


MEETING DATE:	10 December 2015	 North Lincolnshire Clinical Commissioning Group REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY
AGENDA ITEM NUMBER:	Item 7.8	
AUTHOR:	Catherine Wylie	
JOB TITLE: DEPARTMENT:	Director of Risk and Quality Assurance	

**CCG QUALITY GROUP MINUTES
27 AUGUST 2015 AND 22 OCTOBER 2015**

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

1. PURPOSE OF THE REPORT:					
The Quality Group minutes dated 27 August and 22 nd October 2015 are attached for the CCG Governing Body to receive and note, for information only.					
2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:					
Continue to improve the quality of services	X				
Reduce unwarranted variations in services	X				
Deliver the best outcomes for every patient	X				
Improve patient experience	X				
Reduce the inequalities gap in North Lincolnshire	X				
3. ASSURANCES TO THE CLINICAL COMMISSIONING GROUP					
The Quality Group minutes provide assurance to the Governing Body that it is carrying out its function					
4. IMPACT ON RISK ASSURANCE FRAMEWORK:					
<table border="1"> <tr> <td>Yes</td> <td></td> <td>No</td> <td>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

MEETING:	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 North Lincolnshire Clinical Commissioning Group QUALITY GROUP
MEETING DATE:	Thursday 27 August 2015	
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
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
John Pougher (JP)	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
IN ATTENDANCE:		
Gary Johnson (GJ)	Patient Safety Lead <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
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
Clare Smith (CS)	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Dr Anita Kapoor (AK)	CCG GP Member	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Chloe Nicholson (CN)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG	Yorkshire and Humber Commissioning Support

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
1.0 APOLOGIES AND QUORACY		
Apologies were noted, as detailed above. It was noted that the meeting was quorate to proceed.	Decision: Noted	Chair
2.0 DECLARATION OF INTERESTS		
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.	Decision: Noted	Chair
3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 23 JULY 2015		
3.1 ACTION LOG UPDATE AS DISCUSSED ON 23 JULY 2015		
The minutes were accepted as an accurate record of the meeting. The Action Log Update as discussed on 23 July 2015 was received and noted.	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
4.0 ACTION LOG – OUTSTANDING ACTIONS		
Outstanding actions from 26 February 2015 to 23 July 2015 were discussed. An update for each outstanding action would be noted in the Action Log.	Decision: Noted	Chair
5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		
Nothing discussed.	Decision: Noted	Chair
6.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER		
6.1 BOARD ASSURANCE FRAMEWORK (BAF)		
6.2 RISK REGISTER		
<p>Item 6.1: Board Assurance Framework (BAF) 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 potential new risks. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Future iterations of the BAF will include ‘risk movement’ • Last Review Date: Risks to be reviewed regularly 	Decision: The CCG Board Assurance Framework was received, discussed and noted	JP
<p>Item 6.2: Risk Register 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"> • It was agreed that the ‘last review date’ needed to be updated, to ensure the risk register was up to date • Risk ID A01: Lack of fire training and absence of an updated fire procedure alongside changes in building occupancy. Risk of staff not knowing what to do in an emergency <ul style="list-style-type: none"> ○ It was agreed that the risk needed to be reviewed and updated. CW to discuss further at the CCG Executive Team meeting • Risk COM01: Individual Funding Review risk of judicial review and/or financial risk <ul style="list-style-type: none"> ○ Management Lead to be added • Risk Q1: Failure to effectively manage the financial risk of Mental Health Out of Area placements <ul style="list-style-type: none"> ○ Management Lead to be added 	Decision: The CCG Risk Register was received, discussed and noted	JP
7.0 QUALITY DASHBOARD		
7.1 DRAFT NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLaGFT) RISK PROFILE (QUALITY PROFILE TEMPLATE)		
