Executive Summary

The quality account is an annual report for the public from the healthcare provider about the quality of services that it delivers. It is intended to assure commissioners, patients and the public that the provider is regularly scrutinising its services and concentrating on those that need the most attention.

This is the second quality account published by Cornwall Out of Hours, and refers to the year 2014.

The report outlines how well we are doing against national and local targets, where we need to improve the quality of services, and priorities for the coming year.

Cornwall Out of Hours service seeks to improve GP out of hours services to meet the increasingly complex needs of the population of Cornwall.

Our vision is to deliver a service that treats every patient as an individual, providing them with the highest quality clinical treatment, and treating them with dignity, respect and genuine care. We will do this by:

- Improving timely access to GP Out Of Hours’ services across Cornwall
- Embedding the concept of putting the patient first across Cornwall Out of Hours
- Collaborative working with other partners in the local health system.

Along with a wide range of service improvements, good progress has been made on all priorities set for 2014.

- Clinical Effectiveness – robust use of Datix incident reporting and learning outcomes
- Introduction of a GP Continuous Quality Improvement process, including the audit of recorded consultations, to ensure an overview of clinical encounters, providing quality management and supportive feedback when required.

- Patient Experience – Improvements have been made to effectiveness, quality, safety and patients’ experience during their use of the OOH service.
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CORNWALL OOH QUALITY ACCOUNT 2014 2015
Introduction by Stephanie Gray-Roberts, Interim Contract Director

Welcome to the second Quality Account for the Cornwall Out of Hours service. Throughout this reporting period (1 January 2014 – 31 December 2014) we have continued our focus on quality improvement, whilst adapting our service to the rapidly changing healthcare environment.

We are committed to delivering excellent care and to ensuring our patients are at the heart of everything we do at Cornwall Out of Hours. We are passionate about listening to our patients and their carers and doing all that is possible to enhance our care provision.

There are four main principles which define our quality strategy:

1. Clinical effectiveness – of the treatments and interventions we offer
2. Safety – of those receiving, visiting, or working in our services
3. Patient experience – of those being treated or supported by our service
4. Accessibility – of the services we provide to our patients

I am proud to present the Quality Account for the Cornwall Out of Hours service for 2014.

Serco has been responsible for delivering Out of Hours care in Cornwall since 2006 and we remain focused on ensuring the highest levels of healthcare provision. We are responsible for assessing, advising and clinically reviewing, as needed, all the patients in Cornwall (and all our seasonal visitors) who require help between 1830 hours and 0800 hours every day, and 24 hours a day on weekends and bank holidays. We do this utilising over 300 staff who work in a variety of locations including our contact centre, 11 emergency clinics located around Cornwall, and a fleet of seven vehicles including two 4 x 4s. We employ GPs, Emergency Care Practitioners, Nurse Practitioners, Nurse Advisors, Health Advisors, receptionists, drivers, and management and administrative staff. We are proud and privileged to be continuing to deliver excellent care to the people of Cornwall.

In 2012 we experienced some operational pressures on introducing a new system of clinical triage. We have learnt many important lessons since that time and we have worked hard to make our operating standards and governance structures robust and effective. I am pleased to report that these are now functioning well
and this was validated by the Care Quality Commission when they visited unannounced in July 2013.

We continue to work as an integrated health partner within the Cornwall health environment and we are passionate about delivering the highest standards of care in a sustainable manner in collaboration with other aspects of the health economy.

We value the feedback from our patients and their carers and for the first time this year we have introduced the Friends and Family Test as part of our quarterly patient survey.

We are required by law to produce an annual Quality Account, enabling us to be transparent and accountable for the quality of service we provide. The Quality Account provides us with an excellent opportunity to share with you the importance of quality, by highlighting our achievements over the past year and setting the priorities for the coming year in areas where improvements need to be made. We hope that once you have read this report you will see that Serco is committed to ensuring services continue to be delivered to the highest standard of care achievable.

