

Minutes of the Quality & Safety Committee Tuesday 9th July 2019 at 10.30am in the CCG Main Meeting Room

PRESENT:

Dr R Rajcholan – WCCG Board Member (Chair)
Mike Hastings – Director of Operations, WCCG
Yvonne Higgins – Deputy Chief Nurse, WCCG
Sukhdip Parvez - Patient Quality and Safety Manager, WCCG

Lay Members:

Jim Oatridge – Lay Member (Deputy Chair)

Patient Members:

Marlene Lambeth - Patient Representative

In attendance:

Maxine Danks - Head of Individual Care, WCCG
Nicola Hough – PA to Chief Nurse, Director of Quality, WCCG
Kelly Huckvale – Information Governance Officer, Arden and GEM CSU
Annette Lawrence – Designated Lead Safeguarding Adults, WCCG
Peter McKenzie – Corporate Operations Manager, WCCG
Lorraine Millard – Designated Nurse Safeguarding Children, WCCG
Phil Strickland - Governance & Risk Coordinator, WCCG
Lesley Thorpe – Primary Care Macmillan Nurse Facilitator, WCCG

APOLOGIES:

Steve Barlow – Public Health, Wolverhampton Council Liz Corrigan – Primary Care Quality Assurance Coordinator, WCCG Sue McKie – Patient/Public Involvement – Lay Member Ankush Mittal – Public Health, Wolverhampton Council Peter Price – Independent Member – Lay Member Sally Roberts – Chief Nurse, Director of Quality, WCCG

QSC/19/064 Apologies and Introductions

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

QSC/19/065 Declarations of Interest

No declarations of interest.

QSC/19/066 Minutes, Actions and Matters Arising from Previous Meeting

QSC/19/066.1 Minutes from the meeting held on 11th June 2019 (Item 3.1)

The minutes from the last meeting were read and agreed as a true record.

QSC/19/066.2 Action Log from meeting held on 11th June 2019 (Item 3.2)

QSC/19/059.1 - Public Health Update: To forward the two papers that had been presented to the Health Scrutiny Committee to Mrs Hough to share with the Committee.

Mr Barlow had sent his apologies to the meeting but had sent an update prior to the meeting. One of the papers was already in last month's pack 'The Vision for Public Health 2030' paper under agenda item 5.10 and the other was tabled at the meeting and Mrs Hough advised that she would send the electronic copy to the Committee members.

ACTION: Mrs Hough

QSC/19/059.1 - NHS Healthchecks: The offer from Public Health for help advice/support with audits remains. Mrs Roberts asked Mr Barlow to share this with Sarah Southall's team.

Mr Barlow had advised that he had e-mailed Sarah Southall's team and offered support.

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

QSC/19/059.1 - EMIS: Smoking cessation link on EMIS and if GPs need support, the team can go out to them – to put the link on the first GP newsletter to help the GPs.

The newsletter had been completed and was distributed to GPs on 2nd July 2019.

Dr Rajcholan advised that she couldn't access the link at her surgery but could access it from other surgeries.

Mr Hastings offered to follow this up with Mrs Lisa Holder.

ACTION: Mr Hastings

QSC/19/059.6 - Infection Prevention Service Update: Ms Higgins commented on the themes that are seen by the CCG staff e.g. sinks, bins and sharps etc. and she knows they used to be sent to Vanessa Whatley but she said she would check that this will be sent to Mr Reid now.

The IP audits are received by the CCG to enable themes to be identified.

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

QSC/19/059.6 - IP Audit Data: To follow up - Ms Henriques-Dillon had accompanied someone from the IP team to do some audits a while ago in two different care homes and is still awaiting the trust to share the data.

Mr Reid advised prior to the meeting that one care home audit was forwarded as per request. The second audit – IP shadowed and full audit was not completed, therefore no report was compiled/available.

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

QSC/19/060.1 - Risk Register: To chase Safeguarding risk.

This is now on the risk register.

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

QSC/19/067 Matters Arising

There were no matters arising noted.

QSC/19/068 Performance and Assurance Reports

QSC/19/068.1 Quality Annual Report (Item 5.1)

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

Ms Higgins advised that the team had reviewed previous annual reports but had tried a new template which now shows a synopsis of the team achievements and added that it was open for comments and feedback.