<p>Item 7.0: Quality Dashboard CW presented Item 7.0 on behalf of CN. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Overall Indicator RAG Achievement (<i>page 1</i>) <ul style="list-style-type: none"> ○ 62% green • Summary Indicator Count (<i>page 1</i>) • Off Track Indicator Summary by Provider (<i>page 1</i>) • Number of Clostridium Difficile cases (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp2HE 	<p>Decision: The Quality Dashboard was received, discussed and noted.</p> <p>Action: Highlighted actions to be picked up by CN in due course</p>	<p>CW</p> <p>CN</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> • 12 Hour Trolley Waits (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp5HE • Number of MRSA Cases (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp8HE • Number of Serious Incidents (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp15NL ○ Reference Exp16HE ○ Reference Exp17Sp ○ Reference Exp19EM ○ Discussion took place regarding ‘tolerance’ and the ‘RAG ratings’ used <ul style="list-style-type: none"> ▪ CW and CN to discuss further outside of the meeting • Number of Never Events (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp21NL ○ Reference Exp22HE <ul style="list-style-type: none"> ▪ Shown as RAG rating ‘green’, should be ‘red’ ▪ More detailed information to be provided for the next meeting ▪ It was queried whether this related to any North Lincolnshire patients ▪ Discussion took place regarding the ‘assurance’ process, as North Lincolnshire CCG is not the lead commissioner. CW agreed to check with Kevin Parkinson, Interim Head of Provider Management, Yorkshire and Humber Commissioning Support regarding the assurance process. It was felt that assurance should be sought in the first instance from the lead commissioner, and if not assured, contact the provider directly • Patient Harm (Harm Free Care – Acute Care) (<i>page 2</i>) <ul style="list-style-type: none"> ○ Reference Exp27NL • Number of Patient Falls (Repeat Falls) (<i>page 3</i>) <ul style="list-style-type: none"> ○ Reference Exp43NL <ul style="list-style-type: none"> ▪ Discussion took place regarding obtaining information in relation to all falls, and not just repeat falls • NICE Guidance Compliance (<i>page 3</i>) <ul style="list-style-type: none"> ○ Reference Exp47NL <ul style="list-style-type: none"> ▪ CN to follow up ○ Reference Exp48HE • CQC Reports and Related Actions (<i>page 3</i>) <ul style="list-style-type: none"> ○ Reference Exp54NL • Mortality – SHMI (<i>page 3</i>) <ul style="list-style-type: none"> ○ Reference Exp60SG • Mortality – HED (<i>page 3</i>) <ul style="list-style-type: none"> ○ Reference Exp65NL <ul style="list-style-type: none"> ▪ It was queried whether the RAG rating should be ‘amber’ • Mortality – RAMI (MAT) (<i>page 3</i>) 		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> ○ Reference Exp67NL ● Mixed-sex Accommodation Breaches (page 3) <ul style="list-style-type: none"> ○ Reference Exp69SG ● Number of Re-opened Complaints (page 3) <ul style="list-style-type: none"> ○ Reference Exp81NL ● Safeguarding Issues (page 4) <ul style="list-style-type: none"> ○ DP queried the Safeguarding Adults Review. CN to provide additional information ● Detentions under Mental Capacity Act Deprivation of Liberty Safeguards (MCADoLS) (page 4) <p>Item 7.1: Draft Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) Risk Profile (Quality Profile Template)</p> <p>CW presented Item 7.1 on behalf of CN, and the report was taken as 'read'. The purpose of the Quality Risk Profile Tool was to systematically assess risks to the quality of provision, at a point in time. The tool would be used where persistent and/or increasing quality concerns had been identified. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> ● It was acknowledged that a number of stakeholders would have data that informed the profiling process, therefore the importance of moderating the scoring, and agreeing with commissioners, regulators and other relevant stakeholders was highlighted ● The lead commissioner would take responsibility for the development of the draft profile, and ensuring all the relevant stakeholders had the opportunity to contribute ● Discussion took place regarding use of the tool within primary care ● It was noted that the document was a 'draft' document at present, a final version would be presented to the CCG Quality Group 	<p>Decision: The draft Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) Risk Profile (Quality Profile Template) was received, discussed and noted.</p>	
PATIENT EXPERIENCE		
8.0 GP FRIENDS AND FAMILY TEST		
<p>JP presented Item 8.0, and the report was taken as 'read'. It was highlighted that the NHS Friends and Family Test (FFT) was a feedback mechanism, assessing patient experience of NHS services. It uses a simple question which asks how likely, on a scale ranging from extremely unlikely to extremely likely; a person is to recommend the service to a friend or family member if they needed similar care/treatment. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> ● Data is published on a monthly basis ● National returns for FFT data from GP practices began in January 2015 ● Number of responses from practices 	<p>Decision: The GP Friends and Family Test information was received, discussed and noted.</p>	JP
