

**QUALITY AND PERFORMANCE COMMITTEE
MINUTES OF THE MEETING HELD ON 23 JULY 2019
IN BOARD ROOM, WILBERFORCE COURT, HULL, HU1 1UY
9.00AM – 12.00PM**

PRESENT:

J Stamp, Lay Representative, Hull CCG (Vice Chair)
E Butters, Head of Performance and Programme Delivery, Hull CCG
Dr J Crick, Associate Medical Director, Hull CCG and Hull City Council
K Ellis, Deputy Director of Commissioning, Hull CCG
D Heseltine, Secondary Care Doctor, Hull CCG
S Lee, Associate Director (Communications and Engagement), Hull CCG
R Palmer, Head of Contracts Management, Hull CCG
R Thompson, Head of Quality and Nursing, Hull CCG

IN ATTENDANCE:

J Adams, Personal Assistant, Hull CCG - (Minute Taker)
Dr V Anand, Post-CCT GP Fellow at New Hall Surgery and Hull CCG
G Baines, Delivery Manager, Health Watch – item 8 only
J Cairns, Head of Midwifery, HUTHT- item 7 only
K Hiley, Senior Medicines Optimisation Technician, North of England Commissioning Support – item 7 only
R Lane, MVP Chair - item 7 only
A Rawlings, Deputy Designated Nurse Safeguarding Children, Hull CCG – item 10 only

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from:

Dr J Moulton, GP Member (Chair), Hull CCG
D Lowe, Deputy Director of Quality and Clinical Governance/ Lead Nurse
K McCorry, Medicines Optimisation Pharmacist, North of England Commissioning Support
L Morris, Designated Nurse for Safeguarding Children, Hull CCG
E Stevens, Designated Professional for Safeguarding Adults, Hull CCG
S Smyth, Director of Quality & Clinical Governance/Executive Nurse, Hull CCG

2. MINUTES OF THE PREVIOUS MEETING HELD ON 25 JUNE 2019

The minutes of the meeting held on 25 June 2019 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 25 June 2019 would be signed by the Chair.
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3. MATTERS ARISING / ACTION LIST FROM THE MINUTES

There were no matters arising from the Minutes.

ACTION LIST FROM MEETING HELD ON 21 MAY 2019

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

21/06/19 – Quality and Performance Report – this action would be picked up under the Q&P report – action marked as complete

21/06/19 (b) – Quality and Performance Report – The trajectories for E-coli are set nationally this action would be marked as complete.

All other 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.

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 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 and Action Taken
J Stamp	8	Declared a Financial Interest as Chief Executive of North Bank Forum voluntary sector who were currently the host organisation for Health Watch in Hull. The declaration was noted – no further action was considered necessary.

Resolved

(a)	The above declaration of interest was noted – no further action was considered necessary.
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6. QUALITY AND PERFORMANCE REPORT

The Head of Performance and Programme Delivery, Head of Contracts Management and the Deputy Director of Quality and Clinical Governance/ Lead Nurse presented the Quality and Performance Report for consideration.

Highlighted within the report were:

The CCG were currently achieved a balanced position against the in-year allocation.

Quality Premium

The structure for the Quality Premium for 2019/20 had yet to be confirmed as National guidance was awaited.

CCG Improvement Assessment Framework (IAF)

Hull CCG was rated outstanding for the third year running.

CCG constitutional exceptions Summary

A&E Waiting times

The A&E 4 hour waiting time performance had a slight improvement in May 19. From 17th June 2019 the Trust started uploading a daily sitrep position for type 3 activity to enable them to report a system position. This is being reported at the A&E Delivery board.

Referral to treatment

The Planned Care Delivery Group was reviewing waiting times as part of their agenda.

52 Week referral to treatment in incomplete pathways

HUTHT reported 0 patients waiting over 52 weeks at the end of May. Hull CCG reported 1 x 52 week breach in month at Leeds Teaching Hospitals NHS Trust due to consultant capacity in Adult Spine specialty.

Diagnostic test waiting times

The CCG recorded 370 breaches during May 19, the majority being for endoscopies.

