

**Item: 6.1iv**

<b>Report to:</b>	NHS Hull CCG Board
<b>Date of Meeting:</b>	Friday 24 September 2021
<b>Title of Report:</b>	Quality & Performance Committee – Chair’s Annual Report 2020/21
<b>Presented by:</b>	Deborah Lowe. Deputy Director of Quality, Clinical Governance/Lead Nurse
<b>Author:</b>	James Moulton, Committee Chair Deborah Lowe. Deputy Director of Quality, Clinical Governance/Lead Nurse

**STATUS OF THE REPORT:**

To approve	<input checked="" type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input type="checkbox"/>		

**PURPOSE OF REPORT:**  
The purpose of this report is to update Board members with the progress of the work of the Quality & Performance (Q&P) Committee and provide details of how it has delivered against its terms of reference.

**LEVEL OF CONFIDENCE:**

PROCESS	R.A.G. RATING OF LEVEL OF CONFIDENCE
<p>That a high level of confidence exists for the way in which the Quality &amp; Performance Committee monitor the work programme under three discreet areas;</p> <ul style="list-style-type: none"> <li>• Strategic Development</li> <li>• System Development and Implementation</li> <li>• Performance Monitoring</li> </ul> <p>The Committee has ensured there were mechanisms and reporting systems in place to advise the Board of quality and performance management for contracted providers.</p>	<b>HIGH</b>
<b>PERFORMANCE</b>	

That an overall high level of confidence exists for the way in which the Q&P Committee has overseen the continued development, monitoring and reporting of performance outcome metrics in relation to quality improvement, financial performance and management plans. It has ensured the delivery of improved outcomes in relation to the CCGs agreed strategic priorities.

**HIGH**

**RECOMMENDATIONS:**

That the Committee receives this annual report as confirmation from evidence provided.

**REPORT EXEMPT FROM PUBLIC DISCLOSURE**

No  Yes

If yes, detail grounds for exemption

**CCG STRATEGIC OBJECTIVE** *(See guidance notes on page 4)*

*Short summary as to how the report links to the CCG's strategic objectives*

Links to Strategic Objectives 1 / 2 / 3 / 5 / 6 / 7 / 8 / 10 / 11 and 12

**IMPLICATIONS:** *(summary of key implications, including risks, associated with the paper),*

Finance	Report highlights the ways by which the Committee has ensured value for money in services commissioned by NHS Hull CCG.
HR	None
Quality	The report highlights the need to continued and robust monitoring and assurance in respect of constitutional targets and in maintaining the quality of commissioned patient services. The Quality and Performance Committee lead on the oversight of activity relating to safeguarding, patient safety, quality, and experience, reporting directly to the NHS Hull CCG Board.
Safety	Report highlights the ways by which the Committee has ensured steps are taken to ensure patient safety in services commissioned by NHS Hull CCG.

**ENGAGEMENT:** *(Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)*

**LEGAL ISSUES:** (*Summarise key legal issues / legislation relevant to the report*)

**EQUALITY AND DIVERSITY ISSUES:** (*summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). All reports relating to new services, changes to existing services or CCG strategies / policies must have a valid EIA and will not be received by the Committee if this is not appended to the report*)

	<b>Tick relevant box</b>
An Equality Impact Analysis/Assessment is not required for this report.	X
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

**THE NHS CONSTITUTION:** (*How the report supports the NHS Constitution*)

Report highlights the need for continued monitoring of NHS Constitution targets with regards to :

- Referral to treatment times
- Accident and Emergency waiting times
- Cancer waiting times
- Mental health measures

**Quality and Performance Committee  
Chair's Annual Report  
1 April 2020 to 31 March 2021**

**1. Introduction**

- 1.1 The purpose of this report is to provide NHS Hull CCG Board members with a position statement for the year 2020/2021. The report details the activity of the Quality and Performance (Q&P) Committee in respect of its delivery against the Terms of Reference.
- 1.2 This report is inclusive of all work of the Q&P Committee for the period of 1 April 2020 to 31 March 2021.
- 1.3 The Committee has been established since the inception of the Clinical Commissioning Group (CCG) as a formal sub-committee of the NHS Hull CCG Board. For the purposes of this report, the term Committee will be used throughout.

**2. Membership and Role of the Quality and Performance Committee**

- 2.1 The Members, and details of their attendance at the Committee are provided in Appendix 1.
- 2.2 Dr James Moulton is the appointed Chair with Jason Stamp as the Vice Chair.
- 2.3 During this period, all 9 out of 9 meetings have been quorate. A detailed breakdown of attendance can be found in Appendix 1.
- 2.4 The Terms of Reference of the Committee are reviewed annually with changes having been made within the reporting year to the frequency of the meeting. The Quality and Performance Committee now meeting bi-monthly.
- 2.5 The work programme of the Committee is managed under three focus areas within the work-plan and agenda, as follows:
- Strategic Development
  - System Development and Implementation
  - Performance Monitoring
- 2.6 The Committee provide assurance in respect of the management of clinical risk through review the within each meeting, inclusive of the risk register and the submission of the meeting minutes to Integrated Audit and Governance Committee.
- 2.7 The Committee is directly accountable to the CCG Board for overseeing and providing an opinion of confidence (Low, Moderate or High) to the CCG Board.
- 2.8 The Q&P Committee continued to provide bi-monthly integrated quality, performance, and contract reports to the Board, ensuring an integrated assessment of local providers. The report routinely covers the main providers and gives an overview of the quality of services commissioned including patient outcomes. The report highlighted areas of concern related to patient safety, quality and experience.

### 3 Strategic Development

- 3.1 In respect of strategic development the Committee clinical members, lay members, public health colleagues and CCG management teams have worked in line with the Quality Assurance Framework and undertaken the following activity during this reporting period:
- 3.2 Monitored and reported against the Commissioning for Quality Strategy at each meeting, by assessing the process and performance of each provider at Quality Delivery Groups / Clinical Quality Forums. This has provided assurance to the Committee and the Board against the quality strategic objectives and CCG objectives.
- 3.3 The committee received the Annual Report for Safeguarding Adults and Children in June 2020. The reports demonstrated how the CCG and commissioned providers are fulfilling legislative duties in relation to safeguarding and adults. The report particularly highlighted the progress made in establishing the Hull Children`s Safeguarding Partnership and provided assurances that appropriate action was being taken to ensure that NHS Hull CCG is undertaking its statutory responsibilities under the Children and Social Work Act 2017. The report also focussed upon looked After Children and confirmed the separation and arrangements in place for Child Death Reviews with the formation of a new Executive Board. Within the report a recommendation was made that a Safeguarding Assurance Group (SAG) would be established which was implemented accordingly.
- 3.4 Received the Designated Clinical Officer for SEND presented the SEND Annual Report 2019/20 in September 2020. Assurance we given to the committee that the Designated Clinical Officer for Special Educational Needs and Disability (SEND) is working with all partners to ensure that the CCG is meeting its statutory responsibilities in respect of all children and young people in Hull with SEND (0-25 years old) and that professionals from Education, Health and Social Care continue work together closely to ensure children and young people from ages 0-25 years with special educational need and/or disability have the support they need to achieve their identified outcomes.
- 3.5 The Committee signed off the 2019/20 Commissioning for Quality and Innovation (CQUIN) schemes for integration into contracts for commissioned services in June 2020. Acknowledging the "Revised arrangements for NHS contracting and payment during the COVID-19 pandemic" the committee confirmed receipt of the letter dated 26 March 2020 and subsequently on 1 July 2020, this included guidance from NHS England advising Commissioners that the operation of CQUIN (both CCG and specialised) for Trusts will be suspended. Therefore, no CQUIN schemes have been progressed for 2020/21.
- 3.6 The Research and Development Annual Report was received in June 2020, this detailing the work completed in the previous year. The report provided Hull CCG maintains and develops its statutory duties to 'promote research, innovation and the use of research evidence'. A further update report having been received in November 2020 which considered the Research and Development response to the COVID 19 pandemic and the proposed RESTART framework for non-COVID studies. The report provided an update against all the current studies that are funded by Hull CCG including what challenges Covid-19 has brought to these.
- 3.7 The Controlled Drugs Annual report was received in September 2020, the Medicines Optimisation Pharmacist presented within the report all controlled drug schedules and confirming an opioid prescribing volume indicator was introduced as part of the 2019/2020 GP practice enhanced service - Extended Medicines Management Scheme; with the aim to reduce the volume of opioids prescribed in Hull CCG. This prescribing indicator will continue into 2020/2021. The report highlighting the CCGs introduction and implementation and of the

Campaign to Reduce Opioid Prescribing (CROP) project in 2019/2020 and this project will continue into 2020/2021.

- 3.8 The committee Healthwatch Annual Report in November 2020, presented by the Deputy Director of Quality/Lead Nurse on behalf of Healthwatch. The Committee accepted the report and requested the attendance of the Delivery Manager for future reporting.
- 3.9 The Committee reviewed the Infection Prevention and Control Annual Report in December 2020, presented by the Infection, Prevention and Control Lead. The report highlighted that the Infection, Prevention and Control annual report was later in the year than previous years, and this was due to COVID-19 pressures and provided assurance in respect of the arrangements are in place and that the service was making continued progress in reducing the risk of Health Care Associated Infection (HCAI) whilst equally highlighting the work undertaken by the team in response to the COVID-19 pandemic.
- 3.10 The Committee received the Out of Area Placements paper in November 2020. The report providing assurance to the Quality and Performance Committee on the current position regarding out of area placements / bed usage. The report provided a current situation update, for all beds commissioned as part of the Humber Teaching NHS Foundation Trust contracts and for those cases directly commissioned in services out of area. The report was set out in three areas Acquired Brain injury, Transforming Care and Complex Adult/ Older people Mental Health.
- 3.11 The committee have throughout the past year received regular reporting on the CCG's roles and responsibilities within the COVID-19 pandemic. The committee have gained assurance on the reactive and proactive response for both employees of the CCG and for the population of Hull and those using the health services.

#### **4 System Development and Implementation**

In maintaining assurance and improvements in system working and development, the Committee has:

- 4.1 Ensured the CCG has robust systems for quality improvement and clinical governance in place in line with statutory requirements, national policy and guidance and that quality, clinical governance and Value for Money (VFM). Issues have been appropriately addressed in all service developments / reconfiguration of services. These requirements have been met by:
- 4.2 Engaging with providers on quality assurance however due to the COVID-19 Pandemic no direct visits to services having taken place during this reporting period.
- 4.3 The CCG has working in partnership with Hull City Council to implement NICE standards in care homes via a Quality Board and in supporting the COVID response to care homes through newly established forums. This including dedicated support in respect of Infection, prevention and control measures and the training of staff, accessing equipment and in supporting homes with outbreaks. The CCG has taken an unprecedented proactive role throughout the year in progressing the Enhanced Offer into Care homes, supporting discharge from hospital, use of technology and in respect of both testing and vaccination programmes.
- 4.3.1 Monitored the transformation programmes including both national and local programmes of improvements in services both in response to ongoing transformation and in managing pathways during the pandemic period. This including changes to discharge legislation, the increased provision of community bedded services and in equally the maintaining the wider strategic vision for services including the Transforming Care Programme.

- 4.3.2 Receiving the Quality Account submissions in December 2020 and from all the CCG major providers in accordance with the Health and Social Care Act 2012. A paper acknowledged the delayed reporting due to the COVID-19 pandemic and the agreed reporting timeframes. The paper providing assurances to the Committee on compliance with statutory requirements.
- 4.3.3 Identified and built on good practice, shared experience, expertise and successes in relation to quality and Value for Money (VFM) with other commissioners and providers.
- 4.3.4 Reviewed the Board Assurance Framework and Risk Register which is now reviewed within each meeting.
- 4.3.5 Reviewed the NHS Hull CCG Equality and Diversity Plan, associated objectives and the action plan and noted the activities undertaken with the CCG Equality and Diversity programme.

## **5 Performance Monitoring**

- 5.1 The committee has monitored and reported on the quality, performance and Value for Money (VFM) of contracted services ensuring remedial actions are taken as appropriate to address significant service issues. This has included the oversight of contractual levers and advising on the point of escalation.
- 5.2 The committee has received regular updates and assurance on Medicine Management, Infection Control and Controlled Drugs Management. The medicines Optimisation team from North of England Commissioning Support (NECS) having reported upon key achievements over the past year.
- 5.3 The committee has ensured that service providers are fulfilling their statutory requirements with regards to Infection Prevention and Control (IPC). The IPC Lead Nurse hosted by NHS East Riding of Yorkshire CCG has continued to strategic leadership and specialist advice to the CCG, provided expert advice to drive service improvements and compliance with standards and practices across the Hull health care economy. The IPC Lead Nurse has also supported the CCG in developing new local targets for MSSA infection and eColi infection in the absence of national targets and been integral to the COVID-19 pandemic response.
- 5.4 The Committee has received quarterly reports on Serious Incidents (SIs) and Never Events. The Committee has monitored performance of provider SIs and Never Events, ensuring lessons learnt are shared and learning disseminated. SI review panels form part of the process where completed provider SI investigation reports are reviewed. To further enhance this process within the year the CCG now has representation on the HUTHT internal serious incident panel.
- 5.6 The Committee has reviewed incidents, complaints and Patient Advice and Liaison Service (PALS) to ensure lessons learnt and in ensuring learning were disseminated to improve patient experience. To further enhance this the CCG PALS officer now also attend the HUTHT internal Patient Experience meeting.
- 5.7 The committee has monitored the reports of the Research and Development (R&D) Steering group which ensured:
- The CCG promoted opportunities for high quality and relevant research.
  - That good research led to innovation and provided a strong evidence base for clinical decision making.
  - The promotion and conduct of research were embedded in Hull CCG.
  - A developing and evolving knowledge base was established to improve health outcomes and reduce inequalities.

## **6. Summary**

The Quality and Performance Committee can confirm from evidence provided throughout the year and in this annual report that the CCG Board can be provided with a high level of assurance that the quality and patient safety related business is in line with the CCG organisational objectives.

The Committee has taken responsibility for leadership on behalf of the Board ensuring there were mechanisms and reporting systems in place to advise the Board of quality and performance management for contracted providers and that remedial action plans were developed and implemented.

The Committee oversaw the continued development, monitoring and reporting of performance outcome metrics in relation to the quality improvement, financial performance and management plans. It has ensured the delivery of improved outcomes for patients in relation to the CCGs agreed strategic priorities.

**James Moulton**  
**Chair of the Quality and Performance Committee**  
**September 2021**



## Appendix One – Q&P Attendance List

DATE OF MEETING	21/04/20	19/05/20	23/06/20	21/07/20	22/09/20	20/10/20	17/11/20	11/12/20	19/02/21
<b>MEMBERSHIP</b>									
CCG Board GP Member - Chair	√	√	√	√	√	X	√	√	√
Lay Member - Vice Chair	√	√	√	√	√	√	√	√	√
Director of Quality and Clinical Governance/Executive Nurse / Interim Director of Nursing and Quality or their Senior Clinical	*D	*D	D	D	√	D	√	√	√
Deputy Director of Quality and Clinical Governance/Lead Nurse / Deputy Director of Nursing and Quality	√	√	√	√	√	X	√	√	√
Deputy Director of Commissioning	√	√	√	√	√	√	√	√	√
The Deputy Chief Finance Officer – Contracts, Performance, Procurement and Programme Delivery or a senior representative / Deputy Chief Finance Officer	D	D	D	D	D	D	D	D	D
Associate Director of Communications and Engagement or representative of Patient Experience and Engagement / Associate Director of Communications and Engagement	√	√	√	√	√	√	X	√	√
Public Health Representative / Associate Medical Director	√	√	√	√	√	√	√	√	X
Secondary Care Doctor	X	√	√	X	X	√	√	√	√
<b>Membership as per Terms of Reference published on the CCG website</b>									
<b>KEY</b>									
	Was not a member at the time								
	Extraordinary Meeting								
	Not Quorate								
Apologies submitted D = Deputy Present									
X not in attendance									
√ in attendance									
* Post Vacant									

## **Glossary of Terms**

***The use of abbreviations and acronyms should be kept to a minimum. If it is necessary to use them please ensure that a full description is provided when first used and add a Glossary at the end of the report.***

ADHD	Attention Deficit Hyperactivity Disorder
BAF	Board Assurance Framework
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
C diff	Clostridium difficile
CHCP	City Health Care Partnership
COVID19	Coronavirus 2019
CQC	Care Quality Commission
CQF	Clinical Quality Forum
CQUIN	Commissioning for Quality and Innovation
eColi	Escherichia coli
FFT	Friends and Family Test
HEYHT	Hull and East Yorkshire Hospitals NHS Trust
HSAB	Hull Safeguarding Adults Board
HSCB	Hull Safeguarding Children's Board
HSIB	Healthcare Safety Investigation Branch
Hull CCG	Hull Clinical Commissioning Group
HUTH	Hull University Teaching Hospital
HYMS	Hull York Medical School
IPC	Infection, Prevention and Control
LAC	Looked After Children
LeDeR	Learning Disability Death Reviews
MRSA	Methicillin Resistant Staphylococcus Aureus
NECS	North East Commissioning Support Unit
NHS	National Health Service
NHSE	NHS England
PALS	Patient Advice and Liaison Service
PCQ&PSB	Primary Care Quality and Performance Sub Committee
PTL	Protected Time for Learning
Q&P	Quality and Performance
Q&PC	Quality and Performance Committee
Q1	Quarter 1
Q2	Quarter 2
Q3	Quarter 3
Q4	Quarter 4
QIPP	Quality, Innovation, Productivity and Prevention
RTT	Referral to Treatment Times
SI	Serious Incidents
SALT	Speech & Language Therapy
STP	Sustainability & Transformation Plan
TASL	Thames Ambulance Service Limited
VFM	Value for Money
YAS	Yorkshire Ambulance Service