


<b>MEETING DATE:</b>	11 June 2015	 <b>North Lincolnshire Clinical Commissioning Group</b>  <b>REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY</b>
<b>AGENDA ITEM NUMBER:</b>	Item 7.9	
<b>AUTHOR:</b>	Catherine Wylie	
<b>JOB TITLE:</b> <b>DEPARTMENT:</b>	Director of Risk and Quality Assurance	

**CCG QUALITY GROUP MINUTES  
26 FEBRUARY 2015 & 23 APRIL 2015**

<b>PURPOSE/ACTION REQUIRED:</b>	To Receive & Note
<b>CONSULTATION AND/OR INVOLVEMENT PROCESS:</b>	
<b>FREEDOM OF INFORMATION:</b>	<i>Is this document releasable under FOI at this time? If not why not? (decision making guide being developed)</i>  <b>Public</b>

<b>1. PURPOSE OF THE REPORT:</b>	
The Quality Group Minutes dated 26 February and 23 April 2015 are attached for the CCG Governing Body to receive and note, for information only.	
<b>2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:</b>	
Continue to improve the quality of services	<b>X</b>
Reduce unwarranted variations in services	<b>X</b>
Deliver the best outcomes for every patient	<b>X</b>
Improve patient experience	<b>X</b>
Reduce the inequalities gap in North Lincolnshire	<b>X</b>
<b>3. ASSURANCES TO THE CLINICAL COMMISSIONING GROUP</b>	
The Quality Group minutes provide assurance to the Governing Body that it is carrying out its function	
<b>4. IMPACT ON RISK ASSURANCE FRAMEWORK:</b>	
Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

**5. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:**

Yes		No	X
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**6. LEGAL IMPLICATIONS:**

Yes		No	X
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**7. RESOURCE IMPLICATIONS:**

Yes		No	X
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**8. EQUALITY IMPACT ASSESSMENT:**

Yes		No	X
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**9. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS:**

Yes		No	X
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**10. RECOMMENDATIONS:**

The CCG Governing Body is asked to: -

- Receive and note

<b>MEETING:</b>	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 <b>QUALITY GROUP</b>
<b>MEETING DATE:</b>	Thursday 26 February 2015	
<b>VENUE:</b>	CSU Meeting Room 2, Health Place, Brigg	
<b>TIME:</b>	14:00	

<b>PRESENT:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Catherine Wylie (CW) <i>Chair</i>	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Ian Reekie (IR) <i>Vice Chair</i>	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Dr Robert Jaggs-Fowler (RJF)	CCG GP Member/Medical Director/Named Doctor for Safeguarding (Adults & Children)	NHS North Lincolnshire CCG
Dr Faisal Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
Deborah Pollard (DP)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
<b>IN ATTENDANCE:</b>		
Greta Johnson (GJ)	Infection Control Specialist Nurse <i>In attendance for all items</i>	Northern Lincolnshire and Goole NHS Foundation Trust
Gary Johnson (GaJ)	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Chloe Nicholson (CN)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Julie Wilburn (JW)	Specialist Nurse: Safeguarding Children <i>In attendance for all items</i>	NHS North Lincolnshire CCG
Hazel Moore (HM)	Quality Matron <i>In attendance for Item 6.0 only</i>	Northern Lincolnshire and Goole NHS Foundation Trust
Clare Smith (CS)	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

<b>APOLOGIES:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Dr Gary Armstrong (GA)	CCG GP Member	NHS North Lincolnshire CCG
Dr Andrew Lee (AL)	CCG GP Member	NHS North Lincolnshire CCG
John Pougher (JP)	Assistant Senior Officer: Quality and Assurance	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Gemma McNally (GMC)	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG)	Yorkshire and Humber Commissioning Support

