

Date: 14.4.2016 Governing Body
Item No. 8.12
Public

REPORT TITLE: CCG Quality Group Notes
DECISIONS TO BE MADE: To receive and note

Author Catherine Wylie, Director of Risk & Quality Assurance
GB Lead Catherine Wylie, Director of Risk & Quality Assurance


Continue to improve the quality of services	X	Improve patient experience	X
Reduced unwarranted variations in services	X	Reduce the inequalities gap in North Lincolnshire	X
Deliver the best outcomes for every patient	X	Statutory/Regulatory	

Executive Summary (Question, Options, Recommendations):

The Quality Group minutes dated 28th January 2016 and 25th February 2016 are attached for the CCG Governing Body to receive and note, for information only.

Equality Impact	N	
Sustainability	N	
Risk	N	
Legal	N	
Finance	N	

Patient, Public, Clinical and Stakeholder Engagement to date									
	N/A	Y	N	DATE		N/A	Y	N	DATE
Patient:	X				Clinical:			X	
Public:	X				Other:	X			

MEETING:	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 QUALITY GROUP
MEETING DATE:	Thursday 28 th January 2016	
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW) Chair	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
John Pougher (JP)	Assistant Senior Officer; Quality and Assurance	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 Anita Kapoor (AK)	CCG GP Member	NHS North Lincolnshire CCG
Dr Faisal Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Gemma McNally (GMC)(Item 14 only)	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG)	Yorkshire and Humber Commissioning Support
IN ATTENDANCE:		
Chloe Nicholson (CN)	Quality Lead: North Lincolnshire and North East Lincolnshire CCG (<i>In attendance for all items</i>)	NHS North Lincolnshire CCG
Linda Taylor (LT)	Specialist Nurse Infection Prevention and Control	NHS North Lincolnshire CCG
Vivienne Simpson (VS)	Personal Assistant <i>Note Taker</i>	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Gary Johnson (GJ)	Patient Safety Lead	NHS North Lincolnshire CCG
Ian Reekie (IR)	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Julie Wilburn (JW)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG

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		
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 26 NOVEMBER 2015		
No issues were raised and the minutes were agreed as an accurate record.	Decision: Noted	Chair
4.0 ACTION LOG UPDATE AS DISCUSSED ON 26 NOVEMBER 2015		
Outstanding actions from 26 November 2015 were discussed. An update for each outstanding action would be noted in the Action Log.	Actions: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<ul style="list-style-type: none"> • Patient falls – 16 repeat falls across trust with 2 being considered avoidable. RJF to discuss the number of first time falls with NLaG Medical Director and Chief Nurse • NICE compliance – Overall Trust compliance is 79% against 90% target • Mortality HED SHMI – NLaG ranked at 112 out of 136 NHS provider organisations with a score of 107.7 and now falls with the ‘as expected range’ banding • Recruitment challenges in the medicine division and action taken by the Trust to mitigate the risks • Mixed sex accommodation arranging schedule of site visits • Awaiting CQC report on MSA at NLaG • Nutrition and hydration – Trust has been notified of concerns re SGH figures and has been asked to provide feedback on root cause of the problems. • HEY –VTE performance – Trust is achieving 78.35% in Q3 against target of 95% - deterioration since Q2 (88.09%) • HEY – radiology printing SIs. The Trust provided assurance that the printing errors will not occur again as the reports will be circulated electronically, this will be monitored through the SI contract process • EMAS - Considerable increasing in breaching clinical handover times 	<p>ACTION: First time falls – request information from NLaG</p>	<p>RJ-F</p>
<p>9.1 Workforce update report It was noted that the NLaG Trust reports that it has failed to achieve the staffing performance targets, for the period August 2015 to November 2015.</p> <p>However, the Trust has demonstrated a steady improvement in each of these measures during this period. This improved position could be attributed to the various recruitment initiatives undertaken by the Trust during 2015, the workforce summary report includes a section on ‘Action taken by the Trust to mitigate the risks’, this provided commissioners with further assurance of the Trusts position.</p>	<p>Decision: Report noted</p>	
<p>10.0 DRAFT GOVERNING BODY QUALITY PAPER</p>		
<p>CN provided a first draft and informed the group that work is still on-going to provide a concise and meaningful report. CW emphasised this report had to be concise and ready for public consumption with the Governing Body interested in key messages and data if appropriate.</p> <p>Update noted.</p>	<p>Decision: Update noted</p>	
<p>PATIENT EXPERIENCE</p>		
<p>11.0 COMPLAINTS AND PALS QUARTER 3</p>		
<p>Report noted for information.</p> <p>CW informed the group that the PALS service is hosted by East Riding and complaints are now managed in-house.</p>	<p>Decision: Report noted</p>	<p>All</p>


SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
12.0 ANY OTHER BUSINESS		
None		
13.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks identified.		
CLINICAL EXCELLENCE		
14.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
<p>GMcN took the report as 'read'. The document provided an update on the prescribing performance within the CCG GP practices between August 2015 and November 2015.</p> <p>GMcN introduced Helen Fish senior pharmacist from NECS to the group.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • MRHA safety update – prescribing of Mirabegron safety audits, Nicorandil now 2nd line for angina, difference in Levonorgestrel IUS insertion and duration. • PrescQIPP data highlights variance from national data in 4 areas where there is potential to improve the local position: PPIs, Low dose anti-psychotics, % cephalosporins, 3 day trimethoprim. All to be reviewed at local level. • Workplan - specific meeting being arranged to concentrate on areas of concern • Awareness of ACMD advice on gabapentin and Pregabalin misuse • Collaboration between general dashboard and specific prescribing elements • Medication reviews for patients in care homes proposed option for quality improvement and efficiency savings. 	Decision: Reviewed and noted	GMc
15.0 MORTALITY UPDATE		
It was noted that the SHMI figures for year-ending September 2015 are 133 - 119 were within expected range. RJ-F felt we should continue to try and look at this from a quality and care pathways perspective.	Decision: noted	RJ-F
16.0 PRIMARY CARE DEVELOPMENT UPDATE		
<p>RJF informed the group that he has been appointed as chair of PCDG</p> <p>Market Hill – Concern expressed on historical lack of communication. Noted a discussion with NHS E will take place at Governing Body.</p> <p>Vulnerable Practice Scheme – RJ-F asked whether members were aware there is a significant sum of money available to assist vulnerable practices with recruitment. It was agreed this should be discussed at Execs. More information required on the scheme for further discussion at the PCDG. RJ-F to suggest he attends the Joint Co-Commissioning Group to update them.</p> <p>Nursing revalidation – web based service is affordable and will be sent out to practices for practice nurses</p>	Decision: noted	RJ-F

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
17.0 NATIONAL HIP FRACTURE DATABASE		
CN provided a summary paper and highlighted 5 key points. It was pointed out that of all patients with hip fractures identified by the audit during the defined period, 58.5% of patients received prompt surgery. Raising queries about the remaining patients. CN to raise with the Trust via the NL&G QCR meeting.	Decision: Paper noted Action: Raise issue of remaining 41.5% patients treatment via the NLaG QCR meeting	CN
18.0 FALLS & FRAGILITY FRACTURE AUDIT PROGRAMME		
Paper noted	Decision:	
19.0 RDaSH CQC REPORT		
CQC rated RDaSH as 'requires improvement'. CW and RJF to meet with RDaSH Medical Director and Chief Nurse to discuss concerns. Action plan to come through Quality Group when available.	Decision: Report noted ACTION: Meeting with RDaSH to discuss concerns	RJ-F / CWy
20.0 NY&H SCREENING & OVERSIGHT GROUP MINUTES – 8.12.15		
Noted	Decision: Minutes noted	
21.0 ANY OTHER BUSINESS		
None	Decision:	
22.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Performance and quality issues in primary care CQC RDaSH report	Decision: Noted	Chair
PATIENT SAFETY		
23.0 SAFEGUARDING CHILDREN UPDATE		
SG took the paper as read. Specific areas highlighted/discussed: <ul style="list-style-type: none"> SCR – need to see which recommendations are pertinent to NLCCG. Multi-agency audits – 16 cases requiring GP input. It was agreed to take to Execs for further discussion 	Decision: Noted SG to identify which recommendation are pertinent to NLCCG Action: Multi-agency audits for further discussion by Execs	SG RJ-F
24.0 SAFEGUARDING ADULTS UPDATE		
Report received and noted. Phoenix Park is still of significant interest with a further visit by CQC taking place this morning. LT confirmed there were only minor issues in terms of infection control.	Decision: Noted	Chair
25.0 INFECTION PREVENTION AND CONTROL UPDATE		
Noted that Linda Taylor commenced in post on the 4 th January 2016. Paper taken as read. Report noted.	Decision: Noted	Chair
26.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: NOVEMBER 2015		
Report was taken as 'read'. The report highlighted the themes and	Decision: The Serious Incident	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
any emerging issues, by provider, identified in November 2015.	Report for November 2015 were received, discussed and noted.	
26.1 Serious Incident Report: December 2015 Report was taken as 'read'. The report highlighted the themes and any emerging issues, by provider, identified in December 2015.	Decision: The Serious Incident Report for December 2015 were received, discussed and noted.	Chair
27.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT MEETING		
27.1 28 th October – Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	GJ
27.2 25 th November – draft taken as read		
28.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: SEPTEMBER & OCTOBER 2015		
28.1 28 th October - Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	GJ
28.2 25 th November – draft taken as read		
29.0 NLCCG INCIDENT REPORT – QUARTER 3		
Report was taken as 'read'. Discharge summaries – concern had been expressed that practices do not receive feedback. JP and Jason Coombs met with NLaG, who confirmed they have an internal report they circulate. JP has asked for it to be shared with CCG.	Decision: Noted	
30.0 NHS111 UPDATE: MONTHS 7 & 8		
Report on service performance for Months 7 & 8 Average length of call is 20 minutes – raised as a concern at quality monitoring group. SPA nurse in urgent care centre SGH	Decision: The NHS111 update report for Months 7 & 8 was received and noted.	Chair
31.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
32.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Adult safeguarding - Phoenix Park SPA nurse in urgent care centre SGH	Decision: Noted	Chair
INFORMATION GOVERNANCE		
33.0 INFORMATION GOVERNANCE GROUP UPDATE		
It was noted that support is still being received from the CS but there are significant challenges in terms of resource capacity	Decision: Verbal update noted	JP
34.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT		
Toolkit is being monitored. Some concerns with training figures	Decision: Noted	JP
35.0 INFORMATION GOVERNANCE TRAINING NEEDS ANALYSIS		
Taken as read For noting – as CCG will be performance monitored by NHSE. Need to plan for IT equipment ready for induction JP – PL	Decision: Noted Action: JP and PL to review with IT	JP