9.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
10.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Assurance in relation to Hull and East Yorkshire Hospitals NHS Trust (HEY)	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
CLINICAL EXCELLENCE		
11.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
<p>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 April 2015 and June 2015. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Prescribing Budget (<i>page 3</i>) <ul style="list-style-type: none"> ○ Prescribing budget forecast (<i>page 3</i>) ○ Forecast cost growth (<i>page 3</i>) ○ Item growth (<i>page 3</i>) ○ Cost growth (<i>page 3</i>) ○ Practice prescribing visits have enabled practice specific plans in line with the agreed workplan. These will be reviewed on a regular basis, and any risks to delivery reported back to the prescribing adviser and budget holder ○ Discussion took place regarding contractual levers • Safety Update (<i>page 3</i>) <ul style="list-style-type: none"> ○ A recent medical device CAS alert (MSA/2015/031) has been forwarded to all North Lincolnshire GP practices • North Lincolnshire CCG Medicines Management Workplan 2015/2016 (<i>pages 5 to 9</i>) 	<p>Decision: The CCG Quality Group:</p> <ul style="list-style-type: none"> • Reviewed, discussed and noted the Medicines Management Prescribing Report 	GMC
12.0 KPMG: WELL-LED REVIEW: EXECUTIVE SUMMARY ROTHERHAM DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST (RDASH)		
<p>CW presented Item 12.0, and the report was taken as 'read'. Rotherham Doncaster and South Humber NHS Foundation Trust (RDASH) procured the review in line with Monitor's 'Well-led Framework for Governance Reviews; Guidance for NHS Foundation Trusts'. This requires Foundation Trusts to commission an external review at least every three years.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • The review was completed using a five stage process • In summary, RDASH has a large number of effective processes and controls in place to support compliance with the Governance Framework • Thirty recommendations were made • Page 12: Domain 4. Measurement. Question 10 <ul style="list-style-type: none"> ○ RDASH is currently in the process of tendering for a new clinical system to provide better information to the benefit of the Trust 	<p>Decision: The Rotherham Doncaster and South Humber NHS Foundation Trust KPMG Well-Led Review: Executive Summary was reviewed, discussed and noted.</p>	Chair
13.0 MORTALITY UPDATE		
13.1 COMMUNITY MORTALITY ACTION PLAN		
<p>CW presented Item 13.1, and the report was taken as 'read'. The North Lincolnshire CCG Community Mortality Plan incorporated local actions in relation to the review of mortality, and also the commissioning response to the NHS England suggested actions in the document: Our Ambition to Reduce Premature Mortality.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Patient case management <ul style="list-style-type: none"> ○ End to end review process <ul style="list-style-type: none"> ▪ Capacity 	<p>Decision: The Community Mortality Action Plan was reviewed, discussed and noted.</p>	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> ○ Joint working across the health community ○ GP training <ul style="list-style-type: none"> ▪ A GP training session was held on 12 August 2015 ● Prevention and Health Promotion <ul style="list-style-type: none"> ○ Working with Public Health ● Primary Care ● End of Life Care ● Admissions from Care/Nursing Homes in North and North East Lincolnshire <ul style="list-style-type: none"> ○ A joint health and social care event for care home managers is due to take place on 18 November 2015 		
14.0 REVALIDATION OF NURSING STAFF		
<p>CW presented Item 14.0, and the report was taken as 'read'. The paper briefed the CCG Quality Group on the revalidation process that all nurses and midwives will need to engage with from March 2016, to demonstrate that they practice safely and effectively throughout their career. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> ● The paper was presented to the CCG Governing Body on 13 August 2015 	Decision: The Revalidation of Nursing Staff Briefing was reviewed, discussed and noted.	Chair
15.0 PRIMARY CARE DEVELOPMENT UPDATE		