On behalf of the Leadership Team it gives me great pleasure to introduce the Quality Account for 2014. I can confirm that to the best of my knowledge and belief the information contained in the report sets out a true and accurate representation of our performance and achievements in 2014 and demonstrates our commitment to quality improvement.

Stephanie Gray-Roberts
Interim Contract Director
Cornwall Out of Hours
What are Quality Accounts and why are they important?

At Cornwall Out of Hours we are committed to improving the quality of services we provide to our patients. Our Quality Account is our annual report of:

- How well we are doing against targets we are set by our Commissioners (NHS Kernow) and those we set ourselves as an organization
- Where we need to improve the quality of services we provide
- Our priorities for the coming year

Tell us what you think

We would like to hear your views on our Quality Account. Please contact Stephanie Gray-Roberts on 01872 222400 or at Stephanie.Gray-Roberts@Serco.com

Need this document in a different format?

The Quality Account is available in large print and other languages on request. Please contact Stephanie Gray-Roberts on 01872 222400 or at Stephanie.Gray-Roberts@Serco.com

Want to know more?

For more information about our Quality Account, or to find out more about our services, please contact Stephanie Gray-Roberts, Interim Contract Director, on 01872 222400, or by email at Stephanie.Gray-Roberts@Serco.com
Introduction to Clinical Services within Cornwall Out of Hours

Cornwall Out of Hours has provided the out of hours care to patients in Cornwall since April 2006 and serves an estimated population of 530,000 which can increase by 100,000 during the summer months. At the start of November 2014, the call centre operation was transferred to the NHS111 service, in accordance with government policy. Following this Cornwall Out of Hours continue to provide enhanced triage, emergency clinic appointments and home visits.

The services we provide are:

- From January to November 2014, a dedicated call centre operating when GP surgeries are closed, taking calls from the public and our partners in the local health community, and using the NHS Pathways system. This is supported by an administration and clinical team working in hours.

- Offering clinician advice and when necessary, making a clinic appointment, arranging a home visit, referring to ED, Minor Injuries Units or other community services when appropriate, or calling an ambulance, depending on the severity of the clinical condition.

- Running 11 clinics and up to 9 cars across the county with GPs, Nurse Practitioners and Emergency Care Practitioners providing clinical assessment and care.

- Provision of a weekday Admissions Service in conjunction with the Acute GP Service at Royal Cornwall Hospital Treliske.
Location Of Serco Out Of Hours Bases
Our Delivery Strategy

Cornwall Out of Hours seeks to provide a responsive, safe and high quality GP out of hours service for the people of Cornwall, ensuring that their privacy, dignity and individuality are treated with respect.

Through improved organisation and by employing additional clinicians we have the capacity to provide a timely and effective response to patients requiring out of hours services. By putting patient safety first and using the NHS Pathways system we will ensure our services are tailored to individual needs and we will strive continually to improve patient experiences and outcomes. All our staff will be empowered to provide the right care, in the right place, at the right time in partnership with our colleagues in the wider health sector.

Our commitments to patients are to:

1) Provide an effective and accessible OOH service across Cornwall;
   - Ensuring service rotas are filled with relevant and appropriate staff at all times
   - Working closely with our colleagues, including the NHS 111 service, to provide a comprehensive service offering which is clearly communicated to the public
   - Working cleverly to use resources (cars and clinics) to provide a responsive, efficient and caring process

2) Provide a responsive and safe service for the people of Cornwall;
   - Building on existing clinical audit, and introducing the GP Continuous Quality Improvement audit, to assess and improve clinical services
   - Acting on incident reporting in a timely manner and change practice where necessary
   - Ensuring clinical practice follows national and local clinical guidelines
   - Working with the future provider of out of hours services in Cornwall to ensure a smooth and safe transition in May 2015

3) Increase patient engagement by:
   - Conducting quarterly customer surveys and acting on the feedback collected
   - Working with external stakeholders to take decisions on the care provided by OOH and how it can be improved
   - Publishing transparently how we are performing and also the outcomes of any formal evaluations undertaken on our services (CQC Reports)
The National Quality Requirements set by the Department of Health for Cornwall Out of Hours

1. Providers must report regularly to PCTs on their compliance with the Quality Requirements.

- Cornwall Out of Hours reports to NHS Kernow each month at meetings of the Technical Working Group and the Performance Management Group.