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
36.0 RATIFICATION OF INFORMATION GOVERNANCE POLICIES		
<p>The following policies were ratified by the quality group</p> <ul style="list-style-type: none"> • Information Governance Framework • Confidentiality: Code of Conduct Policy • Data Protection and Confidentiality Policy • Email Policy • Privacy Impact Assessment • Safe Haven Policy • Subject Access Request Policy • Information Security Policy • Confidentiality Audit Policy • Acceptable Use Policy • Records Management • Mobile Working Policy 	Quality group approved	JP
37.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP		
No issues identified.	Decision: Noted	Chair
38.0 ANY OTHER BUSINESS		
Nothing discussed.	Decision: Noted	Chair
39.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Potential resource issue for IT support re achievement of IG Toolkit	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
40.0 CQUINS QUARTER 2		
Report was taken as 'read'.	Decision: Noted	CN
<p>40.1 Update on CQUINS 16/17 schemes</p> <p>Discussion took place on the CCGs priorities for the NLaG scheme and the following priorities were proposed</p> <ul style="list-style-type: none"> • Learning disabilities • Dementia • Patient discharge <p>CN shared feedback on progress made with local NL CCG CQUIN for NLAG. Emma Munday and Rebecca Bowen have reported that this indicator may have limited value if stretched into 16/17 scheme</p>	Decision: Noted	CN
<p>40.2 Schedule 4 local Quality Requirements (KPIs)</p> <p>CN has been working closely with EM and RB to ensure that local KPIs specifically for NLCCG service specifications have been mapped to schedule 4 and schedule 6 of the contract.</p>	Decision: Noted	CN
41.0 NORTH YORKSHIRE & HUMBER QUALITY SURVEILLANCE GROUP		
Notes from the meeting held on the 8 th December 2015 were taken as read	Decision: Noted	Chair
42.0 SEASONAL INFLUENZA VACINE UPTAKE AMONGST GP PATIENTS IN ENGLAND		
Noted for information. Number of practices stated as 21 should be 19 VS to notify NHS England	Decision: Noted Action: Notify NHS England	Chair VS

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
43.0 CHILDHOOD FLU VACCINATION PROGRAMME		
Noted	Decision: Noted	Chair
44.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
45.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
46.0 PRIMARY CARE DEVELOPMENT GROUP		
Draft notes from meeting held on 28 TH October 2015. For information.	Decision: Noted	Chair
47.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNING BODY		
None		Chair
ANY OTHER BUSINESS		
48.0 URGENT ITEMS BY PRIOR NOTICE		
None	Decision:	Chair
49.0 FUTURE MEETINGS		
It was agreed to continue to meet on the 4 th Thursday of the month for the time being until outcome of CoM meeting arrangements are known.		
50.0 DATE AND TIME OF NEXT MEETING		
Thursday 25 th February 2016 at 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair

MEETING:	NHS North Lincolnshire Clinical Commissioning Group Quality Group	 QUALITY GROUP
MEETING DATE:	Thursday 25 th February 2016	
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW) Chair	Director of Risk and Quality Assurance/Nurse Member	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 Anita Kapoor (AK)	CCG GP Member	NHS North Lincolnshire CCG
Dr Faisal Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Ian Reekie (IR)	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Jane Cawston (JC)	Community Pharmacist	North East Commissioning Support
IN ATTENDANCE:		
Hazel Moore (HM)	Clinical Quality Matron	NHS North Lincolnshire CCG
Dr Marie Girdham (MG) (Item 6 only)	R&D lead	North Yorkshire & Humber R&D
Vivienne Simpson (VS)	Personal Assistant Note Taker	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Julie Wilburn (JW)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
John Pougher (JP)	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
Chloe Nicholson (CN)	Quality Lead: North & North East Lincolnshire CCG	NHS North Lincolnshire CCG
Linda Taylor (LT)	Specialist Nurse Infection Prevention and Control	NHS North Lincolnshire CCG
Gary Johnson (GJ)	Patient Safety Lead	NHS North Lincolnshire CCG
Gemma McNally (GMC)	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG)	North East 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		
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 28 JANUARY 2016		
Minor grammatical amendments were noted, subject to these	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
<p>inspection follow up appointments are being undertaken in cardiology with the letters taking 6 weeks via India.</p> <ul style="list-style-type: none"> • Ophthalmology • HEY performance • EMAS performance –waiting times • NICE guidance compliance • With increased activity at St Hugh’s - Is there an intention to look at their data 	<p>ACTION: CN to update at next meeting</p>	<p>CN</p>
9.0 DRAFT GOVERNING BODY QUALITY PAPER		
<p>Outstanding. Deferred to March meeting</p>	<p>Decision: Update noted</p>	
PATIENT EXPERIENCE		
10.0 COMPLAINTS AND FOI QUARTER 3		
<p>FOI report noted for information.</p> <p>It was acknowledged that 100% of cases are dealt with in the allotted timescale</p> <p>Complaints - there are currently 9, most are CHC or commissioning/ safeguarding issues.</p>	<p>Decision: Report noted</p>	
11.0 ANY OTHER BUSINESS		
<p>Patient stories – CW to identify how these can be undertaken at Board meetings</p>	<p>Action: Patient stories to be a regular Governing Body agenda item</p>	<p>CW</p>
12.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
<p>No new risks identified.</p>		
CLINICAL EXCELLENCE		
13.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
<p>JC took the report as ‘read’. The document provided an update on the prescribing performance within the CCG GP practices September to December 2015.</p> <p>Specific areas highlighted/discussed:</p> <ul style="list-style-type: none"> • Budget • MHRA alerts • NECs – Prescribing software – GM to update at March meeting 	<p>Decision: Reviewed and noted</p> <p>Action: update on prescribing software</p>	<p>GMc</p> <p>GMc</p>
14.0 PHARMACEUTICAL REBATES		
<p>CW outlined the details to the proposed primary care rebate scheme policy. Highlighting that it has been discussed in detail at the Engine Room who agreed it should go ahead. The Quality Group to be sighted on process, however some proposals will come through this group. It was agreed to strengthen the recommendation and to adopt it as the CCG policy and refer it for information to the Audit Group</p> <p>At the March meeting GMc to work through in detail to ensure the group understands the impact.</p>	<p>Decision: Formally adopted. To be sent to the Audit Group for information.</p> <p>Action: Agenda item March</p>	<p>GMc</p> <p>GMc</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
15.0 MORTALITY UPDATE		
<p>RJF reported that NLaG are back within the 'expected' range for both SHMI and HED. It is hoped that amalgamating the various EOL groups will have a beneficial effect on the SHMI data, by helping to ensure that patients are appropriately identified as being EOL, and are thus cared for (and die) in the appropriate place.</p> <p>FEAST, RATL and BCF – discussion took place on how we monitor the outcomes to ensure performing in best way? Agreed need to monitor whether patients are still alive after being through the 30 days with a follow up audit.</p> <p>Need to ensure pathways are safe if we are changing a clinical service which include engagement with providers, is the challenge? JE build in project processes, providing assurance to engine room and have built in to work</p>	<p>Decision: update noted</p> <p>Action: Audit of RATL & FEAST- JE to raise with Helen Childs</p> <p>Action: Clinical pathways into project processes- JE</p>	<p>RJ-F</p> <p>JE</p> <p>JE</p>
16.0 PRIMARY CARE DEVELOPMENT UPDATE		
<p>RJF updated the group PCDG meeting held on the 24.2.16</p> <ul style="list-style-type: none"> • Group is being revamped • Biggest risk is still resource/capacity to deal with the whole agenda of primary care • Training needs analysis 	<p>Decision: noted</p>	<p>RJ-F</p>
17.0 RDaSH CQC ACTION PLAN		
<p>Action plan was received and it was noted that the Ironstone action plan is being monitored by CQC. Liane Langdon is reviewing their business plan.</p>	<p>Decision: Paper noted</p>	<p>Chair</p>
18.0 QIP: DISCHARGE LETTERS FEEDACK FROM GPs		
<p>Report found to be useful. Concern expressed re the timeliness of discharge letters.</p>	<p>Decision: details noted</p>	<p>Chair</p>
19.0 ANY OTHER BUSINESS		
<p>None</p>	<p>Decision:</p>	
20.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
<p>Clinical pathways</p>	<p>Decision: Noted</p>	<p>Chair</p>
PATIENT SAFETY		
21.0 SAFEGUARDING CHILDREN UPDATE		
<p>SG took the paper as read. Specific areas highlighted/discussed:</p> <p>Multi-agency actions out of the SCR require high levels of health involvement with SG playing key part – looking to prevent young people going Out of Area where possible. CW to discuss under 18 pathway group with Keith Baulcombe. Progress report to April meeting</p>	<p>Decision: Noted</p> <p>Action: CW to discuss under 18 pathway group with KB</p> <p>Action: Progress report at April meeting</p>	<p>SG</p> <p>CW</p> <p>VS/ SG</p>

