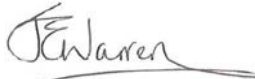


Date:	9 th August 2018
Meeting:	Governing Body
Item Number:	Item 12.1
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Report Title:
Quality, Performance & Finance Committee Summary Report
Decisions to be made:
Members are asked to review and note the content of this report

Author: <i>(Name, Title)</i>	Hazel Moore Head of Nursing Janice Keilthy Lay Representative for Patient and Public Involvement
GB Lead: <i>(Name, Title)</i>	Catherine Wylie Director of Risk and Quality Assurance
Director approval	Julie Warren
Director Signature	

Link to a Strategic Objective?	<input type="checkbox"/>	
Link to a Strategic Risk	<input type="checkbox"/>	

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input type="checkbox"/>		
Reduced unwarranted variations in services	<input type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input type="checkbox"/>		
Deliver the best outcomes for every patient	<input type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>		
Purpose (tick one only)	Approval <input type="checkbox"/>	Information <input type="checkbox"/>	To note <input checked="" type="checkbox"/>	Decision <input type="checkbox"/>	Assurance <input type="checkbox"/>

Executive Summary (Question, Options, Recommendations):	
The enclosed paper provides a summary of the Quality, Performance & Finance Committee meeting held on 2 nd August 2018	
Recommendations	To receive and note the content of this report
Report history	This integrated report replaces the previous standalone Quality, Performance & Finance reports as agreed at the December 2017 Governing Body meeting
Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Sustainability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> The report highlights areas of concern and pressure in relation to sustainability of service across the CCG's main Providers, and the CCG

Risk	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p>The report supports the Quality and Performance section of the CCG Assurance Map, in particular Performance reporting – Finance and Quality. The report provides management level assurance to the Governing Body, to enable them to provide second line assurance to GP members.</p> <p>The content of the report provides assurance in support of the NHS England Assurance Framework.</p> <p>In addition, the report provides assurance against the CCG Board Assurance Framework (BAF) Risk FP1. Risk position monitored by the CCG Planning and Commissioning Committee and the CCG Governing Body.</p>
Legal	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	This report covers the NHS Constitution and incorporates requirements in relation to the NHS Standard Contract across the CCG's Providers.
Finance	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	On-going financial sustainability impacted.

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Clinical:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Chair's Report to the Governing Body

Quality, Performance and Finance Committee

Meeting held on 2 August 2018

In accordance with the constitution, standing orders and Scheme of delegation, NLCCG has established the Quality, Performance and Finance committee. The purpose of the group is to ensure the continuing development of the monitoring and reporting of performance outcome metrics in relation to the CCG quality improvement, financial performance and management plans. The committee will ensure delivery of improved outcomes for patients in relation to the CCGs strategic objectives and continually aim to improve the quality of the services provided.

This report reflects a summary of the meeting held on 2 August 2018 and its agreed action points.

1. Highlights	
1.1 Quality	Enhanced quality surveillance remains in place for Northern Lincolnshire and Goole NHS Foundation Trust [NLAG] and Thames Ambulance Service. Monitoring arrangements for these providers is through the contract management processes and the System Improvement Board framework. Escalation of concerns is also reported to the regional Quality Surveillance Group.
1.2 Finance	At month 3 the CCG reports a Year to Date [YTD] overspend of £1m which is in line with the plan. The YTD QIPP achievement ay Month 3 was £1,363k against a target of £1,499k. Q1 CSF received from NHSE. Despite a slight slippage against target in month 3, assurance was given that this will be retrieved during the coming months, however monitoring will continue.
1.3 Performance	Referral to Treatment times at Northern Lincolnshire and Goole Foundation Trust [NLAG] and Hull and East Yorkshire continue to fall below the required levels. A significant number of patients continue to wait over 52 weeks for an appointment at NLAG; a recovery plan is in place and remedial actions include the reconfiguration of how services are delivered. NLaG are the worst performing Trust in the country. To note an Improvement has been seen in A & E attendance targets.

2. Opportunities	
2.2 Primary Care	The implementation of Electronic RX was discussed. No evidence at this point in time of any safety concerns from GP's.
2.3 Integrated working	NLCCG work alongside the LA in relation to Health and Social Care Provision across North Lincolnshire and this is identified through the Health and Social Care Board. CQC and the LA have identified that

	NLCCG is the strongest provider amongst our peer CCG's and continues to evidence an upward trajectory of excellent provision within our care homes and domiciliary care providers.
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3. Risks	
3.1 Quality	EMAS have experienced significant delays in response times and this is also being addressed through contracting processes. Staffing and recruitment remains a challenge in all areas in North Lincolnshire and services are being as innovative as possible to recruit to vacant positions. It was identified that recruitment within North Lincolnshire is being undertaken by other European countries for nursing staff – predominantly midwives.
3.3 Performance	Patient referral to treatment time remains a risk as a significant number of patients are waiting longer than 52 weeks. Performance against 6 week diagnostic waiting time target has declined, this continues to be monitored through the appropriate channels.

4. Governance	
4.1 Commissioning	IVF Policy presented for information/ratification following approval at PCC. The Committee approved the policy.
4.2 Quality	Terms of Reference for the Serious Incident Group and Incident group were approved by the Committee

5. Assurance	
5.1 Quality	Quarter 4 and Quarter 1 Serious Incident report and Quarter 1 Incident report were presented. The committee were assured with the reports. A reduction in the number of incidents reported within the access, appointment, discharge criteria was identified, this will continue to be monitored to ensure this downward trend is sustained.
5.3 Performance	Provider performance data was received and reviewed. There remain concerns as explained in the points above in particular waiting times.
5.4 Safeguarding	The safeguarding quarterly report was presented. It was noted that as a consequence of the Children and Social Work Act 2017, Local Safeguarding Boards are being abolished and duties placed equally on the Local Authority, CCG and Chief Officer of Police for an area to lead safeguarding children arrangements. The new arrangements need to be in place by end of June 2019. However, North Lincolnshire has been granted “early adopter” status, and will

	<p>be required to publish their plans for, and begin to deliver, new arrangements by October 2018.</p> <p>Further training was also identified for GP and Lay Members</p>
5.5 Commissioning Strategy update	<p>The commissioning strategy updated was presented. It was noted that the plan 2018/19 reflects the strategic priorities agreed by the Governing Body and provided an update in relation to progress to date.</p>
5.6 Information Governance	<p>Head of Governance has been appointed on an interim basis. Discussions are being held with NL Council to source a permanent solution.</p> <p>General Data Protection Regulations (GDPR) - ongoing review and assurance re compliance is a key element of the CCG's IG work plan – no significant concerns have been identified so far.</p> <p>A new tool kit has replaced the old 4.1 version and has been re-named the Data Security Protection Toolkit.</p>

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