2. Providers must send details of all out of hours consultations (including appropriate clinical information) to the practice where the patient is registered by 8.00am the next working day.

- We have Automatic Post Event Messaging in place and also fax the details of consultations to local GP surgeries if necessary.

3. Providers must have systems in place to support and encourage the regular exchange of up to date and comprehensive information (including, where appropriate, an anticipatory care plan) between all those who may be providing care to patients with predefined needs (including, for example, patients with terminal illness).

- Cornwall Out of Hours has a dedicated team of administrative staff who receive, update and monitor information from GP surgeries during the in-hours period, and this task is handed over to Shift Managers at the start of each out of hours period.

4. Providers must regularly audit a random sample of patient contacts and appropriate action will be taken on the results of those audits.

- Cornwall Out of Hours has a Continuous Quality Improvement team who audit a random sample of calls made by Nurse Advisors and Health Advisors each month. A 1% audit of all clinical contacts is also performed every six months, and the results are shared with NHS Kernow.

5. Providers must regularly audit a random sample of patients’ experiences of the service and appropriate action must be taken on the results of those audits.

- Each quarter, a week is chosen by NHS Kernow and 400 surveys are sent to patients who have used our service that week. During 2014, satisfaction rates were 100% in the first quarter, 96.5% in the second quarter, 96.6 in the third quarter, and 90.8% in the final quarter.

6. Providers must operate a complaints procedure that is consistent with the principles of the NHS complaints procedure. They will report anonymous details of each complaint, and the manner in which it has been dealt with, to the contracting CCG.

- Cornwall Out of Hours adheres to the 2009 NHS complaints policy. Anonymised complaints, with trends and learning outcomes, are reported to and discussed monthly with NHS Kernow. Quarterly summaries and a yearly audit are also provided. To date Cornwall Out of Hours
has never had a complaint escalated to the Ombudsman.

7. Providers must demonstrate their ability to match their capacity to meet predictable fluctuations in demand to their contract service, especially at periods of peak demand, such as Saturday and Sunday mornings, and the third day of a Bank Holiday weekend.

- A daily Dashboard is created and shared with NHS Kernow and the wider Whole Service Resilience Network.

8. Initial telephone call:
   - No more than 0.1% of calls engaged
   - No more than 10% of calls abandoned
   - All calls must be answered within 60 seconds of the end of the introductory message which should normally be no more than 30 seconds long.

- No calls received an engaged tone during 2014.
- During 2014 the average percentage of abandoned calls fell to 0.6% (from 2.9% in 2013).
- The percentage of calls answered within 60 seconds was 95.0%.

9. Providers must have a robust system for identifying all immediate life threatening conditions, and, once identified, those calls must be passed to the ambulance service within three minutes.

- The NHS Pathways system is used to identify such conditions and all staff are aware of the importance of contacting ambulance control immediately. A Clinical Floor Walker or other clinician provides guidance on all calls where a Health Advisor has reached a 999 disposition. Any cases where it is identified that this has taken longer than three minutes are audited and discussed with NHS Kernow at the monthly performance meeting.

Start definitive clinical assessment for urgent calls within 20 minutes of the call being answered by a person.

- NHS Pathways identifies such calls and Cornwall Out of Hours employs a Clinical Floor Walker on all shifts who is able to monitor the progress of such calls and intervene as required.

Start definitive clinical assessment for all other calls within 60 minutes of the call being answered by a person.

- NHS Pathways provides this definitive clinical assessment.

