


<b>MEETING DATE:</b>	13 August 2015	 <b>North Lincolnshire Clinical Commissioning Group</b>  <b>REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY</b>
<b>AGENDA ITEM NUMBER:</b>	Item 7.10	
<b>AUTHOR:</b>	Catherine Wylie	
<b>JOB TITLE:</b> <b>DEPARTMENT:</b>	Director of Risk and Quality Assurance	

**CCG QUALITY GROUP MINUTES  
28 MAY 2015 & 25 JUNE 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 28 May 2015 and 25 June 2015 are attached for the CCG Governing Body to receive and note, for information only.					
<b>2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:</b>					
<b>Continue to improve the quality of services</b>	<b>X</b>				
<b>Reduce unwarranted variations in services</b>	<b>X</b>				
<b>Deliver the best outcomes for every patient</b>	<b>X</b>				
<b>Improve patient experience</b>	<b>X</b>				
<b>Reduce the inequalities gap in North Lincolnshire</b>	<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>					
<table border="1" style="display: inline-table;"> <tr> <td style="width: 20px;">Yes</td> <td style="width: 20px;"></td> <td style="width: 20px;">No</td> <td style="width: 20px;">X</td> </tr> </table>	Yes		No	X	
Yes		No	X		

**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	 <p><b>QUALITY GROUP</b></p>
<b>MEETING DATE:</b>	Thursday 28 May 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 ( <i>CW</i> ) <i>Chair</i>	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Dr Faisal Baig ( <i>FB</i> )	CCG GP Member	NHS North Lincolnshire CCG
Dr Anita Kapoor ( <i>AK</i> )	CCG GP Member	NHS North Lincolnshire CCG
Sarah Glossop ( <i>SG</i> )	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
John Pougher ( <i>JP</i> )	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
<b>IN ATTENDANCE:</b>		
Greta Johnson ( <i>GJ</i> )	Infection Control Specialist Nurse <i>In attendance for all items</i>	Northern Lincolnshire and Goole NHS Foundation Trust
Chloe Nicholson ( <i>CN</i> )	Quality Lead: North Lincolnshire and North East Lincolnshire CCG <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Gary Johnson ( <i>GaJ</i> )	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Julie Wilburn ( <i>JW</i> )	Specialist Nurse: Safeguarding Children <i>In attendance for all items</i>	NHS North Lincolnshire CCG
Clare Smith ( <i>CS</i> )	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

<b>APOLOGIES:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Ian Reekie ( <i>IR</i> ) <i>Vice Chair</i>	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Dr Robert Jaggs-Fowler ( <i>RJF</i> )	CCG GP Member/Medical Director/Named Doctor for Safeguarding (Adults & Children)	NHS North Lincolnshire CCG
Deborah Pollard ( <i>DP</i> )	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Jane Ellerton ( <i>JE</i> )	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Gemma McNally ( <i>GMc</i> )	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 AND QUORACY</b>		
Apologies were noted, as detailed above. It was noted that the meeting was quorate to proceed.	<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
<b>3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 23 APRIL 2015</b>		
<b>3.1 ACTION LOG UPDATE AS DISCUSSED ON 23 APRIL 2015</b>		
The minutes were accepted as an accurate record of the meeting.	<b>Decision:</b> Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
The Action Log Update as discussed on 23 April 2015 was received and noted.		
<b>4.0 ACTION LOG – OUTSTANDING ACTIONS</b>		
Outstanding actions from 23 October 2014 to 23 April 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 (BAF)</b> <b>6.2 RISK REGISTER</b>		
<p><b>Item 6.1: Board Assurance Framework (BAF)</b> JP presented Item 6.1, 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 (BAF). 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. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• The CCG Governing Body Workshop on 12 March 2015 undertook a review of strategic risks and the CCG BAF. 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</li> <li>• It was noted that there was a number of gaps in the framework for completion: <ul style="list-style-type: none"> <li>○ Q19: ‘Gaps in Assurance’</li> <li>○ Q20: ‘Gaps in Control’ and ‘Gaps in Assurance’</li> <li>○ Two risks at the bottom of page 1 to be reviewed</li> </ul> </li> <li>• CW advised that the BAF and the Risk Register were administered by Yorkshire and Humber Commissioning Support (YHCS)</li> </ul> <p><b>Item 6.2: Risk Register</b> JP presented Item 6.2, and the report was taken as ‘read’. The report informed the Quality Group of the risks identified on the North Lincolnshire CCG Risk Register. 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. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• The format of the Risk Register is currently under review, and is in the process of being updated by YHCS</li> <li>• FP4: Discussion took place regarding the ‘movement’ and the ‘residual risk score’</li> </ul>	<p><b>Decision:</b> The CCG Board Assurance Framework was received, discussed and noted</p> <p><b>Action:</b> CW and JP to meet with Dawn Taylor, Corporate Services Manager, Yorkshire and Humber Commissioning Support to discuss the BAF and the Risk Register</p> <p><b>Decision:</b> The CCG Risk Register was received, discussed and noted</p>	<p>JP</p> <p>JP</p> <p>JP</p>
