

| Date: | 9 th Februa | ary 2017 | , | | Report Title: | | | | |
|---------------------|------------------------|--|------------|-------------|-------------------------|-------------|----------|-------------|-------------|
| Meeting: | Governing | | | | CCG Quality Group No | ites | | | |
| Item Number: | 8.7 | 5 5007 | | | coo quanty croup its | | | | |
| Public/Private: | Publi | c □ P | rivate 🗆 | 1 | | | | | |
| | 1 4511 | <u>- </u> | | | Decisions to be made: | | | | |
| Author: | Catherine | Wylie | | | To receive and note | | | | |
| (Name, Title) | Director of | - | ng & Oua | ality | TO TOUCHTO UNITE HOLD | | | | |
| GB Lead: | Catherine | | .g & ∾ | | | | | | |
| (Name, Title) | Cutiferine | | | | | | | | |
| Director | Catherine | Wylie | | | | | | | |
| approval | | • | | | | | | | |
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| Continue to impr | ove the qu | ality of | services | \boxtimes | Improve patient exp | erience | | | \boxtimes |
| | | | | | | | | | |
| Reduced unwarra | anted varia | tions in | services | S | Reduce the inequ | ıalities | gap | in Nor | th 🗵 |
| | | | | | Lincolnshire | | | | |
| Deliver the best of | outcomes f | or every | patient | : 🛛 | Statutory/Regulator | y | | | |
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| Executive Summa | ary (Questi | on, Opti | ons, Red | commenda | tions): | | | | |
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| | | | | | | | | | |
| | | | rd Nover | mber 2016 | are attached for the CO | G Gove | rning Bo | ody to re | eceive |
| and note, for info | rmation on | ıly. | | | | | | | |
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| Equality Impact | Yes | s 🗆 N | lo 🗵 | | | | | | |
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| Sustainability | Yes | s 🗆 N | lo 🗵 | | | | | | |
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| Risk | Yes | s 🗌 N | lo 🗵 | | | | | | |
| | | | | | | | | | |
| Legal | Yes | s 🗆 N | lo 🗵 | | | | | | |
| | | | | | | | | | |
| Finance | Yes | Yes □ No ⊠ | | | | | | | |
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| | Pati | ient, Pu | blic, Clin | ical and St | akeholder Engagemen | t to date | | | |
| | N/A | Y | N | Date | | N/A | Y | N | Date |
| Patient: | \boxtimes | | | | Clinical: | | | \boxtimes | |
| Public: | \boxtimes | | | | Other: | \boxtimes | | | |
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| MEETING: | NHS North Lincolnshire Clinical Commissioning Group Quality Group | |
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| | Commissioning Group Quality Group | NHS |
| MEETING DATE: | Wednesday 23 rd November 2016 2016 | North Lincolnshire Clinical Commissioning Group |
| VENUE: | CCG Meeting Room, Health Place, Brigg | |
| TIME: | 13:30 | QUALITY GROUP |

| PRESENT: | | |
|-------------------------------------|---|-------------------------------------|
| NAME | TITLE | SERVICE/AGENCY |
| Catherine Wylie <i>(CW)</i> (Chair) | Director of Nursing and Quality | NHS North Lincolnshire CCG |
| Dr Robert Jaggs-Fowler (RJF) | CCG GP Member/Director of Primary Care /Named Doctor for Safeguarding (Adults & Children) | NHS North Lincolnshire CCG |
| Hazel Moore (HM) | Head of Nursing | 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 |
| IN ATTENDANCE: | | |
| Gary Johnson (GJ) | Patient Safety Lead | NHS North Lincolnshire CCG |
| Linda Taylor (LT) | Specialist Nurse Infection Prevention and Control | NHS North Lincolnshire CCG |
| Vivienne Simpson (VS) | Personal Assistant - Note Taker | NHS North Lincolnshire CCG |
| Gemma McNally (GMc) | Strategic Lead Pharmacist (North East Lincolnshire CCG and North Lincolnshire CCG) | North East Commissioning Support |
| Sarah Glossop (SG) | Designated Nurse: Safeguarding Children | NHS North Lincolnshire CCG |

| APOLOGIES: | | |
|----------------------|---|----------------------------|
| NAME | TITLE | SERVICE/AGENCY |
| John Pougher (JP) | Head of Governance | 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 |
| Chloe Nicholson (CN) | Quality Lead: North & North East Lincolnshire CCG | 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 additional 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 OCTOBER 2016 | | | | |
| The minutes were agreed as an accurate record. | Decision: Noted | Chair | | |

| 4.0 ACTION LOG UPDATE AS DISCUSSED | | |
|--|--|-------|
| Outstanding actions were discussed. An update for each outstanding action would be noted in the Action Log. | Actions: Noted | Chair |
| 5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA) | | |
| None | Decision: Noted | Chair |
| C.O. DOADD ACCURANCE FRANCIAGORY AND DICK DECISTED | | |
| 6.0 BOARD ASSURANCE FRAMEWORK AND RISK REGISTER To inform the Quality Group of the risks to the delivery of North | Decision: The CCG Risk Register | JP |
| Lincolnshire CCG (NL CCG) strategic objectives and risks on the Assurance Framework and Corporate Risk Register. | was received, discussed and noted | 31 |
| In line with NL Risk Management Strategy all other identified risks are held on the Directorate Risk Registers. Work is on-going to ensure that risks, including partnership risks, continue to be captured and managed at the appropriate level. | | |
| Report noted. | | |
| RJF reported that the Audit Group are taking a more in-depth interest in the Risk Registers. | | |
| It was queried whether:- | | |
| a. the mortality risk should remain on the risk register and it was agreed that RJF would discuss with JP | | |
| b. whether medicine management should be included | Action: RJ-F to discuss with JP | RJ-F |
| 7.0 QUALITY DASHBOARD | | |
| Dashboard noted. | Decision: : DASHBOARD Noted | CN |
| Further details are provided in the attached summary report on the following: | | |
| Quality reporting at RDaSH Quality reporting and governance issues at St Hughs NLaG Staffing issues (medical, Microbiologists) NLaG CQC inspection taking place this week and awaiting outcome EMAS – poor performance | | |
| EMAS Partnership Board have confirmed the additional capacity will continue until substantive vacancies have been appointed to and are operational HEY performance | | |
| NLaG CQUINs not meeting anti-microbial prescribing standards | | |
| Dashboard Noted | | |
| 8.0 EMERGENCY PREPAREDNESS RESILIENCE RESPONSE | | |
| Item deferred to December meeting | Decision: Update noted | |
| 9.0 R&D STRATEGY | | l |

| The Quality Group were asked to approve the revised version of the NL R&D Strategy noting the amendments made, in particular the inclusion of research governance section. | Decision: Strategy approved |]P |
|---|--|-----|
| Strategy approved 10.0 MANDATORY TRAINING 6 MONTHLY UPDATE | | |
| Item deferred to December meeting | Decision: | |
| 11.0 INDUCTION AND PROBATIONARY PERIOD POLICY 2016 | | |
| Safeguarding training should take place within 6 weeks of commencement date and not 3 months as stated in the policy. Following this amendment the policy was approved and it was agreed it should be circulated to all directors and senior management. | Decision: Policy approved | |
| PATIENT EXPERIENCE | | |
| 12.0 COMPLAINTS ANNUAL REPORT | | |
| Item deferred to December meeting | | |
| 13.0 FREEDOM OF INFORMATION QUARTERLY REPORT | | |
| This paper provides an update on the current position of Freedom of Information (FOI) requests made to NLCCG from 1 July to 30 September 2016 and a comparison against Quarter Two in 2015/16. Report noted for information | Decision: Report noted | |
| 14.0 ANY OTHER BUSINESS | | |
| Patient Experience Manager now in post – to be invited to future meetings. | Action: VS to invite Clare Smith to attend future meetings | VS |
| 15.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS | | |
| DISCUSSED None | | |
| Notice | | |
| CLINICAL EXCELLENCE | | |
| 16.0 MEDICINES MANAGEMENT/PRESCRIBING/PHARMACEUTICAL REE | | T |
| GMcN took the paper as read. Specific areas highlighted/discussed: Budget expenditure forecasting an overspend Cost growth is 2.8% compared to Y&H at 1.1% Weighted per capita prescribing costs are high compared to other CCGs Drug tariff Quality score card Paper noted | Decision: Reviewed and noted | GMc |
| 17.0 CONTROLLED DRUGS SIX MONTHLY UPDATE | | |
| GMcN outlined the background and highlighted the CCGs responsibilities. A baseline assessment against NICE NG46 standards has been completed. It was noted that the new accountable officer team training is still outstanding. The group discussed whether a controlled drugs policy is needed as | Decision: Report noted | |

