

**MINUTES OF A MEETING OF THE
QUALITY IMPROVEMENT COMMITTEE
Tuesday 4 October 2016 at 1.30 pm
Main Lecture Theatre, Moor Lane Mills, Lancaster**

PRESENT:

Mrs S McGraw	Lay Member (Chair)
Dr M Flanagan	Secondary Care Doctor for the Governing Body
Dr D Knapper	GP Lead - Quality
Dr A Maddox	GP Executive Lead - Contracting, Finance and Quality
Mr K Parkinson	Chief Finance Officer/Director of Governance
Mr A Roche	Healthwatch Lancashire
Mrs J Thompson	Senior Manager - Planning and Partnership
Mrs M Williams	Chief Nurse

In attendance:

Ms J Jones	Head of Safeguarding Designated Nurse
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Action

80/16 WELCOME AND INTRODUCTIONS

Sue McGraw (SMcG) welcomed members to the Quality Improvement Committee (QIC). SMcG welcomed and introduced Jane Jones, Head of Safeguarding Designated Nurse to the meeting.

81/16 APOLOGIES FOR ABSENCE

No apologies for absence were received.

82/16 DECLARATIONS OF INTEREST

Declarations of interest were requested that would be relevant to the items to be discussed on the agenda. No declarations of interest were made. Recorded declarations of interest can be viewed on Lancashire North CCG's (LNCCG) website.

83/16 MINUTES OF THE LAST MEETING HELD ON 2 AUGUST 2016

The minutes of the last meeting held on 2 August 2016 were agreed as a correct record.

84/16 **MATTERS ARISING INCLUDING REVIEW OF ACTION SHEET**

Matters Arising

Item 65/16 - Procedure for the Performance Management of Serious Incidents. The policy and procedures will be presented at the next Governing Body on 18 October 2016.

Item 68/16 - Quality Improvement and Assurance Report. Never Events. Clinical discussions have taken place and it was agreed that these will be stepped down from Never Events and managed as Serious Incidents. Since the report there has been one new Never Event incident reported.

Item 68/16 - Quality Improvement and Assurance Report. 12 Hour Breach. It has now been taken up as a system response to this 12 hour breaches alongside other performance issues and there is a task force being brought together to look at this as a system issue.

Action Sheet

The action sheet was reviewed and updated as follows:-

Item 64/16 - Assurance Framework and Risk Register. Complete.

Item 66/16 - CQC Report. Not Seen Not Heard: A Review of the Arrangements for Child Safeguarding and Health Care for Looked After Children in England. Remove the wording Not Seen Not Heard. Complete.

Item 68/16 - Quality Improvement and Assurance Report. On-going.

85/16 **ASSURANCE FRAMEWORK AND RISK REGISTER**

Margaret Williams (MW) introduced the paper and provided an update. In terms of the Assurance Framework (AF) the review from the last review period there has been one new addition. There are a significant high number of risks recorded and the report does outline some of the progress taken to try and reduce these risks. MW took QIC members through the risks.

MW highlighted key items from the Risk Register (RR). The two reds are RR69 Adolescents with Mental Health problems which are being managed on the Acute Paediatric wards. There has been a huge amount of work and progression on this. A response from the CQC in terms of the Acute Trust regulatory legalities is still awaited.

MW stated that there has been one new risk added which is around maintaining quality standards throughout the period of boundary change.

The other red risk relates to the QIPP programme. The QIPP

programme is monitored and reviewed on a weekly basis with Senior Managers to ensure progress and success of risks.

RESOLVED:

The Quality Assurance Committee noted and agreed the following:-

- **Noted the updates since last report.**
- **Agreed changes to risk as described, noted action to mitigate and offer comment on the report.**
- **Agreed new AF risk entry**

86/16 RISK MANAGEMENT STRATEGY AND POLICY

MW presented the updated Risk Management Strategy and Policy prior to it being ratified by the Governing Body. This report is updated on a yearly basis.

Kevin Parkinson (KP) informed the Quality Improvement Committee that the Audit Committee oversees the detailed internal controls around the efficiency and effectiveness of the organisations compliance with statutory regulations. KP reported that the Audit Committee are satisfied with the CCG's approach to the RR and AF process.

RESOLVED:

The Quality Assurance Committee adopted the revised policy ahead of presentation to Governing Body.

87/16 PROGRESS UPDATE - MERSEY INTERNAL AUDIT AGENCY (MIAA) SERIOUS INCIDENTS AND SAFEGUARDING REPORT

MW presented the report on the Internal Audit visit to review Serious Incidents and Safeguarding in terms of processes and governance arrangements. The report received gave the CCG limited assurance. There were eight recommendations and four have now been completed. The four remaining actions are summarised on the front of the report. The GP lead for Safeguarding is to be identified. That will be picked up again through the boundary change conversations and the safeguarding. Serious Incident policy to include Never Events and ratification at Governing Body. This recommendation cannot be closed off until it has been received by the Governing Body. Update Safeguarding Policy is on-going as some national information is awaited from adults inter-collegiate. In terms of capacity appointments to the structures have been made. There is a link that has been picked up for the designate doctor as a Lancashire wide issue. This was picked up through a CQC inspection of Lancashire wide Children Looked After and Safeguarding service. NHS England's Safeguarding Lead is fully aware of this and has been asked to support the LNCCG with this as it goes beyond Lancashire boundaries and into Cumbria.

KP said that because of the implications of some of these recommendations MW has been asked to attend the Audit Committee to discuss the response being made.

RESOLVED:

The Quality Improvement Committee noted progress to date.

88/16 **QUALITY IMPROVEMENT AND ASSURANCE REPORT**

MW presented the paper and highlighted the following key points:-

Clostridium Difficile (CDI) - this time last year the CCG were in a very different place as the CCG were over trajectory. With the additional engagement linking with Primary Care and specifically those introduced with the post incident review group there is an understanding now of the issues and the learning. CDiff is just one issue the CCG have to deliver around anti-microbial.

Safeguarding - the new Safeguarding Team are now in post and currently looking at the impacts of Boundary Change. The main concern for safeguarding is the Lancashire-wide CQC inspection. This will be picked up later in the meeting.

Care Home Sector - MW stated that there is an STP regulated care sector group who have a work programme looking at marketing, capacity and financial aspects and MW is working on the quality areas. The quality aspect is starting to look at how assurance is obtained. When formulated MW will update the Quality Improvement Committee. Locally there are a couple of care homes that are being closely monitored and supported. A significant issue this month, though LNCCG do not directly contract with them, is an 8 bedded learning disability service in Morecambe that has received its closure notice from CQC. There are three individuals left in that provider and LCC are working with the system to re-place those individuals. There is signification police investigations under-going.

University Hospitals of Morecambe Bay NHS Foundation Trust (UHMBT) - UHMBT recently underwent a peer review in relation to Cancer of Unknown Primary. An action plan was received in March/April 2016 but didn't contain enough information to provide assurance. More information was requested from the Assuring Quality Group. MW and DK are to meet with the Medical Director to obtain the assurances required. The outcomes will be reported to a future Quality Improvement Committee meeting and to NHS England.

Jacqui Thompson (JT) raised an issue on the last bullet point on page 21, Activity monitoring and asked what is meant by a lot more. Dr A Maddox (AM) said that there is a percentage related to this and would clarify the figures at a future meeting.

RESOLVED:

The Quality Improvement Committee agreed the following:-

- **Agreed the way in which the information is presented and evaluated the detail covered in the report supports LNCCG to:-**
 - ❖ **Deliver its statutory duty.**
 - ❖ **Demonstrating outcomes which show the effectiveness of the services commissioned, the safety of the services provided, and the quality of the experience of the patient.**
- **Agreed to send onto Governing Body.**

89/16 **JOINT CCG'S CQC STAKEHOLDER FEEDBACK ON UHMBT**

MW stated that UHMBT are due to be visited again by the CQC. A similar exercise was held approximately 2½ years ago when the Trust were visited by the CQC for the first time. What worked well last time was that Cumbria CCG (CCCG) and LNCCG came together to submit one Stakeholder report. Obviously there has been quite a lot happening in UHMBT having moved from “special measures”, to “requiring improvement”. MW has a call later today with Sandra Sutton, CQC and Helen King, Director of Nursing, CCCG to finalise the CCG’s return. Overall the report does state that there has been a continual journey of improvement for UHMBT. There are still areas of concern with some not improving at the required speed. Those areas are workforce pressures, performance pressures, discharge pathways issue and discharge communication issues. Variations in how UHMBT reviews incidents and applies the learning are being seen occasionally with some repeats in incidents. Clinical record keeping is still a concern. Safeguarding is an area of concern due to leadership and the recruitment of the team and supervision.

The inspection is scheduled for the 11, 12 and 13 October 2016.

RESOLVED:

The Quality Improvement Committee noted the submission of the report to the CQC.

90/16 **KEY ISSUES REPORTED INTO OTHER CCG MEETINGS**

MW previously summarised the AMR strategy and the workforce strategy.

91/16 **EQUALITY AND ENGAGEMENT UPDATE**

JT reminded the Quality Improvement Committee that the Quality Assurance Report last time gave an update of the complaints received by the CCG. Since the end of August 2016 the CCG have received a further complaint, six concerns, two compliments and one PALS. We have currently got four complaints that are open and under investigation. The majority of concerns are around Medicines

Management relating to the recent changes to policy ie not using generic brands or where some products have been blacklisted. This is a lesson for the organisation to learn and that communications around that process could have been better. Following Medicines Management complaints is Continuing Healthcare which relates to the process and communication of the CHC team and the length of time it takes. The compliments received have related to how the CCG have dealt with some of the complaints.

JT reported on a number of engagement activities that have taken place over the last few months. Some of these will link into the Equality and Inclusion assessment that needs to be undertaken each year. A different approach is being taken this year. The Listening Group, who have been trained around Equality and Inclusion will undertake this role.

From a National perspective there has been some recent guidance relating to the CCG's legal duty around including patients to strengthen the need for engagement in decision making. Any information that is published needs to conform to the Accessible Information Standard. A slavery statement needs to be put on the CCG's website. An update will be taken to the Governing Body for approval.

92/16 **SAFEGUARDING**

The following documents were received for information:-

- Wood Report - a report that is going to review the role and functions of the local Safeguarding Children's Board.
- Transfer of Safeguarding Arrangements - from Fylde and Wyre NHS into North Lancashire. The Adult Lead starting 31 October 2016 and the Administrator is starting 17 October 2016. Alice Marquis-Carr has now retired.
- CQC Lancashire Safeguarding Review Action Plan - MW presented the Lancashire-wide Action Plan. MW recently presented specific actions to the Executive Team. A Lancashire response has been completed by Designate Nurses and signed off by the Chief Nurses and NHS England before being submitted to the CQC. Local actions will be monitored by the Safeguarding Assurance Group.

93/16 **LANCASHIRE SAFEGUARDING CHILDREN BOARD MINUTES 8 JULY 2016**

Received for information.

94/16 **UHMBT ASSURING QUALITY MINUTES 18 JULY 2016**

Received for information.

95/16 **MATTERS TO BE DRAWN TO NEXT GOVERNING BODY MEETING**

There were no items to be drawn to the next Governing Body meeting.

96/16 **ANY OTHER BUSINESS**

MW raised the question around Personal Health Budgets and how the system is managing them and what action LNCCG is actioning. Across Lancashire there are 53 live payment cases, 19 individuals pending and 24 on the waiting list. For LNCCG there are 8 live payment cases, 1 pending and 2 on the waiting list giving a total of 11. Future exception reports relating to CHC will be brought to the Quality Improvement Committee meetings.

There was no other business.

97/16 **DATE AND TIME OF NEXT MEETING**

Tuesday 6 December 2016 at 1.30 pm in the Main Lecture Theatre, Moor Lane Mills, Lancaster.