<p>JP provided a verbal update in relation to:</p> <ul style="list-style-type: none"> ● Primary Care Web Tool <ul style="list-style-type: none"> ○ JP advised that no further practices had been identified as outliers ● Care Quality Commission (CQC) <ul style="list-style-type: none"> ○ It was noted that the list of North Lincolnshire GP Practices and their CQC rating had been updated and shared with members on 27 August 2015. There were no updates since the last meeting. 	Decision: Verbal updated noted	JP
16.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
17.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
<p>New risks identified</p> <ul style="list-style-type: none"> ● Medicines Management Overspend 	Decision: Noted	Chair
PATIENT SAFETY		
18.0 SAFEGUARDING CHILDREN UPDATE		
18.1 OFSTED INSPECTION OF CHILDREN'S SERVICES		
18.2 SAFEGUARDING STATUTORY GUIDANCE AND ACCOUNTABILITY AND ASSURANCE FRAMEWORK		
<p>Item 18.0: Safeguarding Children Update</p> <p>JW 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"> ● Serious Case Reviews ● Other significant cases ● Annual Report ● Under 18's Pathway ● Female Genital Mutilation (FGM) <ul style="list-style-type: none"> ○ Nationally, there is an increasing focus on the identification of, and support to, victims of FGM ○ It became mandatory for acute trusts to comply with these updates from 1 April 2015 	<p>Decision: The Safeguarding Children Report was received, discussed and noted.</p> <p>Action: JW to see if it is possible to obtain data for North Lincolnshire for the past year</p>	JW


SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> ○ The requirement to record FGM data has also been extended to GP practices and mental health trusts, who will be required by 1 October 2015 to submit information under the enhanced dataset when treating patients who have FGM ○ The Safeguarding Children team are working with providers to support their state of readiness ○ Discussion took place regarding data for North Lincolnshire <p>Item 18.1: OFSTED Inspection of Children’s Services Item deferred.</p> <p>Item 18.2 Safeguarding Statutory Guidance and Accountability A summary was available as part of the Safeguarding Adults update (Item 19.0).</p>	<p>Action: Deferred. Action Plan to be presented to the next Quality Group meeting</p> <p>Decision: Noted</p>	
19.0 SAFEGUARDING ADULTS UPDATE		
<p>DP presented Item 19.0, and the report as taken as ‘read’. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> ● Prevent ● Safeguarding Adults Reviews (SAR) ● Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework <ul style="list-style-type: none"> ○ The Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework was published in July 2015. The document replaces the previous document dated March 2013. The purpose is to set out the roles, duties and responsibilities of all organisations that commission NHS Health and Social Care, and to set out the minimum standards expected across the system ● North Lincolnshire Safeguarding Adults Board Event taking place on 18 September 2015 ● Care Home update 	<p>Decision: The Safeguarding Adults Report was received, discussed and noted.</p>	DP
20.0 INFECTION PREVENTION AND CONTROL UPDATE		
<p>CW provided a verbal update in relation to infection rates. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> ● MRSA bacteraemia <ul style="list-style-type: none"> ○ 2015/2016: Zero tolerance MRSA bacteraemia objective for all NHS organisations ○ To date since April 2015, no MRSA bacteraemia cases detected/apportioned to North Lincolnshire residents ● C.Difficile <ul style="list-style-type: none"> ○ Primary Care Organisation (PCO) C.Difficile objective for 2015/2016 is 31 ○ Forecast for year is 37, over plan by 6 ○ To date since April 2015, 15 C.Difficile cases had been detected and apportioned to North Lincolnshire residents ○ 3 new cases in August 2015 ● Infection Prevention and Control post is out to advert 	<p>Decision: The Infection Prevention and Control verbal update was noted</p>	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
21.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: JULY 2015		
<p>GJ presented Item 21.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in July 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"> • New Serious Incidents (<i>page 9</i>) 	<p>Decision: The Serious Incident Report for July 2015 was received, discussed and noted.</p>	<p>GJ</p>
22.0 NORTH LINCOLNSHIRE CCG INCIDENT AND SERIOUS INCIDENT MEETING: 24 JUNE 2015		
<p>GJ presented Item 22.0. The minutes from the meeting on 24 June 2015 were taken as 'read', and noted. No comments were made.</p>	<p>Decision: The minutes of the North Lincolnshire CCG Incident and Serious Incident Meeting on 24 June 2015, were received and noted</p>	<p>GJ</p>
23.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: 24 JUNE 2015		