| the CCG does not have staff involve in drug disposal. It was agreed | | |
|--|-------------------------------------|-------|
| that the accountability framework needs to be made clearer. | | |
| GMcN agreed to review why Killingholme practice figures are so high. | | |
| FB reported that a clinical pathways group is being established and | | |
| GMcN agreed to provide examples to show best practice from other | | |
| areas. Further breakdown needed | | |
| | | |
| 18.0 MORTALITY UPDATE | | T |
| RJ-F to provide a report on what actions are being taken to address mortality. | Action: report for December meeting | RJ-F |
| 10.0 PRIMARY CARE LIPDATE | | |
| 19.0 PRIMARY CARE UPDATE | Danisiana Undata Natad | DI E |
| RJF reported a primary care score card will be available from December meeting | Decision: Update Noted | RJ-F |
| | | |
| 20.0 ANY OTHER BUSINESS | | T |
| None | Decision: | Chair |
| 21.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED | | |
| None | Decision: | Chair |
| | | |
| PATIENT SAFETY | | |
| 22.0 NORTH LINCOLNSHIRE SUICIDE CLUSTER COMMUNITY ACTION P | LAN PRACTICE GUIDANCE | |
| SG outlined the Local Authority responsibilities to develop a | Decision: Update Noted | Chair |
| community action plan for responding to any potential or actual | | |
| suicide cluster or contagion that may occur in North Lincolnshire. SG | | |
| confirmed she had actively contributed to it. | | |
| A trial will take place at some point in January. | | |
| | | |
| 23.0 SAFEGUARDING UPDATE | | |
| SG took the paper as read. | Decision: update noted | SG |
| Specific areas highlighted: | | |
| NHS England Safeguarding Assurances | | |
| Paper noted | | |
| | | |
| 24.0 SAFEGUARDING WORK PLAN | | 1 |
| Paper taken as read. | Decision: Report Noted | Chair |
| The work plan will form part of a suite of assurance templates for | | |
| CCG compliance with statutory/ regulatory/ inspection frameworks | | |
| which will be available on Y Drive. | | |
| SG currently amending the safeguarding policy – JP to review before | | |
| final draft comes to the December meeting for approval. | | |
| 25.0 INFECTION PREVENTION AND CONTROL UPDATE | | |
| Paper taken as read. | Decision: Report Noted | LT |
| Specific areas highlighted/discussed: | Decision: Report Noted | L1 |
| specific areas nignlighted/discussed: | | |
| Currently 14 C.Difficile cases | | |
| • E.Coli bacteraemia – increasing year on year- once new guidance | | |
| is available LT to prepare a paper on the impact for the CCG | | |
| Outbreaks | | |
| | | |
| Anti- microbial prescribing | | |
| Care home audits | | |
| Flu season | | |
| Paper noted | | |
| I see | I . | 1 |

| 26.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: OCTOBE | | |
|---|-----------------------------------|-------|
| Paper taken as read. | Decision: Report noted | GJ |
| The following issues were discussed:- | | |
| EMAS – one SI closed on STEIS by Lead Commissioner (NHS Hardwick) | | |
| without NLCCG having the opportunity to comment on the report | | |
| prior to closure – this is being picked up with Contract Leads | | |
| NLaG currently have 38 SIs reported YTD | | |
| NLAG - One Never Event YTD- retained foreign object post | | |
| procedure NEL CCG patient. | | |
| Noted there are more SIs being reported at SGH than DPOWH | | |
| 4 previously reported LSA non assured reports, 3 have now received | | |
| assurance at the SI meeting | | |
| Claire Keegan, LSA Midwife on secondment from NHSE working on | | |
| midwifery services across NL&G on behalf of N & NELCCGs | | |
| Paper noted. | | |
| 27.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT MEETINGS: | | T |
| 27.1 28 th September – Ratified Minutes were submitted for | Decision: Minutes received | GJ |
| information and noted | | |
| 27.2 26 th October – draft taken as read | | |
| 27.2 26 October – draft taken as read | | |
| 28.0 NLaG COLLABORATIVE SERIOUS INCIDENT MEETING: | | |
| 28.1 28 th September – Ratified Minutes were submitted for | Decision: Minutes received | GJ |
| information and noted | | |
| 28.2 26 th October – draft taken as read | | |
| 28.2 26 October – draft taken as read | | |
| 29.0 NHS111 UPDATE: MONTH 6 | | |
| Paper taken as read | Decision: Report 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 |
| | | |
| CQC REPORTS | | |
| 32.0 CQC INSPECTION UPDATES | | |
| Care homes | Decision: Noted | Chair |
| Paper taken as read and noted. | | |
| GP practices | | |
| Paper noted | | |
| . 4555654 | | |
| INFORMATION GOVERNANCE | | |
| 22.0 INFORMATION COVERNANCE CROUD /TOOL VIT LIBRATE | | |
| JP and IH have met with EMBED IT manager to review progress | Decision: Update Noted | |
| against the IG Toolkit submission. Concerns have been expressed re | Decision. Opuate Noted | |
| aparise the 19 roomic submission. Concerns have been expressed to | l . | L |

| EMBED capacity to support the delivery, as a result an action plan has | | |
|---|-------------------------------|-------|
| been agreed and will be closely monitored. The issue has been | | |
| placed on the directorate risk register until such time as the CCG | | |
| receives full assurance that all relevant work and preparations have | | |
| been undertaken. | | |
| 34.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE O | | I |
| N/A | Decision: | |
| 35.0 ANY OTHER BUSINESS | | |
| None | Decision: Noted | Chair |
| 36.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED | | • |
| Safeguarding IT Issues have been identified at NEL - SG to update JP | Decision: Noted | Chair |
| | Action: SG to update JP on IT | |
| | issues | |
| CONTRACT QUALITY ISSUES | | |
| | | |
| 37.0 CQUIN UPDATE | | |
| Deferred to December meeting | Decision: Noted | CN |
| | | |
| 38.0 KPI UPDATE | | |
| Deferred to December meeting | Decision: Noted | CN |
| | | |
| 39.0 ANY OTHER BUSINESS | | |
| None | Decision: Noted | Chair |
| | | |
| 40.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED | | 1 |
| None | Decision: Noted | Chair |
| | | |
| MEETING NOTES FROM OTHER GROUPS | | |
| None | | |
| Notice | | |
| 41.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNII | NE BODY | |
| None | | Chair |
| None | | Crian |
| FOR INFORMATION | | |
| 42.0 | | |
| None | | |
| | | |
| ANY OTHER BUSINESS | | |
| | | |
| 43.0 URGENT ITEMS BY PRIOR NOTICE | | |
| | Decision: | Chair |
| 44.0 DATE AND TIME OF NEXT MEETING | | |
| Wednesday 28 th December 2016 at 14:00 Meeting room 2 , Health | Decision: Noted | Chair |
| Place, Brigg | | |