10. Providers must ensure that patients are treated by the clinician best equipped to meet their needs (especially at periods of peak demand such as Saturday mornings), in the most appropriate location. Where it is clinically appropriate, patients must be able to have a face to face consultation with a GP, including where necessary, at the patient’s place of residence.

- Across the county, Cornwall Out of Hours runs 11 Emergency Clinics and has up
to 9 cars standing by to take clinicians out on home visits.

11. 95% of face to face consultations must be completed:
   Emergency: within one hour
   Urgent: within two hours
   Routine: within six hours
   • During 2014, the percentage of emergency consultations completed within one hour rose from 91.4% in the second half of 2013, to 95.9%, an improvement of 4.4%.
   • Urgent consultations completed within two hours were 93.5%.
   • Routine consultations completed within six hours were 97.6%.

12. Patients unable to communicate effectively in English will be provided with an interpretation service within 15 minutes of initial contact. Providers must also make appropriate provision for patients with impaired hearing or impaired sight.
   • Language Line is available to staff via the Shift Manager
   • TypeTalk is available for patients with impaired hearing
   • All clinics comply with disability access regulations

**SERCO’S GOVERNING PRINCIPLES**

There are four governing principles which are the behaviours expected throughout the organisation. We must all live by the governing principles in our dealings with colleagues, patients, suppliers, partners, shareholders and communities. The governing principles are:

**Foster an entrepreneurial culture**

We are passionate about building innovative and successful Serco businesses. We succeed by encouraging and generating new ideas. We trust our people to deliver. We embrace change and, by taking measured risks, encourage creative thinking.

**Enable our people to excel**

Our success comes from our commitment and energy to go the extra mile. We are responsible to each other and can expect support when we need it most. We expect our people to achieve more by recognizing and harnessing the power of individuals. We value people for their knowledge and ideas and potential to contribute.

**Deliver our promises**

We do what we say we will do to meet expectations. We only promise what we can deliver. If we make mistakes we put them right. We are clear about what we need to achieve and we expect to make a fair profit.

**Build trust and respect**

We build respect by operating in a safe, socially responsible, consistent and honest manner. We never compromise on safety and we always operate in an ethical and responsible manner. We listen. In doing so, we treat others as we would wish to be treated ourselves and challenge when we see something is wrong. We integrate with our communities.
PART 2A  LOOKING FORWARD: OUR PRIORITIES FOR QUALITY IMPROVEMENT TO MAY 2015

Cornwall Out of Hours captures information throughout the year about the quality of the services it provides. Through our Quality Assurance Framework we regularly monitor, assess and evaluate our services. As well as the routine monitoring of clinical audit, quality measurement and staff feedback, we seek the views of patients and carers, information that we consider to be extremely important when considering future delivery of service and quality improvement.

Engaging with Patients and Patient Representatives

Cornwall Out of Hours is a member of the Patients Association, and has an excellent working relationship with SEAP, the independent complaints advocacy service. During 2014 we held monthly meetings with a representative from Healthwatch working group with the. Our Business Change Manager had good working relationships with the Patient Advice and Liaison Service (PALS) and with local Complaints Managers, and gave presentations to local groups such as the WRVS about the our work. She also attended our Emergency Clinics and took the opportunity to talk to patients there. A representative from Healthwatch is present at all our contract performance meetings.

Through these meetings and engagement events Cornwall Out of Hours has been able to share its vision and proposals, along with using the feedback to inform future developments.

In the time until transitioning to Cornwall’s new provider, Cornwall Out of Hours will continue to meet with the appropriate local organisations, to discuss patient feedback, review findings and together consider recommendations, priorities and improvements for the future.

These sessions and initiatives help us to cross-check what patients and their representatives are saying with other sources of feedback such as external patient surveys, what NHS Kernow tell us and through analysis of trends in complaints and incidents. From all this information our quality development plans for 2015 are formed.

