



Southampton City  
Clinical Commissioning Group

Are local people getting good quality care?	Assessment for		Nov-13																														
Providers:	UHSFT	Solent	SHFT	SCAS	STC																												
Has local provider been subject to enforcement action by the CQC?	No	No	Yes <sup>1</sup>	No	No																												
Has local provider been flagged as a 'quality compliance risk' by Monitor and/or are requirements in place around breaches of provider licence conditions?	N	N/A	No	No	N/A																												
Has local provider been subject to enforcement action by the NHS TDA based on 'quality' risk?	N/A	No	N/A	N/A	N/A																												
Does feedback from the Friends and Family test (or any other patient feedback) indicate any causes for concern?	No	No	No	No	No																												
Has the provider been identified as a 'negative outlier' on SHMI or HSMR?	No	No	No	No	No																												
Do provider level indicators from the National Quality Dashboard show that:																																	
MRSA cases are above zero	Yes	No	No	No	No																												
the provider has reported more C difficile cases than trajectory	No	No	No	No	No																												
MSA breaches are above zero	Yes	No	No	N/A	No																												
Does the provider currently have any unclosed Serious Untoward Incidents (SUIs)?	Yes	Yes	Yes	Yes	No																												
Has the provider experienced any 'Never Events' during the last quarter?	No	No	No	No	No																												
<b>CCG:</b>																																	
<b>Clinical Governance</b>																																	
Does the CCG have any outstanding conditions of authorisation in place on clinical governance?	No	<table border="1"> <thead> <tr> <th colspan="4">Overall RAG rating by Month</th> </tr> </thead> <tbody> <tr> <td>Apr-13</td> <td>Amber / Green</td> <td>Oct-13</td> <td>Amber / Green</td> </tr> <tr> <td>May-13</td> <td>Amber / Green</td> <td>Nov-13</td> <td>Amber / Green</td> </tr> <tr> <td>Jun-13</td> <td>Amber / Green</td> <td>Dec-13</td> <td></td> </tr> <tr> <td>Jul-13</td> <td>Amber / Green</td> <td>Jan-14</td> <td></td> </tr> <tr> <td>Aug-13</td> <td>Amber / Green</td> <td>Feb-14</td> <td></td> </tr> <tr> <td>Sep-13</td> <td>Amber / Green</td> <td>Mar-14</td> <td></td> </tr> </tbody> </table>				Overall RAG rating by Month				Apr-13	Amber / Green	Oct-13	Amber / Green	May-13	Amber / Green	Nov-13	Amber / Green	Jun-13	Amber / Green	Dec-13		Jul-13	Amber / Green	Jan-14		Aug-13	Amber / Green	Feb-14		Sep-13	Amber / Green	Mar-14	
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Has the CCG self-assessed and identified any risks associated with the following:																																	
Concerns around quality issues being discussed regularly by the CCG governing body	No																																
Concerns around the arrangements in place to proactively identify early warnings of failing services	No																																
Concerns around the arrangements in place to deal with and learn from serious untoward incidents and never events	No																																
Concerns around being an active participant in its Quality Surveillance Group	No																																
<b>EPRR</b>																																	
If there was an emergency event in the last quarter, has the CCG self-assessed and identified any areas of concern on the arrangements in	No																																
<b>Winterbourne View</b>																																	
Has the CCG self-assessed and identified any risk to progress against its Winterbourne View action plan	No																																
<b>Key to RAG rating</b>																																	
Green - all 'NO' responses																																	
Amber/Green – One or more 'YES' responses but action plan in place that successfully mitigates patient risk																																	
Amber-Red – One or more 'YES' responses and no action plan in place / plan does not successfully mitigate patient risk																																	
Red – Enforcement action is being undertaken by the CQC, Monitor or TDA and the CCG is not engaged in proportionate action planning to address patient risk																																	
1. SHFT is subject to enforcement action by the CQC in relation to services in Oxfordshire. This is also subject to a NHS Risk Summit held on the 8th January 2014. (please note as this is November 2013 template it does not include the issues identified by the CQC in December 2013 at Antelope House in Southampton)																																	