

**QUALITY AND PERFORMANCE COMMITTEE
MINUTES OF THE MEETING HELD ON 18 DECEMBER 2018
IN BOARD ROOM, WILBERFORCE COURT, HULL, HU1 1UY
1.00PM – 4.00PM**

PRESENT:

Dr J Moulton, GP Member (Chair), Hull CCG
E Butters, Head of Performance and Programme Delivery, Hull CCG
K Ellis, Deputy Director of Commissioning, Hull CCG
D Heseltine, Secondary Care Doctor, Hull CCG
S Lee, Associate Director (Communications and Engagement), Hull CCG
K Martin, Deputy Director of Quality and Clinical Governance/ Lead Nurse
L Morris, Designated Nurse for Safeguarding Children, Hull CCG
R Palmer, Head of Contracts Management, Hull CCG
S Smyth, Director of Quality & Clinical Governance/Executive Nurse, Hull CCG
J Stamp, Lay Representative, Hull CCG (Vice Chair)

IN ATTENDANCE:

J Adams, Personal Assistant, Hull CCG - (Minute Taker)
E Stevens, Designated Professional for Safeguarding Adults, Hull CCG
R Thompson, Head of Nursing and Quality, Hull CCG

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from:

D Blain, Designated Professional for Safeguarding Adults, Hull CCG
Dr J Crick, Associate Medical Director, Hull CCG and Hull City Council
J Dodson, Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery, Hull CCG
K McCorry, Medicines Optimisation Pharmacist, North of England Commissioning Support

2. MINUTES OF THE PREVIOUS MEETING HELD ON 27 NOVEMBER 2018

The minutes of the meeting held on 27 November 2018 were presented and it was agreed that they were a true and accurate record.

All other actions were marked as complete.

Resolved

(a)	That the minutes of the meeting held on 27 November 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 27 NOVEMBER 2018

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

27/11/18 6 – Quality and Performance Report – This action was been discussed as part of the Quality and Performance Report.

27/11/18 6 – Quality and Performance Report – The Deputy Director of Quality updated that Humber TFT had a total of 16 responses from Humber to complaints.

27/11/18 6 – Quality and Performance report – The action regarding transport was to be removed and the Chair would speak to the Chair of Primary Care Commissioning Committee.

23/10/18 12 – Paediatric Speech and Language – this was complete and placed on the risk register.

All actions were marked as complete.

(a)	That the action list be noted and updated accordingly.
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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 financial 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

Resolved

(a)	There were no declarations of interest noted.
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6. QUALITY AND PERFORMANCE REPORT

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

Financial Position

No further changes were reported from the previous month.

The forecast spend for equipment was 800k the Committee requested to understand the spend in more detail, it was suggested that the Clinical Commissioning Lead – Equipment and Wheelchairs present an update report around the spend and the prescribing of equipment at the next meeting

Performance Indicators

A&E Waiting times

The A&E 4 hour waiting time target continues to improve, however failed to achieve the Sustainability Transformation Fund trajectory for October. It should be noted that locally reported performance during November has seen significant deterioration and variation on a daily basis and this has continued into December.

Referral to Treatment

Referral to Treatment 18 weeks waiting times performance at HEYHT improved in October, reporting 83.15%, Hull CCG recorded 2 x 52 week breaches in October. RCA s have been undertaken for both breaches

Diagnostic Test Waiting Times

A significant improvement was reported for the second consecutive month, 5.84% in October 2018. The CCG recorded 279 breaches during October. It was noted that additional funding had been attracted, by the Cancer Alliance, to the area to address endoscopy and MRI/CT waits. This would have a positive impact on diagnostic waits and cancer waits in general.

Breast Cancer 2 Week waits

144 patients were seen during October with 13 breaches. The majority of breaches (11) are due to patient choice, with the remaining 2 reasons not listed. A discussion took place around the 11 breaches, it was agreed that the committee would be provided with further information to understand the communication that goes out to patients to try and understand these breaches.

Cancer 31 Days

Cancer 31 day waits: Diagnosis to first definitive treatment within 31 days (all cancers) – 126 patients seen with a total of 8 breaches, 4 due to inadequate elective capacity and 4 due to treatment delayed for medical reasons.

Cancer 31 day waits: 31 day wait for subsequent treatment – surgery – 23 patients seen with 4 breaches all of which were due to inadequate elective capacity. In October 18 the performance was 82.61%.

Crew Clear Delays

YAS at HEYHT performance for 15 minute and 30 minute handovers is 75.00% and 98.65% respectively, both improved from the previous month. YAS at HEYHT performance for 15 minute and 30 minute crew clear is 75.05% and 97.68% respectively for October 2018.

% of people who are moving to recovery

The service had to deliver a rolling quarter for achievement of the national standard, current performance is 55.56% (July – September 2018).

Friends and Family Test for A&E

The CCG and HEYHT have developed a work plan to address the continued issues with achieving this target.

Incidence of healthcare associated infection (HCAI): Clostridium difficile (C.difficile)

At the end of November the CCG were 1 case over the stretch target.

Incidence of healthcare associated infection (HCAI): E-Coli

The actual activity continues to be above the agreed target for cases for E.coli BSI. A joint action plan was reviewed in November 2018 and links to the work of the NHSI UTI Collaborative.

CHCP

A small number of indicators had breached within the current month but remain within the threshold for the year to date position. The underperforming areas are being monitored to understand the depth of the issue.

Quality

The CHCP Quality, Clinical Governance and Safety Group met on 5 December 2018, there was no quarterly Quality Report due but the Group received presentations on Urgent Care, Pressure Ulcers and Infection Prevention and Control.

It was requested that the Never Events and Serious Incidents are separated out within the report.

CHCP are providing quarterly reports rather than monthly reports.

HEYHT

Covered within the performance indicators section.

Quality

The Trust was aiming to recruit 40 nurses by March 2019. Nurse Associates are expected to receive PINs in June 2019.

Plans are in place to recruit a Medical Examiner to support Learning from Deaths. This was a requirement from NHSE with Trust to be compliant by April 2019.

The Trust had identified a theme in medication incidents relating to discharge medication. E-prescribing was being rolled out, currently on six wards.

Humber Teaching Foundation Trust

The Older Peoples single point of access reports had been reviewed Currently 80 patients are waiting for assessment and 40 service users are awaiting for Care Home Liaison. The Committee requested further information around the interpretation of the total number of patients, was the report stating 40 of 80 patients or 120 patient's altogether.

A report around Children's and Adults Mental Health would be presented at the Committee in March 19 to gain assurance around these figures.

Quality

The Trust had declared 16 Serious Incidents (SIs) year to date. Positive improvements in the Trusts overall management of its SIs had been noted. Staffing levels are a concern in the psychiatric Intensive Care Unit which had resulted in bed provision being reduced from 14 to 10 beds, this was been monitored closely.

Spire

The CCG had been able to negotiate better value against local and national benchmarks in terms of New to Follow Up ratios and had seen a significant reduction in Orthopaedic procedures due to the implementation of the MSK triage service.

Quality

Spire was inspected by the CQC between 18th and 20th September 2018, the report was published on 15 November 2018. They have been rated "Good" in all areas.

Spire had not reported any serious incidents or never events year to date.

Yorkshire Ambulance Service

No further information from last month was reported.

Thames Ambulance Service

The provider had experienced data quality issues and therefore performance data for October was awaited. Issues were expected to be as previously reported.

The CCG was due to meet with TASL on 19 December and plan to formally escalate a number of outstanding matters.

Quality

3 vehicles out of the 43 spot checks for IPC were found to be dirty. These vehicles had not been used for some time. Commissioners had requested assurance around IPC procedures.

The IPC Lead was currently in talks with the vehicle cleaning chemicals supplier, Nielsen's, to provide IPC/Deep Clean Training for all relevant staff, at their onsite Training Academy. This will be completed by end of January 2019.

The Committee requested a breakdown of the unresolved complaints.

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

<p>Hull & East Yorkshire Hospitals – A&E 4 hour waiting 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>Hull & East Yorkshire Hospitals – Referral to Treatment waiting 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>Hull & East Yorkshire Hospitals - Diagnostics Waiting 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>Hull & East Yorkshire Hospitals – Cancer Waiting Times (exc. 62 days target)</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 emerging improved performance but not yet assured of sustained improvement.</p>
<p>Hull & East Yorkshire Hospitals – 62-day Cancer Waiting 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>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 waiting 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>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>

Resolved

(a)	Quality and Performance Committee Members considered the Quality and Performance report.
(b)	The Clinical Commissioning Lead – Equipment and Wheelchairs would present an update report around the spend and the prescribing of equipment.
(c)	The committee would be provided with further information to understand the communication that goes out to patients to try and understand these breaches in breast cancer 2 week waits.
(D)	A report around Children’s and Adults Mental Health would be presented at the committee in March 19 to gain assurance around the older people’s single point of access figures.
(E)	A Breakdown of the unresolved complaints within the Thames Ambulance Service was requested by the Committee.
(F)	It was requested that the Never Events and Serious Incidents are separated out within the Quality and Performance report.

7. CONTINUING HEALTHCARE QUALITY AND PERFORMANCE REPORT

The Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the Continuing Healthcare Quality and Performance Report to note.

NHS Funded Care Transformation Programme

The new Head of NHS Funded Care was due to take up position at the start of January 2019.

QUIPP

A workshop was held on the 19th September 2018 to take forward the Yorkshire & Humber NHSE QIPP in order to develop an outline project plan. This program was sponsored by Directors of Finance within the CCGs. The Task and Finish group will meet in early December 2019.

An Options paper would be presented to the Panning and Commissioning Committee in January 2019 around the Transfer to Assess Beds for CHC.

Level of Confidence
Process A HIGH level of confidence was reported in the CCG processes due to NHS Hull CCG are compliant with the National Framework and is meeting the statutory responsibilities around NHS funded care
Performance A HIGH level of confidence was reported in the CCG performance due to NHS Hull CCG submits quarterly reports to NHS England regarding the delivery of NHS funded care. The CHCP service is exceeding the quality premium targets for NHS-CHC and local key performance indicators.

Resolved

(a)	Quality and Performance Committee Members noted the Continuing Health Care Quality and Performance Report.
(b)	An Options paper would be presented to the Planning and Commissioning Committee in January 19 around the Transfer to Assess Beds for CHC.

8. Q1 & Q2 LEDER UPDATE

The Director of Quality and Clinical Governance/ Executive Nurse presented the Q1 & Q2 LeDeR Update to Note.

In total, 144 reviews have been completed so far across the Yorkshire & Humber region to the end of October 2018.

NHS Hull CCG had been notified of 14 reviews in total so far. 6 of these had been completed and approved then archived by Bristol, with a further 2 outstanding. 3 cases are ongoing with CCG reviewers, and 1 case was currently suspended at the local coroner's request.

Two further reviews had been outsourced and had been returned to the LAC in Q2 for approval. Both of these reports were considered by the last CCG LeDeR review panel and judged to be incomplete and below the required standards. Both reviews lacked a thorough review of all professionals and agencies involved in the case. CCG staff/reviewers will address these shortfalls and will re-submit the reports when completed.

It was requested that the Chair attend the next LeDeR panel meeting to observe.

Level of Confidence
NHS Hull CCG
Process
There is a HIGH level of confidence in NHS Hull CCG discharging it's duties in relation to the LeDeR programme.
Performance
There is a HIGH level of confidence in NHS Hull CCG discharging it's duties in relation to the LeDeR programme.

Resolved

(a)	Quality and Performance Committee Members noted the Q1 & Q2 LeDeR Update.
(b)	The Chair of Quality and Performance was to be invited to the next LeDeR Panel meeting to observe.

9. PATIENT RELATIONS REPORT

This item was deferred to the 22 January 19.

10. MENTAL HEALTH FUNDING PANEL TERMS OF REFERENCE

The Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the MH Funding Panel TOR for information.

The Quality and Performance Committee noted the changes to MH Funding Panel TOR.

The following suggested amendments were requested.

- Need to be more clear around the quorum
- Full titles need to be used
- The appeals panel needs to be different to the panel members

Resolved

(a)	Quality and Performance Committee Members received Mental Health Funding Panel Terms of Reference.
(b)	The Strategic Lead - Mental Health and Vulnerable People Commissioning would update the Mental Health Funding Panel Terms of Reference with the changes suggested.

11. DEEP DIVE AGENDA ITEMS

The Personal Assistant and the Deputy Director of Commissioning would contact Jonathan Wood at HEY to organise the Diagnostic Deep dive in the New Year.

Resolved

(a)	No new deep dive agenda items were suggested.
(b)	The Personal Assistant and the Deputy Director of Commissioning would contact Jonathan Wood at HEY to organise the Diagnostic Deep dive in the new year.

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

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

13. 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

14. ANY OTHER BUSINESS

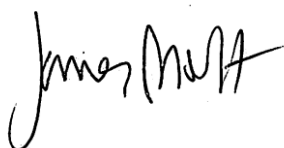
No other business was discussed

15. CHAIR'S UPDATE REPORT

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

16. DATE AND TIME OF NEXT MEETING

The next meeting of the Q&PC would be held on Tuesday 22 January 2019, 9.00am – 12.00pm in the Boardroom at Wilberforce Court, Alfred Gelder Street, Hull



Signed: _____
(Chair of the Quality and Performance Committee)

Date: 23 January 2019

GLOSSARY OF TERMS

CAMHS	Child and Adolescent Mental Health Services
C diff	Clostridium difficile
CHCP	City Health Care Partnership
CQC	Care Quality Commission
CQF	Clinical Quality Forum
FFT	Friends and Family Test
HEYHT	Hull and East Yorkshire Hospitals NHS Trust
HSAB	Hull Safeguarding Adults Board
HSCB	Hull Safeguarding Children's Board
Hull CCG	Hull Clinical Commissioning Group
IPC	Infection, Prevention and Control
LAC	Looked After Children
LeDeR	Learning Disability Death Reviews
NHSE	NHS England
PCQ&PSB	Primary Care Quality and Performance Sub Committee
PTL	
Q&PC	Quality and Performance Committee
Q1	Quarter 1
QIPP	Quality, Innovation, Productivity and Prevention
YAS	Yorkshire Ambulance Service