In 2015, until the end of the contract, Cornwall Out of Hours will continue the development of the communication engagement processes with all stakeholders, in order to ensure a safe and effective transition to the new provider.
Bringing Excellence to Care
Through Our Vision and Values

Cornwall Out of Hours remains committed to quality improvement and patient-centred care. We strive to improve quality by improving productivity and redesigning services wherever possible to meet patient needs. Quality must remain our guiding principle and focus.

COOH will ensure that quality improvement continues through the implementation of strategic quality objectives which are featured in this quality account grouped under three quality dimension headings:

- Patient Safety
- Clinical Effectiveness
- Patient Experience

Priorities for Improvement in 2015

The quality improvement priorities for 2015:

1. Patient safety – To ensure a safe, smooth transition from Cornwall Out of Hours to the new provider of out of hours services.

2. Clinical effectiveness – To continue to collect and monitor a wide range of detailed data about how our service is performing. This means that we can identify areas of good performance quickly and maintain high standards, and importantly, that we can identify any problem areas quickly and take improvement actions.
PART 2B  HOW WE MANAGE QUALITY IMPROVEMENTS

Quality and Safety

This section provides information to demonstrate that the organization is performing to essential standards, that we measure clinical processes and performance and are involved in national projects to monitor quality

Reviewing the Quality of our Services

Clinical Audit is a quality assurance and improvement method, enabling staff to measure and evaluate outcomes of care in a systematic manner. In 2014 there has been a drive to further embed audit activity at clinical services level so it meets patient needs. Relevant clinical audit helps staff to achieve their ambition to deliver continuous improvement in patient care.

Continuous Quality Audit (CQI) is about continually improving the quality of service and is based upon the principle that most things can be improved through small, incremental changes. At Cornwall Out of Hours we have a dedicated CQI team who are themselves expert users of the Pathways system. Each month they audit approximately 300 calls to ensure clinical risk is reduced, quality of triage is improved and call handling efficiency is enhanced.

In 2014, 2458 Pathways calls were audited, and where necessary, development and coaching plans were implemented for individual staff members.

Policies and Procedures

In 2013 there had been a thorough review of policies which included a process for review and updating.

An important aspect of this review had been to ensure the policies were accessible to all staff through the intranet – Sharepoint. It is important with such a diverse workforce that there is easy access to these documents when required.

Changes as a result of incident reporting, complaints, audit and national guidance are linked to policies and changes made if required.

All this work continued in 2014 under the guidance of the Senior Management Team, and Sharepoint became a dynamic tool, used by all in the organisation.

Serco  Health Clinical Governance Strategy.

Cornwall Out of Hours works to a wider Serco Health clinical governance strategy which aims to ensure all health contracts safely and reliably delivers people–centred healthcare services that put the patient first and at the heart of everything that they do. Cornwall Out of Hours Clinical Governance Lead attends National Clinical Governance meetings where all quality and safety issues are discussed and best practice shared.
How Our Regulator, The Care Quality Commission (CQC) Views Our Services

The Care Quality Commission (CQC) is the independent regulator of health and social care in England. Cornwall Out of Hours is registered with the CQC.

Our current registration status is “registered with no conditions”.

We are required to ensure that all individuals are held to account for ensuring that the CQC standards and outcomes are embedded into every day practice.

The CQC visited in the summer of 2013 and the service achieved full compliance against the areas inspected. This follows inspections in 2012 which had showed some areas requiring improvement.

A significant drive was made following the feedback in 2012 to achieve full compliance in 2013.

In the spring of 2014 the newly structured CQC started its inspections of GP services with a specific focus on out of hours services. These address the following questions:

- Are we safe?
- Are we effective?
- Are we responsive?
- Are we caring?
- Are we well led?

Against these criteria, a service is rated outstanding, good, requires improvement or inadequate.

Our continued use of an Assurance Framework to highlight areas that require attention and action ensures focus on improvement of the service meeting all regulatory standards.