Breast cancer 2 week waits

In May there were 22 breaches for breast cancer 2 week waits. The number of breaches are now included within the tables for each exception.

Cancer 62 day waits Urgent GP referral for suspected cancer

Hull CCG performance reported 63.64% in May, (66 patients with 24 breaches). Four of the breaches were due to inadequate elective capacity, the committee found these numbers worrying and the Deputy Director of Commissioning would follow this up with HUTHT.

Friends and Family Test for A&E

The Friends and Family paper work at HUTHT has been updated, the Associate Director of Communication and Engagement would share the paperwork with the Head of Quality and Nursing.

HCAI E-Coli

Some of the Quality indicators for the infection control where out of scope, the committee suggested inviting the infection, prevention and control lead to the Quality and Performance Committee on a regular basis.

CONTRACT PERFORMANCE AND QUALITY

CHCP

The Depression and Anxiety Service Let's Talk was currently in the month of May 19 achieving at 35.40%, the position had increased by over 6% within the reporting month after a steady decline from the start of the year. A new assessment process had been put in place and was taking time to bed in to the service. A meeting will take place in October 19 between Hull CCG and CHCP to look at the extension of the contract. The Committee requested that they see some trajectories and action plan at the next meeting.

The performance for the integrated care service had dropped significantly to 5% for the month of May 2019. This had been picked up with CHCP and some improvement trajectories will be put in place.

Quality

Three serious incidents had been reported for the month of May 2019 two of which are for pressure sores, a meeting will be taking place this afternoon Tuesday 23 July 19 to look further at pressure sores.

Service Managers from the Stroke Service Rossmore had attended the last 2 IQGSG meetings. An unannounced quality visit will take place to the Rossmore Stroke Service to follow up on previous visit.

HUTHT

HUTHT was discussed under the Performance indicator section of the report.

Quality

There had been an increase from 37 cases in 2017/18 for MSSA Bacteraemia to 60 in 2018/19. There had been 10 serious incidents reported in May 19, a Serious Incidents committee at HUTHT was now in place. It was noted that the Community Paediatrics Service had been transferred from CHCP to HUTHT, more patients had been transferred over then first thought with patients that had been waiting a long time for review, the committee requested further information to be included within the September report.

HUMBER FT

It was noted that the situation with the Children and Adolescent Mental health Service (CAHMS) was getting worse with service currently sitting at 10% for the month of May 19.

Quality

The Friends and Family test results had been affected by reporting for the HPV Programme meaning Humber were missing the agreed target The survey question had been redesigned to make the questions more user friendly for this patient group.

Spire

The contract was still being negotiated with Spire.

Quality

Training levels not on target due to the Spire financial year. There were no other exceptions to report.

YAS

No further information to highlight.

Quality

YAS have a new Occupational Health Provider in place and the process for analysing complaints in the local quality group was outlined. No other exceptions reported.

Thames Ambulance Service

The performance information will be included within the September report, as the information was now more accurate following considerable data cleansing work with TASL.

Quality

TASL were re-inspected by the CQC in May 2019. Inspection sites included Hull. TASL are awaiting the CQC report. No other exceptions to report.

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.

<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 Associate Director of Communication and Engagement would share the new Friends and Family paper work at HUTHT with the Head of Quality and Nursing.
(c)	The Committee requested that they see some trajectories and action plan at the next meeting for the Depression and Anxiety Service Let's Talk.
(d)	The committee requested further information to be included within the September report around the transfer of the Community Paediatrics service moving from CHCP to HUTHT.

7. MATERNITY SERVICES FORUM WORK PLAN UPDATE

The Strategic Lead for Children, Young People and Maternity/ Head of Midwifery and Chair of Hull Maternity Voices Partnership presented the Hull Maternity Voices Partnership: Annual Work Programme to endorse.

The purpose of this report was to update the Quality & Performance Committee on the work of the Hull Maternity Voices Partnership (MVP) Annual Work Programme 2018/19 and for the Committee to endorse the 2019/20 Annual Work Programme.

The Work Programme has been approved by the Hull MVP and was endorsed by the Humber Coast and Vale (HCV) Local Maternity System (LMS) on 09 July 2019.

The presentation was well received by the committee, which talked through the key successes and challenges of the service.

The committee felt that the work programme was not sufficiently outcomes-focused nor reflected fully the outcomes achieved. It was requested that the work programme be refined to reflect this and suggested that a full Hull MVP Annual Report be developed.

Level of Confidence
Hull CCG Process A HIGH level of confidence was given in Hull CCG due to there was evidence of progress. Where issues have been identified there are robust improvement plans in place.

Resolved

(a)	Quality and Performance Committee Members approved the Q3/ Q4 Safeguarding Report.
(b)	It was requested that the work programme be refined to reflect the changes suggested and that a full Hull MVP Annual Report be developed.

8. HEALTH WATCH ANNUAL REPORT

The Delivery Manager for Health Watch presented the Health Watch Annual Report to note.

J Stamp declared a Financial Interest in relation to agenda no. 14 as Chief Executive of North Bank Forum voluntary sector who were currently the host organisation for Health Watch in Hull. The declaration was noted - no further action was considered necessary.

Health Watch have changed the way they record their findings they now record by people they have spoken to at events.

Highlighted as key findings within the report was Hospitals were the most common theme that people were asking about at 32% due to the lack of clarification and communication coming from the hospitals. A big theme coming from patients this year was hospital security.

The Delivery manager from Health Watch will now start to attend the Primary Care Quality and Performance Sub Committee Meeting.

Level of Confidence
NHS Hull CCG
Process
A HIGH level of confidence was given in forecast budget expenditure.
A HIGH level of confidence was given in the Management of the budget.
Performance
A MEDIUM level of confidence was given in the Forecast Expenditure.

Resolved

(a)	Quality and Performance Committee Members noted the Health Watch Annual Report.
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9. PATIENT EXPERIENCE ANNUAL REPORT

This item was deferred to 24 September 2019.

10. LAC ANNUAL REPORT

The Designated Nurse for Safeguarding Children presented the LAC Annual report to Approve.

The Deputy Designated Nurse Safeguarding Children highlighted the achievements and challenges within the report. It was highlighted that the Designated Nurse for Looked after Children swapping roles with the Designated Nurse for Safeguarding Children in October 19.

It was noted that on page 13 of the report, the diagram was showing average percentage for the Looked after Children CAMH Attachment Service. The Designated Nurse for Safeguarding Children would check this was the correct way to present this data.

Level of Confidence
NHS Hull CCG
Process
A HIGH level of confidence was given in Hull CCG due to discharging its duties in relation to Looked after Children. There is a strong assurance process in place with strategic leadership of the Integrated Looked after Children and Care Leaver Health Forum.
Performance
A HIGH level of confidence was given in Hull CCG due to discharging its duties in relation to Looked after Children (LAC). Monitoring through the Integrated Looked after Children (ILAC) and Care Leaver Health Forum has resulted in improved performance of statutory requirements and a greater understanding of the health needs of Looked after Children.
CHCP
Process
A MEDIUM level of confidence was given in CHCP due to discharging its responsibilities to LAC owing to the recruitment challenges within the community paediatric service.
Performance
A MEDIUM level of confidence was given in CHCP due to discharging its responsibilities to LAC owing to the recruitment challenges within the community paediatric service.

Resolved

(a)	Quality and Performance Committee Members approved the LAC Annual Report.
(b)	The Deputy Designated Nurse Safeguarding Children would check that the

percentages are the correct way to show the data.

11. Q1 INFECTION, PREVENTION AND CONTROL

The Associate Medical Director presented the Q1 infection, prevention and Control report to discuss.

Highlighted within the report was

The C-diff target for April to June 19 was slightly above the trajectory. The question was posed who sets the trajectories and can the Bi team be involved in setting these from the beginning?

The team are currently awaiting the quality premium target for the E-Coli, HUTHT had reported 24 Trust apportioned cases of e-coli BSI this was a decrease of 4 cases reported at the end of quarter 1.

Level of Confidence
NHS Hull CCG
Process
A HIGH level of confidence was given for the interpretation of budget position & QIPP performance.
A HIGH level of confidence was given for the interpretation of prescribing quality.
Performance
A HIGH level of confidence was given for the forecast expenditure.
A HIGH level of confidence was given for the actual QIPP savings
A HIGH level of confidence was given for the practice performance within the extended medicines management scheme.
A HIGH level of confidence was given for the red drug prescribing charts.

Resolved

(a)	Quality and Performance Committee Members discussed the Q1 Infection, prevention and Control report.
(b)	The Associate Medical Director would find out who sets the trajectories for C-diff and if BI can be involved in this process.

12. Q4 PRESCRIBING REPORT

The Senior Medicines Optimisation Technician presented the Q4 prescribing report to note.

Highlighted within the report was –

Prescribing budget performance – the forecast expenditure performance for March 2019 was -9% (-£4,618,816).

Overall prescribing costs for Q4 2018/2019 – GP practice prescribing costs for NHS Hull CCG has grown by -1.9% (£-905,903) for April 2018 to March 2019 compared to the same period last year, this is above the England average cost growth of -2.72% and Yorkshire and Humber average cost growth of -2.57%.

Hull had consistently maintained its position similar to Barnsley and Wakefield, (Hull’s comparator CCGs in the Yorkshire and Humber area) in this quarter and in previous years.

It was highlighted in the report that drugs used in diabetes had seen an increase a discussion took place and it was agreed that would have been due to the fact that patients were finding out earlier due to all the work taking place around diabetes.

There was also showing an increase spend in vitamins, currently patients are being reviewed who have vitamins on prescription and are being stopped. It was agreed that the Senior Optimisation Technician would check if GP's have to check if patients have been seen by a dietitian before being prescribed with vitamins.

Figure 4 – Prescribing indicators January 19 to March 19, the Committee requested that this table would be shown in Primary Care Networks for the next report.

Resolved

(a)	Quality and Performance Committee noted the Q4 Prescribing Report
(b)	The Senior Medicines Optimisation Technician would find out if GP's have to check that patients have seen a dietitian before being prescribed vitamins.

13. CONTROLLED DRUGS ANNUAL REPORT

The Senior Medicines Optimisation Technician presented the Controlled Drugs Annual report to note.

Highlighted within the report was.

6 incidents were reported directly to the CCG via the DATIX system and no serious incidents were reported. Learning was circulated across the Yorkshire & Humber region via the LIN. The accountable officers from local healthcare providers attend the six monthly LIN including HEYHT, Humber and CHCP.

The question was raised around who would be the named Lead for NHSE due to the Director of Quality and Clinical Governance/ Executive Nurse had now gone on secondment, would this still be the Director of Quality and Clinical Governance/ Executive Nurse.

Level of Confidence
NHS Hull CCG
Process
A HIGH level of confidence was given for the interpretation of prescribing data.
A HIGH level of confidence was given for the collation of incidents relating to controlled drugs.
Performance
A HIGH level of confidence was given for the representation on local intelligence network.
A HIGH level of confidence was given for the review of incidents/ issues.
A HIGH level of confidence was given for the sharing of learning from incidents/ issue reviews.

Resolved

(a)	Quality and Performance Committee noted the Controlled Drugs Annual Report.
(b)	The Associate Medical Director would check who the Lead for controls drugs would be due to the Director of Quality and Clinical Governance/ Executive Nurse now being on secondment.

14. SERIOUS INCIDENTS REPORT

The Head of Nursing and Quality presented the serious incidents report to consider.

Highlighted within the report was:-

HUTHT:

- Whilst it is positive that the Trust are reporting incidents, unfortunately there have been three never events reported during Q1.
- Failure to embed the learning from recurring themes inclusive of pressure ulcers.
- Concerns regarding the management and treatment of diabetic patients (including maternity).
- Failure / delay to identify and act on abnormal test results (including diagnostics).
- Failure to follow guidance has been identified as a theme running through various category type incidents and is not localised to one particular area but is Trust wide.

HTFT:

- Recurring themes of poor documentation
- Failure to either undertake accurate or review risk assessments and communication between teams.

CHCP:

- Failure to embed the identified learning, specifically in relation to pressure damage within the community nursing teams. Recurring themes are evident in this area inclusive of the identification and management of wounds, undertaking a holistic review of patients and poor documentation.
- Failure to recognise safeguarding concerns

Spire:

- Delay in the submission of the never event investigation reported during Q4.

A discussion took place around the ratings that were given for the serious incidents report, the Head of Nursing and Quality would check with the Quality & Patient Safety Lead to check that when writing the narrative that it matches the rating given.

Level of Confidence
NHS Hull CCG Process A HIGH level of confidence was given in the Hull CCG due to having an effective management process in place for SIs with its main providers. Significant level of assurance following the last internal audit.
Performance Hull University Teaching Hospitals NHS Trust A LOW level of confidence was given in the Hull Teaching Hospitals NHS Trust due to the trust had declared three never events during Q1; removal of wrong tooth, a misplaced naso-gastric tube and a retained throat swab post-surgery. There are concerns in the following areas: <ul style="list-style-type: none">• Lack of embedding of learning particularly in relation to pressure ulcers.• Recurring themes of failure to act on abnormal results / failure or delay to follow up.• Treatment and management of diabetic patients (including maternity).• Failure to follow guidance (including maternity services).

<p>Humber NHS Foundation Trust</p> <p>A MEDIUM level of confidence was given in Humber NHS Foundation Trust due to The failure to undertake accurate or appropriate reviews of risk assessments and poor / inadequate documentation continues to be a theme identified in a significant proportion of the Trusts investigation reports. The concerns were appropriately escalated to and are being monitored via the quality forum.</p>
<p>City Health care Partnership</p> <p>A LOW level of confidence was given due to City Health Care Partnership (CHCP): While there has been a noticeable improvement in the overall management of its SI process following the development of an improvement plan there are concerns relating to a failure to embed the identified learning, specifically in relation to pressure damage within the community nursing teams. Recurring themes are evident in this area inclusive of the identification and treatment of wounds, undertaking a holistic review of patients and poor documentation.</p> <p>The organisation has been asked to resubmit its last pressure ulcer investigation report and to undertake a thematic review of the service inclusive of SIs, incidents and complaints which is to be presented at both the SI panel and quality arenas.</p>
<p>Spire Hull and East Riding</p> <p>A MEDIUM level of confidence was given due to No SIs have been reported during Q1. The never event report remains outstanding due to delays in obtaining information from an acute Trust as the patient would not give consent. The report is currently with the organisations legal department awaiting sign off. The organisation did not communicate timely that the report was not going to be submitted on time. This incident occurred in 2016 and was only recently identified due to patient presenting with symptoms. The organisation has already made improvements in a theatre checklist since this incident occurred.</p>
<p>Primary Care</p> <p>A LOW level of confidence was given due to: The SI reported during Q4, related to IT issues / accessing clinical systems was subsequently de-logged due to the incident no longer meeting the threshold. There has been positive engagement with primary care in a number of end to end reviews recently undertaken, of which some have been following other provider's serious incident investigations. This level should remain low until such a time that there is evidence that SIs and subsequent requirement to report and investigate as per national framework (2015) is achieved.</p>
<p>Hull CCG</p> <p>A HIGH level of confidence was given due to appropriate SIs are identified and reported as SIs as evidenced in this report.</p>

Resolved

(a)	Quality and Performance Committee considered the Serious Incidents report.
(b)	The Head of Quality and Nursing would check with the Quality & Patient Safety Lead that when writing the narrative for the report it matches the rating.

15. ANNUAL PROVIDER QUALITY ASSURANCE VISITS REPORT

The Head of Nursing and Quality presented the Annual Provider Quality Assurance Visits report to consider.

The overall outcome from the provider quality assurance visits undertaken during 2018/19 was positive. A number of recommendations were made for each provider visited.

The majority of the recommendations are either fully implemented, with a small number still in progress. There are some positive examples of patient safety and service improvement detailed within the report as a result of the recommendations made to the providers following completion of the visits.

Level of Confidence
NHS Hull CCG Process A HIGH level of confidence was given in the Hull CCG due to having an effective management process in place for identifying and undertaking provider quality assurance visits and monitoring of subsequent actions.

Resolved

(a)	Quality and Performance Committee considered the Annual provider Quality Assurance visits report.
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16. QUALITY BOARD REPORT

The Consultant in Public Health Medicine/ Associate Medical Director presented the Quality Board Report to note.

The report highlighted the improved levels of engagement between providers of Homecare services and the Local Authority commissioners which has led to an improvement in quality of reporting. The report also described the risks and mitigations that the Adult Social Care commissioners are managing in terms of Homecare and Residential and Nursing Care.

An update was provided around the implementation of the Quality Framework that has been co-developed by the CCG and Adult Social Care Quality and Compliance Team, including the incorporation of relevant NICE Quality Standards. This has been delayed due to the governance processes within the Local Authority, but was anticipated to be implemented across the City in Q3, with the first reports being available to the Board in Q4.

An update was given regarding one residential/ nursing care provider in the City that was being closely monitored and a suspension in place. Patients are safe and a number of meetings had taken place since this report was written and the suspension had now been relaxed.

Resolved

(a)	Quality and Performance Committee Members noted the Quality Board report.
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17. QUALITY ACCOUNTS

The Head of Nursing and Quality presented the Quality Accounts 2018/ 19 report to note.

The Quality and Performance Committee noted the Quality Accounts 2018/ 19 Report.

Level of Confidence
NHS Hull CCG Process A HIGH level of confidence was given in accordance with The Health Act 2009, the Department of Health expect the CCG to provide a statement of no more than 500 words for inclusion in the CCG Quality Account. The CCG will take reasonable steps to check the accuracy of data provided in the Quality

Account against any information they have been supplied during the year (e.g. as part of a provider's contractual obligations) and provide a statement, to be included in the organisation's Quality Account.

Performance

A **HIGH** level of confidence was given in NHS Hull CCG has completed the review of each provider's Quality Account and supplied a statement signed by the Chief Officer within the required timescale

Resolved

(a)	Quality and Performance Committee Members noted the Quality Accounts.
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18. EQUALITY AND DIVERSITY REPORT

This item was deferred to 24 September 2019.

19. HULL AND EAST RIDING NURSING AND MIDWIFERY STRATEGY FINAL REPORT MAY 2019

The Quality and Performance Committee took the Hull and East Riding Nursing and Midwifery strategy final report May 2019 for information.

20. DEEP DIVE AGENDA ITEMS

A discussion took place around the deep dives as they are yet to take place this year, it was suggested the Deputy Director of Quality and Clinical Governance and the Head of Nursing and Quality would meet outside of the meeting to discuss them going forward.

Resolved

(a)	The Deputy Director of Quality and Clinical Governance/ Lead Nurse and the Head of Nursing and Quality would meet outside of the meeting to discuss deep dives going forward.
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21. ANY ISSUES TO GO TO THE PLANNING AND COMMISSIONING COMMITTEE

No issues were to go to the Planning & Commissioning Committee.

Resolved

(a)	No issues were to go to the Planning & Commissioning Committee.
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22. MINUTES FROM PLANNING AND COMMISSIONING 3 MAY 19 AND 7 JUNE 19

The Minutes of the meeting held on 3 May 2019 and 7 June 2019 were submitted for information and taken as read.

23. 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

24. ANY OTHER BUSINESS

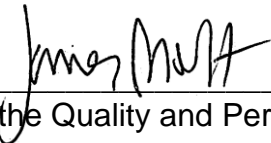
No other business was discussed

25. CHAIR'S UPDATE REPORT

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

26. DATE AND TIME OF NEXT MEETING

The next meeting of the Q&PC would be held on Tuesday 23 July 2019, 9.00am – 12.00pm in the Boardroom at Wilberforce Court, Alfred Gelder Street, Hull

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

Date: 18 September 2019

GLOSSARY OF TERMS

BAF	Board Assurance Framework
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	Protected Time for Learning
Q&PC	Quality and Performance Committee
Q1	Quarter 1
QIPP	Quality, Innovation, Productivity and Prevention
YAS	Yorkshire Ambulance Service