

**NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP**  
**MINUTES OF OUTCOMES AND**  
**QUALITY ASSURANCE COMMITTEE**  
Friday 20 October 2017 at 12.30pm  
Conference Room, NHS Offices, Rosehill

- Chair:** Ruth Gildert, Governing Body Clinical Member - Registered Nurse (RG)
- Present:** Louise Mason Lodge, Deputy Director of Nursing, Quality and Safeguarding, NCCCCG(LML)  
Richeldis Messam, Clinical Quality Senior Officer, NECS (RM)  
Simon Parker, Deputy Designated Nurse for Safeguarding, NCCCCG (SP)  
Dr David Rogers, Medical Director, NCCCCG (DR)  
Dr Kevin Windiebank, Secondary Care Doctor (KW)  
Denise Leslie, Governing Body Lay Member (DL)
- Agenda Item 10:** Brenda Thomas, Governing Body Support Officer, NCCCCG (BT)
- In Attendance:** Debbie Archer, Nursing and Quality Senior Administrator, NCCCCG (DA)

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**1. Welcome and Apologies**

*Action*

Apologies had been received from:

- Les Hanley, Governing Body Lay Member- Health Improvement (LH)  
Andrea Loudon, Primary Care Development and Medicines Lead, NCCCCG (AL)  
Paula Smith, Lead Nurse, Infection Prevention and Control, NCCCCG (PS)

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**2. Declarations of Interest**

There were no declarations of interest.

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**3. Minutes and actions of the previous meeting**

The minutes of the previous meeting held on 18 August 2017 were approved as an accurate record.

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**4. Action Log of the previous meeting**

The actions of the previous meeting were approved and updated.

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**5. Quality Report**

RG would like assurance on issues within the quality report and members agreed following discussion the following comments:

- Need clarity and information on improvements and trends.
- Harm Free care. More info is required on those who have received harm and an interpretation of the data.
- Need reviews of pressure ulcers, lessons learned and assurance. RM reported maternity is more complicated due to the small numbers which would possibly reveal patient identity.
- Safeguarding training. Show narrative regards numbers of who have and haven't been trained. NCCCG requires assurance that mandatory training is being done.

**ACTION: To agenda at QRG for an update**

LML

- Patient Surveys. RM to enquire on numbers. Patient surveys are 65.9% when only 6 people did a survey between March/April.

**ACTION: RM to bring a report of queries to the next development session.**

RM

- Overdue SIs. Need to know who long they are overdue. RM reported there are currently 2 overdue.

- Self harm. This will be taken to the CPFT QRG pre meet.

**ACTION: To agenda at QRG for an update**

LML

- Lessons learned. Need clarity on completion with provided evidence.

- Harm free care. This has been discussed in CPFT QRG pre meet. Clare Parker is taking forward.

**ACTION: RM to make necessary amendments to the quality report and return to OQuAC colleagues.**

RM

In relation to Care Homes LML reported the Bupa Beacon Edge home had now been sold to the Cinnabar Group and is now called Eden Grange. The transfer date is 6 October. The QUIP process is still in place and Kay Douglas is providing nursing input into that process. Embargo is still in place.

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**6. Non Medical Prescribing Policy**

The policy is to be recommended to Governing Body. DL pointed out that on Page 8 CBS checks needs to change to DBS checks.

**ACTION: DA to inform AL and Brenda Thomas.**

DA

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**7. Court of Protection**

The policy was approved in principal. Forward to Brenda Thomas for Governing Body.

**ACTION: Bring back to this meeting to monitor.**

DA

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**8. Scope for the Development Sessions**

This item was discussed in agenda item 10.

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| 9.   | <b>Area Prescribing Committee Medicines recommendations</b>   | DA  |
|  | AL to provide assurance and explanation at the next meeting.  |     |
|  | <b>ACTION: DA to add to next agenda.</b>  |     |
| 10.  | <b>Purpose of OQuAC</b>   |     |
|  | RG initiated discussion concerning her views on what quality assurance to the OQuAC look like and therefore should provide to the Governing Body. The following concerns were raised:   |     |
|  | <ul style="list-style-type: none"> <li>• Information is received too late.</li> <li>• Work programmes are not in place. This will help with planning.</li> <li>• Attendance at this meeting.</li> <li>• The quality report needs to be reviewed.</li> <li>• Contractual obligations need to be discussed. I.e. Cancer waits.</li> </ul> |     |
|  | The group agreed that the next Development Session should concentrate on the purpose of the OQuAC. This will occur on 1 November with the invite extended to all lay members, the Medical Director, commissioners, Brenda Thomas and NECS. The OQuAC agreed to focus on the following:  |     |
|  | <ul style="list-style-type: none"> <li>• Policy and assurance/delivery</li> <li>• Quality report</li> <li>• Draft Workplan</li> </ul>   |     |
|  | <b>ACTION: To feedback from the development session.</b>  | ALL |
| 11.  | <b>Regulation 28 – Action Plan Update</b>   |     |
|  | <b>ACTION: LML to circulate.</b>  | LML |
| 12.  | <b>Minutes from QRG's</b>   |     |
|  | Items for information. KW queried the situation at Alston. LML clarified the beds remain closed due to recruitment issues. The interim solution has seen as good practice as evidence has shown the community nurses are integrating well. LML will be making arrangements to visit Alston.   |     |
| 13.  | <b>AOB</b>  |     |
|  | DA raised annual leave.   |     |
| <b>Date, Time &amp; Venue of Next Meeting</b>                                    |   |     |
| <b>Dev Session:</b> Friday 19 January 2018 at 10.30am, Conference Room, Rosehill |   |     |
| <b>Main Mtg:</b> Friday 16 February 2018 at 10.30am, Conference Room, Rosehill   |   |     |