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

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

Executive Summary (Question, Options, Recommendations): The Quality Group minutes dated 24th March 2016 and 3rd May 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	NHS
MEETING DATE:	Thursday 24 th March 2016	North Lincolnshire Clinical Commissioning Group
VENUE:	CSU Meeting Room 2, Health Place, Brigg	Chinical Commissioning Group
TIME:	14:00	QUALITY GROUP

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
John Pougher (JP) Chair	Assistant Senior Officer; Quality and Assurance	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 (AK)	CCG GP Member	NHS North Lincolnshire CCG
Dr Faisel Baig (FB)	CCG GP Member	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
Julie Wilburn (JW)	Designated Nurse: Safeguarding Adults	NHS North Lincolnshire CCG
IN ATTENDANCE:	L	
Chloe Nicholson (CN)	Quality Lead: North & North East Lincolnshire CCG	NHS North Lincolnshire CCG
Gemma McNally <i>(GMc)</i>	Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG)	North East Commissioning Support
Linda Taylor (LT)	Specialist Nurse Infection Prevention and Control	NHS North Lincolnshire CCG
Vivienne Simpson (VS)	Personal Assistant - Note Taker	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW)	Director of Risk and Quality Assurance/Nurse Member	NHS North Lincolnshire CCG
Hazel Moore (HM)	Clinical Quality Matron	NHS North Lincolnshire CCG
Gary Johnson (GJ)	Patient Safety Lead	NHS North Lincolnshire CCG
Sarah Glossop	Designated Nurse: Safeguarding Children	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	Decision: Noted	Chair
meeting was quorate to proceed.		
2.0 DECLARATION OF INTERESTS		
CW invited those with any Declarations of Interest in relation to the	Decision: Noted	Chair
agenda or not declared previously, to make them known to the		
meeting. No declarations were received.		
3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 25 FEBRUARY 2	2016	
Minor grammatical amendments were noted, subject to these	Decision: Noted	Chair
amendments, the minutes were agreed as an accurate record.		
4.0 ACTION LOG UPDATE AS DISCUSSED ON 25 FEBRUARY 2016		
Outstanding actions from 25 th February were discussed. An update	Actions: Noted	Chair
for each outstanding action would be noted in the Action Log.		
5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
None	Decision: Noted	Chair
6.0 NORTH LINCOLSNHIRE ORAL NUTRITIONAL SUPPLEMENT PROJ	FCT	
Item deferred due to request by NLaG project team, new date to be agreed.	Decision: Noted	Chair
7.0 NLCCG QUALITY GROUP WORK PLAN		
8.0 CLAIMS REPORT		
JP confirmed that no claims have been received over the previous month.		
Legal support - JP also explained that as a member of the NHSLA claims would be processed through this organisation however we would need an individual within the CCG to liaise with them. CW is reviewing the CCG's position. CW pursuing LA to ascertain whether they can support us with legal advice in respect to DOLs/MCA. Further discussions taking place amongst some local CCG's on options for obtaining legal advice - however work is at an early stage.		
9.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER		1
Item 9.1: Board Assurance Framework (BAF) JP presented Item 9.1, 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.	Decision: The CCG Board Assurance Framework was received, discussed and noted	JP
JP noted that a draft audit report has been received giving significant assurance for the BAF. A couple of recommendations were made and these will be incorporated.		
Paper noted		
Item 9.2: Risk Register JP presented Item 9.2, 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.	Decision: The CCG Risk Register was received, discussed and noted	JP
JP reported that directorate risk registers are in the early stages of development and would be receiving further support.		
Paper noted.		
10.0 QUALITY DASHBOARD		
CN presented Item 10.0 Specific areas highlighted/discussed:	Decision: DASHBOARD Noted	CN
• Mixed Sex Accommodation at NL&G – CN agreed to circulate a	Action: CN to circulate MSA	

