

NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP
MINUTES OF OUTCOMES AND
QUALITY ASSURANCE COMMITTEE
Friday 7th December 2018 at 1pm
Conference Room, NHS Offices, Rosehill

Chair: Carole Green, Lay Member- Quality and Performance (CG)

Present: Amanda Boardman, GP Lead, NCCCG (ABrd)
Nicola Duers, Clinical Quality Senior Officer, NECS (ND)
James Fraser, Senior Nurse, NCCCG (JF)
Denise Leslie, Lay Member – Patient and Public Engagement (DL)
Louise Mason Lodge, Deputy Director of Nursing, Quality and Safeguarding, NCCCG (LML)
Anna Stabler, Director of Nursing and Quality, NCCCG (AS)
Dr Kevin Windebank – Secondary Care Doctor (KW)

In Attendance: Debbie Archer, Nursing and Quality Senior Administrator, NCCCG (DA)

1. AGENDA ITEM 1: Welcome and Apologies

Action

Apologies had been received from:
Dr David Rogers, Medical Director, NCCCG (DR)
Paula Smith, Patient Safety Lead, NCCCG (PS)

2. AGENDA ITEM 2: Declarations of Interest

The Chair reminded Committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of NHS North Cumbria Clinical Commission Group. Interests declared by members of the Executive Committee are listed in the CCG's Register of Interest. The register is available either via the Governing Body Support Officer or the CCG website at the following link:

<http://www.northcumbriaccg.nhs.uk/about-us/how-we-make-decisions/declaration-of-interests/index.aspx>

Declarations made at this meeting:

AS declared that currently on secondment to NCCCG from North Cumbria University Hospital Trust (NCUHT) and that all relevant processes put in place by the Accountable Officer were in being adhered to.

3. AGENDA ITEM 3: Minutes of the previous meeting

Resolved: The minutes of the previous meeting held on 2nd November 2018 were approved as an accurate record.

4. AGENDA ITEM 4: Action Log of the previous meeting

Resolved: The actions of the previous meeting held on 2nd November 2018 were approved and updated.

5. AGENDA ITEM 5: Matters Arising

○ Dalton Court:

JF provided an update on the review of Dalton Court, undertaken by CQC on 4 December 2018. Liz Kelly, CQC inspector, had advised that the visit had been positive.

○ CAMHS Working – Joint Provision

ABrd presented the report advising that it was a system wide update. Members were also asked to note that the report had also been presented to the November Integrated Healthcare Partnership Quality Assurance Committee (IHPQAC). Members were also asked to note Northumbria Tyne and Wear were supporting the Trust to review caseloads, processes and systems with a view to reducing waiting times. The CCG also had regular update calls with CPFT to monitor the situation.

In response to a question, ABrd advised that the second wave of NHSE Trailblazer funding in North Cumbria could potentially provide access to digital health care technology through Helios. This company not only provides a full range of NHS services but also provides the benefit of access to doctors and therapists who were trained to offer a range of complementary approaches. This helps to empower patients and families affected by mental and physical illness.

ACTION: Add CAMHS update for the next meeting under matters arising.

DA

○ LeDeR Review Action Plan

Lead Reviewers were encouraged to seek clarification on delays and were offered direct support to structure and finalise the active reviews. However despite this only two reviews were close to being completed. Therefore senior representatives of the LeDeR Steering Group were now tasked to internally explore the reasons for the delays and report back. Further work was being undertaken to train new reviewers to help clear the backlog.

○ Assurance Visits

JF reported that assurance visits had been arranged as follows:

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- Mon 14th January 2019 at 09.30 - A&E at CIC
 - Friday 25th January 2019 at 13:00 at Edenwood
 - Wed 27th February 2019 at 12.30 - Surgical Unit at West
 - Mon 11th March 2019 at 13:00 - Hadrian Unit

----- Committee Members were asked to attend where possible.

- A&E Delivery Board Letter

AS circulated a letter from North West Ambulance Services (NWAS) which had been presented to the A&E delivery board on 17th December. This letter outlined changes to its winter preparedness which included having more ambulance/paramedic vehicles parked at strategic locations which would enable them to reach patients quicker.

6. **AGENDA ITEM 6: Quality Exceptions Report**

AS highlighted the following from the exceptions report:

Never Event

The Trust reported one Never Event in October 2018 concerning a child who received an overdose of Insulin on 17 October 2018. Staff acted promptly and the child has suffered no lasting harm. AS confirmed that a 'lesson learned' exercise had been undertaken and the required changes were being implemented. It was also noted that the number of Serious Incidents had risen due to additional training on reporting incidents.

Falls rising

There was an increase in patient 'All Falls' at NCUHT which had been increasing steadily since July 2018. This was now above the national average and AS would be liaising with the Trust to establish why.

In response to a question from DL, AS advised that feedback in relation to SIRMS had ceased due to the fact that the secondment of the SIRMS nurse for NCUHT had ended. Assurance had been received that this post would be filled permanently in January 2019. ND advised that since the compilation of the report the data had now been received.

AS reported that JF was leading on medication incidents reported within SIRMS. Alison Smith, Executive Nurse at NCUHT had requested a SIRMS extract of themes and trends analysis in order to work with the pharmacy lead to support improvements. It was also noted that the pharmacy lead had appointed a medication safety office who would present future updates around this to the IHPQAC.

The Chair queried the October 2018 percentage of patients who received 'harm free care' which was at 90%, well below the national average of 94.1%. AS reported the safety thermometer for assessing this was a 'point prevalence survey' based on one day in the month which was set nationally. AS reported

the Trusts should be commended as all safety thermometers were now in place apart from the CPFT medication for which a plan was in place.

Resolved: The updates were noted.

7. AGENDA ITEM 7: Quality Items

○ Quality Dashboard Report

AS advised that this report had been developed to be presented at the IHPQAC, Finance & Performance Committee and other meetings across the system and to link the CCG constitutional targets to the quality agenda. Further work was ongoing to incorporate the dashboard and the quality exceptions report.

○ NCCCG Quality Strategy Refresh Report

The 2012-2021 NCCCG Quality Strategy had been review due to the changes with the system. LML provided an overview of the changes and aims of the document. AS advised that further work was required to update the strategy to reflect the new system architecture and this would be presented to the Governing Body once the changes have been made.

DL suggested including some case studies in the full year report in relation to Co-production to identify where this could influence quality. AS proposed that this be reviewed in April 2020 once a full years report was available.

In response to a question from the Chair, LML advised that the year-end aims of this strategy were very much about impact.

The Chair thanked LML for the report.

○ Quality in Commissioned Packages

LML advised that the report outlined the current scope, arrangement in place and the next steps to ensure a systematic process was in place to provide assurance on the safety and quality of packages commissioned either, wholly by the CCG or jointly with Cumbria County Council (CCC). A further update report to be brought to the Committee.

ACTION: LML to provide an update in March 2019

LML

Resolved: The updates were noted.

8. AGENDA ITEM 7: Safeguarding

LML presented the following reports:

1. NHS Safeguarding Strategic Framework for North Cumbria

In light of North Cumbria becoming an Integrated Health Care System (IHCS), designated leads in North Cumbria agreed to review the current

safeguarding arrangements to ensure safeguarding remained a central focus within the new system. Once completed this would feed into the said framework document and would be used to determine the next steps in ensuring the delivery of safe high quality care within the integrated system.

In response to a question from KW, LML advised that the Local Authority, NCCG and the Police had met and were committed to working together and were looking at how the logistics would work within an integrated system and an implementation plan would be developed in due course.

2. CCG Safeguarding Assurance Update

The following actions have been completed in response to the Internal Audit of Safeguarding:

- All Safeguarding Policies have been reviewed and approved by the CCG Outcomes and Quality Assurance Committee in September 2018, in line with the CCG's Scheme of Delegation
- Policy Numbers have been allocated to all Safeguarding Policies as agreed with the CCG's Corporate Business Office

3. Designated Leads Safeguarding Assurance Visits Reports

- a. Assurance Visit Reports – Strengthening Families Team, Ulverston and Strengthening Families Team, Workington.

It was noted that a second assurance visit had been made to CPFT's Strengthening Families Team in Ulverston and Workington. There was evidence of a good level of safeguarding knowledge and practice at both sites, although, there were some areas of improvement agreed. The findings of the visits were shared with partner organisations, contracts department and a full report was forwarded to CPFT. An update on the action plan will also be presented to this Committee in due course.

It was noted that ABrd had distributed a survey to GPs in North Cumbria to establish what contact they had had with the Strengthening Families team. Most practices had sent a positive response back.

- b. Action plans and Assurance July 2018 – CPFT Yewdale and Ruskin Wards

The final reports from the Assurance Visits to Yewdale and Ruskin Wards were issued to CPFT on 25 July 2018 and a response it was confirmed that all actions had completed for Yewdale and Ruskin. It was also confirmed that NCCCG had completed its actions in relation to working with Adult Social Care.

4. Primary Care General Practice Section 11 Audit Report Summary

Cumbria Local Safeguarding Children's Board (LSCB) had issued an annual Section 11 Audit in order to ensure effective arrangements ~~are~~ were in place across the county to safeguard children and young people and to promote their welfare. Any organisation who provides a service to children and young people ~~of~~ or who comes into contact with them must comply with Section 11 of the Children Act 2004. The majority of GP practices were identified as meeting the required standards.

5. Safeguarding and Human Rights Assurance

The Safeguarding Team and members of the Nursing and Quality Team had considered the CCG's business arrangements in relation to Human Rights principles. The Human Rights Assurance will also to be taken to IHPQAC in January 2019.

6. Cumbria Safeguarding Adults Board Annual Report 2017/18

An overview of the purpose of a Safeguarding Adults Board Report.

It was confirmed that the multi-agency priorities and work of Cumbria's Safeguarding Adults Board continue to be supported by representatives from both North Cumbria CCG and Morecambe Bay CCG.

Resolved: The updates were noted.

9. **AGENDA ITEM 8: Complaints Policy**

AS advised this item was for information. The policy had been ratified at the Finance and Performance meeting and was now on the website.

Resolved: The update were noted.

10. **AGENDA ITEM 9: Regulation 28s**

AS reported no updates.

11. **AGENDA ITEM 10: Infection, Prevention and Control**

JF presented the report and highlighted the following:

Approximately 300,000 patients a year in England become infected with a HCAI. It is estimated that 9% of all hospitalised patients acquire a HCAI and that up to 30% of these were preventable. HCAI was a serious patient safety concern and could lead to long hospital stays contributing to delayed transfers of care and pressure on the health system. Reducing E.coli BSI was causing a considerable challenge to NCCCG and the yearly trajectory was unlikely to be met.

DL requested and update on what action was being taken to mitigate the risk of infection to patients.

ACTION: JF to discuss with PS.

JF

Resolved: The update was noted.

12. AGENDA ITEM 11: Maternity – SI Review

The number of Serious Incidents reported at NCUHT had risen in maternity services, which could be due to improved reporting rather than a rise in incidents. Further work had been undertaken by NECS looking at themes and trends over the last three years. AS noted that despite the number of SIs the level of harm was deemed as low. The report had been shared with Alison Smith and would be presented at the IHPQAC in January 2019.

DL suggested the diagrams needed to be changed. The Chair suggested halving the number of graphs as they did not add to the narrative.

ACTION: ND to feedback.

ND

Resolved: The update was noted.

13. AGENDA ITEM 12: CHC Update

AS provided an overview of the Decision Support Tool (DST) targets and assured the committee that there was a plan in place to reduce the DSTs. Currently a process mapping exercise was being undertaken within the CHC team (supported by Cumbria Learning Improvement Collaborative (CLIC)). Although progress had been hampered by sickness, retiring and staff returning to their substantive roles.

Resolved: The update was noted.

14. AGENDA ITEM 13: AOB

The quality exceptions report to be discussed in February.

Date, Time & Venue of Next Meeting

Friday 11th January 2019 at 1.30am in MR3, Rosehill.