<p>GJ presented Item 23.0. The minutes from the meeting on 24 June 2015 were taken as 'read', and noted. No comments were made.</p>	<p>Decision: The minutes of the Northern Lincolnshire and Goole NHS Foundation Trust (NLaGFT) Collaborative Serious Incident Meeting on 24 June 2015, were received and noted.</p>	<p>GJ</p>
24.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT AND CONCERNS POLICY		
<p>GJ presented Item 24.0, and the policy was taken as 'read'. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • It was noted that there was no reference to Primary Care in the policy <ul style="list-style-type: none"> ○ It was confirmed that NHS England were accountable at this time • It was suggested that the review/revision date should be January 2016, rather than June 2017, as more would be known in relation to primary care co-commissioning • 8.1.8: Safeguarding Adults and Children (<i>page 15</i>) <ul style="list-style-type: none"> ○ 8.1.8: first paragraph (<i>page 15</i>) <ul style="list-style-type: none"> ▪ The new Safeguarding Vulnerable People in the Reformed NHS: Accountability and Assurance Framework was published in June 2015, and not on 21 March 2013 ○ 8.1.8: fifth bullet point (<i>page 15</i>) <ul style="list-style-type: none"> ▪ 'Ensure that all SIs are considered by the provider in relation to whether there has been a possible incident of abuse as defined by the "No Secret's - Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse" (DH 2000), and an alert is raised as appropriate' <p>to be amended to</p> <p>Ensure that all SIs are considered by the provider in relation to whether there has been a possible incident of abuse as defined by the Safeguarding Adults</p>	<p>Decision: The Serious Incident, Incident and Concerns Policy was approved, subject to the suggested amendments being made, with a review date of January 2016</p>	<p>JP</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p style="text-align: center;">Statutory Guidance from the Care Act 2014</p> <ul style="list-style-type: none"> ○ 8.1.8: paragraph 6 (page 16) <ul style="list-style-type: none"> ▪ <i>'NHS NL CCG has the responsibility for Safeguarding Vulnerable Adults and is represented at the North Lincolnshire Safeguarding Adults Board by the Designated Nurse for Safeguarding Adults who is employed by NHS NL CCG'</i> to be amended to <p>NHS NL CCG has the responsibility for Safeguarding Vulnerable Adults and is represented at the North Lincolnshire Safeguarding Adults Board by the NLCCG Director of Quality and Risk Assurance and the NLCCG Medical Director</p>		
25.0 NHS111 UPDATE: MONTH 3 (JUNE 2015)		
<p>CW presented Item 25.0, and the report was taken as 'read'. The report provided an update on the NHS111 service performance for month 3 (June 2015). Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Month 3 (June 2015) Activity (page 2) • Performance (page 2) • Warm Transfer and 10 minute call back (pages 2/3) • Call back within 2 hours (page 3) • North Lincolnshire CCG Dispositions (outcomes) and symptoms (page 3) • Staffing update (page 5) • North Lincolnshire CCG Directory of Services (DOS) (page 5) • Contract negotiations (page 6) • Risks (page 7) 	Decision: The NHS111 update report for Month 3 (June 2015) was received, discussed and noted	Chair
26.0 UPDATE ON THE OPEN AND HONEST CARE: DRIVING IMPROVEMENT PROGRAMME <i>Letter from Hazel Richards, Regional Deputy Chief Nurse, NHS England</i>		
<p>CW presented Item 26.0, a letter from Hazel Richards, Regional Deputy Chief Nurse, NHS England providing an update on the Open and Honest Care: Driving Improvement Programme.</p>	Decision: The letter providing an update on the Open and Honest Care; Driving Improvement Programme was received, discussed and noted	Chair
27.0 PATIENT SAFETY ALERT: ADDRESSING ANTIMICROBIAL RESISTANCE THROUGH IMPLEMENTATION OF AN ANTIMICROBIAL STEWARDSHIP PROGRAMME		
<p>CW presented Item 27.0, a patient safety alert, addressing antimicrobial resistance through implementation of an antimicrobial stewardship programme.</p>	Decision: The Patient Safety Alert was received, discussed and noted	Chair
28.0 ANY OTHER BUSINESS		
<p>Nothing discussed.</p>	Decision: Noted	Chair
29.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
<p>No new risks were identified.</p>	Decision: Noted	Chair
INFORMATION GOVERNANCE		
30.0 FREEDOM OF INFORMATION ACT 2000: QUARTER 1 <i>Requests received 1 April – 30 June 2015</i>		
<p>CW presented Item 30.0, and the report was taken as 'read'. The</p>	Decision: The Quarter 1	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
paper provided an update on the position of Freedom of Information requests made to NHS North Lincolnshire CCG in quarter 1, from 1 April to 30 June 2015.	Freedom of Information Act 2000 report was received, discussed and noted	