<b>SUMMARY OF DISCUSSION</b>	<b>DECISION/ACTION</b> (including timescale for completion or update)	<b>LEAD</b>
<b>1.0 APOLOGIES</b>		
Apologies were noted, as detailed above.	<b>Decision:</b> Noted	Chair
<b>2.0 DECLARATION OF INTERESTS</b>		
CW invited those with any Declarations of Interest in relation to the agenda or not declared previously, to make them known to the meeting. No declarations were received.	<b>Decision:</b> Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 22 JANUARY 2015</b>		
The minutes were accepted as an accurate record of the meeting.	<b>Decision:</b> Noted	Chair
<b>4.0 ACTION LOG</b>		
Outstanding actions from 24 July 2014 to 22 January 2015 were discussed. An update for each outstanding action would be noted in the Action Log.	<b>Decision:</b> Noted	Chair
<b>5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>6.0 NUTRITION AND DIETETICS UPDATE: NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST <i>Presentation by Hazel Moore, Quality Matron, Scunthorpe General Hospital</i></b>		
<p>HM provided an update in relation to nutrition and hydration at Northern Lincolnshire and Goole NHS Foundation Trust, via a PowerPoint presentation.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Annual Nutrition and Hydration Audit <ul style="list-style-type: none"> <li>○ The audit had just been undertaken. Further information to be shared in due course</li> </ul> </li> <li>• Communication methods for patients <ul style="list-style-type: none"> <li>○ Alternative methods of communication for patients to advise when hungry were discussed e.g. use of pictures. HM to take forward.</li> </ul> </li> <li>• Complaints <ul style="list-style-type: none"> <li>○ Complaints in relation to nutrition and hydration were discussed.</li> </ul> </li> </ul>	<p><b>Decision:</b> Presentation noted</p> <p><b>Action:</b> CW to share information with HM in relation to complaints involving hydration and nutrition issues, as required</p>	<p>HM</p> <p>CW</p>
<b>7.0 RISK REPORT</b>		
CW advised that the Risk Report was currently being amended, further to discussion in relation to risk Q19 at the Quality Group meeting on 22 January 2015, and the CCG Governing Body on 12 February 2015. The report would be discussed at the next meeting.	<b>Decision:</b> Noted	Chair
<b>8.0 QUALITY DASHBOARD</b>		
<ul style="list-style-type: none"> <li>• <b>8A: CCG Quality Dashboard</b></li> <li>• <b>8B: Update from Contracting Meetings</b></li> </ul>		
<p>CN presented Items 8A and 8B; and the reports were taken as 'read'. It was noted that the Quality Dashboard document was 'work in progress', and comments were invited.</p> <p>Specific areas highlighted/discussed:</p> <p><b>Item 8A: CCG Quality Dashboard</b></p> <ul style="list-style-type: none"> <li>• Number of Clostridium difficile cases</li> <li>• 12 hour trolley waits</li> <li>• NEWS Score</li> <li>• Number of Serious Incidents</li> <li>• Number of Never Events</li> <li>• Patient Harm <ul style="list-style-type: none"> <li>○ It was suggested that previous data from the last 2/3 months could be added to enable comparison</li> </ul> </li> <li>• Avoidable Pressure Ulcers</li> <li>• Number of Patient Falls</li> <li>• NICE Guidance Compliance</li> </ul>	<p><b>Decision:</b> The Quality Dashboard was received, discussed and noted. Members confirmed that they were happy with the Dashboard</p>	<p>CN</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>• CAS Alerts</li> <li>• Mortality</li> <li>• Mixed Sex Accommodation Breaches</li> <li>• Safeguarding Issues</li> </ul> <p><b>Item 8B: Update from Contracting Meetings</b> GaJ highlighted a contracting issue in relation to Spire Hull and East Riding Hospital. Details to be forwarded to CN.</p>	<p><b>Action:</b> GaJ to forward details to CN</p>	<p>GaJ</p>
<b>PATIENT EXPERIENCE</b>		
<p><b>9.0 NORTH LINCOLNSHIRE PATIENT RELATIONS REPORT</b> <i>Report to be provided quarterly: due April 2015</i></p>		
<p>It was noted that the next North Lincolnshire Patient Relations Report would be presented at the meeting on 23 April 2015.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>10.0 HEALTHWATCH ENTER AND VIEW REPORT</b></p>		
<p>CW presented Item 10 and the report was taken as 'read'. It was noted that the report had been shared for information only.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>11.0 ANY OTHER BUSINESS</b></p>		
<p>Nothing discussed.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>12.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b></p>		
<p>No new risks were identified.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<b>CLINICAL EXCELLENCE</b>		
<p><b>13.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE</b></p>		
<p>Item 13 was taken as 'read'. The Medicines Management Prescribing Report provided an update on prescribing within the CCG practices, and was noted, for information only. GMC would provide a verbal update at the next meeting.</p>	<p><b>Decision:</b> Noted</p>	<p>GMC</p>
<p><b>14.0 FRANCIS REPORT/HARD TRUTHS UPDATE</b> <i>Provider current position (by exception)</i></p>		
<p>CW advised that there was nothing new to report in relation to the Francis Report/Hard Truths or the provider current position.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>15.0 WINTERBOURNE UPDATE</b></p>		
<p>CW advised that originally North Lincolnshire CCG had 11 Learning Disability patients out of area. By April 2015, there would be 2 patients remaining on the register.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>16.0 PRIMARY CARE DEVELOPMENT UPDATE</b></p>		
<p>CW confirmed that the Primary Care Development Group meetings had now been moved to a Wednesday; therefore RJF would be unable to attend future meetings, due to clinical commitments. The group was chaired by Dr Andrew Lee, with good representation, including the Local Medical Committee (LMC). The group would be looking at areas such as quality, mortality, recruitment and training within primary care. The minutes of future meetings would be shared with CCG Quality Group members, for information.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>17.0 ANY OTHER BUSINESS</b></p>		
<p>Nothing discussed.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<p><b>18.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b></p>		
<p>No new risks were identified.</p>	<p><b>Decision:</b> Noted</p>	<p>Chair</p>
<b>PATIENT SAFETY</b>		
<p><b>19.0 SAFEGUARDING CHILDREN UPDATE</b></p>		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>• <b>19A: Safeguarding Children Report: February 2015</b></li> <li>• <b>19A: North Lincolnshire CCG Safeguarding Children Workplan</b></li> <li>• <b>19B: Looked After Children Update Report: Jill Turner, Designated Nurse, Looked After Children</b></li> </ul>		
<p>SG presented Item 19A, the Safeguarding Children Report and the North Lincolnshire Safeguarding Children Workplan; both reports were taken as 'read'.</p> <p>CW presented Item 19B, the Looked After Children (LAC) Update, and the report was taken as 'read'. Specific areas highlighted:</p> <ul style="list-style-type: none"> <li>• Paragraph 1.6 <ul style="list-style-type: none"> <li>○ It was queried whether the quoted 10% figure was a national or local statistic. It was suggested that the paragraph should be amended to ensure clarity</li> </ul> </li> <li>• It was noted that Pauline Dumble, Acting Head of Children and Maternity Services (Commissioning) was in the process of reviewing the LAC service, to be discussed at a future Quality Group meeting.</li> </ul>	<p><b>Decision:</b> The Safeguarding Children Report and Workplan was received, discussed and noted.</p> <p><b>Decision:</b> The LAC Update was received and noted.</p> <p><b>Action:</b> To be discussed further at a future Quality Group meeting, once the review of the LAC service had been completed.</p>	SG
<b>20.0 SAFEGUARDING ADULTS UPDATE</b>		
<p>DP presented Item 20, and the report was taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Prevent <ul style="list-style-type: none"> <li>○ North Lincolnshire is a 'Non Priority' area</li> </ul> </li> <li>• NHS Safeguarding Accountability and Assurance Framework <ul style="list-style-type: none"> <li>○ Published for consultation from 12 February 2015 until 26 March 2015 and is available via <a href="http://www.engage.england.nhs.uk/survey/revised-safeguarding-framework">http://www.engage.england.nhs.uk/survey/revised-safeguarding-framework</a>. The Framework covers both Safeguarding Adults and Children</li> </ul> </li> <li>• Care Home Safeguarding Alerts <ul style="list-style-type: none"> <li>○ To be discussed further outside of the meeting</li> </ul> </li> </ul>	<p><b>Decision:</b> The Safeguarding Adults Report was received, discussed and noted.</p>	DP
<b>21.0 INFECTION CONTROL UPDATE</b> <ul style="list-style-type: none"> <li>• <b>Overview of MSSA Bacteraemia</b></li> </ul>		
<p>GJ presented Item 21, the Infection, Prevention and Control Report for January 2015, and the report was taken as 'read'. The report provided an overview on infection rates, trends, outbreaks and collaborative working with contractors across North Lincolnshire and the Cluster. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• MRSA bacteraemia <ul style="list-style-type: none"> <li>○ For January 2015, the report advised that since April 2014, 2 cases had been reported, although a further case had been reported in February 2015. Details of the most recent case were highlighted to members. A RCA meeting would take place for the recent case</li> </ul> </li> <li>• MSSA bacteraemia <ul style="list-style-type: none"> <li>○ To date since April 2014, 34 cases had been detected and apportioned to North Lincolnshire residents</li> </ul> </li> <li>• MRSA/MSSA PVL <ul style="list-style-type: none"> <li>○ To date since April 2014, 3 cases had been reported and managed</li> </ul> </li> <li>• C.Difficile</li> </ul>	<p><b>Decision:</b> The Infection Prevention and Control Report for January 2015 was received, discussed and noted.</p>	GJ


SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ The objective for 2014/2015 is 37. For January 2015, the report advised that since April 2014, 29 cases had been apportioned to North Lincolnshire residents, although 4 further cases had been reported, resulting in 33 cases to date</li> <li>○ Trends associated with cases included use of high risk antibiotics, use of Loperamide and use of Proton Pump Inhibitors</li> <li>○ It was noted that the trajectory for 2015/2016 was 31</li> <li>○ Monitoring of cases continues with liaison with Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) and Hull and East Yorkshire Hospitals NHS Trust (HEY) and Primary Care</li> <li>● E.Coli bacteraemia <ul style="list-style-type: none"> <li>○ To date since April 2014, 111 cases had been detected and apportioned to North Lincolnshire residents</li> <li>○ It was highlighted that there is a seasonal increase in cases during the summer months</li> </ul> </li> <li>● GP Audits and Issues <ul style="list-style-type: none"> <li>○ IPC assurance audits highlighted</li> </ul> </li> <li>● Care Home Audits and Issues <ul style="list-style-type: none"> <li>○ IPC assurance audits highlighted</li> </ul> </li> <li>● Other Issues <ul style="list-style-type: none"> <li>○ Public Health England: Guidance on management of infection in primary care - for consultation and local adoption</li> </ul> </li> <li>● Seasonal Flu <ul style="list-style-type: none"> <li>○ No further influenza outbreaks reported in care homes during January 2015, although an increase of influenza across Yorkshire and the Humber noted</li> </ul> </li> </ul>	<p><b>Action:</b> GJ to forward guidance to RJF</p>	GJ
<p><b>22.0 NORTH LINCOLNSHIRE INCIDENT MONITORING GROUP</b></p> <ul style="list-style-type: none"> <li>● <b>22A: Ratified minutes from 23 December 2014</b></li> <li>● <b>22B: Draft minutes from the meeting held on 28 January 2015</b></li> </ul> <p><b>NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST SERIOUS INCIDENT MEETING</b></p> <ul style="list-style-type: none"> <li>● <b>22C: Ratified minutes from 23 December 2014</b></li> <li>● <b>22D: Draft minutes from the meeting held on 28 January 2015</b></li> </ul>		
<p>CW advised that Items 22A and 22B, the North Lincolnshire Incident Monitoring Group ratified minutes dated 23 December 2014, and the draft minutes from the meeting held on 28 January 2015 were taken as 'read', and noted. No comments were made.</p> <p>Items 22C and 22D, the Northern Lincolnshire and Goole NHS Foundation Trust Serious Incident Meeting ratified minutes dated 23 December 2014, and the draft minutes from the meeting held on 28 January 2015 were taken as 'read', and noted. No comments were made.</p>	<p><b>Decision:</b> The minutes of the North Lincolnshire Incident Monitoring Group were received and noted.</p> <p><b>Decision:</b> The minutes of the Northern Lincolnshire and Goole NHS Foundation Trust Serious Incident Meeting were received and noted.</p>	<p>Chair</p> <p>Chair</p>
<p><b>23.0 NORTH LINCOLNSHIRE SERIOUS INCIDENT REPORT</b></p>		
<p>GaJ presented Item 23, and the report was taken as 'read'. Specific areas highlighted/discussed:</p>	<p><b>Decision:</b> The Serious Incident Report was received, discussed</p>	GaJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>• Key issues (<i>page 4</i>)</li> <li>• Reporting</li> <li>• Assurance</li> <li>• Evidence of learning</li> </ul>	and noted.	
<b>24.0 NORTH LINCOLNSHIRE ACUTE MENTAL HEALTH CARE NICHE REPORT AND ACTION PLAN</b>		
<p>CW presented Item 24A, the Niche Report regarding the Independent Review of Safe Practices in Great Oaks, Scunthorpe, together with Item 24B, the North Lincolnshire Acute Mental Health Care Niche Report Action Plan; both reports were taken as 'read'.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• A recommendation within the Action Plan was a 'review of the joint SI processes with NLCCG and ensure compliance with NHS England Serious Incident Framework' <ul style="list-style-type: none"> <li>○ The current NHS England Serious Incident Framework is still under consultation, when the final document is released, the Trust, North Lincolnshire CCG and Yorkshire and Humber Commissioning Support will review processes</li> <li>○ This would be monitored through the CCG Quality Group</li> <li>○ CW to pick up with GaJ outside of the meeting</li> </ul> </li> </ul>	<b>Decision:</b> The Niche Report regarding the Independent Review of Safe Practices in Great Oaks, Scunthorpe and the North Lincolnshire Acute Mental Health Care Niche Report Action Plan were received, discussed and noted	Chair
<b>25.0 NHS111 UPDATE</b>		
<ul style="list-style-type: none"> <li>• <b>25: NHS111 Briefing Paper – Month 8 (November 2014)</b></li> <li>• <b>25A: NHS111 Briefing Paper – Month 9 (December 2014)</b></li> <li>• <b>25B: Festive Period Update</b></li> </ul>		
<p>Items 25, 25A and 25B were taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• The decrease in performance outturn figures between November and December 2014 against targets was discussed <ul style="list-style-type: none"> <li>○ Warm transfer and 10 minute call back</li> <li>○ Call back within 2 hours</li> </ul> </li> <li>• It was noted that Rebecca Bowen, Senior Delivery Manager, Yorkshire and Humber Commissioning Support attended the NHS111 meetings</li> <li>• NHS North Lincolnshire CCG were not the Lead Commissioner in relation to NHS111</li> </ul>	<b>Decision:</b> The NHS111 update reports for Month 8 (November 2014), Month 9 (December 2014) and the Festive Report update were received, discussed and noted	Chair
<b>26.0 ANY OTHER BUSINESS</b>		
CW provided a verbal update in relation to a multi-drug resistant Tuberculosis (TB) case in the Yorkshire and Humber area.	<b>Decision:</b> Update noted	Chair
<b>27.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>INFORMATION GOVERNANCE</b>		
<b>28.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT</b>		
<ul style="list-style-type: none"> <li>• <b>28: Information Governance Update</b></li> <li>• <b>28A: North Lincolnshire CCG Information Governance Actions</b></li> </ul>		
Items 28 and 28A was taken as 'read', and the updates were noted.	<b>Decision:</b> Update noted	Chair
<b>29.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP</b>		
<b>Policies for Approval</b> <ul style="list-style-type: none"> <li>a) <b>Acceptable Computer Use</b></li> </ul>		



SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>b) Privacy Impact Assessments</b> <b>c) Corporate Records Management Standards and Procedural Guidance</b>		
<ul style="list-style-type: none"> <li>• <b>Item 29A: Acceptable Computer Use Policy and Policy Review Summary</b> Additions had been made to the policy to provide guidance to staff on the use of social media, as outlined in the Policy Review Summary</li> <li>• <b>Item 29B: Privacy Impact Assessments and Policy Review Summary</b></li> <li>• <b>Item 29C: Corporate Records Management Standards and Procedural Guidance and Policy Review Summary</b> Amendments made as outlined in the Policy Review Summary</li> <li>• <b>Incident and Accident Reporting Policy</b> It was noted that the policy was due for review in March 2015.</li> </ul>	<p><b>Decision:</b> The Acceptable Computer Use Policy was approved</p> <p><b>Decision:</b> The Privacy Impact Assessments Policy was approved</p> <p><b>Decision:</b> The Corporate Records Management Standards and Procedural Guidance was approved</p> <p><b>Decision/Action:</b> It was agreed to extend the review date on the Incident and Accident Policy until the new Serious Incident Framework was issued.</p>	Chair
<b>30.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>31.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>CONTRACT QUALITY ISSUES</b>		
<b>32.0 NORTHERN LINCOLNSHIRE QUALITY AND SAFETY ASSURANCE GROUP</b>		
<ul style="list-style-type: none"> <li>• <i>Notes from the meeting held on 22 January 2015</i></li> </ul>		
The minutes from the meeting on 22 January 2015 would be presented at the next meeting.	<b>Decision:</b> Noted	Chair
<b>33.0 NORTH YORKSHIRE AND HUMBER AREA TEAM QUALITY SURVEILLANCE GROUP</b>		
<ul style="list-style-type: none"> <li>• <i>Notes from the meeting held on 14 January 2015</i></li> </ul>		
CW advised that Item 33 was taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the North Yorkshire and Humber Area Team Quality Surveillance Group were received and noted.	Chair
<b>34.0 CQUINS UPDATE</b>		
<ul style="list-style-type: none"> <li>• <i>RDaSH Learning Disability Dementia Pre-Screening Tool</i></li> </ul>		
Discussion took place regarding Item 34 (RDASH Learning Disability Dementia Pre-Screening Tool). It was queried why the tool was not being used on all risk groups	<b>Decision:</b> Noted	Chair
<b>35.0 ANY OTHER BUSINESS</b>		
<p>CN provided a verbal update in relation to the Contract Review Meetings. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Key Performance Indicators (KPI)</li> <li>• Commissioning for Quality and Innovation (CQUIN) schedule</li> <li>• Signing of contracts for 2015/2016</li> </ul>	<b>Decision:</b> Noted	CN
<p><b>Medicines Management/Prescribing</b></p> <p>Discussion took place regarding a number of practices being substantially overspent in relation to their prescribing budget.</p>		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Pharmacist input</li> <li>• Antimicrobial prescribing</li> <li>• High risk antibiotics</li> <li>• Query as to whether Pharmacists feedback regarding advice given</li> <li>• Quality, Innovation, Productivity and Prevention (QIPP) targets</li> <li>• Need to review</li> </ul>	<b>Action:</b> CW to pick up with Gemma McNally	CW
<b>36.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>MEETING NOTES FROM OTHER GROUPS</b>		
<b>37.0 INFORMATION GOVERNANCE GROUP NOTES</b>		
<ul style="list-style-type: none"> <li>• <i>Draft notes from the meeting held on 9 February 2015</i></li> </ul>		
CW advised that Item 37 was taken as 'read', and noted. No comments were made.	<b>Decision:</b> The notes of the Information Governance Group were received and noted.	Chair
<b>38.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE CCG GOVERNING BODY</b>		
No issues were referred.	<b>Decision:</b> Noted	
<b>39.0 DATE AND TIME OF NEXT MEETING</b>		
Thursday 26 March 2015 14:00  <i>This is the prospective Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) visit afternoon.</i>  It was noted that Dr Anita Kapoor had passed on her resignation. Dr Kapoor was thanked for her contribution to the Quality Group.	<b>Decision:</b> Noted	Chair

<b>MEETING:</b>	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 <b>QUALITY GROUP</b>
<b>MEETING DATE:</b>	Thursday 23 April 2015	
<b>VENUE:</b>	CSU Meeting Room 2, Health Place, Brigg	
<b>TIME:</b>	14:00	

<b>PRESENT:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Catherine Wylie (CW) <i>Chair</i>	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Ian Reekie (IR) <i>Vice Chair</i>	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Dr Robert Jaggs-Fowler (RJF)	CCG GP Member/Medical Director/Named Doctor for Safeguarding (Adults & Children)	NHS North Lincolnshire CCG
Dr Faisal Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
Dr Anita Kapoor (AK)	CCG GP Member	NHS North Lincolnshire CCG
Deborah Pollard (DP)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning <i>In attendance from Item 20 onwards</i>	NHS North Lincolnshire CCG
John Pougher (JP)	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
<b>IN ATTENDANCE:</b>		
Greta Johnson (GJ)	Infection Control Specialist Nurse <i>In attendance for all items</i>	Northern Lincolnshire and Goole NHS Foundation Trust
Gary Johnson (GaJ)	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Gemma McNally (GMC)	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG) <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Julie Wilburn (JW)	Specialist Nurse: Safeguarding Children <i>In attendance for all items</i>	NHS North Lincolnshire CCG
Clare Smith (CS)	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

