


MEETING DATE:	11 February 2016	 North Lincolnshire Clinical Commissioning Group REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY
AGENDA ITEM NUMBER:	Item 8.6	
AUTHOR:	Catherine Wylie	
JOB TITLE: DEPARTMENT:	Director of Risk and Quality Assurance	

**CCG QUALITY GROUP MINUTES
26th November 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 26 th November 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	 QUALITY GROUP
MEETING DATE:	Thursday 26 th November 2015	
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
John Pougher (JP) Chair	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
Dr Anita Kapoor (AK)	CCG GP Member	NHS North Lincolnshire CCG
Dr Faisal Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
IN ATTENDANCE:		
Gary Johnson (GJ)	Patient Safety Lead <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Chloe Nicholson (CN)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG <i>In attendance for all items</i>	Yorkshire and Humber Commissioning Support
Vivienne Simpson (VS)	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW)	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Ian Reekie (IR)	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
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Julie Wilburn (JW)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Gemma McNally (GMc)	Strategic Lead Pharmacist (North East Lincolnshire CCG and North 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 and detailed above. It was noted that the meeting was quorate to proceed.	Decision: Noted	Chair
2.0 DECLARATION OF INTERESTS		
JP 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 22 OCTOBER 2015		
The following amendments were noted Item 6.2 Risk ID A02 – should have been noted under 6.1 Item 22.0 Ophthalmology – amend to read ophthalmology figures taken from an SI in 2013 show 11 wrong lenses were fitted to patients Following amendments the minutes were the accepted as an accurate record of the meeting.	Decision: Noted	Chair
3.1 ACTION LOG UPDATE AS DISCUSSED ON 22 OCTOBER 2015		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>Outstanding actions from 22 October 2015 were discussed. An update for each outstanding action would be noted in the Action Log.</p> <p>Item 18 (27.8.15) Female Genital Mutilation – deferred until January meeting</p> <p>Item 10 (22.10.15) Vimeo link – video available but deferred to February meeting when more members present</p> <p>Item 19.2 (22.10.15) agenda item paper completed.</p>	<p>Actions: Noted</p> <p>Deferred to January</p> <p>Deferred to February</p> <p>Item closed</p>	<p>Chair</p> <p>SG</p> <p>GJ</p>
4.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		
Nothing discussed.	Decision: Noted	Chair
5.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER 5.1 BOARD ASSURANCE FRAMEWORK (BAF) 5.2 RISK REGISTER		
<p>Item 5.1: Board Assurance Framework (BAF)</p> <p>JP presented Item 5.1, 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.</p> <p>JP highlighted:</p> <ul style="list-style-type: none"> To make the AF easier to read all risks have been re-numbered and grouped by risk ‘owner’. An additional column has been added ‘source of risk’ following recommendations from an internal audit review. A commentary report has been developed to make it easier to track risk movement and provide an audit trail. It is planned to develop this commentary report to include an evaluation of the risk controls and assurance sections for each risk thus providing the Governing Body with more contextual information to evaluate the overall effectiveness of the CCG’s approach to risk mitigation. <p>Item 5.2: Risk Register</p> <p>JP presented Item 5.2, 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.</p> <p>CN asked whether any risk from the quality contract meeting should be fed in – it was agreed these should be fed in and would first go on the team register or be escalated as appropriate.</p>	<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>
6.0 QUALITY DASHBOARD		
<p>CN presented Item 6.0.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> The Quality Team is in the process of creating a new reporting framework to the Governing Body, it is hoped that the new system will eventually link to the quality dashboard HED SHMI position is now in the ‘higher than expected range’ 	Decision: Noted	CN

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> NLaG staffing continues to be a high risk NICE guidance compliance, the Trust has not met this target Mixed sex accommodation, awaiting amendment to the WebV system Patient discharge - Acknowledged that a lot of action and reviews by the contracting team have taken place. NLaG confirm deadline of 31.12.15 has been agreed with CQC to appoint and agree patient appointment lists HEY have developed a quality and improvement plan to consolidate actions required by the CQC, the main area of concern for HEY relates to the Trusts approach to the management of SIs and Never Events, specifically apparent lack of organisational learning 		
PATIENT EXPERIENCE		
7.0 ANY OTHER BUSINESS		
<p>NLaG Service Delivery Improvement Plan (SDIP) CN explained that the SDIP offers the Trust and commissioners the opportunity to record and deliver actions in connection to innovative schemes in the local area and asked the group to consider – what it looks like, how can we use contract levers, any concerns at practice level and feedback direct to CN. CN also requested feedback on any priority areas/concerns that have arisen in relation to LD and dementia services within NL&G.</p>	Action: Feedback comments direct to CN	All
8.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
<p>No new risks identified. Acknowledged that discharge information from NLaG continues to be a serious risk. Need to continue to monitor NLaG discharge processes and feedback concerns. Medication inaccuracies continue to be a concern including missing medication, inaccurate information re medication and failure to update changes</p> <p>Concern expressed re response button on discharge information as a CCG is unaware of this feedback and currently do not know how these are collated and responded to.</p> <p>Query - do NLaG produce a report based on the information?</p>	Action CN to consult with Eddie McCabe and feedback to quality contract group	CN
CLINICAL EXCELLENCE		
9.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
<p>The report was taken as 'read'. The document provided an update on the prescribing performance within the CCG GP practices between June 2015 and August 2015.</p> <p>Noted significant overspend on pharmacy budget – business case currently being pulled together and will be discussed at future meeting.</p>	Decision: Reviewed and noted	GMC