31.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT		
Information Governance Toolkit submission 2015/2016 As per the previous update at the last meeting, information toolkit work is commencing for 2015/2016. The CCG needs to be mindful of data flows and information security.	Decision: Verbal update noted	JP
32.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP		
No issues identified.	Decision: Noted	Chair
33.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
34.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
35.0 CQUINS UPDATE		
Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH) Quarter 1 2015/2016 CQUIN Achievement GJ provided a verbal update, advising that Quarter 1 targets and milestones were achieved	Decision: Verbal update noted	GJ
36.0 CARE QUALITY COMMISSION (CQC) NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLaGFT) INSPECTION		
CW provided a verbal update in relation to the Care Quality Commission (CQC) inspection.	Decision: Noted	Chair
37.0 PERFORMANCE REPORT: AMBULANCE REPORTING <i>Extract from the CCG Corporate performance Executive Summary – May 2015, presented to the CCG Governing Body on 11 June 2015</i>		
CW presented Item 37.0. Further to discussion in relation to the Performance Report at the CCG Governing Body on 11 June 2015, the CCG Quality Group was asked to advise the Business Intelligence team, as to which reports/measures of those listed in Appendix 1 would be most helpful from a quality perspective, to be included in future performance reports. After discussion, it was agreed to include the following information in future performance reports. <ul style="list-style-type: none"> • Response Time by Minute (CCG) • Handover Turnaround 	Decision: It was agreed to include 'Response Time by Minute (CCG) and Handover Turnaround' information to future performance reports	Chair
38.0 NORTHERN LINCOLNSHIRE QUALITY AND SAFETY ASSURANCE GROUP: 30 APRIL 2015		
CW presented Item 38.0. The minutes from the meeting on 30 April 2015 were taken as 'read', and noted. No comments were made.	Decision: The minutes of the Northern Lincolnshire Quality and Safety Assurance Group on 30 April 2015, were received and noted.	Chair
39.0 NORTH YORKSHIRE AND HUMBER QUALITY SURVEILLANCE GROUP: 13 MAY 2015		
CW presented Item 39.0. The minutes from the meeting on 13 May 2015 were taken as 'read', and noted. No comments were made.	Decision: The minutes of the North Yorkshire and Humber Quality Surveillance Group on 13 May 2015, were received and noted.	Chair
40.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
41.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
42.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE CCG GOVERNING BODY		
No issues were referred.	Decision: Noted	Chair
43.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
44.0 DATE AND TIME OF NEXT MEETING		
Thursday 24 September 2015 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair

MEETING:	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 NHS North Lincolnshire Clinical Commissioning Group QUALITY GROUP
MEETING DATE:	Thursday 22 October 2015	
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
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
John Pougher (<i>JP</i>)	Asst SO Quality & Assurance	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
Jane Ellerton (<i>JE</i>)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Julie Wilburn (<i>JW</i>)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
John Pougher (<i>JP</i>)	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
IN ATTENDANCE:		
Gary Johnson (<i>GJ</i>)	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Chloe Nicholson (<i>CN</i>)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG	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 all items</i>	Yorkshire and Humber Commissioning Support
Pete LeQuelenec (<i>PL</i>)	Business Manager <i>Note Taker</i>	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Dr Faisal Baig (<i>FB</i>)	CCG GP Member	NHS North Lincolnshire CCG

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
45.0 APOLOGIES AND QUORACY		
Apologies were noted, as detailed above. It was noted that the meeting was quorate to proceed.	Decision: Noted	Chair
46.0 DECLARATION OF INTERESTS		
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.	Decision: Noted	Chair
47.0 MINUTES OF THE PREVIOUS MEETING HELD ON 23 JULY 2015		
47.1 ACTION LOG UPDATE AS DISCUSSED ON 23 JULY 2015		
The minutes were accepted as an accurate record of the meeting. The Action Log Update as discussed on 27 August 2015 was received and noted.	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