<b>APOLOGIES:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Chloe Nicholson (CN)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG	Yorkshire and Humber Commissioning Support

<b>SUMMARY OF DISCUSSION</b>	<b>DECISION/ACTION</b> (including timescale for completion or update)	<b>LEAD</b>
<b>1.0 APOLOGIES AND QUORACY</b>		
Apologies were noted, as detailed above. It was noted that the meeting was quorate to proceed.  Dr Anita Kapoor was welcomed. Dr Kapoor would attend future meetings.	<b>Decision:</b> Noted	Chair
<b>2.0 DECLARATION OF INTERESTS</b>		
CW invited those with any Declarations of Interest in relation to the agenda or not declared previously, to make them known to the meeting. No declarations were received.	<b>Decision:</b> Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 26 FEBRUARY 2015</b> <b>3.1 ACTION LOG UPDATE AS DISCUSSED ON 26 FEBRUARY 2015</b>		
The minutes were accepted as an accurate record of the meeting.  The Action Log Update as discussed on 26 February 2015 was received and noted.	<b>Decision:</b> Noted	Chair
<b>4.0 ACTION LOG – OUTSTANDING ACTIONS</b>		
Outstanding actions from 24 July 2014 to 26 February 2015 were discussed. An update for each outstanding action would be noted in the Action Log.	<b>Decision:</b> Noted	Chair
<b>5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>6.0 RISK REPORT</b>		
<b>6.1 BOARD ASSURANCE FRAMEWORK</b>		
<p><b>Item 6.0: Risk Report</b> JP advised that the Risk Report was being updated, further to recommendations made at the CCG Governing Body Workshop on 12 March 2015.</p> <p><b>Item 6.1: Board Assurance Framework</b> JP presented Item 6.0, and the report was taken as ‘read’. The report informed the Quality Group of the highest rated strategic risks identified for North Lincolnshire CCG on the Governing Body Assurance Framework. The Quality Group was asked to review the risks and comment on their relevance, and update if appropriate regarding mitigating actions to identify new risks.</p> <p>The CCG Governing Body Workshop on 12 March 2015 undertook a review of strategic risks and the CCG Board Assurance Framework. The results from this review and the recommendations from the audit of risk management in the CCG will form the basis of an action plan, to strengthen and further embed risk management in the CCG’s operational processes. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Q20: ‘Positive/External Assurance’, ‘Gaps in Control’ and ‘Gaps in Assurance’ to be completed</li> </ul>	<p><b>Decision/Action:</b> The Risk Report to be presented to the next Quality Group meeting on 28 May 2015</p> <p><b>Decision:</b> The CCG Board Assurance Framework was received, discussed and noted</p>	JP
<b>7.0 QUALITY DASHBOARD</b>		
<p>GaJ presented Item 7.0 on behalf of CN. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Summary Indicator Count (<i>page 1</i>) <ul style="list-style-type: none"> <li>○ Relates to all providers</li> </ul> </li> <li>• Off Track Indicator Summary by Provider (<i>page 1</i>)</li> <li>• Number of Clostridium difficile cases <ul style="list-style-type: none"> <li>○ Reference Exp2HE</li> </ul> </li> <li>• 12 hour trolley waits <ul style="list-style-type: none"> <li>○ Reference Exp5HE</li> </ul> </li> <li>• Number of Serious Incidents <ul style="list-style-type: none"> <li>○ Reference Exp16HE</li> <li>○ Reference Exp17Sp <ul style="list-style-type: none"> <li>▪ Tolerance</li> </ul> </li> </ul> </li> <li>• Number of Never Events</li> <li>• Patient Harm <ul style="list-style-type: none"> <li>○ Reference Exp27NL</li> </ul> </li> <li>• Mixed-sex Accommodation Breaches</li> </ul>	<b>Decision:</b> The Quality Dashboard was received, discussed and noted	GaJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ Reference Exp72Hu</li> <li>● Discussion took place regarding the use of a similar Dashboard for Primary Care</li> </ul>		
<b>8.0 CLAIMS UPDATE</b>		
JP advised that no claims had been notified to the CCG, within the last quarter.	<b>Decision:</b> Verbal update noted	JP
<b>PATIENT EXPERIENCE</b>		
<b>9.0 PATIENT RELATIONS REPORT</b> <i>Quarter 4: January 2015 – March 2015</i>		
<p>CW presented Item 9.0 on behalf of Julia Elstob, Patient Relations Manager, Yorkshire and Humber Commissioning Support, and the report was taken as 'read'. The report provided information in relation to Quarter 4 (January 2015 to March 2015). Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>● Executive Summary: Complaints/PALS for Quarter 4 (<i>page 3</i>)</li> <li>● It was agreed that the information could be provided in a table, rather than graphs/charts</li> </ul>	<p><b>Decision:</b> The Patient Relations Report was received, discussed and noted</p> <p><b>Action:</b> CW to liaise with Julia Elstob in relation to presentation of information for future reports</p>	Chair
<b>10.0 ANY OTHER BUSINESS</b>		
<p>Discussion took place in relation to performance at Hull and East Yorkshire Hospitals NHS Trust (HEY).</p> <p>It was queried when feedback would be received regarding the Friends and Family Test for Primary Care. It was confirmed that feedback was expected at the end of April 2015.</p>	<b>Decision:</b> Noted	Chair
<b>11.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>CLINICAL EXCELLENCE</b>		
<b>12.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE</b> <b>12.1 SUMMARY OF MEDICATION OPTIMISATION REVIEWS COMPLETED ON CARE HOME PATIENTS</b> <b>12.2 YORKSHIRE AND HUMBER CONTROLLED DRUG LOCAL INTELLIGENCE NETWORK – INFORMAL FEEDBACK</b> <b>12.3 SAFER MEDICATION WORK PROGRAMME 2014/2015</b>		
<p><b>Item 12.0: Medicines Management Prescribing Report</b> GMC presented Item 12.0, and the report was taken as 'read'. The document provided an update on the prescribing performance within the CCG GP practices between December 2014 and February 2015. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>● Prescribing growth areas (<i>page 6</i>)</li> <li>● QIPP Efficiency (April 2014 to March 2015) (<i>page 6</i>)</li> <li>● QIPP Plan Tracker (April 2015) (<i>page 6</i>)</li> <li>● NICE (<i>page 6</i>) <ul style="list-style-type: none"> <li>○ Discussion regarding Nalmefene for reducing alcohol consumption in people with alcohol dependence. The Northern Lincolnshire Area Prescribing Committee have discussed and agreed that the prescribing of Nalmefene is for specialised services, which can provide the required psychosocial interventions, as specified by NICE. The North Lincolnshire Council Public Health team are currently working with their lead providers to update current patient pathways for alcohol</li> </ul> </li> </ul>	<p><b>Decision:</b> The Medicines Management Prescribing Report was reviewed, discussed and noted</p>	GMC

