



Wirral

Clinical Commissioning Group

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Our Ref: ID920

Re: Freedom of Information Request

Thank you for your request for information made under the Freedom of Information Act 2000 which was received into this office on 24th August 2017.

You Asked for:

Please find attached a Freedom of Information request on behalf of the All-Party Parliamentary Thrombosis Group. I would be grateful if you could please provide a response within the timeframe specified by the Freedom of Information Act 2000.

Our Response:

Please find attached the completed Freedom of Information request.

We hope this information is useful, however if you require any further information please do not hesitate to contact a member of the Corporate Affairs Team (contact details at the top of this letter)

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ALL-PARTY PARLIAMENTARY THROMBOSIS GROUP

FREEDOM OF INFORMATION REQUEST

FOI request into commissioning services that deliver high quality VTE prevention

Name: Corporate Affairs Team

Position: Corporate Affairs Team

Clinical Commissioning Group: Wirral Clinical Commissioning Group

Email: foirequests.nhswirralccg@nhs.net

Please note that additional paper or electronic copies are available on request from the All-Party Parliamentary Thrombosis Group secretariat

Please return your completed response to the All-Party Parliamentary Thrombosis Group secretariat:

James Le Grice
All-Party Parliamentary Thrombosis Group Secretariat
c/o Four Public Affairs
20 St Thomas Street
London
SE1 9BF
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Tel: 020 7054 9967

Under the Freedom of Information Act 2000, the All-Party Parliamentary Thrombosis Group writes to request the following information:



ALL-PARTY PARLIAMENTARY THROMBOSIS GROUP

Venous thromboembolism (VTE) is a collective term referring to deep vein thrombosis (DVT) and pulmonary embolism (PE). VTE is defined by the following ICD-10 codes: I80.0-I80.3, I80.8-I80.9, I82.9, O22.2 – O22.3, O87.0 – O87.1, I26.0, and I26.9.

QUESTION 1 – QUALITY ASSURANCE

VTE prevention has been recognised as a clinical priority for the NHS by the National Quality Board and the NHS Leadership Team. It has been identified as the most important patient safety practice in our hospitals, and VTE-specific indicators feature in both the NHS Outcomes Framework and the CCG Outcomes Indicator Set.

The delivery of high quality VTE prevention should automatically underpin the majority of admissions due to medical illness or surgery as part of the providers' duty to deliver care in a safe environment. Commissioners should ensure that this duty is clearly mandated through local service contracts.

- a) **Has your CCG clearly mandated in its providers' service contracts that failure to comply with best practice in VTE prevention will result in consequences imposed by your CCG?** (*Best practice in VTE Prevention as defined by NICE Quality Standard 3: VTE Prevention, NICE Clinical Guideline 92, the VTE risk assessment National Quality Requirement, and NHS Standard Contract Service Condition 22*)
(Tick a box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

QUESTION 2 – VTE Risk Assessment and Root Cause Analysis

The VTE risk assessment National Quality Requirement stipulates that Trusts must risk assess at least 95 per cent of all in patient service users. Until 2016/17, failure to comply with this requirement resulted in a nationally set commissioning sanction.

- a) **Has your CCG agreed a local penalty for failure to comply with the VTE risk assessment National Quality Requirement?** (*Tick a box*)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

If yes to the above, please describe the local penalty that has been agreed:

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- b) Between 1 April 2016 and 31 March 2017, has your CCG imposed a penalty on providers that fail to comply with the VTE risk assessment National Quality Requirement? *(Tick a box)*

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

If 'Yes', please specify which providers your CCG has imposed a penalty on on between 1 April 2016 and 31 March 2017 and, if the penalty was a financial sanction, please indicate the value of the sanctions imposed:

Name of provider	Value of sanctions
Wirral University Teaching Hospital NHS Foundation Trust	0

Furthermore, according to Service Condition 22 of the NHS Standard Contract 2016/17, the provider must:

“Perform Root Cause Analysis of all confirmed cases of pulmonary embolism and deep vein thrombosis acquired by Service Users while in hospital (both arising during a current hospital stay and where there is a history of hospital admission within the last 3 months, but not in respect of Service Users admitted to hospital with a confirmed venous thromboembolism but no history of an admission to hospital within the previous 3 months)...”

The provider must report the results of those Root Cause Analyses to the co-ordinating commissioner on a monthly basis.



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- c) How do you quality assure that your providers are complying with the national obligation to perform Root Cause Analyses of all confirmed cases of hospital associated thrombosis (HAT)?
(Please tick as many boxes that apply)

Method	Place an X as applicable
Request real-time submission of Root Cause Analyses on completion	<input checked="" type="checkbox"/>
Request a monthly report of Root Cause Analyses	<input type="checkbox"/>
Request a quarterly report of Root Cause Analyses	<input type="checkbox"/>
Request an annual report of Root Cause Analyses	<input type="checkbox"/>
Request a face-to-face meeting to discuss Root Cause Analyses	<input type="checkbox"/>
Request made by other means not listed. (Please specify)	<input type="checkbox"/>
This information has yet to be requested	<input type="checkbox"/>

- d) Between 1 April 2016 and 31 March 2017, has your CCG imposed any sanctions, verbal or written warnings on providers for failure to comply with the national obligation to perform Root Cause Analyses of all confirmed cases of HAT? (Please tick one box)

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>



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If 'Yes', please specify which providers your CCG has imposed sanctions, verbal or written warnings on between 1 April 2016 and 31 March 2017:

Name of provider	Sanction, verbal or written warning?

QUESTION 3 – VTE IN YOUR CCG AREA

- a) Does your CCG have an estimate of the cost of VTE to the NHS locally (including cost of treatment, hospital bed days, sanctions and any litigation costs) for 2016/17? *(Please tick one box)*

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

If 'Yes', please specify the estimated cost:

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ALL-PARTY PARLIAMENTARY THROMBOSIS GROUP

The local CQUIN menu for 2016/17 included a 'Prevention of avoidable hospital admissions originating from care homes' goal within the 'Integration' priority area.

- b) In 2016/17, did your CCG agree a 'Prevention of avoidable hospital admissions originating from care homes' local CQUIN goal? *(Please tick one box)*

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

If 'Yes', does the goal make specific reference to avoidable hospital admissions from VTE?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

- c) Does your CCG provide guidance for nursing care home staff on prevention and management of VTE? *(Please tick one box)*

Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>