

Agreed OUH NHS FT Commissioning for Quality and Innovation (CQUIN) goals for 2017/18

CQUIN Name	CQUIN type	Goal
1a. Improvement of health and wellbeing of NHS staff	National	Achieving a 5 percentage point improvement in two of the three NHS annual staff survey questions on health and wellbeing, musculo skeletal (MSK) and stress.
1b. Healthy food for NHS staff, visitors and patients	National	Maintaining previous improvements in the provision of healthy foods and building upon these with a particular emphasis on reductions in the provision of food which is high in fats, sugar and salt.
1c. NHS Staff Health & Well-being	National	Improving the uptake of flu vaccinations for front line staff within Providers.
2a. Timely identification of sepsis in emergency departments and acute inpatient settings	National	The percentage of patients who met the criteria for sepsis screening and were screened for sepsis.
2b. Timely treatment of sepsis in emergency departments and acute inpatient settings	National	The percentage of patients who were found to have sepsis when they were screened and received intravenous antibiotics within 1 hour.
2c. Assessment of clinical antibiotic review between 24-72 hours of patients with sepsis who are still inpatients at 72 hours	National	Percentage of antibiotic prescriptions documented and reviewed by a competent clinician within 72 hours.
2d. Reduction in antibiotic consumption per 1,000 admissions	National	Providers are required to achieve a 2% reduction for total antibiotic consumption and 1% reduction each for Piperacillin-Tazobactam and Carbapenems.
4. Improving services for people with mental health needs who present to A&E	National	Reduce by 20% the number of attendances to A&E for those within a selected cohort of frequent attenders who would benefit from mental health and psychosocial interventions, and establish improved services to ensure this reduction is sustainable.
6. Offering advice and guidance	National	The scheme requires providers to set up and operate advice and guidance services for non-urgent GP referrals, allowing GPs to access consultant advice prior to referring patients in to secondary care.
7. NHS e-Referrals	National	This indicator relates to GP referrals to consultant-led first outpatient services and the availability of services and appointments on the NHS e-Referral Service.
8. Supporting proactive and safe discharge	National	Increasing proportion of patients admitted via non-elective route discharged from acute hospitals to their usual place of residence within 7 days of admission by 2.5% points from baseline.
B11 Hepatitis C Virus (HCV) Improving Treatment Pathways	Specialised Commissioning	NHS England has implemented the establishment of Hepatitis C networks to ensure clinical and cost effective care is delivered

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through Operational Delivery Networks (ODNs)		with oversight from Hepatitis C centres and multi-disciplinary teams (MDTs). Strong partnership working across the complex pathways for patients is essential to ensure patients have access to both clinical expertise and local delivery of care.
B13 Automated Exchange Transfusion for Sickle Cell Care	Specialised Commissioning	Patients with sickle cell disease require exchange transfusions to manage their condition. This can be done manually or using automated exchange. This CQUIN scheme aims to incentivise the use of automated exchange by specified specialist centres in order to improve patient experience and use of clinical resources.
B14 Haemoglobinopathy Improving Networks through ODNs	Specialised Commissioning	To improve appropriate and cost-effective access to appropriate treatment for haemoglobinopathy patients by developing operational delivery networks (ODNs) and ensuring compliance with ODN guidance through MDT review of individual patients' notes.
CA2 SACT Dose Banding	Specialised Commissioning	A national incentive to standardise the doses of Standardised Dose Banding Adult Intravenous Systemic Anticancer Therapy (SACT) in all units across England in order to increase safety, to increase efficiency and to support the parity of care across all NHS providers of SACT in England.
IM3 Rheumatic Diseases	Specialised Commissioning	Systemic auto-immune rheumatic diseases are rare, multisystem, non-genetic conditions that have high morbidity and mortality. This CQUIN promotes the development of coordinated MDT clinics which will support earlier diagnosis and intervention, and ensure earlier detection/prevention of relapse which will reduce avoidable mortality and morbidity, reduce costs, and improve quality of life.
Haemophilia Partnership Working with DGHS	Specialised Commissioning	To promote Haemophilia Partnership Working with District General Hospitals.
CA3 SACT Optimising Palliative Chemotherapy Decision Making	Specialised Commissioning	Systemic Anti-Cancer Treatment (SACT) can play an important role in extending life in patients with advanced disease, acknowledging also that the beneficial and harmful effects of treatment must be carefully balanced and regularly reviewed. This CQUIN aims to ensure that in specific groups of patients, decisions to start and continue further treatment should be made in direct consultation with peers and then as a shared decision with the patient.
IM2 Cystic Fibrosis Adherence (Adult)	Specialised Commissioning	This scheme employs an electronic Cystic Fibrosis (CF) adherence indicator captured by an IT platform (CFHealthHub) to deliver a complex behavioural intervention that increases patient activation and adherence, thus delivering better patient outcomes and avoidance of costly escalations.
TR3 Spinal CQUIN	Specialised Commissioning	The scheme aims to promote the better management of spinal surgery by creating and supporting a regional network of a hub centre and partner providers that will ensure data is collected to enable evaluation of practice effectiveness and that elective surgery only takes place following MDT review.
Armed Forces Health	Specialised	To ensure high quality services are accessible to armed forces

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	Commissioning	personnel and registered families to promote, protect and restore the health of the community.

**Agreed OUH NHS FT Commissioning for Quality and Innovation (CQUIN) goals for 2018/19:
 With the exception of 'Haemophilia Partnership Working with DGHs' the CQUINs above
 are planned to be multi-year and therefore all of the above will continue into 2018/19.**