

Minutes of the Quality & Safety Committee
Tuesday 12th March 2019 at 10.30am in the CCG Main Meeting Room

PRESENT:

Steve Barlow – Public Health, Wolverhampton Council
Yvonne Higgins – Deputy Chief Nurse, WCCG
Dr R Rajcholan – WCCG Board Member (Chair)
Sally Roberts – Chief Nurse and Director of Quality, WCCG

Lay Members:

Jim Oatridge – Lay Member (Deputy Chair)

In attendance:

Kassie Styche – Quality and Safety Officer, WCCG (Minute Taker)
Kim Corbett – Nurse Manager Infection Prevention, RWT
Liz Corrigan – Primary Care Quality Assurance Coordinator, WCCG
David King – EIHR Manager, WCCG
Katrina McCormick – Children’s SEND Programme Officer, WCCG
Peter McKenzie – Corporate Operations Manager, WCCG
Phil Strickland - Governance & Risk Coordinator, WCCG

APOLOGIES:

Mike Hastings – Director of Operations, WCCG
Nicola Hough – PA to Chief Nurse and Director of Quality, WCCG
Marlene Lambeth – Patient Representative – Lay Member
Sue McKie – Patient/Public Involvement – Lay Member
Ankush Mittal – Public Health, Wolverhampton Council
Sukhdip Parvez - Patient Quality and Safety Manager, WCCG
Peter Price – Independent Member – Lay Member

QSC/19/022 Apologies and Introductions

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

QSC/19/023 Declarations of Interest

No declarations of interest.

QSC/19/024 Minutes, Actions and Matters Arising from Previous Meeting

QSC/19/024.1 Minutes from the meeting held on 12th February 2019 (Item 3.1)

The minutes from the meeting which was held on 12th February 2019 were read and agreed as a true record.

QSC/19/017.1 – Policies for Ratification - Dr Rajcholan asked for clarification around certifying or verifying the death.

Mrs Roberts replied that this was verifying death only.

QSC/19/024.2 Action Log from meeting held on 12th February 2019 (Item 3.2)

QSC/19/015.1: Quality Report – To liaise with STP lead to understand what the system may be able to offer to support with regards to the deteriorating performance for the 2 week wait for cancer referrals.

Mrs Roberts informed the group that she had met with the Cancer Leads regarding a system response and received helpful information. The main areas discussed were inconsistency of data, working progress for referrals and provider feedback.

Mr Oatridge was concerned with the inconsistency of data provided and information received from RWT.

Mrs Roberts replied that following weekly meetings with RWT and reassurance she believes there are some discrepancies with cancer alliance data.

Validation of the data will also need to be made through work Public Health is currently undertaking.

Mr Barlow from Public Health will submit formal feedback around the referral data to April's Meeting.

ACTION: Mr Barlow

QSC/19/015.1: Quality Report – To provide the detail of the Serious Incidents to the next meeting.

The details of the serious incidents are now included with the Quality Report.

It was **agreed to close** this action and **remove** it from the action log.

QSC/19/005.6: Quarterly CQUIN Update – To request an update on Tobacco control indicators for BCPFT for the next meeting. Awaiting national guidance around this.

Currently there is no national data out for tobacco control indicators. BCP have no submission for quarter 3, however Ms Higgins will chase this data.

ACTION: Ms Higgins

Mrs Roberts advised the 2019/2020 CQUINs are out now.

QSC071: H&S Performance Report – New H&S Provider to look into supporting CCG with H&S requirements. Meeting taking place soon with the company and the named personnel at the CCG.

Mrs Roberts advised that Wolverhampton CCG had met with the new provider week commencing 4th March 2019 and the audits were due to be started week commencing 18th March 2019. An update report for last year's data will be submitted for April's meeting.

ACTION: Mrs Roberts

QSC/19/025 Matters Arising

There were no matters arising noted.

QSC/19/026 Performance and Assurance Reports

QSC/19/026.1 Quality Report (Item 5.1)

The above report was previously circulated and noted by the Committee.

Cancer – Overall cancer performance at RWT remains a challenge, performance of all cancer targets have deteriorated in January 2019. Key areas for concern along with breast are Urology, Upper GI and Dermatology and the trust are receiving continuous support in these areas. An improvement in 62 day performance is anticipated by March. The deterioration in performance was expected as the reduction in backlog was undertaken, however during this reporting period there was also an unprecedented

demand in 2WW Breast symptomatic referrals and this has had a significant impact on current performance and achievement of trajectory.

Mr Oatridge asked Ms Higgins what is meant by harm and the harm reviews.

Ms Higgins responded it means the eventual outcome for the patient from delays; this includes psychological and physical harm following the end of a pathway.

Mrs Roberts explained that to date the harm reviews have evidenced minimal harm and that if harm was identified this would be reported as a serious incident within the SI framework.

Mrs Roberts informed the team that RWT were due to return the achievement of trajectories by July 2019; however they have requested submission to NHSI in April 2020. The CCG note that this is a massive concern due to the significant move from July 2019 to April 2020 and will be challenged by CCG.

Mr Oatridge stated he was very impressed with the much improved layout of the Quality Report and finds the expected achievement column very helpful.

Mortality – This is still a key issue, the Trust has identified that an improvement on the SHMI is not expected until October 2019. The Trust mortality strategy has been launched and focuses on ensuring that the organisation is learning through the development of a strong mortality framework.

Ms Higgins informed the group that there has been an increase of Serious Incidents raised suboptimal care resulting in death. Wolverhampton CCG has completed a themed review of these incidents with the main theme being lack of recognition around deterioration. Ms Higgins has requested minutes from the RWT Deteriorating patients group to be submitted to CQRM and a visit is to be arranged to follow the sepsis pathway in the trust.

ACTION: Ms Higgins

Mr Barlow stated that he thought one of the main issues has been with Locum doctors and the lack of training around Sepsis and Deterioration.

Dr Rajcholan requested further details and the cause of death for the Serious Incident that took place in Gynae.

The full details of the themed review were attached to the Quality report as appendix 1.

Ms Higgins stated that we need to strengthen Mortality within Primary Care to look at the figures for dying within 30 days.

Mrs Roberts advised a scoping exercise for the GPs and what they currently do for the Mortality reviews is underway.

Dr Rajcholan agreed and said there needs to be significant training within Community Services. Dr Rajcholan informed the group she had referred a patient to the Community Matron Team and should have been seen within ten days; however had still not been seen after four weeks. There is very little support around Community Services and this does need addressing.

Sepsis – The CQUIN performance for quarter 3 shows a deteriorating position for sepsis screening and timely antibiotic administration in both inpatients and ED. Data identifies that of the 88.9% patients screened in ED, only 61.9% received antibiotics within the hour and of the 66.2% screened as inpatients, only 63.5% received antibiotics within the hour. Further assurance relating to data supplied is being sought.

Implementation of the software update to include an electronic flagging system for sepsis has been delayed nationally until end March which may impact on return to performance.

Ms Higgins stated that there is a lot of work to do in this area and we are pushing heavily.

Maternity – Maternity services capping remains in place, elective and emergency C Section rate remains above the trajectory, and labour and instrumental delivery rate are also above trajectory.

Ms Higgins informed the group that a capacity review will be undertaken in March 2019.

BCPT – The CQC rating has decreased and this may impact on the quality and safety of care provided, there is an ongoing monitoring against the CQC action plan.

Ms Higgins has regular meetings in place to strengthen report writing and standardise CQRM format and a visit has been arranged to Wolverhampton inpatient wards to gain assurance from the CQC report.

Probert Court – There are still ongoing concerns and the QNA Team will continue to support the care home manager with quality improvement.

Ms Higgins informed the group that a new Clinical Lead and Senior Nurse have been appointed.

Mr Oatridge asked when the new members of staff are likely to be in post.

Ms Higgins responded that the staff will hopefully be in post by April 2019. However quality and safety issues remain and sustainability of this arrangement is heavily challenged.

HCAI – E-coli improvement plan anticipates improvement by next data release in August 2019. Monthly meetings are being held between CCG, RWT and Public Health with a robust driver diagram and action plans in place.

Ms Higgins informed the group that we have recently recruited a GP to the E-coli group and this will be beneficial to the outcomes going forward.

Incidents – We currently have good figures in regards to falls and pressure injuries and there is positive work taking place with Never Events.

Ms Higgins informed the group that we have no overdue SIs and the quality indicators are very good.

Mrs Corrigan and Miss McCormick joined the meeting.

Ms Higgins asked the group if they had any questions or comments about the report.

Mr Oatridge enquired around the elevation in sickness for Maternity and that the trending lines seem to show seasonal sickness. Ms Higgins agreed and that she would watch the figures.

Mr Oatridge commented on the issues stated on page 54 around data sharing of children and young people in care for the 50 mile plus cohort.

Mrs Roberts replied that there was an issue with resistance of releasing data that a staff member had requested. We currently sub contract the work through RWT for the 50 mile radius and that we contact RWT when the data is required.

Mrs Roberts informed Mr Oatridge that this issue has now been resolved and there should be no further issues with obtaining data and that a SOP is in place that resides within the contract.

QSC/19/026.2 Primary Care Report (Item 5.2)

The above report was previously circulated and noted by the Committee.

Infection Prevention – Mrs Corrigan advised that the IP audits continue and that the 2018/2019 cycle will complete this month. The main issue raised from the audits are damage to décor.

Flu vaccines – The Flu programme comes to an end this month and all surgeries have supply. Mrs Corrigan informed the group that the 2018/2019 evaluation is available and that a full report will be submitted for April's meeting.

Deterioration and Sepsis – Ron Daniels the Sepsis Lead from the Sepsis Charity Trust will be presenting at 'Team W' on 27th March 2019.

Serious Incidents – There is currently one serious incident which was picked up via PPIGG.

Quality Matters – Ongoing and monitoring monthly.

FFT – Still good figures for the uptake on FFT, however we do sit under the national average for the patient satisfaction question and we are currently monitoring this through Primary Care Contracting.

Workforce and Development – Work is ongoing and further funding has been given.

Mrs Roberts thanked Mrs Corrigan for all of the hard work she has put into Primary Care and the recognition from this work is very positive going forward.

Mrs Corrigan left the meeting.

QSC/19/026.3 SEND Update

The above report was previously circulated and noted by the Committee.

The SEND Health local offer review is underway and Mrs McCormick and Mr May are leading work in further developing our offer.

The council have increased the number of children and young people in special and mainstream school places from September 2018 and will have further increases have been announced for September 2019.

Mr King joined the meeting.

CCG SEND Action plan has been updated and will support in this area of work which is based on the self-assessment diagnostic checklist and 6 key domains against which the CCG will be measured as part of the inspection process by CQC and Ofsted.

- 1) Leadership and Governance – It has been agreed that SEND will be tabled at Governing Body.
Standard Operating Procedures for areas of work are required and these are being progressed
- 2) Joint Arrangements – Further work is required in this area in order to fully understand our joint commissioning arrangements. This is particularly relevant to the increase in special school places and the impact that this has on our providers.
- 3) Commissioning – Agreement has been made to refresh the SEND specific JSNA in order to appropriately use the needs to analysis information to develop local offers across the city.
- 4) EHC Plans – Good progress in relation to the development of EHCPs has taken place.
- 5) Engagement – This is well established in particular to Personal Health budgets

but requires improvements in some areas such as CAMHS.
6) Monitoring and redress.

Miss McCormick informed the group that there are currently no new risks but some may be highlighted following the review.

Mrs Corbett joined the meeting.

Mr Oatridge commented on how positive the report was, however he would like the report to include an idea of scale including how many schools and how many children. Mr Oatridge is also keen to hear about the difference in growth and activity and what resource is available.

Dr Rajcholan agreed and Mrs McCormick confirmed the next report will include higher level detail.

Miss McCormick left the meeting.

QSC/19/026.4 Equality and Diversity Report and Annual Report (Item 5.4)

The above reports were previously circulated and noted by the Committee.

Mr Strickland joined the meeting.

Mr King informed the group that the report includes all relevant information for the CCG to meet its publication duty.

There is public engagement planned for EDS2 outcomes during 2019.

No risks have been identified in the report, though failure to publish by 30th March 2019 would be a risk since the CCG would not have met its legal requirement of duty to publish.

The annual report has been produced to set out a summary of the activity of Wolverhampton CCG and was undertaken during the 2018/2019 financial year. The report covers the following areas;

- An overview of the CCG's approach to Equality
- The CCG's NHS Equality Delivery System 2 (EDS2) template update
- An update on the CCG's newly adopted Equality Objectives

Mr King stated that section 3 in particular reflects well on the CCG.

There are ongoing issues around the patient grading and these not being included in the outcomes, the CCG are compliant with what we are doing with the grading issues.

Agreement was made by the group that the report can be published.

Mrs Roberts spoke about the public engagement and using patient stories through the work we have completed with patient safety. When using patient's stories in the past we have always received great feedback.

Mr Oatridge stated that on reflection of the stories they are good to hear but then nothing is heard after.

Mrs Roberts agreed and said context is very important.

Mr Oatridge informed Mr King that he thought his recent presentation was extremely good.

Mrs Roberts agreed and that very good feedback had been received.

Mr King left the meeting.

Dr Rajcholan left the meeting, Mr Oatridge will chair for the remainder of the meeting.

QSC/19/026.5 Infection Prevention service update (Item 5.5)

The above report was previously circulated and noted by the Committee.

Mrs Corbett informed the group that going forward Mr Reid, acting Head of Nursing for Corporate Support Services will be submitting the report and attending the meeting.

There has been one outbreak of influenza A confirmed within Nursing Homes and advice and support has been given by the IP Team and treatment prescribed by RIT Team.

There have been a few practices although have been using safe sharps still had non safe sharps in their stock cupboards. Waste management bins still need to be replaced with lidded receptacles that are easy to clean and foot operated only.

Mr McKenzie joined the meeting.

The figures for the Gram negative bacteraemia are variable and are above the expected level. Monthly meetings are being held between CCG, RWT and Public Health with a robust driver diagram and action plans in place.

Ms Higgins and Mrs Corbett updated the group around the 6 month catheter project that is currently underway; however there has been low numbers of patients involved in the pilot.

Mrs Roberts enquired when the data for the pilot will be available.

Mrs Corbett replied that she will hopefully be able to get the data out by the end of this month.

ACTION: Infection Prevention Team

Mr Barlow stated he had issues with the figures on page 6 of his report.

Mrs Roberts replied that this does happen sometimes when the documents are PDF'd and that the word version was correct.

Mr Oatridge requested the report to include more data on catheters as he feels the content around catheters has gone.

ACTION: Infection Prevention Team

Mrs Corbett left the meeting.

QSC/19/027 Risk Review

QSC/19/027.1 Quality and Safety Risk Register (Item 6.1)

The above report was previously circulated and noted by the Committee.

Mr Strickland advised that there were no new risks for the Committee.

Mr Oatridge requested Mr Strickland to only give a brief update as the discussion from Ms Higgins for the Quality report reflects where we are for the risk register. Mr Oatridge advised going forward it may be best for the Risk Register to follow the Quality Report on the agenda and a final review at the end of the meeting.

ACTION – Mrs Hough

Committee Risks:

Vocare (QS01) – Agreement within the meeting for this risk to be closed off the Risk Register.

Flu (QS09) – Agreement within the meeting for this risk to be closed off the Risk Register.

Probert Court (QS08) - Probert Court remains high, due to ongoing issues, however plans have been put in place and regular monitoring is taking place.

Mr Oatridge stated he is reluctant to lower the risk until we have certainty these issues are resolved.

The group were in agreement.

Cancer (QS06) – Mr Oatridge requested for this risk to be reviewed early due to the delay in Trajectories.

The group were in agreement, Mr Strickland to meet with Mr Parvez and Mrs Thorpe to review.

ACTION: Mr Strickland

Mortality (QS07) – Risk to remain as moderate.

Mr Strickland left the meeting.

QSC/19/028 Policies for Ratification

QSC/19/028.1 Data Quality Policy (Item 7.1)

The Data Quality Policy was not included in the paper pack for the meeting. Mr McKenzie agreed to circulate the paper, he stated there were no major amendments made to the policy.

ACTION: Mr McKenzie

QSC/19/028.2 Standard Operating Procedure for the Management of Subject Access Requests (Item 7.2)

The above document was previously circulated and noted by the Committee.

Mr Oatridge enquired when the policy is amended and if this was done every 3 years as this SOP states was reviewed in 2018.

Mr McKenzie replied that usually a SOP would be reviewed and updated every 3 years unless there is a change in legislation then it would be reviewed every 12 months.

Mr McKenzie confirmed he is happy with the content of the policies.

Mr McKenzie asked for the committee's approval to delegate sign off of the CCGs Data Security Protection Toolkit before the end of March.

QSC/19/029 Feedback from Associated Forums

QSC/19/029.1 Commissioning Committee (Item 8.1)

The Commissioning Committee minutes from 31st January 2019 were received for information/assurance.

QSC/19/029.2 Primary Care Operational Management Group (Item 8.2)

The Primary Care Operational Management Group minutes from 4th January 2019 were received for information/assurance.

QSC/19/030 Items for Escalation/Feedback to CCG Governing Body

- Slipping of SHMI
- Cancer work with Public Health
- Dr Odum to be invited to next Governing Body Meeting

Mr Oatridge wanted clarification whether this will be for public or private meeting.

Mrs Roberts advised it would be best for the private meeting.

QSC/19/031 Any Other Business

Mr Oatridge states the reports are becoming very good and are slicker reports; however feels more work needs to be done with the Primary Care Report as this seems the same each month. Mr Oatridge requests that the report be more data and dashboard driven with less narrative and to concentrate on areas for concern and have a changes section.

Ms Higgins agreed and will speak to Mrs Corrigan to amend for April's meeting.

ACTION: Ms Higgins

Mr Oatridge expressed his concern around and what the FFT data is being used for and how much it costs and is the work valued.

Mrs Roberts replied to Mr Oatridge that the FFT is contractual work and we need to have completed each month.

QSC/19/032 Date of Next Meeting: Tuesday 9th April 2019 at 10.30am in the Main Meeting Room, Wolverhampton Clinical Commissioning Group.

Meeting closed at 12.25pm

Signed: Date:
Chair