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>dependence, to include treatment where necessary with Nalmefene and psychological intervention. The updated patient pathway is expected at the end of May 2015 from the Public Health Team</p> <ul style="list-style-type: none"> <li>• CCG Medicines Management Workplan 2014/2015 (pages 7 – 12) <ul style="list-style-type: none"> <li>○ Workplan noted</li> <li>○ GRASP AF (page 12)</li> </ul> </li> </ul> <p><b>Item 12.1: Summary of Medication Optimisation Reviews Completed on Care Home Patients</b> GMC presented Item 12.1, and the report was taken as 'read'. The document provided a summary in relation to medication optimisation reviews completed on care home patients.</p> <p><b>Item 12.2: Yorkshire and Humber Controlled Drug Local Intelligence Network: Informal Feedback</b> GMC presented Item 12.2, and the report was taken as 'read'. Discussion took place regarding the suggested actions from the Yorkshire and Humber Controlled Drug Local Intelligence Network in relation to the supply of high risk medicines (e.g. methadone) over bank holiday periods. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Dissemination of suggested actions to GP practices</li> <li>• Alert systems in place</li> <li>• Information sharing between services</li> <li>• Suggestion made to 'audit' GP practices, to ensure action being taken</li> </ul> <p><b>Item 12.3: Safer Medication Group Work Programme 2014/2015</b> GMC presented Item 12.3, and the report was taken as 'read'. It was agreed that the progress, and whether the action had been completed, needed to be reviewed and updated. It was queried who the identified Leads were working with in Primary Care.</p>	<p><b>Decision:</b> Noted</p> <p><b>Decision/Action:</b> GMC to confirm how the information received from the Yorkshire and Humber Controlled Drug Local Intelligence Network has been disseminated to GP practices, and to take forward the suggestion to 'audit' practices to ensure action being taken.</p> <p><b>Decision/Action:</b> The Safer Medication Group Work Programme 2014/2015 was noted for information. GMC to take forward the comments raised</p>	
<p><b>13.0 FRANCIS REPORT/HARD TRUTHS UPDATE</b> <b>13.1 PROVIDER CURRENT POSITION (BY EXCEPTION)</b></p>		
<p><b>Item 13.0: Francis Report/Hard Truths Update</b> CW advised that there was nothing new to report in relation to the Francis Report/Hard Truths.</p> <p><b>13.1: Provider Current Position (by exception)</b> CW advised that Veritas were working with Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT), in relation to the Serious Incident and Duty of Candour process/compliance.</p>	<p><b>Decision:</b> Noted the verbal updates</p>	<p>Chair</p>
<p><b>14.0 WINTERBOURNE UPDATE</b></p>		
<p>CW advised that originally North Lincolnshire CCG had 11 Learning Disability patients out of area. At present, there were no Winterbourne clients on the register. The Yorkshire and Humber Commissioning Support Team were thanked for their work within this area.</p>	<p><b>Decision:</b> Noted the verbal update</p>	<p>Chair</p>
<p><b>15.0 PRIMARY CARE DEVELOPMENT UPDATE</b></p>		
<p>JP provided a verbal update in relation to:</p> <ul style="list-style-type: none"> <li>• <b>Primary Care Web Tool</b> JP advised that the Primary Care Web Tool had highlighted</li> </ul>	<p><b>Decision:</b> Verbal update noted.</p>	<p>JP</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>two further practices for review.</p> <ul style="list-style-type: none"> <li>• <b>Care Quality Commission (CQC)</b> It was noted that a Care Quality Commission Report had been published in relation to an inspection at South Axholme Practice on 2 February 2015. The CQC overall rating was 'requires improvement'. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>○ Relevant legislation in relation to medicines management</li> <li>○ The full report can be accessed via the CQC website</li> <li>○ It was queried whether a list of North Lincolnshire GP Practices and their CQC rating could be produced for a future meeting</li> </ul> </li> </ul>	<p><b>Action:</b> JP to produce a list of GP Practices and their CQC rating</p>	
<b>16.0 MORTALITY SURVEILLANCE PACK</b>		
<p>CW presented Item 16.0 and the report was taken as 'read'. The document was dated January 2015, and provided a summary of the latest quarterly hospital mortality data and trends for the main hospital providers for the CCG's population. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• The Summary Hospital-level Mortality Indicator (SHMI) statistics had been updated, showing that the SHMI for Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) had increased from 107.7 to 110, but remain in the 'as expected' range</li> <li>• RJF provided a verbal update in relation to 'end to end' reviews</li> </ul>	<p><b>Decision:</b> The Mortality Surveillance Pack was received, discussed and noted</p>	Chair
<b>17.0 PATIENT REPORTED OUTCOMES MEASURES (PROMS) QUARTERLY REPORT</b>		
<p>CW presented Item 17.0 and the report was taken as 'read'. The report provided a summary of the latest quarterly PROMs data and trends for the CCG overall, and for the main providers for the CCG's population. The report was based on data published on 13 November 2014 by the Health and Social Care Information Centre (HSCIC) relating to procedures conducted up to March 2014. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Key Messages (<i>pages 8 and 9</i>) <ul style="list-style-type: none"> <li>○ Groin Hernia: Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT)</li> </ul> </li> </ul>	<p><b>Decision:</b> The PROMs Quarterly Report was received, discussed and noted</p>	Chair
<b>18.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>19.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
The Care Quality Commission Report in relation to the South Axholme Practice was highlighted, as the CQC overall rating was 'requires improvement'.	<b>Decision:</b> Noted	Chair
<b>PATIENT SAFETY</b>		
<b>20.0 SAFEGUARDING CHILDREN UPDATE</b>		
<p>SG presented Item 20.0, and the report was taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Safeguarding Children Work Plan <ul style="list-style-type: none"> <li>○ To be shared as part of the update in May 2015</li> </ul> </li> <li>• OFSTED inspection of Children's Services</li> </ul>	<p><b>Decision:</b> The Safeguarding Children Report was received, discussed and noted.</p>	SG
<b>21.0 SAFEGUARDING ADULTS UPDATE</b>		
DP provided a verbal update. Specific areas highlighted/discussed:	<b>Decision:</b> The Safeguarding	DP

