

Date:	13 th April2	2017			Report Title:				
Meeting:	Governing	g Body			CCG Quality Group N	otes			
Item Number:	9.9								
Public/Private:	Publi	c⊠ P	rivate 🗆						
					Decisions to be made	e:			
Author:	Catherine				To receive and note				
(Name, Title)	Director o	of Nursir	ng & Qua	lity					
GB Lead:	Catherine	Wylie							
(Name, Title)									
Director	Catherine	Wylie							
approval									
Continue to impr	ove the qu	ality of	services		Improve patient ex	perience			
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Reduced unwarra	anted varia	tions in	services			ualities	gap	in Nor	th 🗵
5 11 11 1					Lincolnshire				
Deliver the best of	outcomes f	or every	patient		Statutory/Regulato	ry			
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Executive Summa	ary (Questi	on, Opti	ons, kec	ommenda	tions):				
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		iated 28	Decem	iber 2016	are attached for the C	CG Gove	rning BC	dy to re	ceive and
note, for informa	tion only.								
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Equality Impact	16:	э	10 🖂						
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MEETING:	NHS North Lincolnshire Clinical	
	Commissioning Group Quality Group	
		NHS
MEETING DATE:	28 th December 2016	North Lincolnshire
		Clinical Commissioning Group
VENUE:	Boardroom, Health Place, Brigg	
TIME:	14:00- 15:45	QUALITY GROUP

PRESENT:		
NAME	TITLE	SERVICE/AGENCY
Catherine Wylie (CW) (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) Dr Anita Kapoor (AK)	Head of Nursing CCG GP Member	NHS North Lincolnshire CCG NHS North Lincolnshire CCG
Dr Faisel Baig (FB)	CCG GP Member	NHS North Lincolnshire CCG
John Pougher (JP) Ian Reekie (IR)	Head of Governance CCG Lay Member, Patient & Public Involvement	NHS North Lincolnshire CCG NHS North Lincolnshire CCG
Jane Ellerton (JE) Chloe Nicholson (CN)	Senior Manager; Commissioning Quality Lead: North & North East Lincolnshire CCG	NHS North Lincolnshire CCG NHS North Lincolnshire CCG
IN ATTENDANCE:		
Katie Thomas (KT) (Note taker)	Project Officer/ Personal Assistant	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 and Adults	NHS North Lincolnshire CCG
Sally Bainbridge (SB)	Specialist Nurse	NHS North and North East Lincolnshire CCG

APOLOGIES:					
NAME	TITLE	SERVICE/AGENCY			
Gary Johnson (GJ)	Patient Safety Lead	NHS North Lincolnshire CCG			
Linda Taylor (LT)	Specialist Nurse Infection Prevention and Control	NHS North Lincolnshire CCG			

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD
1.0 APOLOGIES AND QUORACY		
Apologies were noted as 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 additional Declarations of Interest in	Decision: Noted	Chair
relation to the agenda or not declared previously, to make them		
known to the meeting.		
IR declared a potential conflict of interest in relation to item 7 as his		
wife works as part of the reception team at the Spire.		
No other declarations were raised.		



SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	LEAD	
3.0 MINUTES OF THE PREVIOUS MEETING HELD ON 23 rd NOVEMBE	R 2016		
The minutes were agreed as an accurate record. Decision: Noted C			

4.0 ACTION LOG UPDATE AS DISCUSSED		
Outstanding actions were discussed. An update for each outstanding action has been noted within the Action Log.	Actions: Noted	Chair
5.0 MATTERS ARISING (NOT COVERED ON THE AGENDA)		_
No items were raised for discussion.	Decision: Noted	Chair
6.0 BOARD ASSURANCE FRAMEWORK AND CORPORATE RISK REGIS	STER	
The Board Assurance framework risks summary and the corporate risk register were noted and discussed. The group were informed that the format had been developed from work done in Leeds. It was mutually agreed that work from other CCGs should also be viewed and considered before finalising the document. JP confirmed that the directorate risk registers are set up, with some directorates needing further development. The group agreed that these need to be reviewed regularly and suggested reviewing twice a year as part of this meeting. The group requested to see the full risk register at the next meeting. The risk management strategy was deferred to the meeting in January.	Action: agenda item January Action: agenda item January	JP
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7.0 QUALITY DASHBOARD The quality dashboard and summary of key points were noted. The	Decision: Noted	CN
mixed sex breaches were highlighted. The CCG members confirmed that they were pleased with how the trust has reported and applied criteria. It was confirmed that a meeting with Karen Fanthorpe will be going into diaries imminently. The staffing position was noted and it was discussed that agency spend and medical staffing position continues to be highly challenging for the trust. A complaint from a North Lincs patient attending the Spire was discussed. It was confirmed that the friends and family test has seen a dip recently and there was an in depth discussion around how a better method of carrying out the test could be designed going forward. The group confirmed that the performance dashboard that goes to the Joint Commissioning Committee will come to this meeting in the future to enable a more joined up and integrated report. CW confirmed that she has had some initial conversations with Richard Young the Director of Commissioning with regards to this. The proposal paper was then briefly discussed and the group decided to discuss this virtually with primary care colleagues. It was noted that NLaG are awaiting the outcome of the CQC	Decision: Discuss the proposal paper virtually	
inspection. RDaSH have received their draft report and it seems that their service has moved from inadequate to good. The issue around the RTT was noted. JE confirmed that the CCG have spoken to CQC around another 12,000 patients that have been discovered that may not have been addressed by the trust. The next		