<b>7.0 QUALITY DASHBOARD</b>		
<p>CN presented Item 7.0; an updated version of the circulated document was presented. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Overall Indicator RAG Achievement (<i>page 1</i>) <ul style="list-style-type: none"> <li>○ The segment with 62% should be ‘green’, not ‘red’</li> </ul> </li> <li>• Summary Indicator Count (<i>page 1</i>) <ul style="list-style-type: none"> <li>○ Relates to all providers</li> <li>○ ‘Blue’ represents areas where no data is available at</li> </ul> </li> </ul>	<b>Decision:</b> The Quality Dashboard was received, discussed and noted	CN

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>present</p> <ul style="list-style-type: none"> <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 Exp6Sp <ul style="list-style-type: none"> <li>▪ The indicator is not applicable, agreement to remove from the report</li> </ul> </li> <li>○ Reference Exp5HE</li> <li>○ Discussion regarding the 12 hour trolley waits policy/guidance</li> </ul> </li> <li>• Number of MRSA Cases <ul style="list-style-type: none"> <li>○ Reference Exp7NL</li> </ul> </li> <li>• NEWS Score</li> <li>• Number of Serious Incidents <ul style="list-style-type: none"> <li>○ Reference Exp15NL</li> <li>○ Reference Exp16HE</li> <li>○ Reference Exp19EM</li> <li>○ Reference Exp20RD</li> </ul> </li> <li>• Number of Never Events <ul style="list-style-type: none"> <li>○ Reference Exp22HE <ul style="list-style-type: none"> <li>▪ Discussion took place in relation to the supporting narrative</li> </ul> </li> </ul> </li> <li>• Patient Harm <ul style="list-style-type: none"> <li>○ Reference Exp27NL</li> </ul> </li> <li>• Number of Patient Falls <ul style="list-style-type: none"> <li>○ Reference Exp43NL</li> </ul> </li> <li>• NICE Guidance Compliance <ul style="list-style-type: none"> <li>○ Reference Exp47NL</li> </ul> </li> <li>• CAS Alerts <ul style="list-style-type: none"> <li>○ Reference Exp50NL <ul style="list-style-type: none"> <li>▪ Awaiting feedback</li> </ul> </li> </ul> </li> <li>• CQC Reports and Related Actions <ul style="list-style-type: none"> <li>○ Reference Exp55HE <ul style="list-style-type: none"> <li>▪ Discussion took place in relation to the supporting narrative</li> </ul> </li> </ul> </li> <li>• Mortality – SHMI <ul style="list-style-type: none"> <li>○ Reference Exp60SG</li> </ul> </li> <li>• Mortality – HED <ul style="list-style-type: none"> <li>○ Reference Exp65NL</li> </ul> </li> <li>• Mortality – RAMI (MAT) <ul style="list-style-type: none"> <li>○ Reference Exp67NL</li> </ul> </li> <li>• Mixed-sex Accommodation Breaches <ul style="list-style-type: none"> <li>○ Reference Exp72Hu</li> </ul> </li> <li>• Number of Complaints <ul style="list-style-type: none"> <li>○ Reference Exp78YA</li> </ul> </li> <li>• Discussion took place in relation to performance at Hull and East Yorkshire Hospitals NHS Trust (HEY). It was noted that HEY are under close scrutiny, and the position is being closely monitored</li> </ul>	<p><b>Action:</b> GaJ to forward any previous reports to CN</p> <p><b>Action:</b> CN to obtain information from Northern Lincolnshire and Goole NHS Foundation Trust (NLAGFT) in relation to repeat falls</p>	<p>GaJ</p> <p>CN</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>PATIENT EXPERIENCE</b>		
<b>8.0 PATIENT RELATIONS REPORT</b> <i>Annual Report: April 2014 – March 2015</i>		
CW presented Item 8.0 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 April 2014 to March 2015.	<b>Decision:</b> The Patient Relations Report was received, discussed and noted	Chair
<b>9.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>10.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>CLINICAL EXCELLENCE</b>		
<b>11.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE</b>		
<p><b>Item 11.0: Medicines Management Prescribing Report</b></p> <p>CW presented Item 12.0 on behalf of GMc, and the report was taken as 'read'. The document provided an update on the prescribing performance within the CCG GP practices between January 2015 and March 2015. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>QIPP Efficiency (<i>page 6</i>)</li> </ul> <p>It was noted that the medicines management team are commencing prescribing visits with practices, to introduce the workplan and to also highlight areas of opportunity for budget management and QIPP efficiencies. It was queried who takes part in the practice visits</p>	<p><b>Decision:</b> The Medicines Management Prescribing Report was reviewed, discussed and noted</p> <p><b>Action:</b> GMc to confirm who takes part in the practice visits</p>	<p>GMc</p> <p>GMc</p>
<b>12.0 FRANCIS REPORT/HARD TRUTHS UPDATE</b> <b>12.1 PROVIDER CURRENT POSITION (BY EXCEPTION)</b>		
<p><b>Item 12.0: Francis Report/Hard Truths Update</b></p> <p><b>Item 12.1: Provider Current Position (by exception)</b></p> <p>It was noted that there was no further update at this time. It was agreed to remove the standing item from the agenda. Any further updates would be provided on an exception basis.</p>	<b>Decision:</b> Noted	Chair
<b>13.0 WINTERBOURNE UPDATE</b>		
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. It was agreed to remove the standing item from the agenda. Any further updates would be provided on an exception basis.	<b>Decision:</b> Noted	Chair