This Assurance Framework is a live document and is reviewed at every Clinical Governance Meeting (monthly) to ensure actions are taken in a timely manner. Actions are colour coded using a traffic light (red, amber, green) system, and any areas of significant concern are then transferred to the contract Risk Register. All red actions are escalated and discussed at monthly National Clinical Governance meetings.

For example, it came to our attention that we needed to improve drug control and stock level management. In order to do this, we created a process which encourages more accurate ordering, regular stock checking and reduction of out of date drugs. More data is delivered to management to allow closer control and clearer accountability. The review looked at all aspects of the process including recorded usage in cars and clinics, aiming to reduce stock holding where possible whilst continuing to meet service standards. The new protocols were adopted in Spring 2014.
Information Governance provides a structure which determines the way that organisations process and handle information. Cornwall Out of Hours is committed to ensuring that we manage all of the information we hold and process in an efficient, effective and secure manner. Information Governance should not be seen in isolation, but as an integral part of our work, ensuring that we meet legal requirements, while supporting business improvement and continuity. Our framework ensures that information is

- held securely and confidentially
- obtained fairly and lawfully
- recorded accurately and reliably
- used effectively and ethically
- shared appropriately and legally

Cornwall Out of Hours has an Information Governance Statement of Compliance in line with the HSCIC (Health & Social Care Information Centre) requirement where a third party company has access to the NHS national network and data therein.

This is to ensure the integrity of the system is preserved and that the data held within the service is secure and risk assessed.

Cornwall Out of Hours completes an annual assessment (IG Toolkit) which encompasses data management, security assurance, data protection and clinical information assurance. Key areas are evidenced with policies, procedures and audit data to ensure the Statement of Compliance is adhered to.

We are currently compliant in all areas and will ensure that compliance continues during the forthcoming transition process.
LOOKING BACK: OUR CARE QUALITY ACHIEVEMENTS IN 2014

Cornwall Out of Hours Healthcare Priorities for 2014

Patient safety

The complexities of modern healthcare mean that things may occasionally go wrong even though we have the relevant processes and procedures in place. Cornwall Out of Hours follows appropriate policies in order to identify any failings or weaknesses and to ensure that investigation and learning from incidents or complaints take place.

We encourage all staff to report any untoward events as part of our open and honest culture, and aim to promote shared learning from these events. The National Patient Safety Agency (NPSA) regards high levels of incident reporting as positive – those organisations which have an open culture are more likely to have the processes in place to learn from such events.

Cornwall Out of Hours has a Clinical Governance Lead, who has led a drive to develop the recording of Datix information and to ensure positive learning outcomes are achieved from this.

Cornwall Out of Hours has adopted and adheres to a Being Open and Duty of Candour Policy. This ensures that we communicate effectively, and describes the process for acknowledging, apologising and explaining when this go wrong in an open and honest manner with service users, staff and all relevant others involved in the investigation of a patient safety event.

Datix is an incident reporting system to which all members of staff have access. All incidents are investigated, any necessary action taken, and feedback is always given to the initiator of the Datix.

In 2014, 329 Datix incidents were reported. Many of these involved the input of other healthcare partners. Feedback and learning has been cascaded to individuals were necessary and to the wider team via our weekly Team Brief.

Clinical effectiveness

During 2014, examples of clinical audit included a Hand Hygiene audit completed across all eleven Emergency Clinics. High standards were found, but it was noted that two of the Community Hospitals did not have the correct sinks in the consulting rooms, as it is now a requirement that sinks should not have a plug or overflow. This has been fed back to the hospitals concerned and will be updated as soon as their finances allow.

1% Clinical Audit – All patients who contact Cornwall Out of Hours should experience appropriate clinical assessment and should receive the correct advice, prescriptions or
onward referral where necessary. Every six months each clinician has at least 1% of their cases audited. The audit and resulting action points are shared with our Commissioners. Feedback is given to each clinician, who can use it for appraisal/revalidation evidence.