Single Item QSG meeting will be going into the diaries imminently.		
8.0 LEARNING DISABILITY SITE VISIT REPORT		
The report was noted by the group. FB briefly updated the group on the findings from the visit on 7 th December. It was confirmed that the CCG has approved recurrent funding. The staff morale was said to be high. It was highlighted that there is some slight anxiety from staff that the service may not be situated at the Iron stone centre in the future. However, FB assured the group that the team were delivering the CCG priorities.	Decision: Noted	FB
9.0 EMERGENCY PREPAREDNESS RESILIENCE RESPONSE POLICY		
Item deferred to January meeting.	Decision: Deferred	JK
10.0 MANDATORY TRAINING 6 MONTHLY UPDATE		
Item deferred to January meeting.	Decision: Deferred	PL
11.0 LEARNING, CANDOUR AND ACCOUNTABILITY		
The summary report was noted by the group.	Decision: Noted	IR
PATIENT EXPERIENCE		
12.0 COMPLAINTS ANNUAL REPORT		
Item deferred to April meeting.	Decision: Deferred	CS
13.0 FREEDOM OF INFORMATION REVISED POLICY		
The group agreed to approve the revised policy.	Decision: Approved	JP
14.0 ANY OTHER BUSINESS		
No items were raised for discussion.	Decision: Noted	Chair
15.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS		
None None	Decision: Noted	Chair
CLINICAL EXCELLENCE		
4.C.O. MEDICINES MANAGEMENT/PRESCRIPING/DUADMAGENTICAL REL	DATEC LIDDATE	
16.0 MEDICINES MANAGEMENT/PRESCRIBING/PHARMACEUTICAL REI GMcN provided a verbal update. Specific areas were	Decision: Noted	GMc
highlighted/discussed as follows:		
 The financial position is still forecasting an overspend. The team has recorded a £240,000 saving in the year, which hasn't managed to get rid of the overspend. However, colleagues were confirmed to be working to clarify whether the 6 practices with the biggest overspends are showing a true position. The team will be looking at demographics and population. The community nursing £800,000 overspend was noted. 		
There was a discussion around the budget not being set		

appropriately from the beginning.		
 Quoracy to the APC meetings was discussed to have not been met. RJF confirmed that a clinical lead has been appointed pending formal references and security. 		
17.0 MORTALITY UPDATE		
It was confirmed that the mortality figures will be incorporated into the primary care dashboard going forward. The SHMI situation currently remains as expected. No 30 day SHMI figures were available for this month's meeting.	Decision: Noted	RJF
18.0 PRIMARY CARE DASHBOARD		
The group acknowledged that the primary care dashboard is being developed. It was stated that the dashboard will also be received at the Joint Commissioning Committee.	Decision: Noted	RJF
19.0 ANY OTHER BUSINESS		l.
No items were raised for discussion.	Decision: Noted	Chair
20.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
None	Decision: Noted	Chair
PATIENT SAFETY		
21.0 SAFEGUARDING UPDATE		
 The safeguarding adult review group will be looking at carrying out an adult review in February. Formal performance data has been received from NLaG with some more to come. RDaSH have not provided any new data- there are some gaps, and conversations are happening through the contracting team. The GP safeguarding leads forum was launched in November and will be held quarterly. 18 out of 19 GP practices have completed the self-declaration with regards to safeguarding arrangements. A paper will be brought to January's meeting around gap analysis with regards to how the CCG have assessed themselves against joint targeted into child exploitation. Liz Baxter and Sally Bainbridge are working on. The safeguarding policy was noted. SG confirmed that the policy will remain the overarching policy, with two quick read policies being written from it- one for staff with 	Decision: Add to January meeting. Action: Following	
concerns for a child and one for commissioning and contracting staff. It was confirmed to be a CCG policy not for practices. The practice policy template is being updated. IR requested that 'non exec directors' as part of 7.7 be changed to 'lay members'. IR suggested 6.5 and 6.6 highlighting that dependent on the size of the organisation, a discussion can be had with the CCG to discuss what is applicable. 22.0 INFECTION PREVENTION AND CONTROL UPDATE	amendments to be placed on intranet Decision: Policy approved.	

CW presented the paper on LT's behalf. The group requested that LT change the colour coding. It was confirmed that performance is doing well, CDIF and MRSA well in trajectory. There is one practice still to be audited. CW confirmed that she met with the new vaccinations manager from NHS England and North Lincolnshire has recruited a new co-ordinator that will be starting in the New Year to work out where North Lincolnshire sit nationally and how improvements can be made.	Action: LT to change colour coding.	Chair
23.0 NORTH LINCOLNSHIRE CCG SERIOUS INCIDENT REPORT: NOVEM	BER	
The report was noted. CW suggested some wording be considered as in the public domain.	Decision: Report noted	Chair
24.0 NORTH LINCOLNSHIRE CCG INCIDENT AND SERIOUS INCIDENT M	EETING MINUTES	
The minutes of the meeting on the 26 th October 2016 and the 30 th November 2016 were taken as read and noted.	Decision: Minutes received	Chair
25.0 NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TR MEETING MINUTES	UST COLLABORATIVE SERIOUS IN	CIDENT
The minutes of the meeting on the 26 th October 2016 and the 30 th November 2016 were taken as read and noted.	Decision: Minutes received	Chair
26.0 NHS111 UPDATE: MONTH 7		
Item deferred to January meeting.	Decision: Deferred	RB
27.0 ANY OTHER BUSINESS		
No items were raised for discussion.	Decision: Noted	Chair
28.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
None	Decision: Noted	Chair
CQC REPORTS		
29.0 CQC INSPECTION UPDATES		
Care homes Paper taken as read and noted. CW highlighted that a new health and social care standards board has now been set up of which Janice Keilthy is the Chair. It was explained that the board has been set up to encourage an integrated quality approach between health and the local authority to work alongside and support care homes and domiciliary providers. It was reiterated that CQC have highlighted a higher proportion of good or outstanding care homes in the area. Hilltop and Haverholme have had significant improvements noted.	Decision: Noted	Chair
GP practices Paper noted.	Decision: Noted	Chair
INFORMATION GOVERNANCE		
30.0 INFORMATION GOVERNANCE/ TOOLKIT UPDATE		
The group were updated that eMBED have not been fully staffed, resulting in the CCG have not receiving the support they have had previously. A local manager has been appointed as a temporary interim that will support the CCG (Kath Allen). JP will be meeting with	Decision: Update Noted	JP

her on 29/12/16, and should have a more detailed picture of the		
position for the information toolkit submission. This risk needs to be featured on the risk register. It was also discussed whether the CCG		
may be weak in information asset owners. IH should now be		
identified as the SIRO.		
31.0 NOTIFICATION OF ISSUES FROM INFORMATION GOVERNANCE (GROUP	
N/A	Decision: Noted	Chair
32.0 ANY OTHER BUSINESS		
No items were raised for discussion	Decision: Noted	Chair
33.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		l
New risks identified for information toolkit by year end.	Decision: Noted	Chair
CONTRACT QUALITY ISSUES		
34.0 CQUIN UPDATE		
The paper was taken as read. The challenges set out in the paper	Decision: Noted	CN
were briefly discussed and the core objectives of national schemes.		
35.0 LOCAL KPI UPDATE		
The paper was noted by the group.	Decision : Noted	CN
36.0 ANY OTHER BUSINESS		
None	Decision: Noted	Chair
37.0 IDENTIFICATION OF ANY NEW RISKS FROM BUSINESS DISCUSSED		
The awaited outcome of the NLaG CQC inspection was highlighted as	Decision: Noted	Chair
a new risk.		
MEETING NOTES FROM OTHER GROUPS		
38.0 ISSUES REFERRED FROM OTHER SUB GROUPS OF THE GOVERNI	NG BODY	
None	Decision: Noted	Chair
FOR INFORMATION		
39.0 NLAG CANCER BREACH POLICY		
The policy was taken as read and noted. It was confirmed that a	Decision: Noted and received	Chair
wider working group had been responsible for the development of	for information.	
the policy. David Thomson had been the representative from the CCG		
and it was confirmed that the policy has been signed off by each acute provider.		
acute provider.		
ANY OTHER BUSINESS		
40.0 URGENT ITEMS BY PRIOR NOTICE		
No items were raised for discussion.	Decision: Noted	Chair
41.0 DATE AND TIME OF NEXT MEETING		
Wednesday 25 th January 2017 at 14:00 Meeting room 2 , Health	Decision: Noted	Chair
Place, Brigg]