

Date:	11 th October 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

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GB Lead: <i>(Name, Title)</i>	Janice Keilthy Lay Representative for Patient and Public Involvement
Director approval	Clare Linley
Director Signature	<i>Clare E. Linley</i>

Decisions to be made:

To note

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 meetings held on 6 th September and 4 th October 2018
Recommendations 1

	2	
	3	
Report history		
Equality Impact	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Sustainability	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Risk	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Legal	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Finance	Yes <input type="checkbox"/> No <input type="checkbox"/>	

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

Chair's Report to the Governing Body

Quality, Performance and Finance Committee

Meetings held on 6th September and 4th October 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 meetings held on 6th September and 4th October 2018 and the agreed action points.

Finance	
6th September 2018 and 4th October meetings	<p>A full discussion with robust challenge in relation to the current and prospective financial position of the CCG documented within the Integrated Quality Performance and Finance Report was undertaken at both meetings.</p> <p>The Committee felt assured with the current financial position with a moderate level of confidence in relation to the year-end position.</p> <p>The Committee was pleased to note NHSE observations around positive in year financial performance and the improving underlying position for the organisation.</p>
4th October 2018	<p>The Procurement Policy was considered for approval. The Committee approved the Policy and were assured with the content.</p>
Quality and Performance	
6th September 2018	<p>The Committee considered the performance data from a range of providers and undertook robust discussion in relation to the quality implications within the Integrated Quality Performance and Finance Report.</p> <p>The Committee were not fully assured with the quality of the current 52 week wait data from Northern Lincolnshire & Goole NHS Foundation Trust (NLG) and had a low level of confidence in relation to the length of time individuals are waiting for out-patient appointments. The Committee agreed that a deep dive would be undertaken to review the data and quality implications in greater detail.</p> <p>The Equality and Inclusion Policy was considered for approval. The Committee agreed that the policy required further amendment following feedback and delegated responsibility to the Director of Nursing and Quality for sign of the policy.</p> <p>The Major Incident Plan was considered for approval. The Committee approved the Plan and were assured with the robust</p>

	<p>content of the Plan subject to minor comments being taken into consideration from the Director of Nursing and Quality.</p> <p>The Influenza Plan was considered for approval. The Committee approved the Plan and were assured with the content of the Plan subject to minor comments being taken into consideration from the Director of Nursing and Quality.</p> <p>The Committee considered the most recent Care Quality Commission (CQC) Inspections for Care Homes and GP Practices. The Committee were assured and had a high level of confidence with the content and action required by the CCG in relation to the Care Homes and GP Practices mentioned.</p>
<p>4th October 2018</p>	<p>The Committee considered the performance data from a range of providers and undertook robust discussion in relation to the quality implications within the Integrated Quality Performance and Finance Report.</p> <p>The performance position with regard to 52 week waits remains a concern and further information is being sought through the Head of Strategic Commissioning to provide assurance in this regard.</p> <p>The Committee discussed nurse staffing at NLaG and has asked for a deep dive to be brought to the next meeting.</p> <p>A paper providing a summary of the key findings of the most recent NLAG CQC inspection and actions being taken by the CCG and with system partners was considered and discussed in detail.</p> <p>The Committee was assured with regard to the actions that the CCG is taking with partners to support improvement and assurance of quality however the Committee was concerned regarding the continued inadequate rating for the well led domain and is not fully assured regarding the impact of the leadership changes that the Trust has put in place to support improvement.</p> <p>The Committee identified did not identify any new risks from the business discussed at the meeting but has requested that the existing risk on the transitional register (risk 5) regarding the risk of patients receiving poor quality care is reviewed in the context of the most recent CQC report.</p>