<b>14.0 SHMI: SUMMARY FOR SELECTED PROVIDERS (APRIL 2015)</b>		
<p>CW presented Item 14.0, and the report was taken as 'read'. The report provided Summary Hospital-level Mortality Indicator (SHMI) information for selected provider organisations.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) were in Band 2 'as expected (between over-dispersion control limits)'</li> </ul>	<b>Decision:</b> The SHMI Summary for Selected Providers (April 2015) was reviewed, discussed and noted	Chair
<b>15.0 PRIMARY CARE DEVELOPMENT UPDATE</b> <b>15.1 DISCHARGE SUMMARIES</b>		
<p>JP provided a verbal update in relation to:</p> <ul style="list-style-type: none"> <li><b>Primary Care Web Tool</b></li> </ul> <p>JP advised that no further practices had been identified as outliers.</p>	<b>Decision:</b> Verbal update noted.	JP


SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li><b>Care Quality Commission (CQC)</b> It was noted that a list of North Lincolnshire GP Practices and their CQC rating had been produced and shared with Quality Group members. It was agreed that the document would be updated regularly and shared.</li> <li><b>Diabetic Retinal Screening</b> Discussion took place regarding the above service. It was agreed that CW would write to Dr Phil Kirby, Screening and Immunisation Lead, NHS England - North (Yorkshire and Humber) to obtain more information. It was suggested that this should be discussed at a future Council of Members meeting.</li> </ul> <p><b>Item 15.1: Discharge Summaries</b> Discussion took place regarding the discharge summaries being received from Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT). JP advised that he had met with Karen Fanthorpe, Deputy Chief Operating Officer, NLaGFT, and any issues/concerns were being taken forward.</p>	<p><b>Action:</b> CW to write to Dr Kirby Screening and Immunisation Lead, NHS England - North (Yorkshire and Humber) to obtain more information.</p> <p><b>Decision:</b> Noted</p>	<p>Chair</p> <p>JP</p>
<b>16.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>17.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
Diabetic Retinal Screening was identified, as per the discussion under Item 15.0	<b>Decision:</b> Noted	Chair
<b>PATIENT SAFETY</b>		
<b>18.0 SAFEGUARDING CHILDREN UPDATE</b>		
<p>SG presented Item 18.0, and the report was taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>Case Reviews</li> <li>The Safeguarding Children Work Plan was attached for information</li> <li>The Safeguarding Children Governing Body Briefing would now take place on 9 July 2015</li> <li>OFSTED inspection of Children's Services</li> <li>SG advised that a Specialist Practitioner (Safeguarding) post was now been advertised. Details would be forwarded to providers, safeguarding leads and Directors of Nursing.</li> </ul>	<p><b>Decision:</b> The Safeguarding Children Report was received, discussed and noted.</p> <p><b>Decision:</b> The Safeguarding Children Work Plan was received, discussed and noted.</p>	<p>SG</p>
<b>19.0 SAFEGUARDING ADULTS UPDATE</b>		
<p>CW presented Item 19.0 on behalf of DP, and the report as taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>Prevent</li> <li>Safeguarding Adults Reviews (SAR)</li> <li>Designated Adult Safeguarding Manager (DASM)</li> </ul>	<b>Decision:</b> The Safeguarding Adults Report was received, discussed and noted.	DP
<b>20.0 INFECTION PREVENTION AND CONTROL REPORT: APRIL 2015</b>		
<p>GJ presented Item 20.0, the Infection, Prevention and Control Report for April 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>2015/2016: Zero tolerance MRSA bacteraemia objective for all NHS organisations</li> </ul> </li> </ul>	<b>Decision:</b> The Infection Prevention and Control Report for April 2015 was received, discussed and noted.	GJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ To date since April 2015, no MRSA bacteraemia cases detected/apportioned to North Lincolnshire residents</li> <li>● MSSA bacteraemia <ul style="list-style-type: none"> <li>○ No trajectories/targets set for alert organism</li> <li>○ To date since April 2015, 2 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 2015, 1 case had been reported and managed</li> </ul> </li> <li>● C.Difficile <ul style="list-style-type: none"> <li>○ Primary Care Organisation (PCO) C.Difficile objective for 2015/2016 is 31</li> <li>○ To date since April 2015, 4 C.Difficile cases had been detected and apportioned to North Lincolnshire residents</li> <li>○ It was noted that the year-end total of 35 C.Difficile cases against an objective of 37 for 2014/2015 was updated in late April 2015, with a further case detected. Therefore the total for 2014/2015 was 36</li> </ul> </li> <li>● E.Coli bacteraemia <ul style="list-style-type: none"> <li>○ No trajectories/targets set for alert organism</li> <li>○ To date since April 2015, 10 cases had been detected and apportioned to North Lincolnshire residents</li> </ul> </li> <li>● GP Audits and Issues</li> <li>● Care Home Audits and Issues <ul style="list-style-type: none"> <li>○ The Provider Information Forum set up to replace the Care Home Intelligence Group has been cancelled until further notice</li> </ul> </li> <li>● Other Issues <ul style="list-style-type: none"> <li>○ On-going collaborative work across the Humber patch for the development of a Community/Primary Care toolkit for Carbapenemase Producing Enterobacteriaceae (CPE)</li> <li>○ On-going collaborative work across the Humber patch regarding an Infection Risk Assessment Tool</li> </ul> </li> <li>● Outbreaks <ul style="list-style-type: none"> <li>○ D&amp;V</li> <li>○ Norovirus</li> <li>○ Legionella</li> </ul> </li> <li>● Seasonal Flu</li> </ul>		