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>Dr K highlighted how useful it has been when PCT pharmacist came to practice and worked to review progress on targets which also helped to improve quality of care</p> <p>BF queried the potential impact of meds management of being on LPF JP replied that results would be known shortly and would be in a better to assess the impact a new provider will make.</p>		
10.0 MORTALITY UPDATE		
<p>It was reported that the commissioning group is progressing, with the focus on End of Life Care, improving systems and service for clients. CN reported that Dr Foster shows a different view on mortality and once system in place may provide more clarity</p>		
11.0 PRIMARY CARE DEVELOPMENT UPDATE		
<p>JP reported that that a CQC inspection has taken place at Ancora and the findings are reported as 'generally good'. No other practice has been identified as an outlier through the RADAR information</p>		
12.0 ANY OTHER BUSINESS		
None		
13.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
None	Noted	Chair
PATIENT SAFETY		
14.0 SAFEGUARDING CHILDREN UPDATE		
Paper taken as read. No comments	Noted	Chair
14.1 SERIOUS CASE REVIEW		
Paper taken as read. No comments	Noted	Chair
15.0 ANNUAL HEALTH REPORT ON LOOKED AFTER CHILDREN AND YOUNG PEOPLE 2014-2015		
Paper taken as read. No comments Report approved	Decision: Noted	Chair
16.0 SAFEGUARDING ADULTS UPDATE		
Report received and noted. No comments	Decision: Noted	Chair
17.0 INFECTION PREVENTION AND CONTROL UPDATE		
<p>Paper taken as read. No comments</p> <p>Advised that the new ICP lead, Linda Taylor will commence in post on the 4th January 2016.</p>	Decision: Noted	Chair
18.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: OCTOBER 2015		
<p>GJ presented Item 18.0, and the report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in October 2015. Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Ophthalmology – validation exercise due to be completed by end December • HEY kidney dialysis • Child suicide 	Decision: The Serious Incident Report for October 2015 were received, discussed and noted.	GJ
19.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT MEETING		
19.1 30 th September – Ratified notes	Decision: Noted	GJ
19.2 28 th October – draft taken as read		
20.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: SEPTEMBER & OCTOBER 2015		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
20.1 30 th September - Ratified notes Minutes from these meetings were submitted for information and noted 20.2 28 th October – draft taken as read 20.3 Extra Ordinary SI meeting 28 th October – draft taken as read and noted the trust action plan over the VERITAS	Decision: Noted	GJ
21.0 NHS111 UPDATE: MONTHS 6 (SEPTEMBER 2015)		
Report on service performance for Month 6 and Quarter 2 were noted. No comments It was reported that a SI for a NL resident has recently occurred. Details will be available for the next meeting.	Decision: The NHS111 update report for Month 6 (September 2015) was received and noted.	Chair
22.0 ANY OTHER BUSINESS		
It was reported that serious concerns have been raised by the CQC on a local care home, their report to be published on 1 st December. CCG clinical team currently on site reviewing patient care.	Decision: Noted	Chair
23.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
INFORMATION GOVERNANCE		
24.0 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. Progress is satisfactory and should be able to comply with level 2	Decision: Verbal update noted	JP
25.0 MINUTES FROM INFORMATION GOVERNANCE GROUP 17 NOVEMBER 2015		
Meeting cancelled.	Decision: Noted	Chair
26.0 FREEDOM OF INFORMATION QUARTER 2		
Taken as read	Decision: Noted	
27.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP		
No issues identified.	Decision: Noted	Chair
28.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
29.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
30.0 CQUINS UPDATE		
CN reported awaiting national guidance and currently planning 3 local CQUINs Agreed to split the information into 4 organisations in future reports	Decision: Verbal update noted	GJ
31.0 NORTH YORKSHIRE & HUMBER QUALITY SURVEILLANCE GROUP		
Notes from the meeting held on the 16 th September 2015 were noted and taken as read	Decision: Noted	Chair
32.0 INITIAL FEEDBACK FROM CQC INSPECTION		
Update noted	Decision: Noted	Chair
33.0 MORTALITY OUTLIER ALERTS		
33.1 Acute Bronchitis – noted	Decision: Noted	
33.2 Cardiac Dysrhythmias – noted	Decision: Noted	

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
CCG will be copied into NLaG response and feedback		
34.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
35.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
36.0 PRIMARY CARE DEVELOPMENT GROUP		
Minutes from meeting held on 28 TH October 2015 not available.	Decision: Noted	Chair
37.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNING BODY		
None		Chair
38.0 ANY OTHER BUSINESS		
1 st December - Interviewing for Clinical Quality Manager 1 st December Chloe, Gary and Fay will be joining CCG 4 th January – Linda Taylor commences	Decision: Verbal update noted	Chair
39.0 DATE AND TIME OF NEXT MEETING		
Thursday 28 th January 2065 at 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair