

QUALITY AND PERFORMANCE COMMITTEE

**MINUTES OF THE MEETING HELD ON 20 MARCH 2018
IN BOARD ROOM, WILBERFORCE COURT, HULL, HU1 1UY
13.30PM – 16.30PM**

PRESENT:

Dr James Moulton, GP Member (Chair), Hull CCG
Estelle Butters, Head of Performance and Programme Delivery, Hull CCG
Sue Lee, Associate Director (Communications and Engagement), Hull CCG
Karen Martin, Deputy Director of Quality and Clinical Governance/ Lead Nurse
Kate Memluks, Quality Lead, Hull CCG
Lorna Morris, Designated Nurse for Safeguarding Children, Hull CCG
Ross Palmer, Head of Contracts Management, Hull CCG
Sarah Smyth, Director of Quality & Clinical Governance/Executive Nurse, Hull CCG
Jason Stamp, Lay Representative, Hull CCG (Vice Chair)

IN ATTENDANCE:

Jade Adams, Personal Assistant, Hull CCG - (Minute Taker)
Mike Napier, Associate Director of Corporate Affairs

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from:

David Blain, Designated Professional for Safeguarding Adults, Hull CCG
Dr James Crick, Associate Medical Director, Hull CCG and Hull City Council
Joy Dodson, Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery, Hull CCG, Hull CCG
Karen Ellis, Deputy Director of Commissioning, Hull CCG
Gareth Everton, Head of NHS Funded Care, Hull CCG
Helen Harris, Quality Lead, Hull CCG
Kevin Mccorry, Medicines Optimisation Pharmacist, North of England Commissioning Support

2. MINUTES OF THE PREVIOUS MEETING HELD ON 20 FEBRUARY 2018

The minutes of the meeting held on 20 February 2018 were presented and it was agreed that they were a true and accurate record.

Resolved

(a)	That the minutes of the meeting held on 20 February 2018 would be signed by the Chair.
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3. MATTERS ARISING FROM THE MINUTES / ACTION LIST FROM THE MINUTES

There were no matters arising from the Minutes.

ACTION LIST FROM MEETING HELD ON 20 FEBRUARY 2018

The action list was presented and the following updates were received:

20/03/18 - Terms of reference – To be agreed at the April 2018 Meeting.

19/12/17 6 – Contract Performance actions update, QUIPP and quality premium – Confusion was raised around the DNA rate for Community Gynaecology S Lee agreed to look at the engagement work that the Communication Team had undertaken and will feed back to the Committee at next meeting.

19/12/17 12 - Sentinel National stroke audit programme – it was agreed this action would be picked up at the quality visit, action put back onto the agenda on May 2018

Autism Deep Dive actions – Actions to be addressed at the April 2018 meeting.

27/06/17 13 – Individual Funding request update – The Communication Team will be undertaking a review of the IFR correspondence.

All other actions were marked as closed.

Resolved

(a)	That the action list be noted and updated accordingly.
(b)	The Associate Director of Communication and Engagement agreed to look at the engagement work that the Communication Team had undertaken and will feed back to the Committee at next meeting regarding the confusion which was raised around the DNA rate for Community Gynaecology.

4. NOTIFICATION OF ANY OTHER BUSINESS

Any proposed item 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.

There were no items of Any Other Business.

5. DECLARATIONS OF INTEREST

In relation to any item on the agenda of the meeting members were 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 number to which the interest relates;
- (iii) the nature of the interest and the action taken
- (iv) be declared under this section and at the top of the agenda item which it relates to;

Name	Agenda No	Nature of Interest / Action Taken
J Moulton	All Items	<ul style="list-style-type: none">• GP Partner Faith House Surgery Modality, providing General Medical Services• GP Tutor Hull York Medical School• Registered with the General Medical Council• Registered with the Royal College of General Practitioners• Voting GP on Health and Wellbeing Board - Hull

		City Council
J Stamp	All Items	<ul style="list-style-type: none"> Chief Officer North Bank Forum for voluntary organisation - sub contract for the delivery of the social prescribing service. Member of Building Health Partnerships
S Smyth	All Items	<ul style="list-style-type: none"> Registered nurse on the NMC register
K Martin	All Items	<ul style="list-style-type: none"> Registered nurse on the NMC register
J Crick	All Items	<ul style="list-style-type: none"> Qualified GP and undertakes sessional GP work outside of the Clinical Commissioning Group. As part of sessional GP work undertakes ad hoc GP out of hours GP sessions for Yorkshire Doctors Urgent Care (part of the Vocare Group). Joint appointment between Hull Clinical Commissioning Group and Hull City Council. Standing Member of one of the National Institute for Health and Care Excellence (NICE) Quality Standards Advisory Committees. Spouse is a Salaried GP who undertakes out of hours GP work for Yorkshire Doctors Urgent Care (part of the Vocare Group) and also provides out of hours cover for a hospice. All of this work is undertaken outside of the Clinical Commissioning Group area.

Resolved

(a)	That the above declarations be noted.
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6. QUALITY AND PERFORMANCE REPORT

Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery and the Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the Quality and Performance Report to consider.

Financial Position

Hull CCG was currently on track to achieve a balanced position against the budget.

Quality Premium

No update Reported.

CCG Performance Indicators

A&E waiting time

A&E was currently under performing and was been monitored through a range of forums.

52 Week Referrals

During January there were 13 x 52 week breaches for the CCG with 6 at HEYHT and 7 at CHCP.

CHCP: The 7 breaches allocated to the tier 3 Weight Management Service was a reduction on previous months breaches and is expected to reduce further.

Breast Cancer 2 week waits

156 patients were seen with 12 breaches occurring, the January breach target was 9. Some of the breaches related to Patients not taking up appointments when given them. A discussion took place around if patients were provided with leaflets around the importance of attending their appointments whether this would improve attendance. The Associate Director of Communications and Engagement agreed to follow this up.

Diagnostic Test Waiting Times

During January the CCG had 399 breaches with the majority of these being for endoscopies 45% (181) and Imaging 41% (163).

Friends and Family Test for Postnatal Community

A discussion took place around the indicators within the report. It was noted that no information was collated in the months of June and December 2017. The Associate Director of Communications and Engagement agreed to have a conversation with HEY to understand the figures further.

Contract Performance and Quality

CHCP

Let's Talk: Assessment Booking & Clustering

The 7-day assessment performance is below target but improving slightly, however the 6-week national standard waiting time for entering treatment has continued to not achieve the 75% standard and is being followed up with the provider. The initial 5-year term of the Let's Talk contract is due to expire in September 2019 and the CCG is reviewing options for ongoing commissioning.

Community Paediatrics

Initial Health Assessments in December, showed that there was only 56% (5 of 9) of children offered an appointment within 28 days of becoming looked after. This is due to ongoing issues with the notification process to health providers of an assessment being required. It was noted that this was disappointing performance and would be raised further at the CHCP Integrated Quality, Governance and Safety Group. A further discussion took place and it was agreed that the Director of Quality and Clinical governance/ Executive Nurse would have a conversation with Tracey Vickers the Director of Nursing at CHCP and would also send a joint letter to Alison Murphy Director of Children's Services at the Local authority regarding the issues raised.

Quality

The CHCP Integrated Quality, Governance and Safety Group met in February 2018. Key highlights from the meeting were that the Terms of reference were agreed, the 125 incidents that were reported for Hull in January 2018 were for both Hull and East Riding CCGS, staff at CHCP were reviewing these figures so that they will be reported correctly in the future.

Training

Overall CHCP compliance with all statutory and mandatory training was reported as 85% compliance.

HEYHT

The CQC carried out an unannounced inspection of core services on the 7th February 2018. The CQC visited again at the end of February to review the well-led domain. The outcome of the inspections from the CQC is awaited.

MRSA

In November the Trust reported one MRSA (Trust Apportioned) bacteraemia.

E Coli

The Trust threshold for Ecoli was 73, the Trust performance to date was 94, which was above the threshold. It was noted that this increase was due to the implementation of the Sepsis guidance.

Serious Incidents

The trust have reported twenty-five serious incidents and one never event (medication error) during Quarter 3. The number of SIs relating to the suboptimal care of the deteriorating patient / unexpected deaths remains a concern – A letter was written by the Serious Incident Panel Chair to the Chief Medical Officer at the trust to raise this concern, a meeting took place on 6th March to discuss the Issues.

Humber FT

2018/19 Contract

Investment has been agreed to support adult acute mental health inpatient flow. This included additional beds at Mill View Court, step-down accommodation and continuation of the Crisis Pad with extended hours.

Contract Governance

The Collaborative Working model for managing the contract in 2018/19 has now been agreed and meetings in this format are commencing in March 2018 with the Technical and Information Group (TIG) and the other groups to start from April. The Lay Member raised concerns around membership to the groups as Hull CCG appeared not be represented The Head of Contracts Management and the Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery to have discussion around this further and raise the concerns further with the ERY CCG.

Quality

The Clinical Quality Forum (CQF) meeting was held on 16 February 2018. The agenda was reduced due to no trust Board meeting taking place before the Forum.

HFT have developed a 12-month recovery action plan following concern over their overall management of the Serious Incident Process.

Spire

Complaints

It was noted within the report that only one complaint had been received for Spire. The Committee questioned whether or not this information was correct, it was agreed that the Associate Director of Communications and Engagement would check this information was correct.

Never Events

A wrong site surgery never event was declared on 13th February 2018. The investigation report is due for submission on 11th May 2018.

YAS

No further update given.

Thames Ambulance Service

The key performance indicators for Thames Ambulance Service were shared to the Committee and 4 of these indicators are now showing as green.

Level of Confidence
Financial Management Process A HIGH level of confidence in the CCG process for financial management due to Established systems and processes for financial management that are verified by internal and external audit. Performance A HIGH level of confidence in the CCG reported financial performance due to all statutory targets planned to be achieved. Track record of performance.
Hull & East Yorkshire Hospitals – A&E 4 hour waiting times Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information. Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.
Hull & East Yorkshire Hospitals – Referral to Treatment waiting times Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information. Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.
Hull & East Yorkshire Hospitals - Diagnostics Waiting Times Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information. Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.
Hull & East Yorkshire Hospitals – Cancer Waiting Times (exc. 62 days target) Process A HIGH level of confidence in the CCG processes for reporting the performance against this target established systems and processes for reporting performance information. Performance. A MEDIUM level of confidence in the achievement of this target due to emerging improved performance but not yet assured of sustained improvement.
Hull & East Yorkshire Hospitals – 62-day Cancer Waiting Times Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information. Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.

<p>Humber Foundation Trust – Waiting Times (all services)</p> <p>Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information.</p> <p>Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.</p>
<p>City Health Care Partnership – Looked After Children Initial Health Assessments</p> <p>Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information.</p> <p>Performance A LOW level of confidence in the achievement of this target due to ongoing underperformance.</p>
<p>City Health Care Partnership – Improved Access to Psychological Therapies</p> <p>Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information.</p> <p>Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.</p>
<p>Yorkshire Ambulance Service – Ambulance Handover Times</p> <p>Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information.</p> <p>Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.</p>
<p>TASL – Key Performance Indicators (all)</p> <p>Process A HIGH level of confidence in the CCG processes for reporting the performance against this target due to established systems and processes for reporting performance information.</p> <p>Performance. A LOW level of confidence in the achievement of this target due to ongoing underperformance.</p>

Resolved

(a)	Quality and Performance Committee Members considered the contents of the Quality and Performance Report.
(b)	The Associate Director of Communications and Engagement agreed to follow up discussion around whether patients receive leaflet about the importance of attending appointments.
(c)	The Associate Director of Communications and Engagement agreed to have a conversation with HEY to understand the figures further for Friends and Family Test for Postnatal Community.
(d)	The Director of Quality and Clinical Governance/ Executive Nurse would have a conversation with Tracey Vickers and Send a joint letter to Alison Murphy regarding the issues raised around Community Paediatrics at CHCP.
(e)	The Head of Contracts Management and the Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery to have discussions about the issues raised around contract governance at Humber.
(f)	The Associate Director of Communications and Engagement would check the complaints for Spire.

7. CQC REVIEW OF LOOKED AFTER CHILDREN AND SAFEGUARDING

The Designated Nurse for Safeguarding Children presented the Hull Children Looked after and safeguarding inspection update to note.

The Quality and Performance Committee acknowledged that this was a positive report.

Level of Confidence	
NHS Hull CCG	
Process A High level of confidence was reported for Hull CCG discharging it's duties in relation to safeguarding children. Quarterly monitoring of progress has been undertaken by the Designated nurse via the Hull Children Looked After and Safeguarding (HCLAS) meetings.	
Performance A High level of confidence was reported for the Hull CCG discharging it's duties in relation to safeguarding children. There has been significant progress made against the CQC recommendations, the main outstanding areas being in relation to fully embedding information sharing processes with the local authority.	
Hull & East Yorkshire Hospitals	
Process A HIGH level of confidence in HEYHT discharging it's duties in relation to safeguarding children. There is clear leadership within HEYHT to progress the CQC recommendations.	
Performance A HIGH level of confidence in HEYHT discharging its duties in relation to safeguarding children. Significant progress has been achieved against the CQC recommendations.	
Humber Foundation Trust (HFT)	
Process A HIGH level of confidence in HFT discharging its duties in relation to safeguarding children. There is clear leadership within HFT to progress the CQC recommendations.	
Performance A MEDIUM level of confidence in HFT discharging it's duties in relation to safeguarding children. Significant progress has been achieved against the CQC recommendations. However, further work is necessary to embed a "Think Family" approach within the trust, for full assurance of an embedded supervision process and the achievement of level 3 training compliance.	
City Health Care Partnership	
Process A HIGH level of confidence in CHCP discharging it's duties in relation to safeguarding children. There is clear leadership within CHCP to progress the CQC recommendations.	
Performance A HIGH level of confidence in CHCP discharging it's duties in relation to safeguarding children. Significant progress has been achieved against the CQC recommendations the main outstanding area being in relation to the multi-agency looked after children agenda.	

Resolved

(a)	Quality and Performance Committee Members noted the CQC Review of Looked after children and Safeguarding.
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8. GUIDANCE – VIRAL GASTROENTERITIS/ VIRAL RESPIRATORY SYSTEMS PARTNERS GUIDNANCE

The Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the Guidance for the Viral Gastroenteritis and Viral Respiratory systems partners' guidance for Endorsement at the committee.

Resolved

(a)	Quality and Performance Committee Members endorsed the Guidance for the Viral Gastroenteritis and Viral Respiratory systems partners’.
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9. CLOSTRIDIUM DIFFICILE PROPOSED OBJECTIVES

The Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the Clostridium Difficile proposed objectives to approve.

The purpose of the report was to provide the committee with an overview of Hull CCG’s current position in relation to clostridium difficile and to agree a stretch objective for 2018/19. The Quality and Performance Committee agreed a stretch target of 55 cases to be set for Hull CCG and a 45 stretch target to be set for HEY. Discussion had taken place with Trust and IPC committees to approve the changes to target.

Level of Confidence
Process A High level of confidence was reported for the CCG as the CCG had ended the year under C Diff objective for the third year in a row.
Performance A High level of confidence was reported for the CCG was under objective for C diff and had robust review processes in place.

Resolved

(a)	Quality and Performance Committee Members approved the Stretch Objective for the Cdiff proposed objectives.
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10. HFT SITE VISIT LETTER

The Deputy Director of Quality and Clinical Governance/ Lead Nurse shared the HFT Site visit for information.

It was noted that actions and recommendations should have been included within the letter. The Deputy Director of Quality and Clinical Governance had raised her concerns at the Humber CQF.

Resolved

(a)	Quality and Performance Committee Members noted the HFT Site Visit letter for information.
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11. BOARD ASSURANCE FRAMEWORK

The Associate Director of Corporate Affairs presented the Board Assurance Framework to discuss.

The Quality and Performance Committee agreed the current risk levels for this Committee.

Level of Confidence
Process A High level of confidence was reported in the Hull CCG BAF process, in that the BAF is regularly monitored, reviewed and updated.

Resolved

(a)	Quality and Performance Committee Members noted the Board Assurance Framework.
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12. EQUALITY AND DIVERSITY UPDATE REPORT

The Associate Director of Corporate Affairs presented the Board Assurance Framework to discuss.

A discussion took place around the New Objectives for 2019-2023 and it was felt that objective 3 wasn't ambitious enough and should state "to support a diverse and skilled workforce".

Level of Confidence
Process A High level of confidence was reported in the Hull CCG Equality and Diversity process, in that the Equality and Diversity is regularly monitored, reviewed and updated.
Performance A High level of confidence was reported in Hull CCG due to the significant achievements against the objectives set out in the E&D action plan.

Resolved

(a)	Quality and Performance Committee Members noted the Equality and Diversity update report.
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13. DEEP DIVE AGENDA ITEMS

No Deep Dive agenda items were highlighted.

14. ANY ISSUES TO GO TO THE PLANNING AND COMMISSIONING COMMITTEE

No issues have been raised to go to the Planning and Commissioning Committee.

15. NOTES FROM THE FOLLOWING MEETINGS ARE AVAILABLE ON REQUEST:

- HEYHT Contract Management Board
- Humber FT Contract Management Board
- Spire Contract Management Board
- H&ERY Serious Incident Panel
- Infection, Prevention and Control Group

16. ANY OTHER BUSINESS

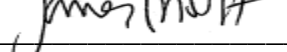
No other business was discussed

17. CHAIR'S UPDATE REPORT

The content of the Chair's Update Report would be discussed outside of the meeting.

18. DATE AND TIME OF NEXT MEETING

The next meeting of the Q&PC would be held on Tuesday 24 April 2018, 1pm – 4pm in the Boardroom at Wilberforce Court, Alfred Gelder Street, Hull

Signed: 
(Chair of the Quality and Performance Committee)

Date: 24 April 2018

GLOSSARY OF TERMS

2WW	2 Week Wait
BAF	Board Assurance Framework
BAFF	British Association for Adoption and Fostering
BI	Business Intelligence
BME	Black Minority Ethnic
BSI	Blood Stream Infections
CAB	Choose and Book
CAMHS	Child and Adolescent Mental Health Services
CCE	Community Care Equipment
C diff	Clostridium difficile
CDI	Clostridium Difficile Infection
CDOP	Child Death Overview Panel
CHCP	City Health Care Partnership
CIP	Cost Improvement Programme
CMB	Contract Management Board
COG	Corporate Operations Group
CoM	Council of Members
COO	Chief Operating Officer
CQC	Care Quality Commission
CQF	Clinical Quality Forum
CQN	Contract Query Notice
CQUIN	Commissioning for Quality and Innovation
CSE	Child Sexual Exploitation
DoN	Directors of Nursing
FFT	Friends and Family Test
GAD	General Anxiety Disorder
GNCSI	Gram Negative Bloodstream Infection
GMC	General Medical Council
HANA	Humber All Nations Alliance
HCAI	Healthcare Acquired Infection
HCW	Healthcare Worker
HEYHT	Hull and East Yorkshire Hospitals NHS Trust
HMI	Her Majesty's Inspectors
HSAB	Hull Safeguarding Adults Board
HSCB	Hull Safeguarding Children's Board
Hull CCG	Hull Clinical Commissioning Group
Humber FT	Humber NHS Foundation Trust
HYMS	Hull York Medical School
IAGC	Integrated Audit & Governance Committee
ICES	Integrated Community Equipment Service
IDLs	Immediate Discharge Letters
IFR	Individual Funding Requests
IMD	Index of Multiple Deprivation
IPC	Infection, Prevention and Control
IRS	Infra-Red Scanning
IST	Intensive Support Team
LA	Local Authority
LAC	Looked After Children
LeDeR	Learning Disability Death Reviews

LIN	Local Intelligence Network
LSCB	Local Safeguarding Children Board
MCA/DoLs	Mental Capacity Act / Deprivation of Liberty Safeguards
MIU	Minor Injury Unit
MoU	Memorandum of Understanding
MRSA	Methicillin-Resistant Staphylococcus Aureus
NE	Never Event
NECS	North East Commissioning Support
NHSE	NHS England
NIHR	National Institute for Health Research
NLAG	North Lincolnshire and Goole NHS Trust
OOA	Out of Area
P&CC	Planning and Commissioning Committee
PCQ&PSB	Primary Care Quality and Performance Sub Committee
PDB	Programme Delivery Board
PEN	Patient Experience Network
PHE	Public Health England
PPA	Prescription Pricing Authority
PPFB	Putting Patients First Board
PPI	Proton Pump Inhibitors
PTL	Protected Time for Learning
Q&PC	Quality and Performance Committee
Q1	Quarter 1
QIPP	Quality, Innovation, Productivity and Prevention
QSG	Quality Surveillance Group
PandA	Performance and Activity
RCF	Research Capability Funding
RCA	Root Cause Analysis
RfPB	Research for patient Benefit
RTT	Referral To Treatment
SAR	Safeguarding Adult Review
SCB	Safeguarding Children Board
SCR	Serious Case Review
SI	Serious Incident
SIP	Service Improvement Plan
SNCT	Safer Nursing Care Tool
SOP	Standard Operating Procedure
STF	Sustainability and Transformation Fund
STP	Sustainable Transformation Plan
TDA	NHS Trust Development Authority
UTI	Urinary Tract Infection
VoY	Vale of York
WRAP	Workshop to Raise Awareness of Prevent
WYCS	West Yorkshire Urgent Care Services
YAS	Yorkshire Ambulance Service
YFT	York Teaching Hospital NHS Foundation Trust
YHCS	Yorkshire and Humber Commissioning Support
YTD	Year to Date