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
22.0 SAFEGUARDING ADULTS UPDATE		
Report received and noted. Phoenix Park is still of significant interest. Concern also noted with Haverhome	Decision: Report Noted	Chair
23.0 INFECTION PREVENTION AND CONTROL UPDATE		
CW took the paper as read. Specific areas highlighted/discussed: MRSA Bacteraemia RCA/PIR review Outbreaks – care homes C.Difficile – 28 at present (trajectory is 31)	Decision: Report Noted	LT
24.0 NORTH LINCOLNSHIRE CCG INCIDENT REPORT: 2015/2016		
Report was taken as 'read'. The report provides an overview of the incidents for Quarter 3 for the period 1 October to 31 December 2015.	Decision: The Incident Report for Q3 was received, discussed and noted.	GJ
25.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT MEETING		
27.1 25 th November – Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	GJ
27.2 3 rd February – draft taken as read		
26.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST (NLAGFT) COLLABORATIVE SERIOUS INCIDENT MEETING: SEPTEMBER & OCTOBER 2015		
26.1 25 th November - Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	GJ
26.2 3 rd February – draft taken as read		
27.0 NHS111 UPDATE: MONTH 9		
Data unavailable on service performance for Month 9.	Decision: Noted.	Chair
28.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
29.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Timeliness of discharge letters.	Decision: Noted	Chair
INFORMATION GOVERNANCE		
30.0 INFORMATION GOVERNANCE GROUP UPDATE		
Notes from the meeting held on 5 th January were received. CW advised the group the CCG has to achieve level 2 in order to function (IG training)	Decision: Noted	JP
31.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT		
Deferred to next meeting	Decision: Noted	JP
32.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE GROUP		
No issues identified.	Decision: Noted	Chair
33.0 ANY OTHER BUSINESS		
None	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		
Potential resource issue for IT support re achievement of IG Toolkit	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
35.0 CQUINS QUARTER 3		
It was noted this report is a working copy	Decision: Noted	CN
35.1 NLaG 16/17 CQUIN SCHEME PROPOSAL FOR LOCAL INDICATORS		
NL&G proposed five local CQUIN indicators for 16/17, NLCCG and NELCCG agreed that none of the Trusts proposals were suitable for delivery in 16/17 as they did not offer sufficient stretch. Three local CQUINs have been identified for inclusion in the contract: - Adults at risk - Dementia & Delirium Discharge - COPD Care Bundle (Please note: Becky Bowen is reviewing the service spec to establish whether this is already covered in the spec)	Decision: Noted	CN
36.0 DRAFT NLaG LOCAL KPIS – WORKING COPY		
The first NL&G contract review meeting took place on 11th February; Commissioners had a constructive discussion with the Trust and reviewed all of the KPIS proposed by Commissioners. These proposals were a collaboration between the following: - Discussions with Quality Leads across the Humber patch - Review of service specs in NLCCG - Quality concerns raised by NL and NELCCG during 15/16 - Continuation of KPIS currently in the 15/16 contract We are now at version 1.4 of the local KPI scheme; Commissioners await feedback from the Trust on these proposals. CN to circulate the updated version once feedback has been received from the Trust.	Decision: Noted	Chair
37.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
37.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
38.0 PRIMARY CARE DEVELOPMENT GROUP		
Discussed under Item 16	Decision: Noted	Chair
40.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNING BODY		
None		Chair
ANY OTHER BUSINESS		
41.0 URGENT ITEMS BY PRIOR NOTICE		
None	Decision:	Chair
42.0 DATE AND TIME OF NEXT MEETING		
Thursday 24 th March 2016 at 14:00 CSU Meeting Room 2 (first floor), Health Place, Brigg	Decision: Noted	Chair