

**MINUTES OF A MEETING OF THE
QUALITY IMPROVEMENT COMMITTEE
Tuesday 4 April 2017 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 A Maddox	GP Executive Lead - Contracting, Finance and Quality
Mr K Parkinson	Chief Finance Officer/Director of Governance
Mrs J Thompson	Senior Manager - Health and Wellbeing

In attendance:

Mrs B Carter	Corporate Affairs Support Manager (Minutes)
Mrs J Jones	Head of Safeguarding, Designated Nurse for Safeguarding Children for agenda item 10.0. (item 35/17)
Mr P Magee	Interim Quality Manager for agenda item 9.0. (item 36/17) and agenda item 12.0. (item 37/17)
Mr A Rocke	Healthwatch Lancashire
Mr R Thompson	Senior Quality Manager for agenda item 5.0. (item 32/17), agenda item 7.0. (item 34/17) and agenda item 8.0. (item 38/17)

Action

27/17 WELCOME AND INTRODUCTIONS

Sue McGraw (SMcG) welcomed members to the first Quality Improvement Committee (QIC) meeting of Morecambe Bay CCG (MBCCG).

28/17 APOLOGIES FOR ABSENCE

Apologies for absence were received from Margaret Williams, Chief Nurse.

29/17 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 Morecambe Bay CCG's (MBCCG) website.

30/17 MINUTES OF THE LAST MEETING HELD ON 7 FEBRUARY 2017

The minutes of the last meeting held on 7 February 2017 were agreed as a correct record.

31/17 **MATTERS ARISING INCLUDING REVIEW OF ACTION SHEET**

Action Sheet

The action sheet was reviewed and updated as follows:-

Item 105/16 - Mersey Internal Audit Agency (MIAA) Assurance Accountability Report - Lancashire North CCG (LNCCG) Website. Complete.

Item 06/17 - Assurance Framework and Risk Register Update. Complete.

Item 13/17 - Cancers of Unknown Primary. The first meeting of the Morecambe Bay Cancer Group is scheduled to be held in June 2017. Complete.

Matters Arising

There were no matters arising.

32/17 **ASSURANCE FRAMEWORK AND RISK REGISTER UPDATE**

Russell Thompson (RT) presented the report which updates the Quality Improvement Committee of changes to the Assurance Framework (AF) and Risk Register (RR) since the last report and provides assurance around Risk Management.

RT stated that the AF and RR had not altered since its last submission. An error was highlighted on page 2, 1.2.2. Risk AF58 relating to the CCG assurance systems confirm that University Hospitals of Morecambe Bay NHS Foundation Trust are able to sustain improvement as directed had reduced to '12' and not '15' as stated in the document.

RESOLVED:

The Quality Improvement Committee agreed changes to the risks described and noted actions to mitigate and also commented on the report.

33/17 **QUARTERLY FREEDOM OF INFORMATION REPORT**

Jacqui Thompson (JT) informed the QIC that the CCG receive weekly update reports and stated that the Freedom of Information (FOI) process had improved. The majority of FOI requests are received from commercial organisations and students. Legal advice has been sought from the CCG's legal team regarding one persistent requester.

A steady stream of complaints are being received relating to the following three areas:-

- CHC - attitude of staff doing assessments and the process of

assessments.

- Medicines Management - changes to branded medicines and blacklisted products.
- 111 and Out of Hours - relating to access and processes.

RESOLVED:

The Quality Improvement Committee acknowledged the updated.

34/17 **QUALITY AND SAFEGUARDING TRANSITION REPORT**

RT presented the Quality Transition Report and stated that due to timeliness of the change to MBCCG this report had been submitted by Margaret Williams (MW) to the Governing Body on 21 March 2017. The QIC discussed the report and praised its comprehensiveness. Questions were asked with regard to how the QIC will receive assurance that those elements identified as risks and areas of improvements will be addressed. RT stated that the report was a snapshot of Quality and Improvement aspects, but as it was so comprehensive it would be an ideal start for the development of a Morecambe Bay Quality Strategy. RT was requested to write a Morecambe Bay Quality Strategy for the next meeting scheduled to be held on 6 June 2017.

RT

Kevin Parkinson (KP) stated that it was important that the QIC ensures that this item becomes a standing agenda item with an action for this group to oversee.

RESOLVED:

The Quality Improvement Committee noted the following:-

- **Noted the content the report provided.**
- **Noted the assurance and actions to mitigate risk were identified.**
- **Noted the planned next steps.**

35/17 **SECTION 11 AUDIT**

Jane Jones (JJ) presented the Section 11 Audit/Safeguarding Standards report and explained that it is an annual audit tool to monitor safeguarding arrangements across all agencies. This is the final submission for LNCCG and covers the period 2016/17.

JJ highlighted the following:-

- No areas of non-compliance.
- Two amber areas relating to the review of Safeguarding policies and recruitment to the role of Designated Doctors. Both areas

are progressing.

- It was noted that there are lots of good practice to showcase in relation to engagement and support to Primary Care and the Care Home Sector, close working with the Care Home Support Team, Engagement with various Boards and Partnership workstreams, together with training events being held, leadership across the system for safeguarding arrangements and processes for cascading and embedding lessons learnt.

Discussions took place regarding the Safeguarding Standards for small and large providers monitored by the CCG. A compliance report will be included in the Safeguarding Dashboard and will also report on Cumbria CCG (CCCG) Section 11 Report from 2016/17 and any subsequent action plan as a result of non-compliance to be taken forward by MBCCG.

Dr Andy Maddox (AM) praised the Safeguarding Team who in a very short time has forged links with Primary Care.

RESOLVED:

The Quality Improvement Committee noted and approved the following:-

- **Noted the content of the audit and associated RAG rating of evidence provided.**
- **Approved the completed audit tool for submission to the Lancashire Safeguarding Children Board.**

Paul Magee joined the meeting at this point.

36/17 MANAGING LONG WAITING CANCER PATIENTS (104 DAYS)

Paul Magee (PM) presented the paper and informed the QIC that in October 2015 NHS England, Monitor (NHS Improvement) and the Trust Development Authority published a policy Managing Long Waiting Cancer Patients policy on backstop measures. NHS England is asking assurance from CCG's that they are actively monitoring providers and that patients are not coming to harm. MBCCG have requested assurance from UHMBT in November 2016 and again in March 2017. UHMBT have responded through the Quality Assurance meeting that they have a process to identify breaches beyond 104 days and that they use their current internal Serious Incidents process. No breaches have been reported between 12 February 2017 and 12 March 2017.

PM asked the QIC to note on-going work required regarding Morecambe Bay residents who may have breached 104 days with other providers. 104 day breaches are not common and are often complex or complicated cases.

RESOLVED:

The Quality Improvement Committee noted the report.

37/17 **NATIONAL COMMISSIONING FOR QUALITY AND INNOVATION (CQUIN) Q3 2016/17 UPDATE AND PREPARATION FOR 2017 - 2019**

PM presented the report which provides a quarter 3 update for the UHMBT national CQuIn schemes and outlines the MBCCG progress and activity for 2017/18 and 2018/19.

PM said that in quarter 3 2016/17 UHMBT are on target to achieve the measures and indicators for the national schemes and evidence submitted for Q3 supports that position. An exception is Anti-Microbial Resistance (AMR) which the CCG has been in consultation with NHS England and NHS Improvement. This has been influenced by the good work UHMBT have completed in relation to Sepsis. Early indication is that the indicators are to be implemented as published.

Dr Andy Maddox (AM) raised the question of who should respond to a letter written to Hilary Fordham (HF) from Aaron Cummins regarding AMR. KP stated that HF would need to reply with the outcome once final information was received from NHS England and NHS Improvement.

For CQuIn 2017/18 - 2018/19 PM outlined the national schemes for the next two years and confirmed that UHMBT have a robust internal monitoring and reporting system for CQuIn. The QIC will receive quarterly updates.

PM stated that the paper focused on UHMBT and gave a verbal update on Blackpool Teaching Hospitals Community Services which remain under discussion but linked to Blackpool CCG and Cumbria Partnership Foundation Trust Community Services which also remain under discussion with Cumbria CCG. JT queried the Alcohol and Tobacco CQuIn schemes which are reported as commencing in 2018/19 but JT understood these schemes commenced in 2017/18. PM agreed to investigate and report back to the next QIC meeting.

PM

RESOLVED:

The Quality Improvement Committee noted the report.

PM left the meeting at this point.

38/17 **QUALITY IMPROVEMENT AND ASSURANCE REPORT**

RT presented the Quality report for January 2017 and February 2017. RT stated that confirmation has now been received that CDI rates in South Cumbria are within target. 12 Hour Breaches in UHMBT A&E were continuing to be reviewed but none had resulted in patient harm to date. CQC have released guidance for Acute Trusts to admit mental health patients who attend A&E following a risk assessment if it is in

the best interest of patient care.

RT stated that currently there are 4/5 care homes having difficulties across the Bay footprint with a total of around 500 beds. There is only one care home which is in imminent threat of closure by the CQC. Work is continuing to support all homes. RT highlighted and discussed the Task and Finish Groups that Margaret Williams had set up and supported in order to support the regulated Care Sector.

A question was raised from the quality report on why the Hillcroft provider had reported seven serious incidents over the time period. It was reported that this was due to the home having a positive reporting culture, this should not be seen as underperformance. The QIC asked for such aspects to be stated in future Quality Reports to ensure that context is provided to figures.

RT informed the QIC that UHMBT had been removed from special measures following a successful CQC inspection in November 2016 where they achieved a 'good' rating with an outstanding rating for care.

RESOLVED:

The Quality Improvement Committee agreed the following:-

- **Agreed the detail covered in the report supports MBCCG 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.**

38/17 KEY ISSUES REPORTED INTO OTHER CCG MEETINGS

SMcG stated that she was not aware of any key issues that have been reported into other CCG meetings.

39/17 EQUALITY AND ENGAGEMENT UPDATE

JT highlighted the following areas:-

Boundary Change - continuing to answer queries relating to the boundary change.

Equality and Inclusion Assurance - received by the Governing Body at the meeting held on 21 March 2017. Making good progress on meeting all duties.

Self-Care and Engagement - a piece of work is being undertaken with partner organisations on how to work with communities. This piece of work links into Dr Andy Knox's rocket diagram.

Bridget Kingcox, Advanced Nurse Practitioner/Partner Rosebank Medical Practice joined the meeting at this point.

40/17 **GENERAL PRACTICE DIABETIC AUDIT**

Bridget Kingcox (BK) gave a presentation on an audit to identify the risk of hypoglycaemia in type 2 diabetics.

BK explained that the aim of the audit was to identify patients with type 2 diabetes at Rosebank Medical Practice who are at risk of hypoglycaemia. A total of 100 patients were included in the audit in June 2016. The results showed that 23 (23%) patients were identified at potential risk of hypoglycaemia. Two patients were at immediate risk and urgent action was taken.

BK stated that the audit had been an extremely worthwhile exercise. The audit highlighted two patients who were at high risk of hypoglycaemia and also made all clinicians at Rosebank Medical Practice more aware of the potential danger of too tight blood sugar control.

The audit is planned to be repeated in six months' time.

SMcG thanked BK for the presentation

BK left the meeting at this point.

Neil Townsend and Nicola Kerfoot joined the meeting at this point.

41/17 **CANCER CARE**

Neil Townsend (NT) gave a presentation on CancerCare and explained who they are, what they provide and the areas in which they provide care.

NT explained that CancerCare is a unique independent charity dedicated to helping families affected by cancer and other life limiting conditions living in North Lancashire, South Lakeland and the Barrow and Furness area.

CancerCare offer free professional help, therapy, counselling and a range of services.

Nicola Kerfoot (NK) presented her story to the Quality Improvement Committee. NK said that as well as receiving support from family and friends she also received support from CancerCare which included counselling for NK and her family.

SMcG thanked NT and NK for their presentation.

NT and NK left the meeting at this point.

42/17 **SAFEGUARDING DASHBOARD**

Received for information.

43/17 **ANTI-MICROBIAL RESISTANCE BAY WIDE COLLABORATIVE MINUTES 20 DECEMBER 2016 AND 31 JANUARY 2017**

Received for information.

44/17 **LANCASHIRE NORTH CCG BTH COMMUNITY SERVICES CONTRACT SERVICE PERFORMANCE, DEVELOPMENT AND QUALITY MINUTES 5 JANUARY 2017**

Received for information.

45/17 **LANCASHIRE SAFEGUARDING ADULTS BOARD MINUTES 4 NOVEMBER 2016**

Received for information.

46/17 **UHMBT ASSURING QUALITY MEETING MINUTES 16 JANUARY 2017 AND 20 FEBRUARY 2017**

Received for information.

47/17 **MATTERS TO BE DRAWN TO NEXT GOVERNING BODY MEETING**

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

48/17 **ANY OTHER BUSINESS**

There was no other business.

49/17 **DATE AND TIME OF NEXT MEETING**

Tuesday 6 June 2017 at 1.30 pm in the Boardroom, Moor Lane Mills, Lancaster.