership.

- ✓ We **have** regular development days involving the whole CCG as well as Board development days.
- ✓ We **will continue** to listen to our staff and ensure that we take the concerns they raise seriously.
- ✓ We **will continue** to ensure we apply the values of transparency, honesty and candour within the CCG and how we operate.
- ✓ We **will** regularly challenge our NHS providers to demonstrate how they are creating a culture of compassion and incorporating the 6Cs into all clinical care.
- ✓ We **will** scrutinise our NHS provider’s staff surveys and not allow poor results to remain unattended to.
- ✓ We **will** expect our NHS providers to regularly report how they are engaging with their workforce and enabling staff to raise concerns.
- ✓ Our NHS providers **will** be held to account on their contractual duty candour and being open.
- ✓ We **will** work with our Patient Congress and providers to consider how to use CQUINs to reward providers that demonstrate how they empower staff to deliver compassionate care.