summary update note, completed by Tara Filby for information and assurance. summary report Clinical Handover times at EMAS CN to circulate info for both sites Action: CN to circulate EMAS handover times information Never Event at HEY (this 31 did not relate to NLCGG patient but is useful as an indication of the processes) Action: CN to circulate EMAS handover times information MRS compliance - CN to provide update from NLaG MRSA screening at NLaG Action: CN to circulate update for information Workforce at NLaG MCC compliance - CN to provide update from NLaG, HEY, RDaSH & EMAS Action: CN to circulate update for information CQC position - awaiting formal feedback in relation to NLaG, HEY, RDaSH & EMAS The exception report hyperlinks in the quality dashboard, in addition to performance (numerical) data. Action:: Up to circulate update for information 11.0 COMPLAINTS The following information was noted for Quarter 3 Number prelied - 1 Number relyforward from Q2 - 2 New Q3 - 3 Number relyfeld - 1 Number rol upheld - 1 Total carried forward to Q4 - 3 Decision: Update noted The Group expressed the need for further information in the report. Including; themes, severity - whether dealt with within the timescale agreed with complainant and how many gone to ombudsman and been upheld by ombudsman. It was suggested that a rag rating could be used. Action:: JP to discuss with CW PATIENT EXPERIENCE 12.0 ANY OTHER BUSINESS none Action: JP to discuss with CW		DECISION/ACTION (including timescale for completion or update)	LEAD
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SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
14.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
GMc took the report as 'read'. The document provided an update on the prescribing performance within the CCG GP practices November 2015 to January 2016	Decision: Reviewed and noted	GMc
Specific areas highlighted/discussed:		
Prescribing budget position remains as significant overspend. Growth consistent High cost per capita QIPP reporting Safety updates – how is it monitored whether GP practices comply – agreed this would be an agenda item for PCDG Hypnotics	Action: PCDG agenda item	RJ-F
Scorecard Group the practices into care networks rather than localities for the next report. GMc to discuss with Business Intelligence Budget setting	Action: GMc to discuss with Business Intelligence	GMc
APC updating its TORs		
Controlled drugs accountable officer for NHS E has changed – VS to circulate info	Action: VS circulated details 30.3.16	
Pharmaceutical Rebates – no new rebates to add.		
15.0 MORTALITY UPDATE		
RJF reported the latest SHMI remains within 'expected'. RJF informed the group that he and CW had given notice that they will not be present at every meeting of the Mortality Performance & Assurance Committee but will monitor what is happening and report back when appropriate.	Decision: update noted	RJ-F
16.0 ANY OTHER BUSINESS		
CQC GP Practice inspections – JP informed the group that reports had been published for Riverside, Cedar and West Common Lane and all were deemed as 'Overall: Good' Inspections have recently taken place at The Birches, Ashby Turn Primary Care, Traingate at Kirton and Bridge Street, Brigg	Decision: update noted	JP
17.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
None	Decision: Noted	Chair
PATIENT SAFETY		
18.0 SAFEGUARDING CHILDREN UPDATE		
Paper taken as read. Specific areas highlighted/discussed:	Decision: update noted	SG
On-going issue re GP's providing safeguarding updates for the LSCB. Practices have been reluctant to respond to the audits. The LMC have made it clear practices should be providing the reports but		

SUMMARY OF DISCUSSION	DECISION/ACTION	LEAD
	(including timescale for completion or update)	
should be paid. RJ-F writing to Chairs of both the LSAB and LSCB	Action: RJ-F writing to LSAB	RJ-F
outlining the LMC view.	and LSCB Chairs	
19.0 SAFEGUARDING ADULTS UPDATE		l
Report received and noted.	Decision: Report Noted	Chair
Specific areas highlighted/discussed:		
Prevent training – need to ensure both Quality Group and Governing Body have a briefing		
Learning lessons review		
Phoenix Park – feedback received from CQC		
Guidance and documentation		
Multi-agency review learning		
Specialist nurse in post 1.4.16		
20.0 INFECTION PREVENTION AND CONTROL UPDATE		l
LT took the paper as read.	Decision: Report Noted	LT
Specific areas highlighted/discussed:		
Norovirus		
C.Difficile target for next year remains at 31		
21.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: JANUAR	Y & FEBRUARY 2016	
Reports were received and noted.	Decision: The Serious Incident	Chair
	Reports were received,	
	discussed and noted.	
22.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT, INCIDENT MEE		. <u>.</u> .
22.1 27 th January – Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	Chair
22.2 24 th February – draft taken as read		
23.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TR	UST (NLAGFT) COLLABORATIVE SI	ERIOUS
INCIDENT MEETING: SEPTEMBER & OCTOBER 2015		-
23.1 27 th January - Ratified Minutes from these meetings were submitted for information and noted	Decision: Noted	Chair
23.2 24 th February – draft taken as read		
24.0 NHS111 UPDATE: MONTH 9 & 10		I
Reports were received and noted.	Decision: Noted.	Chair
Warm transfers - CN expressed concern re data capture and disparity		
of information.		
25.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
26.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		1
None	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION	LEAD
	(including timescale for completion or	
INFORMATION GOVERNANCE	update)	
27.0 INFORMATION GOVERNANCE GROUP UPDATE		T
JP stated the current focus has been on the IG toolkit submission	Decision: Noted	JP
28.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT	1	I
Toolkit has been submitted and self-assessed at level 2. JP confirmed that 100% compliance had been achieved for the IG training module.	Decision: Noted	JP
29.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE	GROUP	
No issues identified.	Decision: Noted	Chair
30.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
31.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED)	
None	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
32.0 CQUINS QUARTER 3		
32.1 Q3 Reconciliation Position	Decision: Noted	CN
Specific areas highlighted/discussed:		
The Q3 CQUIN position has now been reconciled; Commissioners		
note that the Q3 reconciliation process has been difficult, with		
lessons to be learned by Trusts and Commissioners.		
The Q3 final position is to be submitted to NL&G QCR in April	Action: CN to circulate overview of national CQUINs	CN
32.2 2016/2017 schemes update	Decision: Noted	CN
Commissioners have worked up two local CQUINs, these are		
	Action: CN to circulate	
Adults at risk	overview of 16/17 schemes for	
COPD (discharge element of care bundle)	information	
The national CQUIN scheme presents some challenge to Acute Trusts,		
in summary the scheme involves:		
NHS Staff health and wellbeing		
Timely identification and treatment of Sepsis		
Antimicrobial Resistance and Antimicrobial Stewardship		
• 33.1 LOCAL KPI SCHEDULE		L
	Decision: Noted	CN
Negotiations continue to take place with NLaG on development with		
the local KPI scheme, good progress has been made to date and		
Commissioners feel that the scheme is near completion		
CCG will have to justify why they are requesting information	Action: CN to circulate update	
		•

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or	LEAD
	update)	
On-going review by NHS England states the need to demonstrate the need for the KPI - CN to provide brief overview	of the local KPI scheme	
34.0 ANY OTHER BUSINESS		1
None	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		
Draft notes from the meeting held on 24 th February were received and noted.	Decision: Noted	Chair
37.0 NY&H QUALITY SURVEILLANCE GROUP		
Notes from the meeting held on 8 th January 2016 were received and noted.	Decision: Noted	Chair
Single item QSG – details noted		
38.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNI	NG BODY	I
None		Chair
ANY OTHER BUSINESS		
39.0 URGENT ITEMS BY PRIOR NOTICE		
None	Decision:	Chair
40.0 FUTURE MEETINGS		
Further discussion needed to find and agree a new schedule	Action: RJ-F to discuss with CW	
41.0 DATE AND TIME OF NEXT MEETING	·	
Tuesday 3 rd May 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	NHS
MEETING DATE:	Tuesday 3 rd May 2016	North Lincolnshire Clinical Commissioning Group
VENUE:	CSU Meeting Room 2, Health Place, Brigg	
TIME:	14:00	QUALITY GROUP