48.0 ACTION LOG – OUTSTANDING ACTIONS		
Outstanding actions from 27 August 2015 were discussed. An update for each outstanding action would be noted in the Action Log.	Decision: Noted	Chair
49.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		
Nothing discussed.	Decision: Noted	Chair
50.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER 50.1 BOARD ASSURANCE FRAMEWORK (BAF) 50.2 RISK REGISTER		
<p>Item 6.1: Board Assurance Framework (BAF) 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 potential new risks. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Demise of Commissioning Support • JP to discuss with appropriate managers and go through system • Risk ID A02: IR queried whether A02 should ‘drop off’ the register due to its change in scoring. JP advised that as it was a strategic risk it would always remain on the register <p>Item 6.2: Risk Register 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"> • Risk COM01: Individual Funding Review risk of judicial review and/or financial risk. CCG had received outcome from Parliamentary Health Ombudsman advising that CCG to accept fault in this case. It has exposed some vulnerabilities in CCG processes, which CW was going to address by: <ul style="list-style-type: none"> ○ Undertaking a Look Back exercise ○ Organise an independent review of current process ○ Learn from other areas 	<p>Decision: The CCG Board Assurance Framework was received, discussed and noted</p> <p>Decision: The CCG Risk Register was received, discussed and noted</p>	<p>JP</p> <p>JP</p>
51.0 QUALITY DASHBOARD 51.1 DRAFT NLCCG PRIMARY CARE QUALITY DASHBOARD		
<p>Item 7.0: Quality Dashboard CN presented Item 7.0. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Possible changes to amend the RAG system by using a different RAG status • Still challenges with the NLaGFT performance, though Dr Foster should give a better comparator • Revise whole of framework on softer areas (site visits) • Staffing levels – key issue in NLaGFT and CN to ask for data <p>Discussion took place about the way forward in presenting Quality information to both the Governing Body and the Joint Commissioning Board. It was proposed that it is looked at breaking information down</p>	Decision: Noted	CN

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>into networks as opposed to individual topics. CN commented that the PC Quality Dashboard gave an explanation on an Excel report which could be considered for future use. CW asked how we could make a difference. CN asked if we should use NEL Safeguarding template to present future findings. Do we look in future at:</p> <ul style="list-style-type: none"> • General Quality reporting to Governing Body • Quality matters linked to Primary Care to Joint Commissioning Board <p>It stated that a priority for the team was visits to practices, to which CW commented that was to visit care homes first. CW also advised that a Clinical Quality Manager would soon be in place to work under CW and will be used to visit areas in North Lincolnshire, including practices.</p>		
PATIENT EXPERIENCE		
52.0 PATIENT RELATIONS REPORT		
<ul style="list-style-type: none"> • Quarter 1 (Apr-Jun 2015) • Quarter 2 (Jul-Sep 2015) 	Decision: Reports received and Noted	Chair
53.0 GP PATIENT SURVEY		
<p>IR talked through the annual IPSOS Mori monitoring satisfaction survey carried out for North Lincolnshire practices. He advised that the position had slipped slightly from last year and was showing as being 1-2% down on last year's survey. RJF pointed out that the figures around accessibility were in his opinion fairly accurate. AK noted that the figures do not mean that the standard of care is not good, especially when patient request to see a specific named GP. It appeared to be a difference between access and quality against the difference in expectations of patients.</p>	Decision: Noted	Chair
54.0 HEALTHWATCH NORTH LINCOLNSHIRE PATIENT CARE PATHWAY (FEB 2015)		
<p>A very good in depth report which highlighted a lack of patient stories within North Lincolnshire. GJ advised that there was a link on Vimeo that could be useful and he agreed to share the link post meeting. JE asked how patient stories are collated and it was commented that the CCG needed to be specific on what stories went forward to Board level. IR advised that NLaGFT do the patient story very well, and asked if they could be contacted to see if they had stories we could have relating to patients journeys through commissioning. CW commented that it might be beneficial to also contact RDaSH and other CCGs within the area.</p>	<p>Decision: Noted</p> <p>Action: GJ to share Vimeo link</p>	<p>Chair</p> <p>GJ</p>
11.0 ANY OTHER BUSINESS		
Nothing discussed.		