<b>21.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: APRIL 2015</b>		
<p>GaJ presented Item 21.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in April 2015, either via the initial Strategic Executive Information System (StEIS) triggers or areas of concern highlighted at the Serious Incident Group meetings and the monitoring of reports for quality of content, timeliness and shared learning.</p>	<p><b>Decision:</b> The Serious Incident Report for April 2015 was received, discussed and noted.</p>	<p>GaJ</p>



SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>22.0 NORTH LINCOLNSHIRE CCG INCIDENT AND SERIOUS INCIDENT MEETING: 25 MARCH 2015</b>		
GaJ presented Item 22.0. The minutes from the meeting on 25 March 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the North Lincolnshire CCG Incident and Serious Incident Meeting on 25 March 2015, were received and noted	GaJ
<b>23.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: 25 MARCH 2015</b>		
GaJ presented Item 23.0. The minutes from the meeting on 25 March 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the Northern Lincolnshire and Goole NHS Foundation Trust Serious Incident Meeting on 25 March 2015, were received and noted.	GaJ
<b>24.0 NHS111 UPDATE: MONTH 12 (MARCH 2015)</b>		
Item 24.0 was taken as 'read'. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Activity (page 2)</li> <li>• Warm transfer and 10 minute call back (page 2)</li> <li>• Call back within 2 hours (page 2)</li> <li>• North Lincolnshire CCG Directory of Services (DOS) (page 5)</li> </ul>	<b>Decision:</b> The NHS111 update report for Month 12 (March 2015) was received, discussed and noted	Chair
<b>25.0 OXYGEN ASSESSMENTS</b>		
CW advised that Rebecca Bowen, Senior Delivery Manager, Yorkshire and Humber Commissioning Support would be invited to attend the CCG Quality Group meeting on 25 June 2015, to discuss further, in order to ensure assurance was provided to the CCG in relation to oxygen assessments.	<b>Decision:</b> Noted	Chair
<b>26.0 ROTHERHAM DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST (RDaSH): SIGN UP TO SAFETY – SAFETY IMPROVEMENT PLAN 2015 - 2018</b>		
Item 26.0 had been circulated for information only.	<b>Decision:</b> Noted	Chair
<b>27.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Update noted	Chair
<b>28.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
Oxygen assessments (as per Item 25.0)	<b>Decision:</b> Noted	Chair
<b>INFORMATION GOVERNANCE</b>		
<b>29.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT</b>		
<b>Information Governance Toolkit submission 2014/2015</b> CW advised that all standards had attained Level 2 compliance.	<b>Decision:</b> Verbal update noted	Chair
<b>30.0 FREEDOM OF INFORMATION</b> <b>30.1 FREEDOM OF INFORMATION ACT 2000: QUARTER 4/YEAR END (Requests received 1 January 2015 – 31 March 2015)</b> <b>30.2 QUARTER 4 SUMMARY OF CCG FREEDOM OF INFORMATION DATA</b> <b>30.3 FREEDOM OF INFORMATION WORK PLAN 2015/2016</b>		
CW presented Items 30.1, 30.2 and 30.3 regarding Freedom of Information requests, and all were taken as 'read', and noted for information.	<b>Decision:</b> The Freedom of Information Act 2000 Quarter 4/Year End reports and the Work Plan for 2015/2016 were received and noted	Chair
<b>31.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP</b>		
JP advised that the Information Governance Group meeting had taken place on 19 May 2015. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• There is a need to ensure Privacy Impact Assessments (PIA) are being undertaken</li> </ul>	<b>Decision:</b> Verbal update noted	JP

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>Information Toolkit work is commencing for 2015/2016. The CCG needs to be mindful of data flows and information security</li> </ul>		
<b>32.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> 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>CONTRACT QUALITY ISSUES</b>		
<b>34.0 CQUINS UPDATE</b>		
CW provided a verbal update in relation to national and local CQUINS for 2015/2016.	<b>Decision:</b> Noted	Chair
<b>35.0 NORTHERN LINCOLNSHIRE QUALITY AND SAFETY ASSURANCE GROUP: 22 JANUARY 2015</b>		
CW presented Item 35.0. The minutes from the meeting on 22 January 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the Northern Lincolnshire Quality and Safety Assurance Group on 22 January 2015, were received and noted.	Chair
<b>36.0 NORTH YORKSHIRE &amp; HUMBER QUALITY SURVEILLANCE GROUP: 11 MARCH 2015</b>		
CW presented Item 36.0. The minutes from the meeting on 11 March 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the North Yorkshire and Humber Quality Surveillance Group on 11 March 2015, were received and noted	Chair
<b>37.0 ANY OTHER BUSINESS</b>		
Nothing discussed.		