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>• Prevent Training</li> <li>• NHS Safeguarding Accountability and Assurance Framework               <ul style="list-style-type: none"> <li>○ Published for consultation from 12 February 2015 until 26 March 2015. Further information awaited</li> </ul> </li> <li>• Care Homes</li> </ul>	Adults verbal update was noted.	
<b>22.0 INFECTION CONTROL UPDATE</b>		
<p>GJ presented Item 22.0, the Infection, Prevention and Control Report for February/March 2015, and the report was taken as 'read'. The report provided an overview on infection rates, trends, outbreaks and collaborative working with contractors across North Lincolnshire and the Cluster. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• MRSA bacteraemia               <ul style="list-style-type: none"> <li>○ Year-end total of 3 MRSA bacteraemia cases</li> </ul> </li> <li>• MSSA bacteraemia               <ul style="list-style-type: none"> <li>○ To date since April 2014, 35 cases had been detected and apportioned to North Lincolnshire residents</li> </ul> </li> <li>• MRSA/MSSA PVL               <ul style="list-style-type: none"> <li>○ To date since April 2014, 4 cases had been reported and managed</li> </ul> </li> <li>• C.Difficile               <ul style="list-style-type: none"> <li>○ Year-end total of 35 C.difficile cases against an objective of 37</li> </ul> </li> <li>• E.Coli bacteraemia               <ul style="list-style-type: none"> <li>○ To date since April 2014, 128 cases had been detected and apportioned to North Lincolnshire residents</li> <li>○ It was highlighted that there is a seasonal increase in cases during the summer months</li> </ul> </li> <li>• GP Audits and Issues</li> <li>• Care Home Audits and Issues</li> <li>• Other Issues               <ul style="list-style-type: none"> <li>○ Tuberculosis</li> </ul> </li> <li>• Outbreaks               <ul style="list-style-type: none"> <li>○ D&amp;V</li> <li>○ Scarlet Fever</li> </ul> </li> <li>• Seasonal Flu</li> <li>• MRSA bacteraemia: SystmOne alerts for high risk patients               <ul style="list-style-type: none"> <li>○ Removal of alerts by some GP practices</li> </ul> </li> <li>• 2015/2016 Key Priorities</li> </ul>	<p><b>Decision:</b> The Infection Prevention and Control Report for February/March 2015 was received, discussed and noted.</p> <p><b>Action:</b> Message to be sent to GP Practices to advise that SystmOne alerts should not be removed</p>	GJ
<b>23.0 QUARTER 4 INCIDENT REPORT 2014/2015 (1 JANUARY 2015 TO 31 MARCH 2015)</b>		
<p>GaJ presented Item 23.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, reported in quarter 4 for the period 1 January 2015 to 31 March 2015, via the new electronic Incident Reporting 'App'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• GP Incident Reporting App               <ul style="list-style-type: none"> <li>○ Available as a tile on the CCG Intranet</li> <li>○ Can be any member of the practice who adds incidents</li> <li>○ Discussed at the GP Training session on 10 December 2014, and added to Practice Dispatches</li> </ul> </li> </ul>	<p><b>Decision:</b> The Quarter 4 Incident Report 2014/2015 was received, discussed and noted.</p>	GaJ



SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ on 12 January 2015 <ul style="list-style-type: none"> <li>○ There has been a greater proportion of incidents reported during Quarter 4, than previous quarters</li> </ul> </li> <li>● Incidents overview <ul style="list-style-type: none"> <li>○ Breakdown of reported incidents from GP Practices</li> </ul> </li> <li>● Incidents relating to discharge summary communications</li> <li>● NHS111</li> </ul>		
<b>24.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT</b> <b>24.1 FEBRUARY 2015</b> <b>24.2 MARCH 2015</b>		
<p>GaJ presented Items 24.1 and 24.2, and the reports were taken as 'read'. The Serious Incident Reports for February and March 2015 highlighted the themes and any emerging issues by provider.</p> <p><b>24.1: February 2015</b>  Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>● Executive Summary (<i>page 4</i>)</li> <li>● Performance Monitoring: Timeliness (<i>page 12</i>)</li> <li>● Key Messages (<i>page 15</i>)</li> </ul> <p><b>24.2: March 2015</b>  Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>● Executive Summary (<i>page 4</i>)</li> <li>● Key Messages (<i>page 15</i>)</li> </ul>	<p><b>Decision:</b> The Serious Incident Reports for February and March 2015 were received, discussed and noted.</p>	<p>GaJ</p>
<b>25.0 NORTH LINCOLNSHIRE CCG INCIDENT AND SERIOUS INCIDENT MEETING</b> <b>25.1 25 FEBRUARY 2015</b>		
<p>GaJ advised that the meeting scheduled to take place on 25 February 2015 had been cancelled.</p>	<p><b>Decision:</b> Noted</p>	<p>GaJ</p>
<b>26.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING</b> <b>26.1 MINUTES: 25 FEBRUARY 2015</b>		
<p>GaJ presented Item 26.1. The minutes from the meeting on 25 February 2015 were taken as 'read', and noted. No comments were made.</p>	<p><b>Decision:</b> The minutes of the Northern Lincolnshire and Goole NHS Foundation Trust Serious Incident Meeting on 25 February 2015, were received and noted.</p>	<p>GaJ</p>
<b>27.0 NHS ENGLAND SERIOUS INCIDENT FRAMEWORK: 27 MARCH 2015</b>		
<p>GaJ presented Item 27.0. The document outlined the NHS England Serious Incident Framework. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>● Three levels of investigation <ul style="list-style-type: none"> <li>○ Concise investigations</li> <li>○ Comprehensive investigations</li> <li>○ Independent investigations</li> </ul> </li> <li>● A single timeframe of 60 working days has been agreed for the completion and submission of concise and comprehensive investigation reports</li> <li>● Independent investigations should be completed within 6 months of being commissioned</li> <li>● Serious Incidents <ul style="list-style-type: none"> <li>○ Serious Incident Policy</li> </ul> </li> <li>● Duty of Candour</li> <li>● Closure</li> </ul>	<p><b>Decision:</b> The Serious Incident Framework (27 March 2015) was received, discussed and noted.</p>	<p>GaJ</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ Closure checklist</li> </ul>	<b>Action:</b> GaJ to review the current Serious Incident report review form against the closure checklist	
<b>28.0 NHS ENGLAND PATIENT SAFETY REVISED NEVER EVENTS POLICY AND FRAMEWORK: 27 MARCH 2015</b>		
GaJ presented Item 28.0. The document outlined the NHS England Patient Safety Revised Never Events Policy and Framework. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Failure to report a Never Event (<i>paragraph 3</i>)</li> <li>• Cost recovery (<i>paragraph 4</i>)</li> <li>• Never events list</li> <li>• Flow chart               <ul style="list-style-type: none"> <li>○ 'Inform organisational leaders that a Never Event has occurred following local policy'                   <ul style="list-style-type: none"> <li>▪ It was queried whose policy would be followed</li> </ul> </li> </ul> </li> </ul>	<b>Decision:</b> The Revised Never Events Policy and Framework (27 March 2015) was received, discussed and noted.  <b>Action:</b> GaJ to pick up query	GaJ
<b>29.0 ABSCONDING/MISSING PATIENTS WITHIN NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST</b>		
CW presented Item 29.0 and the report was taken as 'read'. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Good report               <ul style="list-style-type: none"> <li>○ CW to feed back to Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT)</li> </ul> </li> <li>• Assurance in relation to fluctuating capacity patients               <ul style="list-style-type: none"> <li>○ CW to pick up</li> </ul> </li> <li>• Involvement of Mental Health and Drug and Alcohol services               <ul style="list-style-type: none"> <li>○ CW to pick up</li> </ul> </li> <li>• Swipe card access to ward areas</li> <li>• Smart Board alerts</li> <li>• Mandatory training compliance for the Mental Capacity Act (MCA) and Mental Capacity Act and Deprivation of Liberty Safeguards (MCA DOLS)</li> </ul>	<b>Decision:</b> The report was received, discussed and noted.  <b>Action:</b> CW to pick up highlighted actions	Chair
<b>30.0 NHS111 UPDATE</b> <b>30.1 MONTH 10 (JANUARY 2015)</b> <b>30.2 MONTH 11 (FEBRUARY 2015)</b>		
Items 30.1 and 30.2 were taken as 'read'. Specific areas highlighted/discussed: <p><b>30.1: Month 10 (January 2015)</b></p> <ul style="list-style-type: none"> <li>• Activity (<i>page 2</i>)</li> <li>• Warm transfer and 10 minute call back (<i>page 2</i>)</li> <li>• Call back within 2 hours (<i>page 2</i>)</li> </ul> <p><b>30.2 Month 11 (February 2015)</b></p> <ul style="list-style-type: none"> <li>• Activity (<i>page 2</i>)</li> <li>• Warm transfer and 10 minute call back (<i>page 2</i>)</li> <li>• Call back within 2 hours (<i>page 2</i>)</li> <li>• It was queried why there was a need to log the caller's gender. It was suggested that this should be the patient's gender</li> </ul>	<b>Decision:</b> The NHS111 update reports for Month 10 (January 2015) and Month 11 (February 2015) were received, discussed and noted	Chair
<b>31.0 SCARLET FEVER UPDATE</b>		
Item 31.0 had been circulated for information only. The North Lincolnshire notification figures were highlighted. It was noted that	<b>Decision:</b> Noted	GJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
an update had been provided by GJ under Item 22.0 (Infection Prevention and Control Report).		
<b>32.0 ANY OTHER BUSINESS</b>		
CW provided a verbal update in relation to good practice at Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) regarding pressure ulcers. A project aimed at reducing pressure ulcers in hospital, will see every nurse at NLaGFT given a Pressure Ulcer Grading (PUG) Visual Guide and a pocket mirror, so they can carry out regular skin assessments to help identify early signs of deterioration in skin integrity and recognise pressure ulcers. The tissue viability nurses are working on a number of projects to increase staff awareness.	<b>Decision:</b> Update noted	Chair
<b>33.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>INFORMATION GOVERNANCE</b>		
<b>34.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT</b>		
<b>34.1 DRAFT INFORMATION GOVERNANCE GROUP MINUTES: 9 FEBRUARY 2015</b>		
Item 34.1 was taken as 'read'. It was noted that the Acceptable Computer Use Policy, Privacy Impact Assessment Policy and the Records Management Policy had been presented to the Quality Group on 26 February 2015.	<b>Decision:</b> Update noted	Chair
<b>Information Governance Toolkit submission 2014/2015</b> All standards have attained Level 2 compliance.		
<b>35.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP</b>		
Nothing discussed.		
<b>36.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>37.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>CONTRACT QUALITY ISSUES</b>		
<b>38.0 CQUINS UPDATE</b>		
CW provided a verbal update in relation to CQUINS for 2015/2016. The national CQUINS were being discussed with local providers.	<b>Decision:</b> Noted	Chair
<b>39.0 ANY OTHER BUSINESS</b>		
Nothing discussed.		
<b>40.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
A risk in relation to the achievement of CQUINS was highlighted.	<b>Decision:</b> Noted	Chair
<b>MEETING NOTES FROM OTHER GROUPS</b>		
<b>41.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE CCG GOVERNING BODY</b>		
No issues were referred.	<b>Decision:</b> Noted	
<b>42.0 DATE AND TIME OF NEXT MEETING</b>		
Thursday 28 May 2015 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	<b>Decision:</b> Noted	Chair