12.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks identified		
CLINICAL EXCELLENCE		
13.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
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 June 2015 and September 2015.	Decision: Reviewed and noted	GMc
14.0 RESEARCH & DEVELOPMENT STATUS REPORT JULY – OCTOBER 2015		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
Noted	Noted	Chair
15.0 MORTALITY UPDATE		
she had attended the meeting on 20 October 2015 and the CCG is working with NLaGFT and others to understand the mortality issues, of why people die where they are. This is to be kept as a joint process going forward.	Noted	Chair
16.0 PRIMARY CARE DEVELOPMENT UPDATE		
JP provided a verbal update on current issues.	Decision: Verbal updated noted	JP
17.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
18.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks identified	Decision: Noted	Chair
PATIENT SAFETY		
19.0 SAFEGUARDING CHILDREN UPDATE		
19.1 OFSTED INSPECTION OF CHILDREN'S SERVICES		
19.2 SERIOUS CASE REVIEW		
<p>SG gave a general update on safeguarding:</p> <p>Item 19.1: OFSTED Inspection of Children's Services –LSCB is currently subject to review and is identifying gaps such as governance arrangements and the need for the Governing Body to challenge evidence. Need to look at:</p> <ul style="list-style-type: none"> • Business Plan • Up to date policies <p>Need to know what good challenge looks like and if this could be a topic for a future GB workshop.</p> <p>Item 19.2 Serious Case Review</p> <p>SG provided a verbal update on the Serious Case Review that had recently taken place. CAMHS and RDASHFT were the only organisations that knew this was happening. The review highlighted how professionals deal with self-harm.</p> <p>IR commented that NHS Commissioning were about to issue guidance on the closure of Care Homes. CW stated that CCG do not have guidance as yet, and added that CCG needed a process which contracting were supposed to be dealing with.</p>	<p>Decision: Noted</p> <p>Action: SG to produce paper for next meeting on SCR</p> <p>Action: CW to check with contracting</p>	JW
20.0 SAFEGUARDING ADULTS UPDATE		
Report received and noted.	Decision: The Safeguarding Adults Report was received, discussed and noted.	DP
21.0 INFECTION PREVENTION AND CONTROL UPDATE		
CW advised that following recruitment, the CCG had selected a new ICP lead, but HR checks were still being undertaken before confirmation of a start date.		Chair
22.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: AUGUST AND SEPTEMBER 2015		
GJ presented Item 22.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in both August and September 2015 Specific areas	Decision: The Serious Incident Report for August and September 2015 were	GJ

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
highlighted/discussed: <ul style="list-style-type: none"> National figures show a 30% less SI in this current year NLaGFT showing SI as being 60% down in current year and figures have been checked Ophthalmology figures taken from an SI in 2013 show 11 wrong lenses were fitted to patients 900 still waiting to be seen in ophthalmology; 600 at DPoW and 300 at SGH There have been three 'never' events but none are NL patients 	received, discussed and noted.	
23.0 INCIDENT REPORT 21015/16 QUARTER 2		
The Q2 incident report was submitted for information and noting. GJ advised that the request from IR to use public facing names for practices to be used had been actioned. He added that neurology had massive backlogs and that there was a 3 month back log in the issuing of letters. It was agreed that assurance was needed regarding the current state of administrative support within NLaGFT, which had encountered problems due to a reorganisation of secretarial duties. GJ advised that the Q" report would be forwarded for inclusion in Practice Despatches.	Decision: The Q2 incident report was received and noted	GJ
24.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT MEETINGS JULY AND AUG 2015		
Minutes of the meetings held in July and August were accepted	Noted	GJ
25.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: JULY & AUGUST 2015		
Minutes from these meetings were submitted for information and noted	Noted	GJ
26.0 NHS111 UPDATE: MONTHS 4 & 5 (JULY & AUGUST 2015)		
NHS 111 Updates for months 4 & 5 were noted.	Decision: The NHS111 update report for Months 4 & 5 (July & August 2015) were received and noted.	Chair
27.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
28.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
INFORMATION GOVERNANCE		
29.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT		
Information Governance Toolkit submission 2015/2016 As per the previous update at the last meeting, information toolkit work is commencing for 2015/2016. JP advised that the CCG is on target to achieve full completion.	Decision: Verbal update noted	JP
30.0 MINUTES FROM INFORMATION GOVERNANCE GROUP 19 MAY & 11 AUG 2015		
Noted	Decision: Noted	Chair
31.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP		
No issues identified.	Decision: Noted	Chair
32.0 INFORMATION GOVERNANCE GROUP TERMS OF REFERENCE		
Nothing discussed.	Decision: Noted	Chair
33.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
34.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
35.0 CQUINS UPDATE		
Summary of Q1 2015/16 CQUIN achievement for providers of North Lincolnshire CCG GJ provided a verbal update, advising that the CCG had received both Q1 and Q2 submissions from NLaGFT. It was felt that these could be useful CQUINS for 2016/17	Decision: Verbal update noted	GJ
36.0 QUALITY DASHBOARD ACUTE & SPECIALIST TRUSTS SEPTEMBER 2015		
Noted	Decision: Noted	Chair
37.0 NORTH YORKSHIRE AND HUMBER QUALITY SURVEILLANCE GROUP: 15 JULY 2015		
Noted	Decision: Noted.	Chair
38.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
39.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
40.0 PRIMARY CARE DEVELOPMENT GROUP		
Minutes from meeting held on 24 June 2015 were noted.	Decision: Noted	Chair
41.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNING BODY		
Nothing discussed		Chair
41.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
42.0 DATE AND TIME OF NEXT MEETING		
Thursday 26 November 2015 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair