

**Item: 9.1**

**PRIMARY CARE QUALITY & PERFORMANCE SUB COMMITTEE  
MINUTES OF THE MEETING HELD ON THURSDAY 16 NOVEMBER 2017,  
9.30 AM – 11.30 AM, BOARD ROOM, WILBERFORCE COURT,  
ALFRED GELDER STREET, HULL, HU1 1UY**

**PART 1**

**PRESENT:**

Estelle Butters, Head of Performance and Programme Delivery, Hull CCG  
Phil Davis, Head of Primary Care, Hull CCG  
Nikki Dunlop, Commissioning Lead – Primary Care, Hull CCG  
Colin Hurst, Engagement Manager, Hull CCG  
Karen Martin, Deputy Director of Quality & Clinical Governance/Lead Nurse, Hull CCG  
Kevin McCorry, Senior Pharmacist, North of England Commissioning Support  
Kate Memluks, Quality Lead, Hull CCG  
Sarah Smyth, Director of Quality & Clinical Governance/Executive Nurse, Hull CCG  
(Chair)  
Lynda Whincup, Professional Advisor Primary Care Nursing, Hull CCG  
Nicola Wood, Screening & Immunisation Clinical Coordinator, Public Health England

**IN ATTENDANCE:**

Jade Adams, Personal Assistant, Hull CCG - (*Minute Taker*)

**WELCOME AND INTRODUCTIONS**

The Chair welcomed everyone to the meeting and those present introduced themselves.

**1. APOLOGIES FOR ABSENCE**

Apologies for Absence were received from:  
James Crick, Associate Medical Director, Hull CCG  
Liz Lyle, Locality Pharmacist (Hull), North of England Commissioning Support  
Alex Molyneux, Medicines Optimisation Pharmacist, North of England Commissioning Support (NECS)  
Hayley Patterson, Primary Care Contracts Manager, NHS England  
Jason Stamp, Lay Member, Hull CCG

IT WAS NOTED THAT THE MEETING WASN'T QUORATE

**2. MINUTES OF THE MEETING HELD ON 15 SEPTEMBER 2017**

Minor errors were recorded as incorrect on item 6, minor changes to be updated and the meeting held on 15 September 17 Minutes were approved as a true and accurate record.

**Resolved**

(a)	The minutes of the meeting held on 15 September 2017 be taken as a true and accurate record.
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**3. MATTERS ARISING / ACTION LIST**

**19/01/17 6 – Patient online** – Rachel Iveson to update at the next meeting  
**19/07/17 7 – GP 5 Year Forward** – to be updated in progress Jan 18

All other actions were marked as closed

**Resolved**

(a)	That the Action List from the meeting held on 19 July 2017 be updated accordingly.
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**4. NOTIFICATION OF ANY OTHER BUSINESS**

Any proposed items to be taken under Any Other Business must be raised and, subsequently approved, at least 24 hours in advance of the meeting by the Chair.

**Resolved**

(a)	There were no items of any other business to be discussed at this meeting.
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**5. DECLARATIONS OF INTEREST**

In relation to any item on the agenda of the meeting members are reminded of the need to declare:

- (i) any interests which are relevant or material to the CCG;
- (ii) any changes in interest previously declared; or
- (iii) any pecuniary interest (direct or indirect) on any item on the agenda.

Any declaration of interest should be brought to the attention of the Chair in advance of the meeting or as soon as they become apparent in the meeting. For any interest declared the minutes of the meeting must record:

- (i) the name of the person declaring the interest;
- (ii) the agenda item number to which the interest relates;
- (iii) the nature of the interest;
- (iv) be declared under this section and at the top of the agenda item which it relates too;

Name	Agenda Item No	Nature of Interest
Sarah Smyth		Registered Nurse with Nursing Midwifery Council
Karen Martin		Registered Nurse with Nursing Midwifery Council
Kate Memluks		Indirect interest as Expert by Experience Choice Support to Care Quality Commission

**Resolved**

(a)	That the above declarations of interest be noted.
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## 6. PRIMARY CARE QUALITY AND PERFORMANCE REPORT

The Quality Lead presented the Primary Care Quality and Performance Report as a draft and for discussion.

### CQC Visits

James Alexander Family Practice have now had their first CQC visit and was rated outstanding in well led and good in all other areas with an overall rating of good. The CQC have also announced a new regime which will commence on 1 April 2018, the Quality Lead has requested the CQC representative explores what training will be available to prepare practices for a CQC visit. The CQC representative has responded advising once they have finalised their plans he will contact the Quality Lead to arrange dates.

Hull CCG currently have one serious incident reported by a GP practice, the investigation report was received on 25<sup>th</sup> September 2017 which was the day the report was due. The practice involved has declined the offer of support by the Quality Team.

The report was reviewed by the serious incident panel. Following discussions it was agreed that the report needed further detail and it was agreed that the Associate Medical Director and the Quality Lead would visit the practice to provide support. The Associate Medical Director visited the practice and met with the doctors and the Practice Manager where it became clear that the incident involved various health partners and to enable a full investigation and report an independent investigation would need to take place including all agencies. Hull CCG Safeguarding Adults Lead has agreed to take the case to the next Safeguarding Adults Review Board on 5 December 2017 for their consideration as the case could meet the threshold for a Safeguarding Adults Review. The Associate Medical Director is liaising with the coroner to establish if the independent investigation will have an impact on the coroner's investigation.

### Amendments to the report

Integrated Delivery Team update snapshots are to be included within the report for each grouping and then fed into the Primary Care Committee.

The Primary Care Quality and Performance Sub Committee agreed the Patient Experience part of the Dashboard which will be updated annually.

The Quality Lead and the Head of Performance and Programme Delivery are to work together to look at the format of the Primary Care Quality and Performance Report. The report will be updated and shared with SLT prior to being presented at the committee.

It was agreed the exceptions highlighted within the Dashboard would be acknowledged at the Primary Care Quality and Performance Sub Committee.

The Professional Advisor for Primary Care Nursing gave an update on the practice Nurse Development. The practice nurses had met an hour before the city wide PTLs. To discuss the GP groupings and how this would feed into the newly formed Primary Care Nursing in General Practice Steering Group.

The Director of Quality and Clinical Governance/ Executive Nurse advised the Sub Committee that when visits are being undertaken at practices our commissioning

colleagues are reminded to include appropriate members of the Quality Team, so that duplicate visits aren't taking place. This will become part of the Integrated Delivery Team process.

Discussions took place around where the Prescribing Report would best fit within the committee structure; the Subcommittee agreed that the report should be presented to the Quality and Performance Committee. It was agreed the Senior Pharmacist would share the prescribing heat map with the Primary Care Quality and Performance Sub Committee, the Quality Lead and Commissioning Lead – Primary Care. This could then feed into the Primary Care Quality and Performance Committee

**Resolved**

(a)	The Primary Care Quality and Performance Sub Committee Members Noted the discussions
(b)	The Quality Lead was to chase the CQC to put on training on for practices so they meet their requirements for next year.
(c)	The Quality Lead and Head of Performance and Programme Delivery are to work together to look at the format of the Primary Care Quality and Performance Report shared with SLT in December 2017.
(d)	The Quality Lead and Commissioning Lead – Primary Care are to discuss how the prescribing heat map would fit within the dashboard.

**7. Q1 AND Q2 PRIMARY CARE INCIDENT REPORT**

The Quality Lead presented the Q1 and Q2 Primary Care Incident Report the Report identified Patient Transport issues reported by HEYT.

- IDL lack of information, reported by GP practices
- Delay in patient records, reported by GP practices
- Delay in test results from HEYT, reported by GP practices

The Director of Quality and Clinical Governance/ Executive Nurse stated that only Primary Care incidents and lessons learnt should be reported within the Incident Report.

**Resolved**

(a)	The Primary Care and Performance Sub Committee Members noted the discussions
(b)	The Quality Lead was to update the incident report with the changes suggested

**8. UROSEPSIS PILOT**

The Deputy Director of Quality and Clinical Governance gave an overview of the Urosepsis pilot which was going to be rolled out in 2 phases during January and March 2018. The pilot is a joint initiative with East Riding of Yorkshire CCG and will involve two nursing homes in Hull and two of the GP Groupings Modality and Hull GP Collaborative.

The pilot will be built upon the work undertaken by Oxford CCG and NHS Improvement in order to reduce hospital admissions, promote increased awareness of prevention of dehydration and appropriate testing for urinary tract infections.

## Resolved

(a)	The Primary Care Quality and Performance Sub Committee Members noted the update provided.
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### 9. FOR INFORMATION

#### PRIMARY CARE JOINT COMMISSIONING COMMITTEE MINUTE

### 10. ANY OTHER BUSINESS

No other business was discussed

### 11. DATE AND TIME OF NEXT MEETING

30<sup>th</sup> January 2018, 2pm – 4pm, Board Room, Wilberforce Court, Hull, HU11UY

### Abbreviations

CHCP	City Health Care Partnership
CoM	Council of Members
CQC	Care Quality Commission
FFT	Friends & Family Test
HEYHT	Hull and East Yorkshire Hospitals NHS Trust
HSCIC	Health and Social Care Information Centre
Hull CCG	Hull Clinical Commissioning Group
Humber FT	Humber NHS Foundation Trust
NHSE	NHS England
PAG	Professional Advisory Group
PALS	Patient Relations
PCJCC	Primary Care Joint Commissioning Committee
PCQ&PSC	Primary Care Quality & Performance Sub Committee
QSG	Quality Surveillance Group