In 2014 the audit of GPs found that a very small percentage of cases had documentation which was considered to be inadequate. No adverse risk at outcome was found; however, as an action point, clinicians found to have inadequate notes were contacted with case number references and asked to reflect upon and change their practice in line with expected standards.

Clinicians receive individual feedback on audit results and any recurrent issues are addressed at internal appraisal.

A Continuous Quality Improvement process was introduced in October 2014 for GPs and ECPs, ensuring that their practice remains safe and effective. Each week calls and consultations are reviewed using the toolkit commissioned by the Royal College of General Practitioners. This toolkit provides a framework for assessing the quality of individual provider-patient interactions. Appropriate feedback is given to the clinicians. This forms part of a supportive learning environment where best practice is shared and individual learning is actioned and monitored.

**Patient experience**

Cornwall Out of Hours employs a Service Improvement Coordinator, who receives all complaints and compliments about our service. All complaints are taken seriously and are thoroughly investigated. Learning outcomes are identified, both for individuals and for the service as a whole, and the required actions are logged and brought to the Clinical Governance monthly meeting, ensuring that they are completed.

In 2014 Cornwall Out of Hours answered 78,051 telephone calls. The number of substantiated complaints equates to 0.02% of these calls.

The results of the survey completed by a random selection of patients showed a 96% satisfaction rate with our service overall.

In 2014 we introduced the Friends & Family test. This is an important feedback tool which provides a mechanism to highlight both good & poor patient experience. Our Quarter 4 2014 Friends & Family test showed that 91.6% of patients would recommend the Cornwall OOH service to their friends & family.
During the year we received 68 plaudits. Some examples included:

“Please accept our grateful thanks and appreciation for your excellent service”

“All round your service to me was excellent”

“My sisters and I are truly grateful…. for the kindness and warmth at the worst point in our lives”

“Thank you for the excellent and professional service you provided”

“Everyone was so kind, professional and helpful and I do really appreciate it. You were all so prompt and good to me and no one made me feel a nuisance.”

Closing Statement from Stephanie Gray-Roberts, Interim Contract Director

I am privileged to have been able to present the quality achievements of Cornwall Out of Hours in 2014, along with our priorities for the months ahead. Our staff continue to work tirelessly to deliver a quality service to our patients and to strive for quality improvements. I am confident that this is reflected clearly within this report.

Thank you for taking the time to read this Quality Report, which I hope has been informative and enjoyable. I would welcome feedback on its contents and format.

Stephanie Gray-Roberts
Interim Contract Director
Cornwall Out of Hours
Statements from Organisations and Committees

NHS Kernow
NHS Kernow welcomes the opportunity to comment on the 2014 Quality Account for the Cornwall Out of Hours GP Service. We would like to acknowledge the continued efforts made by the provider in evolving operational models in an unscheduled care landscape that continues to develop alongside our commissioning intentions.

The Quality Account focuses on a number of indicators. The contract is monitored against the National Quality Requirements set by the Department of Health, for GP Out of Hours Services. The CCG monitors the performance of the service across these indicators at meetings of the Technical Working Group, which includes clinical input from GPs working for the service. This performance and continued improvement plans are discussed at the Performance Management Group, this group is supported by Healthwatch representation. The CCG is pleased to note the continued improvement in performance of the Out of Hours service in all the National Quality Requirements during 2013.

The CCG recognises the high patient satisfaction rate with the service, with an increase in that satisfaction demonstrated through the year, consistent with the improvement in service provision noted above. We also are pleased to recognise the significant number of plaudits received.

Face to face clinical indicators have also been shown to have improved during 2014, with more urgent and routine consultations being provided within the monitored timeframes by the end of 2014.

The CCG acknowledges the quality improvement priorities for 2015, which is to effectively support the transition to the new provider.

We regularly bring together all our unscheduled care providers in a System Resilience Group and we are grateful to the Cornwall Out of Hours service for their continued contribution, particularly during a period of transition, when we are in the process of appointing a new provider for GP Out of Hours care.