

Minutes of the Quality & Safety Committee
Tuesday 14th August 2018 at 10.30am in the CCG Main Meeting Room

PRESENT:

Dr R Rajcholan – WCCG Board Member (**Chair**)
Sally Roberts – Chief Nurse and Director of Quality, WCCG
Mike Hastings – Director of Operations
Nicola Hough – Minute Taker – Administrative Officer (PA to Chief Nurse and Director of Quality)
Yvonne Higgins – Deputy Chief Nurse

Lay Members:

Jim Oatridge – Deputy Chair - Lay Member
Sue McKie – Patient/Public Involvement – Lay Member
Peter Price – Independent Member – Lay Member

In attendance (part):

Fiona Brennan – Designated Nurse for Looked After Children
Liz Corrigan – Primary Care Quality Assurance and Practice Development Co-ordinator
Molly Henriques-Dillon – Quality Nurse Team Leader
Tracey Jones – Quality Nurse Advisor
Annette Lawrence – Designated Adult Safeguarding Lead
Sukvinder Sandhar – Deputy Head of Medicine Optimisation

APOLOGIES:

Marlene Lambeth – Patient Representative
Dr Ankush Mittal – Consultant in Public Health, City of Wolverhampton Council

QSC/18/022 Apologies and Introductions

Apologies were received and noted as above and introductions took place.

QSC/18/023 Declarations of Interest

Ms McKie advised that she is involved with an agency in Walsall; working with Wolverhampton and Walsall Public Health reviewing Child Deaths and this will be for two days per week.

QSC/18/024 Minutes, Actions and Matters Arising from Previous Meeting

QSC/18/024.1 Minutes from the meeting held on 10th July 2018 (Enclosure 1)

The minutes from the meeting which was held on 10th July 2018 were read and agreed as a true record.

QSC/18/024.2 Action Log from meeting held on 10th July 2018 (Enclosure 2)

QSC/18/015.2 - Action Log - To send a message around corporately about not accepting late papers.

It was confirmed that this had been undertaken following the last meeting.

CLOSED

QSC/18/015.2 - Items for Consideration - To check with IT to see if the iPads could be an IT solution to the WHO checklist and report back to the Committee.

Mr Hastings confirmed that he had spoken to Mr Simon Parton at the Trust around the functionality on the system who confirmed that the team use an electronic WHO checklist but not in real time. He added that this was an Infection Control issue; but there were ways of getting around it, he was aware that Sandwell used wipe clean keyboards.

Mrs Roberts commented that it might be worth progressing and suggested to pick it up at CQRM.

ACTION: Mrs Roberts

QSC/18/015.2 - Items for Consideration: CQC update - To give an update on inspections that had taken place on the VI practices on 5th July 2018 in September 2018.

Mr Hastings stated that he had spoken to the Trust and that the CQC feedback they received was very good across the Board.

Ms McKie asked about Healthwatch and asked if the information is triangulated.

Mrs Roberts commented that the information should be shown on the dashboard and suggested that Ms Higgins should meet with Ms Tracy Creswell.

ACTION: Ms Higgins

QSC/18/016.3 - Quality Annual Report - To chase the Nuffield Hospital Never Event final RCA.

Ms Higgins confirmed that this had been received and is now closed.

CLOSED

QSC071 - H&S Performance Report.

Mrs Roberts advised that the University can provide this function going forward, however each team need to identify leads and a draft proposal will be taken to a meeting in October.

ACTION: Mrs Roberts

Mr Oatridge commented on GPs surgery and that some are VIs and wondered if we would be able to show sub set and as to who holds the contracts.

Mr Hastings commented that the GPs hold the contracts and they are held to account; they are doing a report of all four models through the Primary Care Commissioning meeting as they have also received a request for another report from NHSE so they will do one to incorporate all the details required.

Mr Oatridge enquired as to whether this would affect how we report to Quality and Safety.

Mrs Roberts advised that this would be discussed on the Primary Care report as there was some learning identified.

Mrs Corrigan joined the meeting.

QSC/18/017.1 - Quality and Safety Risk Register: To review the Risk Register.

This meeting has taken place and the Risk Register updated accordingly.

CLOSED

QSC/18/024.3 Matters Arising

There were no matters arising.

QSC/18/025 Assurance Reports

QSC/18/025.1 Quality Report including Primary Care and Care Home Report (Enclosure 3)

Ms Higgins presented the Monthly Quality Report including Primary Care Report and advised that this would be the last report of this style as she was hopeful that the next report should be dashboard style.

Vocare – They are continuing to make progress; the improvement board has now been stepped down and joint triage is taking place between Vocare and the Trust. They are having more staff commencing in September so will have more effective working; the relationship between partners is improving.

Mrs Roberts added that there is now a weekly meeting between RWT and Vocare.

Mr Price queried the management side and wondered if they were to be moved elsewhere to another pressured area what would happen then.

Mrs Roberts stated that they are watching and will actively manage it.

Urgent Care – Ms Higgins advised that an issue arose this week with regards to the Phoenix Centre as she had received an alert from Staffs; they are not getting letters from Phoenix; on checking it was only out of area patients that are affected and there was a delay in the electronic correspondence.

Cancer – The Trust is an outlier for 104 and 62 days wait; this may impact on quality of care; they have reviewed the harm review process and have had an initial meeting which needs to have clinical inclusion. IST review is being undertaken and this is focussing on urology; they are recommending the Urology one stop shop.

Ms Henriques-Dillon and Ms Jones joined the meeting.

Ms Higgins advised that they are still having weekly cancer calls.

Mrs Roberts added that the CCG had met with NHSE with the trust present; the meeting went well and there was recognition of close working and the impact is negligible. The referral wait is up 12-18% with some key pieces of work highlighted around the urology pathway. The Cancer Alliance is supporting the one stop diagnostic work; the clinicians are leading and owning it. The weekly phone calls have been now escalated with a monthly face-to-face meeting as well as the weekly calls. Mrs Roberts advised that she will chair this meeting; they are on escalation and Mr Paul Tully is leading on some work across the STP with performance being the initial issue.

Dr Rajcholan asked about the harm review process and whether they were using a harmonised approach.

Mrs Roberts replied that yes they are.

Ms Higgins stated that some GP expertise and involvement would further strengthen the process.

Dr Rajcholan commented that with regards to urology; the Trust had visited Leeds and a lot of learning came from that and asked if the Trust had got Think Tank at the moment.

Mrs Roberts replied that no they had not at the moment and added that there was around a 62 day wait and that there is some additional support.

Maternity – Ms Higgins advised that with regards to the latest Never Event in Maternity, she and Mrs Roberts had walked the Maternity pathway and she had also visited the Neo Natal Unit (NNU). With regards to the breast milk incident, RWT has now got robust actions and she will revisit in a couple of weeks. With regards to the Birth Plus Rate report it is currently at 1:29 with a slight improvement on 1:30 the Trust has recruited additional midwives to start September 2018 and there are currently no vacancies, the rate needs to be at 1:28 and they will hopefully achieve this by September 2018.

Friends and Family Test (FFT) - Mrs Roberts commented that she wanted to flag the rate and the women's experience (83/100). Choices in maternity services; they are working on the LMS plans. The maternal rate of smoking; the CCG is working with this and will ask Ms Sandra Smith for an update for the next meeting.

ACTION: Mrs Roberts

Mortality – Ms Higgins advised that the latest SHMI for January 2017 to December 2017 had risen to 119. The Trust had written to CQC regarding the Dr Foster alert for pneumonia and stroke. Mrs Roberts attended the recent operational Mortality meeting at RWT and we have commenced a system wide approach for mortality reduction; the Trust has got some expert external support.

Mrs Roberts stated that the external support was Stan Silverman she added that she had met with him and the trust a couple of weeks ago and he was going to be a critical reviewer. She advised that the MORAG meeting had been stepped down and felt that the operational meeting was much improved. There was an improvement plan that supports this work. Dr Mittal (Public Health) was also working on Wolverhampton city wide Mortality.

Ms McKie asked why the risk was amber and not red as the SHMI is rising.

Mrs Roberts **agreed** to change this to red.

ACTION: Mrs Roberts

Ms McKie also asked about infant mortality.

Mrs Roberts advised that Healthwatch are looking to commission work around mortality and they would include them as part of the work on this; she added that they are proactive with Health and Wellbeing with a paper expected to Board in November.

Never Events – There were no further Never Events reported.

Within Black Country Partnership NHS Trust there were concerns around two inpatient issues and there was a query around increased pressure. She advised that a collaborative unannounced visit would be undertaken.

Probert Court – Ms Higgins advised that they provide step down and step up provision and there were a number of quality concerns raised. CQC have undertaken a visit and raised a few issues; there were concerns raised around care planning. Probert Court have a number of safeguarding issues RE: falls. She added that they have a meeting planned.

Mrs Roberts commented that Probert Court have recruited a clinical lead and added that there was no deputy; these patients are vulnerable as recently discharged from hospital and at risk and there is a high reliance on agency staff; the team from Accord are in Probert Court at the moment. Mrs Roberts advised that they need to consider Winter pressures.

Dr Rajcholan asked if there were Safeguarding issues.

Ms Henriques-Dillon replied that yes there were Safeguarding issues.

Mr Price enquired as to whether this issue would be added to the Risk Register following this afternoons meeting.

Ms Higgins replied that it will go on the Risk Register if needed.

Mrs Roberts stated that they had received enormous support last year.

Ms Lawrence and Ms Brennan joined the meeting.

Factory identified an outbreak of TB – Ms Higgins advised that there had been some positive screenings and a decision has been made to screen all employees; which equates to 100 staff and screening was been undertaken today and tomorrow to see how many were positive; this would have an impact on RWT and added that there was a teleconference next week.

Mr Strickland joined the meeting.

Primary Care Report

Infection Prevention and Control –There had been an issue with Warstones and Coalway Road where it was the physical environment with regards to the décor, damaged plaster, carpet tiles etc. she added that both practices were VI, that they were working with the VI team and the action plan will be updated within a month

Flu Programme – NHSE had asked the CCG to complete a spreadsheet for over 65 year olds; some practices had not ordered the correct vaccinations, there are currently monthly Primary Care flu meetings taking place and it is on the Risk Register; there are some practices that have over ordered so have some extra stock.

Child Health Team – There is cover for various child stages; they had vaccines counted in the uptake; this will be discussed at the Practice Makes Perfect (PN Forum) and Mary Porter from Child Health Records will be attending the session on 13th September 2018 as they need to make sure that children have vaccinations on time.

Cancer screening – There is ongoing work taking place around this.

Post meeting note: Below was an update provided after the meeting.

Annual Cancer Screening Coverage (%) by Local Authority

Indicator	Lower threshold ¹	Standard ²	Geography	2010	2011	2012	2013	2014	2015	2016
2.20i - Cancer screening coverage - breast cancer (%)	70	80	Wolverhampton	72.9	72.9	71.0	70.3	70.4	71.9	71.2
			England	76.9	77.1	76.9	76.3	75.9	75.4	75.5
2.20ii - Cancer screening coverage - cervical cancer (%)	75	80	Wolverhampton	74.1	72.9	72.0	70.6	70.5	69.4	68.1
			England	75.5	75.7	75.4	73.9	74.2	73.5	72.7
2.20iii - Cancer screening coverage - bowel cancer (%)	55	60	Wolverhampton						52.9	52.0
			England						57.1	57.9

Source: PHOF, PHE

Key:

	Significantly better than the national average
	Similar to national average
	Significantly worse than the national average

¹ Lower threshold based on the 2017-18 Public Health Functions Agreement

² Standard is the clinical standard required to control disease and ensure patient safety.

Serious Incidents – Mrs Corrigan advised that the report stated that there was one Serious Incident; however, it has since been reviewed and it was found not to be a SI.

Quality Matters – These are now recorded on Datix which is easier to monitor; they are looking at themes; there was an issue on Baby weighing clinic which has gone back to LMC; the concern was that GPs hadn't got access to the Baby clinic; this was an ongoing issue to pick up.

Practice in Wolverhampton – There was an issue with a practice who had been in transition from VI. MGS medical practice; there has been a number of meetings between

the CCG and practice where they have produced an action plan and is on the Risk Register.

Ms Higgins added that the team think this is unique to this practice and is related to working with locum GPs.

Mrs Corrigan stated that they had identified 150 referrals that were outstanding and she had been into every patient's record and had identified a number of them that had already been referred or discharged. With regards to Mental Health referrals; there was an issue around the pathway of the number of urgent and non-urgent (red rated) there was no evidence that they had been picked up; she was expecting an update by the end of this week.

Coloscopy – There had been a query raised where a patient had not been referred following a smear.

Dr Rajcholan enquired whether there were any fast tracked patients out of the 100+ patients.

Mrs Corrigan replied that there were none.

Ms Higgins asked if there were identified for any harm related issues.

Mrs Corrigan replied that there was probably one which had been investigated who had heart issues; the patient has since died and they are working with the family and RWT.

Mr Oatridge commented that the report looked like it was from our side; and asked about the patient and what potential harm was there.

Mrs Roberts advised that the Duty of Candour would be enacted if appropriate.

Docman issues – There were some issue for the Out of Hours and Accident and Emergency and they were unsure if it is an IT or a process issue.

Mrs Roberts commented that there were multiple strands; VI back to GMS; a deep dive is required and a RCA is needed; there may be some contract issues - a more comprehensive report around this practice is required and some deeper learning for us and RWT.

Discussions took place about Docman and that there had been two pieces of communication which had been sent out.

Mrs Corrigan commented that it would be the end of September when actions would be seen; will also look at Docman referrals. She added that Healthwatch are involved especially around the cardiology complaint and supporting from patient review.

Dr Rajcholan enquired as to how they record referrals.

Mrs Corrigan replied that they were sitting in a repository and it was unclear where they were; but on looking in patient's notes they were clearly there and added that some were new referrals.

Mr Oatridge wondered if that meant the patient would be aware or not.

Mr Hastings replied that the GP would let their admin know about a referral and it should be actioned within 3 days.

Mr Hastings commented that there were lot of issues with this practice and that he was aware of it he thought it could have been a lot worse. He advised that with regards to a Lessons Learned report there is an ongoing issue at the moment with NHS Protect.

Mrs Corrigan added that there are other issues around medication and he advised that an audit was being undertaken with an external company.

Mrs Roberts advised that the findings from this audit would report to the Audit Committee.

Friends and Family Test – Mrs Corrigan advised that the figures continue to improve month on month and they continue to submit due to electronic screening she added that they have now got a Friends and Family Policy in place and a practice has been offered support to help with submission.

NICE Assurance – There is a meeting due this month and Primary Care is linked with Peer reviews.

CQC – There are two practices that the CCG are supporting and she is currently awaiting a date to meet with the GP and Nurse.

Workforce – A Practice Nurse strategy is currently out for discussion

GP Forward View – They are looking at a Care Navigation and medical system which would free up GP time.

Mrs Corrigan left the meeting.

Care Home Report

Serious Incidents - Ms Henriques-Dillon advised that the number of Serious Incidents across the Care Homes were reducing with five being reported in Quarter 1 of which three were grade 3 Pressure Injuries, and two slips, trips and falls with fractures, she added that they will look at falls prevention interventions again.

Ms Henriques-Dillon advised that she is working with Public Health around oral health.

Dr Rajcholan asked if they have any dental plans.

Ms Henriques-Dillon replied that NHSE had withdrawn the funding.

Ms Higgins advised that they had reinstated this service in Walsall and she was going to try for Wolverhampton too.

With regards to the CQC rating, this was a moving picture and there are still some care homes awaiting an inspection. She added that Bentley Court had been re-inspected and was in suspension around quality concerns.

Safeguarding – The team continue to receive concerns related to neglect and acts of omission.

SPACE Programme – Ms Henriques-Dillon provided the Committee with copies of the latest newsletters for their information.

Mr Oatridge asked if there were any concerns around GP visits or Vocare visits.

Ms Henriques-Dillon commented that there are outreach pathways of care and they are aware that they can call the team if they need them.

Mrs Roberts advised that she had reviewed a business case for the Commissioning Committee and was supportive for additional matrons.

Ms Higgins stated that starting in September there will be deterioration post in the community which will be supportive of care homes

Ms Henriques-Dillon introduced Ms Tracey Jones a Quality Advisor who had started with

the Quality Team this week.

Mr Hastings asked about flu in the care homes.

Ms Henriques-Dillon advised that they would recruit staff to help with flu and they could call the Rapid Intervention Team (RIT) to be involved with any outbreaks there might be.

Dr Rajcholan referred to Section 2.5 of the Quality report where it showed the Pressure Injuries and asked if it was grade 3 and 4 or just 3 or 4.

Mrs Roberts replied that it was for both and added that there was a meeting this afternoon to discuss them.

Ms Higgins advised that there is preparatory work taking place.

Mrs Roberts stated that the CCG were out for procurement for beds and mattresses for the Community.

Dr Rajcholan referred to page 23 of the quality report and the workforce sickness/absence rate which had increased to 4.99% in June 2018 for Black Country Partnership trust.

Ms Higgins was unsure where the sickness rate is related to whether it is clinical or even to one particular area but stated that she had requested further information to be taken to next CQRM. She was concerned about staffing and sickness rate.

Mrs Roberts stated that the CQC have been to the Black Country Partnership NHS Trust and they were awaiting the report.

Ms Henriques-Dillon and Ms Jones left the meeting.

QSC/18/025.2 Safeguarding Adults, Children and Looked After Children Report (Enclosure 4)

Ms Lawrence presented the Safeguarding Adults, Children and Looked After Children Report and advised that the CCG's current position from the Safeguarding assurance tool demonstrates significant progress. An action plan has been submitted to NHSE as requested and outstanding actions are being progressed by the team.

Training – The team have completed a full training programme for 2017/2018 which they aim to replicate again for next year. This commences in September 2018; and will provide Level 3 Safeguarding Adults and Children for Primary Care and CCG staff. The training for 2017/18 evaluated very well.

Safeguarding Reviews – There is one in progress which is near completion and is due to be published in September 2018. There are also two learning reviews that are in progress which are also expected to be completed in September 2018.

LeDeR – There has been significant progress made in Wolverhampton since the Local Area Contact responsibilities for Wolverhampton were delegated to WCCG's Designated Adult Safeguarding Lead.

Mr Hastings left the meeting.

Mrs Roberts asked how many there were.

Ms Lawrence replied that there were 11 LeDeR reported deaths since October 2018, however some were repeat notifications

Mrs Roberts advised that the Black Country is an outlier and is under scrutiny by NHS England

Ms Lawrence agreed. There have been bespoke LeDeR Reviewer training sessions offered and 14 places have been booked on the 29th August training in Wolverhampton. Online training is being developed by the University of Bristol. Dudley CCG currently has oversight for the Black Country and processes are being developed for shared administrative support and support for bereaved relatives.

Mrs Roberts stated that with regards to the STP, there is a risk, and as a result of this, the management of LeDeR at a local level has been progressed.

Serious Case Reviews – There are currently two underway in Wolverhampton and a SI which may be a SCR.

The Deputy Designated Nurse Safeguarding Children is developing a Neglect Tool kit. This was presented at a local learning event in Q1 and was very well received

Safeguarding Supervision – This is for named and specialist nurses, and is provided by WCCG's Designated Professionals.

Providers – The safeguarding team have changed the format of reporting within the Q1 report to reflect greater analysis of provider performance. This is work in progress, to include other providers in the future.

- **RWT** - Have completed a Training Needs Analysis (TNA) and have set a trajectory of 50% of training to be completed by December 2018 and 85% by the end of March 2019.
- **BCP** – All levels of training compliance have been achieved. They are currently reviewing their Safeguarding service across the Black Country.

Looked After Children Report

Ms Brennan advised that Looked After Children will be changing its name in the future to either 'Children who are Looked After' or 'Children in Care'. She stated that the next annual report will show a breakdown. There were currently 640 children, this number remains static and 59.6% of this number are out of the area. She added that they are changing the data and they are getting more assurance from providers. Ms Brennan commented that it didn't look good at the moment but she was receiving assurances and it was work in progress. She is working with Public Health to see how they can collate data together.

SEND CQC Inspection – They have now added LAC to the action plan.

Ms McKie wondered if children from other Countries were included.

Ms Brennan replied that yes they are included and added that she thought there were six children.

Mrs Roberts stated that Ms Brennan and the providers have worked really hard to get this data together and have produced some really good work.

Dr Rajcholan commented that only 8% of our children are currently placed further than 50 miles away.

Ms Brennan confirmed that was correct and added that it had improved slightly as it was 12% and that 8% is what the CCG are responsible for.

Ms Lawrence and Ms Brennan left the meeting.

QSC/18/025.3 Medicine Optimisation Report (Enclosure 5)

Ms Sandhar presented the Medicine Optimisation Report and highlighted the following:

Safety Alert: FDB Optimise Rx® Pilot – This delivers patient specific prescribing

guidance to drive medicines optimisation at the point of care and it has been piloted at Thornley Street Practice and it will hopefully be rolled out from September onwards.

MHRA Alerts: Valporate prescribing – The MHRA issued a press release on 24th April 2018 stating that valproate must no longer be prescribed to women or girls of childbearing potential unless they are on the pregnancy prevention programme (PPP).

Prescribing Incentive Scheme (PIS) Update – The CCG has offered a Prescribing Incentive Scheme (PIS) 2018 – 2019 to all of its member GP practices as encouragement and reward to improve the quality, safety and cost effectiveness of prescribing. Successful implementation will deliver benefits in 2018/19 and subsequent years. This scheme has a total of 10 components and achievements will be monitored from April 2018 onwards.

Mr Oatridge referred to section 2.3 of the report and had noted that the aim was to reduce prescribing by 10% and wondered why that was.

Ms Sandhar replied that this was relating to anti-biotics which can have an effect on C Diff.

Mr Oatridge wondered why 10%.

Ms Sandhar confirmed that it was National target.

Dr Rajcholan referred to page 6 of the report and noted that one of 12 areas was to do with 'Morphine as a % of all opioid prescribing' and the target should be over and above 40% and we are at 37.85%.

Ms Sandhar commented that they retire some targets and bring some others back for other years. She added that significant improvement on morphine had already been made.

Dr Rajcholan commented on the morphine with the new prescribing scheme and added that she couldn't see it on the list and wondered if we were still concentrating on morphine.

Ms Sandhar replied that morphine would still be the preferred opioid.

Ms McKie commented on Valproate and had noted that there were 230 females identified and wondered if pharmacists were aware.

Ms Sandhar replied that they should know and they should query it. The MHRA Alert goes to all Health Professionals including pharmacies.

Dr Rajcholan advised that if Valproate is the drug of choice it is up to the GP to review it when the patient becomes of child bearing age.

Ms Sandhar added that alerts are getting stronger now and added that patients also need to be part of prevention programme.

Mr Price, Ms Sandhar and Dr Rajcholan left the meeting.

QSC/18/026 Risk Review

QSC/18/026.1 Quality and Safety Risk Register (Tabled)

Mr Strickland apologised for the tabled report.

Committee Risks – There is a new Probert Court risk which had been rated as a 20 and wondered whether this had already been discussed.

Mrs Roberts replied that there was a meeting this afternoon and she would let Mr Strickland know the outcome.

Mr Strickland advised that there was a risk around waiting times for LAC CAMHS; he added that Ms Brennan feels this risk could be closed if Committee is in agreement.

The Committee **agreed** to close this action.

Ms McKie commented on the Mortality risk which was amber.

Mrs Roberts agreed that this had been reviewed and it had been agreed to go red.

Mr Hastings commented on MGS Clinical Practice.

Mr Strickland advised that there was a risk for MGS; but was unsure how much needs to be captured here.

Mrs Roberts stated that she had asked Mrs Corrigan to do a more detailed report and they will then review risks.

Dr Rajcholan rejoined the meeting.

Ms McKie commented on Risk QS02 regarding the named midwife at RWT and thought it had been recruited to.

Ms Higgins advised that they have recruited to but they are not in post yet and added that they will close the risk when they commence in post.

Mr Strickland left the meeting.

QSC/18/027 Feedback from Associated Forums (Exceptions and Queries)

QSC/18/027.1 Commissioning Committee (Enclosure 6)

The Commissioning Committee minutes were received for information/assurance.

QSC/18/027.2 Primary Care Operational Management Group (Enclosure 7)

The Area Prescribing Committee minutes were received for information/assurance.

QSC/18/028 Items for Escalation/Feedback to CCG Governing Body

- Probert Court

QSC/18/029 Any Other Business

Mrs Roberts commented on the wider system works and advised that the Dudley Group had been given a 'Requires Improvement' overall rating from the CQC with their Emergency Department being rated 'Inadequate' she added that a report was due out next week but confirmed it was not good; she is involved in this and it may attract media attention.

QSC/18/029.1 Learning from Deaths Report (RWT) (Enclosure 8)

Mrs Roberts presented the Learning from Deaths Report from RWT and stated that this was for assurance to the Committee and added that it was much better.

Mr Oatridge asked how the relationship with RWT was.

Mrs Roberts replied that she was happy with it and relationships were very mature.

Ms Higgins added that she had met with their Head of Governance and the working

relationship was also very good. She added that they had got really good systems and processes in place.

Mrs Roberts stated that the only criticism she had was the pace of work compared to what she was used to.

Dr Rajcholan advised that she felt that the Chief Nursing Officer was more open and approachable.

Mrs Roberts added that it was a good two way position.

Dr Rajcholan enquired about the Secondary consultant who sits on this Committee and asked if we could ensure that he had got the dates of this Committee.

ACTION: Mrs Hough

QSC/18/030 **Date of Next Meeting:** Tuesday 11th September 2018 at 10.30am in the Main Meeting Room, Wolverhampton Clinical Commissioning Group.

Meeting closed at 12.40pm

Signed: **Date:**

Chair

DRAFT