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW) Chair	Director of Risk and Quality Assurance/Nurse	NHS North Lincolnshire CCG
	Member	
Dr Robert Jaggs-Fowler	CCG GP Member/Medical Director/Named	NHS North Lincolnshire CCG
(RJF)	Doctor for Safeguarding (Adults & Children)	
Dr Anita Kapoor <i>(AK)</i>	CCG GP Member	NHS North Lincolnshire CCG
Ian Reekie <i>(IR)</i>	CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG
Hazel Moore (HM)	Clinical Quality Matron	NHS North Lincolnshire CCG
IN ATTENDANCE:		
Chloe Nicholson (CN)	Quality Lead: North & North East Lincolnshire CCG	NHS North Lincolnshire CCG
Gary Johnson <i>(GJ)</i>	Patient Safety Lead	NHS North Lincolnshire CCG
Sarah Glossop (SG)	Designated Nurse: Safeguarding Children	NHS North Lincolnshire CCG
Vivienne Simpson (VS)	Personal Assistant - Note Taker	NHS North Lincolnshire CCG
Lydia Golby (LG)	Lead for Quality	NHS North East Lincolnshire CCG
Jane Cawston (JC)	Locality Pharmacist	North East Commissioning Support
Sally Bainbridge (SB)	Specialist Nurse – Safeguarding	NHS North Lincolnshire CCG

APOLOGIES:		
NAME	TITLE	SERVICE/AGENCY
John Pougher (JP)	Assistant Senior Officer; Quality and Assurance	NHS North Lincolnshire CCG
Julie Wilburn (JW)	Designated Professional: Safeguarding Adults	NHS North Lincolnshire CCG
Dr Faisel Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
Linda Taylor (LT)	Specialist Nurse Infection Prevention and Control	NHS North Lincolnshire CCG
Jane Ellerton (JE)	Senior Manager; Commissioning	NHS North Lincolnshire CCG
Gemma McNally (GMc)	Strategic Lead Pharmacist (North East	North East Commissioning
	Lincolnshire CCG and North Lincolnshire CCG)	Support

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
4.0 APOLOGIES AND QUORACY		
Apologies were noted and detailed above. It was noted that the	Decision: Noted	Chair
meeting was quorate to proceed.		
5.0 DECLARATION OF INTERESTS		
CW invited those with any Declarations of Interest in relation to the	Decision: Noted	Chair
agenda or not declared previously, to make them known to the		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
meeting. No declarations were received.		
6.0 MINUTES OF THE PREVIOUS MEETING HELD ON 24 MARCH 201	6	
The minutes were agreed as an accurate record.	Decision: Noted	Chair
4.0 ACTION LOG UPDATE AS DISCUSSED ON 24 MARCH 2016		
Outstanding actions from 24 th March were discussed. An update for	Actions: Noted	Chair
each outstanding action would be noted in the Action Log.		
7.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		
None	Decision: Noted	Chair
8.0 CQC NLaG SUMMIT		
CW reported on the CQC Quality summit. The summit included a		
presentation by CQC on the outcome of the Trust and also a presentation by NLAG on their response to the ratings. NLAG have developed an action plan which CW and RJF have commented on beck to NLAG. CW and Liane Langdon are meeting with the CQC Deputy Chief Inspector of Hospitals, Ellen Armistead, to discuss the content of the report.	Decision: Noted	Chair
7.0 NLCCG QUALITY GROUP WORK PLAN		
Monthly Serious Incident Reports and Quarterly Incident Report to be added to the work plan Quality accounts to be circulated at the May meeting Members were asked to have their reports ready on time.	Decision: additions noted. Work plan to be sent to the Audit Group for information	Chair
8.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER		
 Board Assurance Framework (BAF) CW presented the report which 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. Q4 Risk to CCG regarding delayed delivery of retrospective claims – CW reported that Doncaster CCG are outsourcing to a national company with an excellent reputation for achieving results, NLCCG have 57 outstanding cases. Further updates will be brought to the committee for assurance. CW also reported that Doncaster are unable to continue to provide a service for PHBs and have given notice to terminate the contract, NLCCG have agreed to take the service back in-house and a recruitment process will be taking place to recruit to the required posts. The final handover needs to be completed by September 2016. 	Decision: The CCG Board Assurance Framework was received, discussed and noted	JP
Risk Register 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.	Decision: The CCG Risk Register was received, discussed and noted	
Paper noted.		

	(including timescale for completion or	LEAD
	update)	
	<u> </u>	
11.0 QUALITY DASHBOARD		
CN presented Item 9.0	Decision: DASHBOARD Noted	CN
Specific areas highlighted/discussed:		
 EMAS CQC position EMAS Performance. It was agreed to invite a quality representative from EMAS to discuss the deteriorating performance to a meeting with N & NE Lincs CCGs – CN to take forward NLaG staffing issues NL&G Clinical Admin Review NL&G CQC position NL&G MSA position RDASH CQC position 	Action: CN to organise meeting with EMAS/NLCCG and NELCCG	CN
Further detail on the above are provided in the summary report CW reported that a new style board report has been produced and asked whether the QG wants to adopt this style? It was agreed to continue with the original format but to include a more robust actions column. CW/CN/HM to discuss further It was noted that St Hughs Hospital has been added to the report and they had also required an 'inadequate' grade from CQC. Dashboard noted.	Action: CN to add further column to DASHBOARD	CN
10.0 COMPLAINTS		
Details noted.	Decision: Update noted	
CW reported she would review the content and amend the report with Peter LeQuelenec and Clare Smith.	Action: CW to discuss content with PL/CS	cw
PATIENT EXPERIENCE		1
11.0 PATIENT RELATIONS QUARTER 4 REPORT		
Taken as read.		
No comments		
12.0 ANY OTHER BUSINESS		
Long delays in receiving results for Cervical Smears, should be 2	Action: CN to discuss long	CN
weeks but now over 8 weeks due to shortage of cytologists. CN to take forward with PHE	delays in receiving results of cervical smears with PHE	
13.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSE	 D	
Delay in smear test results	Decision: noted	

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
CLINICAL EXCELLENCE		<u> </u>
14.0 MEDICINES MANAGEMENT/PRESCRIBING UPDATE		
JC took the report as 'read'. The document provided an update on the prescribing performance within the CCG GP practices December 2015 to February 2016	Decision: Reviewed and noted	GMc
Specific areas highlighted/discussed:		
Forecast £1m overspend. This group to monitor and focus more closely.		
Medicines Optimisation Work Plan – this work plan will focus on achieving savings. One suggestion by NECS is more work should be done with care homes.		
CW reported that Dr Falk's term as prescribing lead concludes in June and the CCG will be recruiting a new prescribing lead.		
CCG Controlled Drugs Responsibilities – report noted.		
15.0 MORTALITY UPDATE It was agreed that the commissioning plan should be matched up with the community morality action plan.	Action: RJF/JE/CW	RJ-F
16.0 ANY OTHER BUSINESS	L	•
None	Decision:	
17.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
Prescribing overspend and work plan	Decision: Noted	Chair
PATIENT SAFETY		
18.0 SAFEGUARDING CHILDREN UPDATE		
Paper taken as read. Specific areas highlighted/discussed:	Decision: update noted	SG
Tier 4 Quality Assurance Review		
LSCB Annual Report 2014/ 2015	Decision: Report noted Action: Forward to Governing Body	VS
19.0 SAFEGUARDING ADULTS UPDATE		T
Report received and noted.	Decision: Report Noted	Chair
Specific areas highlighted/discussed: A Care home in North Lincolnshire who receive grading of 'inadequate' was discussed It was proposed that more safe and well checks should be undertaken –HM to take forward.	Action: HM to organise 'safe and well' checks at Phoenix Park	НМ
LSAB Annual Report 2015	Decision: Report noted Action: Forward to Governing Body	VS
23.0 INFECTION PREVENTION AND CONTROL UPDATE		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
CW took the paper as read.	Decision: Report Noted	LT
CW reported that a MRSA outbreak in the neonatal unit at SGH has		
taken place and the unit is closed. GJ awaiting 72 hour report.	2016	
24.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: MARCH	Decision: The Serious Incident	Chair
Reports were received and noted.	Report was received, discussed	Criair
	and noted.	
25.0 NORTH LINCOLNSHIRE CCG: SERIOUS INCIDENT MEETING		I
22.1 24 TH February – Ratified Minutes from these meetings were	Decision: Minutes Noted	Chair
submitted for information and noted		
22.2 30 th March – Ratified Minutes from these meetings were		
submitted for information and noted		
22.3 27 th April – draft taken as read		
23.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TR	UST (NLAGFT) COLLABORATIVE S	ERIOUS
INCIDENT MEETING: SEPTEMBER & OCTOBER 2015	, , , , , , , , , , , , , , , , , , ,	
23.1 24 TH February - Ratified Minutes from these meetings were	Decision: Minutes Noted	Chair
submitted for information and noted		
23.2 30 th March – Ratified Minutes from these meetings were		
submitted for information and noted		
23.3 27 th April – draft taken as read		
24.0 NORTH LINCOLNSHIRE CCG INCIDENT REPORT – QUARTER 4		-
GJ took the report as read	Decision: Noted	GJ
Specific areas highlighted/discussed:		
Large numbers of GP incidents have been reported		
Overview of practice engagement		
25.0 NRLS ORGANISATION PATIENT SAFETY INCIDENT REPORTS		
Reports received on HEY, RDaSH and NLaG and details noted.		
CN to clarify at CMB why if NLaG are in the 'Highest 25% of	Action: Discuss with CMB	CN
Reporters' why there were 'significant challenges' noted in the CQC		
outcome report		
26.0 NHS111 UPDATE: MONTH 11		
It was noted that the lead commissioner for 111 has not	Decision: Noted	Chair
provided a performance report for Month 11. RB to provide		2
month 11 and 12 reports to the next meeting.		
month 11 and 12 reports to the next meeting.		
27.0 ANY OTHER BUSINESS	1	1
	Decision: Noted	Chair
None		1
None 28.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
	Decision: Noted	Chai

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
29.0 INFORMATION GOVERNANCE GROUP UPDATE		
No meeting held	Decision: Noted	JP
30.0 INFORMATION GOVERNANCE TOOLKIT PROGRESS REPORT		
Nothing new to report	Decision: Noted	JP
31.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE	GROUP	
No issues identified.	Decision: Noted	Chair
32.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
33.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
None	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
34.0 CQUINS QUARTER 4		
CN noted that the Q4 position is not yet ready for circulation as it has not yet been reconciled. The Trusts submission is currently being reviewed by Commissioners, the final report will be circulated to this Committee in May 16. The reported schedule for this Committee will be amended to reflect this. In addition to the above, the CQUIN 16/17 position was discussed. The Trust has challenged the inclusion of dementia in the CQUIN	Decision: Noted	CN
scheme and has requested that the definition of 'neurological condition' is defined, with further detail to be added. Commissioners have agreed to provide further detail on the definition of a 'neurological condition', but have refused to remove the dementia criterion from the scheme. The Quality Manager continues to negotiate the CQUIN scheme with the NEL and NLCCG Contract Team.		
35.0 LOCAL KPI SCHEDULE		
CN confirmed that Commissioners had submitted their final offer, in terms of content of the local KPI schedule to the Trust and await feedback from the Trust.	Decision: Noted	CN
36.0 PROMs		
Awaiting information from NHSE		
37.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
38.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
No new risks were identified.	Decision: Noted	Chair
MEETING NOTES FROM OTHER GROUPS		
39.0 PRIMARY CARE DEVELOPMENT GROUP		
Meeting on 27 th April was cancelled due to Junior Doctors industrial action	Decision: Noted	Chair

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
40.0 NY&H QUALITY SURVEILLANCE GROUP		
Notes from the meeting held on 14 th March 2016 were received and noted.	Decision: Noted	Chair
CN confirmed the key points are pulled out of the DASHBOARD		
information		
41.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNI	NG BODY	
None		Chair
ANY OTHER BUSINESS		
42.0 URGENT ITEMS BY PRIOR NOTICE		
None	Decision:	Chair
43.0 DATE AND TIME OF NEXT MEETING		
Wednesday 25 th May 2016 at 14:00	Decision: Noted	Chair
CCG meeting room, Health Place, Brigg		