<b>38.0 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>39.0 PRIMARY CARE DEVELOPMENT GROUP: 18 FEBRUARY 2015</b>		
CW presented Item 39.0. The minutes from the meeting on 18 February 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the Primary Care Development Group on 18 February 2015, were received and noted	Chair
<b>40.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE CCG GOVERNING BODY</b>		
Issues as discussed under Item 31.0 from the Information Governance Group were noted.	<b>Decision:</b> Noted	Chair
<b>41.0 DATE AND TIME OF NEXT MEETING</b>		
Thursday 25 June 2015 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	<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 25 June 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 ( <i>CW</i> ) <i>Chair</i>	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Ian Reekie ( <i>IR</i> ) <i>Vice Chair</i>	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Dr Robert Jaggs-Fowler ( <i>RJF</i> )	CCG GP Member/Medical Director/Named Doctor for Safeguarding (Adults & Children)	NHS North Lincolnshire CCG
Dr Anita Kapoor ( <i>AK</i> )	CCG GP Member	NHS North Lincolnshire CCG
Jane Ellerton ( <i>JE</i> )	Senior Manager; Commissioning	NHS North Lincolnshire CCG
John Pougher ( <i>JP</i> )	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
<b>IN ATTENDANCE:</b>		
Greta Johnson ( <i>GJ</i> )	Infection Control Specialist Nurse <i>In attendance for all items</i>	Northern Lincolnshire and Goole NHS Foundation Trust
Chloe Nicholson ( <i>CN</i> )	Quality Lead: North Lincolnshire and North East Lincolnshire CCG <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Gary Johnson ( <i>GaJ</i> )	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Gemma McNally ( <i>GMc</i> )	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG) <i>In attendance for Item 11.0 only</i>	Yorkshire and Humber Commissioning Support
Rebecca Bowen ( <i>RB</i> )	Senior Delivery Manager <i>In attendance for Items 25.0 and 26.0 only</i>	Yorkshire and Humber Commissioning Support
Clare Smith ( <i>CS</i> )	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

<b>APOLOGIES:</b>		
<b>NAME</b>	<b>TITLE</b>	<b>SERVICE/AGENCY</b>
Dr Faisal Baig ( <i>FB</i> )	CCG GP Member	NHS North Lincolnshire CCG
Deborah Pollard ( <i>DP</i> )	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Sarah Glossop ( <i>SG</i> )	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Julie Wilburn ( <i>JW</i> )	Specialist Nurse: Safeguarding Children <i>In attendance for all items</i>	NHS North Lincolnshire CCG

<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.	<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
<ul style="list-style-type: none"> <li>• Q4: Assurances to be added</li> <li>• Q5: Assurances to be added</li> <li>• Discussion took place regarding support for practices in relation to commissioning of primary care. Specific areas in relation to monitoring contractual compliance and resource availability were highlighted. It was suggested that a risk should be added to the risk register to pick up the highlighted areas</li> </ul>		
<b>7.0 QUALITY DASHBOARD</b> <b>7.1 EAST MIDLANDS AMBULANCE SERVICE NHS TRUST (EMAS) PERFORMANCE SUMMARY: JUNE 2015</b>		
<p><b>Item 7.0: Quality Dashboard</b>  CN presented Item 7.0. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Overall Indicator RAG Achievement (<i>page 1</i>)</li> <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 (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp2HE</li> </ul> </li> <li>• 12 Hour Trolley Waits (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp6Sp <ul style="list-style-type: none"> <li>▪ The indicator is not applicable, agreement to remove from the report</li> </ul> </li> <li>○ Reference Exp5HE</li> </ul> </li> <li>• Number of MRSA Cases (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp7NL</li> </ul> </li> <li>• NEWS Score (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp10NL <ul style="list-style-type: none"> <li>▪ It was queried what the NEWS indicator measures <ul style="list-style-type: none"> <li>• CN to clarify</li> </ul> </li> </ul> </li> <li>○ Reference Exp11HE <ul style="list-style-type: none"> <li>▪ The Trust does not currently collect this data</li> </ul> </li> </ul> </li> <li>• Number of Serious Incidents (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp15NL <ul style="list-style-type: none"> <li>▪ CN to obtain information from GaJ</li> </ul> </li> <li>○ Reference Exp19EM</li> <li>○ Reference Exp20RD</li> </ul> </li> <li>• Number of Never Events (<i>page 2</i>)</li> <li>• Patient Harm (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp27NL <ul style="list-style-type: none"> <li>▪ The patient safety thermometer was discussed. CN to clarify which element is deteriorating (falls/pressure ulcers/Venous Thromboembolism (VTE))</li> </ul> </li> <li>○ Reference Exp28HE</li> </ul> </li> <li>• Number of 2, 3 and 4 Avoidable Pressure Ulcers (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp35NL <ul style="list-style-type: none"> <li>▪ CN to clarify which incidents originated in the community</li> </ul> </li> </ul> </li> <li>• Deep Tissue Injury (<i>page 2</i>) <ul style="list-style-type: none"> <li>○ Reference Exp38NL</li> <li>○ Reference Exp39HE</li> </ul> </li> </ul>	<p><b>Decision:</b> The Quality Dashboard was received, discussed and noted.</p> <p><b>Action:</b> Highlighted actions to be picked up by CN.</p>	<p>CN</p>



SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>○ Handovers over 15 minutes</li> <li>○ % delayed over 15 minutes</li> <li>○ Discussion took place in relation to the process from ambulance arrival to booking in the patient</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 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>10.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>CLINICAL EXCELLENCE</b>		
<b>11.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE</b>		
<p><b>Item 11.0: Medicines Management Prescribing Report</b>  GMC presented Item 11.0, and the report was taken as 'read'. The document provided an update on the prescribing performance within the CCG GP practices between February 2015 and April 2015. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• North Lincolnshire CCG Prescribing Scorecard 2015/2016 (pages 4 &amp; 5)</li> <li>• North Lincolnshire CCG Medicines Management Workplan 2015/2016 (pages 6 to 10) <ul style="list-style-type: none"> <li>○ Cardiovascular <ul style="list-style-type: none"> <li>▪ Optimise medicines in the management of Atrial Fibrillation</li> <li>▪ Improve use of anticoagulants, including newer drugs, in line with NICE guidelines</li> <li>▪ GRASP AF and local search template to be compared</li> </ul> </li> </ul> </li> <li>• Quality Scorecard (page 11)</li> </ul> <p><b>Quarter 4 Prescribing Scorecard (January 2015 – March 2015)</b></p> <ul style="list-style-type: none"> <li>• NSAIDs Ibuprofen and Naproxen % items</li> <li>• Antibacterial Drugs: Items per STAR-PU</li> <li>• Hypnotics</li> <li>• Opioid Analgesics</li> <li>• It was suggested that the graphs in the document should have narrative to aid in interpretation</li> <li>• Page numbers to be added to the report</li> <li>• It was suggested that peer to peer discussions should be proposed, to link low prescribing practices with high prescribing practices, to share best practice</li> <li>• It was suggested that Practice Dispatches could be used to identify findings</li> </ul>	<p><b>Decision:</b> The Medicines Management Prescribing Report was reviewed, discussed and noted</p> <p><b>Action:</b> GMC to take suggestions forward.</p>	GMC
<b>12.0 RESEARCH AND DEVELOPMENT STATUS REPORT (APRIL – JUNE 2015)</b>		
CW presented Item 12.0 on behalf of Marie Girdham, Research and Development Lead, and the report was taken as 'read'. The status report provided information on the level of study activity in North Lincolnshire, including non-portfolio and portfolio status, and the	<b>Decision:</b> The Research and Development Status Report (April to June 2015) was considered and discussed. The	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>potential research development links. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Research-based activity</li> <li>• Promotion of research evidence and use of research</li> <li>• Work in development</li> <li>• Critical Appraisal Skills and Evidence-based Practice Workshop: 26 June 2015</li> </ul>	<p>study activity for the timeline given and the potential development work was noted.</p> <p>The CCG Quality Group recognised how North Lincolnshire CCG is endeavouring to promote research, and the use of research evidence as part of its mandate</p>	
<p><b>13.0 MORTALITY AND PATIENT REPORTED OUTCOMES MEASURES (PROMs) REPORTS</b>  <b>13.1 MORTALITY SURVEILLANCE PACK (MARCH 2015)</b>  <b>13.2 PATIENT REPORTED OUTCOMES MEASURES (PROMs) QUARTERLY REPORT (MAY 2015)</b></p>		
<p><b>Item 13.1: Mortality Surveillance Pack (March 2015)</b>  CW presented Item 13.1 and the report was taken as 'read'. The document was dated March 2015, and provided a summary of the latest quarterly hospital mortality data and trends for the main hospital providers for the CCG's population.</p> <p><b>Item 13.2: Patient Reported Outcomes Measures (PROMs) Quarterly Report (May 2015)</b>  CW presented Item 13.2 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 14 May 2015 by the Health and Social Care Information Centre (HSCIC) relating to procedures conducted up to December 2014.</p>	<p><b>Decision:</b> The Mortality Surveillance Pack (March 2015) was received, discussed and noted</p> <p><b>Decision:</b> The PROMs Quarterly Report (May 2015) was received, discussed and noted</p>	<p>Chair</p>
<p><b>14.0 DO NOT ATTEMPT CARDIOPULMONARY RESUSCITATION (DNACPR) POLICY FOR NORTH AND NORTH EAST LINCOLNSHIRE</b></p>		
<p>CW presented Item 14.0, and the report was taken as 'read'. The policy acted as guidance for all healthcare staff within the North and North East Lincolnshire area. It aimed to achieve a coordinated approach to CPR decisions across all healthcare settings in the region (hospitals, general practice, care homes, the patient's own home, hospices and the ambulance service), ensuring the patient's best interests are met should their cardiac and/or respiratory function cease. The policy was not intended to be prescriptive, but recognises the very sensitive and unique nature of CPR decisions, and the need to treat each case on an individual basis. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• 17.0: Responsibilities of North and North East Lincolnshire healthcare professionals (<i>page 18</i>) <ul style="list-style-type: none"> <li>○ It was highlighted that overall responsibility for the CCG was via the Medical Director <ul style="list-style-type: none"> <li>▪ RJF advised that he was happy to approve the policy</li> </ul> </li> </ul> </li> </ul>	<p><b>Decision:</b> The Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) Policy was approved</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 no further practices had been identified as outliers.</li> <li>• <b>Care Quality Commission (CQC)</b></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>It was noted that a list of North Lincolnshire GP Practices and their CQC rating had been produced and shared with Quality Group members. It was agreed that the document would be updated regularly and shared.</p> <ul style="list-style-type: none"> <li>• <b>Productive General Practice (PGP) Event: 9 June 2015</b> It was noted that an event had taken place on 9 June 2015, which had provided an opportunity for practices participating in the PGP programme to showcase their learning and any improvements they have made since the start of the programme. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>○ RJF advised that improvements had been made within his practice</li> <li>○ It was agreed that any improvements should be shared with other practices</li> <li>○ It was agreed that further discussion should take place at a future Primary Care Development Group meeting and a GP Training session</li> <li>○ Universal telephone triage was discussed</li> </ul> </li> </ul>		