Dr Rajcholan stated that it was commendable on how it was presented; it showed clear direction and identified priorities going forward.

Mr Oatridge commented that it was a splendid report; which was easy to read and engages the reader. The report does not talk about what hasn't been achieved. Also it may be enhanced if it included the governance framework for CCG within it.

Ms Higgins replied that Mr Oatridge's comments and suggestions were very helpful and added that it is only at draft stage.

Ms Lawrence and Ms Millard joined the meeting.

QSC/19/068.2 Safeguarding Annual Report (Item 5.2)

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

Ms Millard advised that the report highlighted key points taken from the quarterly reports over the last 12 months, which are included as appendices to this report. It was noted that a new template had been used for this year's annual report. Positive feedback was received from the committee regarding the new format

Mr Oatridge asked if he could make a general comment which was he felt the report could look more balanced if it showed things that weren't achieved as well as the things that were achieved. He added that the report would benefit from a governance overlay showing the reporting into this Committee and the Governing Body and would identify the challenging and reporting elements.

Ms Millard stated that there are two governance structures, one for the CCG and one for the Wolverhampton Safeguarding Boards/Partnership. The report outlines and provides narrative relating to WCCG's Statutory Safeguarding responsibilities.

Ms Higgins stated that the team will review the governance structure.

QSC/19/068.3 Child Death Changes and Wolverhampton Safeguarding Arrangements (Item 5.12)

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

Ms Millard advised that the new Safeguarding arrangements have got to be embedded by September 2019 and added that Mrs Roberts is now the new chair of both Adults and Children MASA going forward for the first year.

Ms Lawrence and Ms Millard left the meeting.

QSC/19/068.4 Quality Report (Item 5.3)

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

<u>Cancer</u> (Red rated) – With regards to the issue around the two week wait breast symptomatic patients are being offered alternative hospitals within a two mile radius.

Mr Hastings added that they had looked at the distance from the GP practice to New Cross Hospital, Wolverhampton and then within two miles for other hospitals and patients could go to the Manor Hospital, Walsall or Russells Hall Hospital, Dudley.

Ms Higgins stated that GPs are being informed of waiting times.

Dr Rajcholan commented that the determining factor from GP practice is within two miles and asked if GP practices have been informed.

Mr Oatridge queried if it was still with patient choices as well as the waiting times.

Mr Hastings replied yes it was around patient choice and they will look for the first actual appointment; RWT were at 50 days for two week wait as of last week.

Ms Higgins advised that they are still continuing with the harm review process. RTT performance has declined; the CCG has asked for a remedial action plan outlining how performance will be improved and speciality level detail.

<u>Mortality</u> (Red rated) – Going forward the SHMI is going to be reported on a monthly basis rather than quarterly. There are a high number of CQC mortality outlier alerts; a new one has been received for COPD, the trust is working on a response.

<u>Sepsis</u> (Amber rated) – The trust now have a dashboard supported by the new esepsis flagging system. The CCG have walked the pathway and Ms Higgins now sits on the Deteriorating Patient Group. The trust is really embracing the work. At the next CQRM (RWT) the trust will be presenting spotlight sessions on Mortality and Sepsis, so we can see further progress and gain assurance.

<u>BCP Workforce</u> (Amber rated) – Workforce remains the same; there are system wide concerns. Penrose visit detail came to the last Committee meeting. The TCP lead also met with the trust last week. Ms Higgins advised that she has seen improvement from last October to now.

<u>Suicide Data</u> – The number of actual suicides have increased for Sandwell and Wolves; there were 10 in 2017, 16 in 2018 and 13 in 2019 with a further five attempted suicides; a further detailed analysis is been undertaken to look specifically at Wolverhampton data and identify themes and trends.

Dr Rajcholan wondered if there was a particular group e.g. PTSD.

Mr Parvez replied that there was nothing highlighted on STEIS; the theme showed that it was mainly men over 50 years old; Sandwell appear to have more suicides so collaborative work continues.

Ms Higgins commented that Liverpool has a zero suicide initiative and they have been asked to present at the STP Mental Health group.

She added that there were concerns around the Duty of Candour process following a recent visit and further assurance has been requested.

Data in relation to 12 hour breaches in RWT with regards to Mental Health patients and within the Black Country has been received. Walsall had one 12 hour breach; RWT have had eight 12 hour breaches relating to Mental Health patients.

Mr Hastings advised that some people came in from MERIT group yesterday and they had mentioned about their bed availability system and wondered if RWT were using. He added that it is in the style of a dashboard and when Mr Hastings was shown the system it said that it was last updated within the last 8-10 minutes. This showed all information across the MERIT trusts across the country.

Mr Parvez suggested that if we could get the link then RWT can advise whether they use it and he asked Mr Hastings for the link to share it with RWT.

ACTION: Mr Hastings

<u>Probert Court</u> (Red rated) – The Home has now actually closed and have removed the risk.

Mr Oatridge asked if this was a full home closure and asked if all patients had been moved.

Ms Higgins replied that they have been moved as it was only a step down facility.

Dr Rajcholan asked when the procurement process was taking place for a replacement.

Ms Higgins replied that there were two providers interested; Eversleigh was one and

there was another new one.

<u>Reduced CQC Rating of Wolverhampton Nursing Home</u> (Amber rated) – This was due to an inadequate Nursing Home and relates to the Health and Safety elements.

Cancer – The trust are not on track with this; the CCG have had a revised remedial action plan and they are predicting a return by February 2020.

Ms Higgins stated that they have left the original prediction in red but has shown the new date in green.

Ms Higgins advised that she had spoken with CQC last week as RWT are awaiting a CQC visit; they are undertaking focus groups in July at West Park with a potential visit at the end of July/August.

QSC/19/068.5 Primary Care Report (Item 5.4)

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

Mrs Corrigan had provided apologies ahead of the meeting and Ms Higgins asked for any questions/comments but advised that work is ongoing around the hub.

Mr Oatridge stated that the report format was very good.

QSC/19/068.6 Cancer and End of Life Update (Item 5.5)

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

Ms Higgins advised that Mrs Thorpe had sent her apologies and added that this was a new report as Mrs Thorpe's workstream. Mrs Thorpe is doing some really good work and her next report will identify priorities going forward. Mrs Thorpe has been instrumental in developing the harm review process and she also conducts peer review and patient engagement work. She has arranged training events and has been part of the red bag implementation as the swan boxes; she has also been working on the Verification of Death policy to help improve quality. Ms Higgins asked the Committee if there was anything they would like to see in the report going forward.

Mr Hastings wondered what was happening with the End of Life EPACS system.

Ms Higgins replied that she had recently had a discussion with the Deputy Chief Nurse (Ms Whatley) at RWT and she was going to speak with IT about how they can move forward with EPACS; she had recognised a barrier.

Mr Hastings advised that he would speak with Ms Whatley

ACTION: Mr Hastings

Dr Rajcholan asked if there was help from IM&T to come and speak with GPs.

Mr Hastings replied that the idea is for it to be fully integrated and the last he heard there were seven practices that were running a pilot.

Dr Rajcholan added that some practices are not confident in using the system and would value some support.

Ms Huckvale joined the meeting.

QSC/19/068.7 Information Governance Report - Quarter 1 (Item 5.6)

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

There was 248 pieces of activity undertaken in quarter 1; they were awaiting the release

of the toolkit but this has now happened.

Workplan – This is on the agenda for ratification.

IG Handbook – Last year they revised the policies and therefore the handbook is now more succinct.

Compliance Spot Checks – These have been undertaken; there was nothing to note so no concerns.

DSP Toolkit – This has now been released.

Priorities for Quarter 2 – IAO/IAA annual risk reviews commencing in August.

IG Incidents – There has been one near miss reported within quarter 1. This related to an e-mail where a recipient from a Care Home under investigation was unintentionally copied into an email which was confidential. Staff continue to raise concerns.

Caldicott Guardian Log Work Remit 2019/2020 - Five DPIAs have been submitted to the IG team for review and comment. Four were regarding CCG commissioning services and the other one was a High Intensity User Project. They have gone back with comments and are working on a data sharing agreement.

Subject Access Requests – There was one request for information during 1st April 2019 – 2nd July 2019. This related to CHC records of deceased patient and will be handled under the Access to Health Records Act and Mr McKenzie will be responding to this request.

General Practice Information Governance Service – There has not been much contact; however, the same practice has contacted the service twice in the first quarter and a DPIA has been completed on behalf of all practices.

QSC/19/068.8 Information Governance Handbook (Item 5.7)

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

The latest handbook has been drafted on policies that were approved last year and Mr McKenzie was happy with the content.

The Role of the Data Protection Officer (DPO) – The Committee has to authorise or accept DPO.

Ms Huckvale stated that as far as she was aware some practices have purchased their own.

Dr Rajcholan commented that she had not received any feedback.

Ms Huckvale advised her to speak with Mr McKenzie.

The Committee **approved** the Information Governance Handbook.

QSC/19/068.9 Information Governance Workplan 2019/2020 (Item 5.8)

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

Updated Changes – The timeframe column has been amended.

Information Asset Register – This was completed September - December last year and has been bought forward to be conducted in August/September this year.

IT Related DSPT Assertions – This row has been added towards the bottom of the workplan and that there will be regular meetings with the provider; just need to agree

timescales.

Mr Hastings referred back to the Handbook with regards to practices if they have any issues with their smart cards it should say they need to contact RWT.

Dr Rajcholan stated that there is a presumption that they have to contact RWT.

Mr Hastings added that it would be helpful to point people towards the help desk.

Ms Huckvale left the meeting and Mr Strickland and Mr McKenzie joined the meeting.

QSC/19/068.10 FOI Report (Item 5.9)

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

Freedom of Information Requests (April – June 2019) – There have been 62 FOI requests which is about average. The CCG has responded to 52 of the 62 requests received of which 51 were replied to within the deadline; we requested an extension of the other one and the remaining 10 are still within the deadline. These requests come in from all people; students, media, MPs etc.

Ms Danks joined the meeting.

Subject of Requests – During this quarter, requests for information have covered the formation of Primary Care Networks (PCN) whereby the CCG were asked how many PCNs had and how many were rejected. The CCG responded within 20 days and this information was in the public domain. There have also been some Personal Health Budget queries. This is all in line with what is happening and there was nothing of concern.

Mr Oatridge asked if there was anybody dissatisfied with the responses.

Mr McKenzie replied that no there wasn't, he added that sometimes they get somebody come back for further information. However, some have unrealistic queries and if we don't hold the information we let them know.

DPO for Practices - Dr Rajcholan asked Mr McKenzie if there was an update on this.

Mr McKenzie replied that he will chase.

ACTION: Mr McKenzie

Mr McKenzie and Ms Higgins left the meeting.

QSC/19/068.11 Quality Assurance in CHC Report (Item 5.10)

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

Key Issues:

The ICT have noted a reduction in the number of inappropriate referrals for consideration against the criteria for NHS funded care. This is following the change in process for completion of the initial screening checklist. The team are now going out themselves to review the patients. They have agreed to fund a three month period of care to review their needs.

Fast Track – This is now being scrutinised with the District Nurses; Ms Danks still has some concerns and has been raised with the End of Life workstream.

Personal Health Budget – The CCG met the target last year and looking at comparative data, the CCG are in the middle.

Ms Higgins joined the meeting.

Paperless – All files are in the process of being scanned and the team are being stopped making new files. They are moving across to a web based system which is also being used across the Black Country. It will hopefully be live in September, and will give a snapshot of patients. This will also help to identify workload etc.

Quality Premium – The CCG are meeting the Quality Premium target required of CHC; which requires 80% of full CHC assessments to be completed within 28 day timescale and less than 15% of CHC full assessments to be completed in an acute setting.

CCGs – The team are working with other CCGs for commissioning; there was an event last week and it was noted that Birmingham are also now doing the same as the CCGs within the Black Country. Birmingham were historically higher priced but all are aligned going forward.

Appeals – There are only eight outstanding at the moment; which is a low number in comparison to other areas.

Dr Rajcholan stated that it was a good comprehensive report thanked Ms Danks and asked about the recruitment of a RMN.

Ms Danks replied that it was a Registered Mental Health Nurse as the one who had been in post has left the CCG due to personal reasons.

Mr Hastings asked about IT system and whether it had been checked out with IT Department at RWT.

Ms Danks replied that the IT Department are liaising with the company.

Ms Danks left the meeting.

QSC/19/068.12 Quarterly CQUIN Update (Item 5.11)

The above report was not available to be circulated to the Committee before the meeting.

It was decided that this report would be presented at the next meeting.

QSC/19/069 Risk Review

QSC/19/069.1 Risk Register (Item 6.1)

Committee Risks:

Cancer 62 and 104 Day Cancer Pathways (QS06) – This had been picked up on the Quality Report.

Breast Cancer 2 week wait (QS09) – To provide an update next month.

Probert Court – The Nursing Home is now closed. It was **agreed** that this could be **removed** off the Risk Register.

SEND Risk – A query was raised as to whether it was best for this risk to be on this Committees Risk Register or the Commissioning Committee.

Ms Higgins replied that there are two issues with the SEND Risk; one is funding which should be commissioning and the other is regarding being ready for review which should be this Committee.

EPRR - Mr Hastings stated that they need to look at EPRR again especially with the impending EU exit being pushed to October. It is felt that costs will be a lot higher e.g.

warehousing will be more expensive, this needs to be reviewed.

Mr Strickland advised that he would pick this up with Tally Kalea.

Mr Hastings stated that core standards have come through for EPRR.

RTT - Ms Higgins enquired whether there was a risk relating to RTT.

Mr Hastings queried from which perspective as the value of RTT should go to F&P or the Quality side of it.

Ms Higgins replied that she thought it was a similar risk to mortality.

Mr Hastings stated that he would look at the data with Mrs Moon.

ACTION: Mr Hastings

Workforce - Mr Oatridge queried as to whether there was a corporate risk around workforce generally e.g. lack of nurses; pensions for GPs etc.

Mr Strickland commented that this is picked up at Primary Care Commissioning Committee.

Mr Oatridge commented that there may be a bubble effect with work flows in and felt that there should be a risk around workforce etc.

Mr Strickland stated that there could potentially be two risks.

Mr Hastings asked Mr Strickland to have a look and recommend what is best.

ACTION: Mr Strickland

Mr Oatridge advised that he thought it should be a corporate risk.

Mr Strickland advised that he would speak with Mr McKenzie.

Maternity Capacity and Demand (QS05) – It was agreed that this risk could be closed.

Mr Strickland left the meeting.

QSC/19/070 Feedback from Associated Forums

QSC/19/070.1 Health and Wellbeing Board (Item 7.1)

The Health and Wellbeing Board minutes from 10th April 2019 were received for information/assurance.

QSC/19/070.2 Commissioning Committee (Item 7.2)

The Commissioning Committee minutes from 30th May 2019 were received for information/assurance.

QSC/19/070.3 Primary Care Operational Management Group (Item 7.3)

The Primary Care Operational Management Group minutes from 17th May 2019 were received for information/assurance.

QSC/19/070.4 NICE Group (Item 7.4)

The NICE Group minutes from 15th May 2019 were received for information/assurance.

QSC/19/071 Items for Escalation/Feedback to CCG Governing Body

MASA and Child Death changes

QSC/19/072 Any Other Business

Australian Flu - Mr Hastings advised that there is an outbreak of Australian Flu at the moment and the UK usually follows the trend of these cases which was peaking in June so we would normally see effects in August/September and wondered if there were any preparations for this.

Ms Higgins replied that yes the flu group is looking into this. This has been discussed at CQRM with regards to getting vaccinations earlier; there is a CQUIN and it will be added to the GP Primary Care Newsletter.

Mr Hastings wondered if it would be covered with the trivalent vaccinations.

Ms Higgins replied that she but didn't know the strain; they have seen a rise in numbers in Australia but they are not dependency as yet. However, this has been sent out to Primary Care and they are working on flu preparation.

Mr Oatridge asked if the practices would need to do anything different.

Mr Hastings commented that PHE had not made the vaccinations available yet and queried as who the PHE representative was as it needs to be raised at the next Health Protection Forum and added that it was normally himself or Mr Kalea that goes from the CCG.

Ms Higgins asked if Mr Hastings wanted someone from Quality to attend and asked Mr Hastings to share the dates to see if someone could go. She advised that Mrs Corrigan also does monthly calls about screening/vaccinations etc.

ACTION: Mr Hastings

QSC/19/073

Date of Next Meeting: Tuesday 13th August 2019 at 10.30am in the Main Meeting Room, Wolverhampton Clinical Commissioning Group.

Apologies received from Ms Higgins and Dr Rajcholan.

Meeting closed at 12:15pm

Signed:	 	 Date:	
Chair			