<b>16.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Noted	Chair
<b>17.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>PATIENT SAFETY</b>		
<b>18.0 SAFEGUARDING CHILDREN UPDATE</b>		
<p>CW presented Item 18.0 on behalf of SG, and the report was taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Case Reviews</li> <li>• Other significant cases <ul style="list-style-type: none"> <li>○ Further information to be provided in the update in July 2015</li> </ul> </li> <li>• Statutory Guidance and Accountability and Assurance Framework <ul style="list-style-type: none"> <li>○ A refresh is due to be published shortly</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> <p><b>Action:</b> Action Plan to be presented to a future meeting</p>	Chair
<b>19.0 SAFEGUARDING ADULTS UPDATE</b>		
<b>19.1 DRAFT SAFEGUARDING VULNERABLE ADULTS ANNUAL REPORT 2014/2015</b>		
<p><b>Item 19.0: Safeguarding Adults Update</b> CW presented Item 19.0 on behalf of DP, and the report as taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Prevent</li> <li>• Safeguarding Adults Reviews (SAR)</li> <li>• Designated Adult Safeguarding Manager (DASM)</li> <li>• Safeguarding Adults Board Quality Group</li> </ul>	<p><b>Decision:</b> The Safeguarding Adults Report was received, discussed and noted.</p>	Chair
<p><b>Item 19.1: Draft Safeguarding Vulnerable Adults Annual Report 2014/2015</b> CW presented Item 19.1 on behalf of DP, and the report was taken as 'read'. The report assured the Quality Group that the CCG had met its Safeguarding Adults responsibilities and statutory obligations, during the period 2014/2015.</p>	<p><b>Decision:</b> The Draft Safeguarding Vulnerable Adults Annual Report 2014/2015 was received, discussed and noted.</p> <p><b>Action:</b> To be presented to the CCG Governing Body on 13</p>	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
	August 2015	
<b>20.0 NEW PREVENT STATUTORY DUTY WITHIN THE NHS</b>		
CW presented Item 20.0, and the report was taken as 'read'. The letter from NHS England had been shared to highlight the implementation of Prevent in the NHS. From 1 July 2015, the NHS will have a statutory duty concerning Prevent.	<b>Decision:</b> The letter from NHS England regarding the new Prevent Statutory Duty within the NHS, was received for information	Chair
<b>21.0 INFECTION PREVENTION AND CONTROL REPORT: APRIL 2015</b> <b>21.1 INFECTION PREVENTION AND CONTROL ANNUAL REPORT 2014/2015</b>		
<p>GJ presented Item 21.0, the Infection Prevention and Control Report for May 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>○ 2015/2016: Zero tolerance MRSA bacteraemia objective for all NHS organisations</li> <li>○ To date since April 2015, no MRSA bacteraemia cases detected/apportioned to North Lincolnshire residents</li> </ul> </li> <li>• MSSA bacteraemia <ul style="list-style-type: none"> <li>○ No trajectories/targets set for alert organism</li> <li>○ To date since April 2015, 6 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 2015, 2 cases had been reported and managed</li> </ul> </li> <li>• C.Difficile <ul style="list-style-type: none"> <li>○ Primary Care Organisation (PCO) C.Difficile objective for 2015/2016 is 31</li> <li>○ To date since April 2015, 6 C.Difficile cases had been detected and apportioned to North Lincolnshire residents</li> </ul> </li> <li>• E.Coli bacteraemia <ul style="list-style-type: none"> <li>○ No trajectories/targets set for alert organism</li> <li>○ To date since April 2015, 23 cases had been detected and apportioned to North Lincolnshire residents</li> </ul> </li> <li>• GP Audits and Issues</li> <li>• Care Home Audits and Issues <ul style="list-style-type: none"> <li>○ Continuation of engagement with care homes via link network</li> <li>○ No further news regarding the Provider Information Forum and whether the group will be reinstated</li> </ul> </li> <li>• Other Issues <ul style="list-style-type: none"> <li>○ On-going collaborative work across the Humber patch for the development of a Community/Primary Care toolkit for Carbapenemase Producing Enterobacteriaceae (CPE)</li> <li>○ On-going collaborative work across the Humber patch regarding an Infection Risk Assessment Tool</li> </ul> </li> </ul>	<b>Decision:</b> The Infection Prevention and Control Report for May 2015 was received, discussed and noted.	GJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> <li>• Outbreaks <ul style="list-style-type: none"> <li>○ No outbreaks to report during May 2015</li> </ul> </li> <li>• Seasonal Flu <ul style="list-style-type: none"> <li>○ Nothing to report</li> <li>○ A Northern Lincolnshire Collaborative Flu Group meets on a monthly basis to discuss the 2015/2016 flu season preparations</li> </ul> </li> </ul> <p><b>Item 21.1: Infection Prevention and Control Annual Report 2014/2015</b></p> <p>GJ presented Item 21.1, the Infection Prevention and Control Annual Report 2014/2015, and the report was taken as 'read'. The report provided an annual overview of 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>• Appendix 1: MRSA bacteraemia cases 2014/2015 (<i>page 12</i>)</li> <li>• Appendix 2: Year on year MRSA bacteraemia cases in North Lincolnshire 2009/2010 to 2014/2015 (<i>page 13</i>)</li> <li>• Appendix 3: Cases of Clostridium difficile during 2014/2015 (<i>page 14</i>)</li> <li>• Appendix 4: Year on year Clostridium difficile cases in North Lincolnshire 2009/2010 to 2014/2015 (<i>page 15</i>)</li> <li>• Appendix 5: Cases of MSSA bacteraemia during 2014/2015 (<i>page 16</i>)</li> <li>• Appendix 6: Cases of E.Coli bacteraemia during 2014/2015 (<i>page 17</i>)</li> <li>• Appendix 7: Year on year MSSA and E.Coli bacteraemia cases 2012/2013 to 2014/2015 (<i>page 18</i>)</li> </ul> <p><b>Clinical Waste</b></p> <p>Discussion took place regarding the disparity between services in relation to the disposal of sharps bins from patients. It was acknowledged that the systems in place were safe, variation was the issue.</p>	<p><b>Decision:</b> The Infection Prevention and Control Annual Report 2014/2015 was received, discussed and noted.</p> <p><b>Decision:</b> Noted</p>	
<b>22.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: MAY 2015</b>		
<p>GaJ presented Item 22.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in May 2015, either via the initial Strategic Executive Information System (StEIS) triggers or areas of concern highlighted at the Serious Incident Group meetings and the monitoring of reports for quality of content, timeliness and shared learning. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> <li>• Co-commissioning: Primary Care (<i>page 5</i>) <ul style="list-style-type: none"> <li>○ Screening issues (<i>pages 22 &amp; 23</i>)</li> </ul> </li> </ul>	<p><b>Decision:</b> The Serious Incident Report for May 2015 was received, discussed and noted.</p>	GaJ
<b>23.0 NORTH LINCOLNSHIRE CCG INCIDENT AND SERIOUS INCIDENT MEETING: 29 APRIL 2015</b>		
<p>GaJ presented Item 23.0. The minutes from the meeting on 29 April 2015 were taken as 'read', and noted. No comments were made.</p>	<p><b>Decision:</b> The minutes of the North Lincolnshire CCG Incident and Serious Incident Meeting on 29 April 2015, were received and noted</p>	GaJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>24.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: 29 APRIL 2015</b>		
GaJ presented Item 24.0. The minutes from the meeting on 29 April 2015 were taken as 'read', and noted. No comments were made.	<b>Decision:</b> The minutes of the Northern Lincolnshire and Goole NHS Foundation Trust Serious Incident Meeting on 29 April 2015, were received and noted.	GaJ
<b>25.0 NHS111 UPDATE: MONTH 1 (APRIL 2015)</b>		
RB presented Item 25.0, and the report was taken as 'read'. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• Month 1 (April 2015) Activity (page 2)</li> <li>• Warm transfer and 10 minute call back (page 2)</li> <li>• Call back within 2 hours (page 2)</li> <li>• Year to date activity (page 3)</li> <li>• Performance (page 3)</li> <li>• North Lincolnshire CCG Dispositions (outcomes) and symptoms (page 4)</li> <li>• North Lincolnshire CCG Directory of Services (DOS) (page 6)</li> <li>• Contract negotiations (page 6)</li> <li>• Risks (page 6)</li> <li>• Information and Data Quality (page 7)</li> <li>• It was noted that FB and RB are the contacts for issues in relation to NHS111</li> </ul>	<b>Decision:</b> The NHS111 update report for Month 1 (April 2015) was received, discussed and noted	RB
<b>26.0 OXYGEN ASSESSMENTS</b>		
RB provided a verbal update in relation to issues highlighted regarding oxygen assessments. It was noted that there were no Key Performance Indicators (KPI) in the previous contracts; therefore there was no data available. RB confirmed that assurance had been received from the providers that they were undertaking oxygen assessments.	<b>Decision:</b> Verbal update noted	RB
<b>27.0 ENSURING THE NHS IS SAFELY STAFFED: LETTER FROM THE CHIEF NURSING OFFICER, NHS ENGLAND</b>		
Item 27.0 had been circulated for information only.	<b>Decision:</b> Noted	Chair
<b>28.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	<b>Decision:</b> Update noted	Chair
<b>29.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	<b>Decision:</b> Noted	Chair
<b>INFORMATION GOVERNANCE</b>		
<b>30.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT</b>		
<b>Information Governance Toolkit submission 2014/2015</b> All standards had attained Level 2 compliance.  <b>Information Governance Toolkit submission 2015/2016</b> Information Toolkit work is commencing for 2015/2016. The CCG needs to be mindful of data flows and information security	<b>Decision:</b> Verbal update noted	Chair
<b>31.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP</b>		
JP advised that the Information Governance Group meeting had taken place on 19 May 2015. Specific areas highlighted/discussed: <ul style="list-style-type: none"> <li>• There is a need to ensure Privacy Impact Assessments (PIA) are being undertaken</li> </ul>	<b>Decision:</b> Verbal update noted	JP

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<b>32.0 ANY OTHER BUSINESS</b>		
Nothing discussed.	Decision: Noted	Chair
<b>33.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	Decision: Noted	Chair
<b>CONTRACT QUALITY ISSUES</b>		
<b>34.0 CQUINS UPDATE</b>		
<b>34.1 SUMMARY OF QUARTER 4 2014/2015 CQUIN ACHIEVEMENT</b>		
<p><b>Item 34.0: CQUINS Update</b> CW provided a verbal update in relation to national and local CQUINS for 2015/2016.</p> <p><b>Item 34.1: Summary of Quarter 4 2014/2015 CQUIN Achievement</b> CW presented Item 34.1, and the report was taken as 'read'. The report provided a summary of CQUIN achievement per provider, together with information on exceptions, positive assurances, highlights, and any changes to the CQUIN schemes.</p>	<p>Decision: Noted</p> <p>Decision: The summary of quarter 4 2014/2015 CQUIN achievement was received, discussed and noted</p>	CN
<b>35.0 ANY OTHER BUSINESS</b>		
Nothing discussed.		
<b>36.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED</b>		
No new risks were identified.	Decision: Noted	Chair
<b>MEETING NOTES FROM OTHER GROUPS</b>		
<b>37.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE CCG GOVERNING BODY</b>		
Issues as discussed under Item 31.0 from the Information Governance Group were noted.	Decision: Noted	Chair
<b>38.0 ANY OTHER BUSINESS</b>		
<p><b>Anticoagulation for Atrial Fibrillation (AF)</b> CW provided a verbal update in relation to the above.</p> <p><b>Board Reports and Reporting</b> CW advised that the CCG Quality and Risk report would now be for 'discussion' at the CCG Governing Body meetings, rather than being for 'information only'. Quality Group members were reminded that the content of the document would be presented and available in the public domain.</p> <p><b>Clinical Nurse Specialist, Infection Prevention and Control</b> GJ was thanked for her input and work to date on behalf of the CCG, and the CCG Quality Group.</p>	Decision: Noted	Chair
<b>39.0 DATE AND TIME OF NEXT MEETING</b>		
Thursday 23 July 2015 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair