

Minutes of the Quality & Safety Committee
Tuesday 10th December 2019 at 10.30am in the CCG Main Meeting Room

PRESENT:

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

Lay Members:

Sue McKie – Patient/Public Involvement – Lay Member
Jim Oatridge – Lay Member

Patient Members:

Marlene Lambeth – Patient Representative

In attendance:

Liz Corrigan – Primary Care Quality Assurance Coordinator, WCCG
Mavis Foya – Quality Team, WCCG
Nicola Hough – PA to Chief Nurse, Director of Quality, WCCG
David King – EIHR Manager, WCCG
Matt Leak – Public Health, Wolverhampton Council
Peter McKenzie – Corporate Operations Manager, WCCG
Lorraine Millard – Designated Nurse Safeguarding Children, WCCG
Hemant Patel - Head of Medicines Optimisation, WCCG
Matt Reid – Acting Head of Nursing - Corporate Support Services
Ravi Seehra - Public Health, Wolverhampton Council
Lesley Thorpe – Primary Care Macmillan Nurse Facilitator, WCCG

APOLOGIES:

Mike Hastings – Director of Operations, WCCG
Annette Lawrence - Designated Adult Safeguarding Lead
Katrina McCormick – Children’s SEND Programme Officer, WCCG
Ankush Mittal – Public Health, Wolverhampton Council
Peter Price – Independent Member – Lay Member
Phil Strickland - Governance & Risk Coordinator, WCCG

QSC/19/115 Apologies and Introductions

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

QSC/19/116 Declarations of Interest

No declarations of interest.

QSC/19/117 Minutes, Actions and Matters Arising from Previous Meeting

QSC/19/117.1 Minutes from the meeting held on 12th November 2019 (Item 3.1)

The minutes from the last meeting were read and agreed as a true record with a couple of minor amendments:

Apologies were received from Sue McKie

QSC/19/112.2 - Primary Care Operational Management Group Minutes

The Primary Care Operational Management Group minutes from 11th September 2019 were received for information/assurance.

QSC/19/117.2 Action Log from meeting held on 12th November 2019 (Item 3.2)

QSC/19/107.2: Corporate Memory - To raise this at the Transition Board.

This was discussed at Governing Body and it was agreed to take it to the Transition Board.

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

QSC/19/109.1: Quality Report - To review if there are any issues with regards to access to neurology consultants at RWT.

There were no delays, concerns at RWT.

Dr Rajcholan advised that a patient was referred in October and was offered an appointment for June.

Mr Oatridge commented that he had heard that some neuro-specialist at another trust had declined the referral as they thought the patients were not ill enough.

Mrs Roberts stated that all four Black Country CCGs are working on pathways and added that neurology will be one of them.

Mr Parvez informed the Committee that referrals are being seen between 9.4 weeks and a maximum of 20 weeks.

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

QSC/19/109.2: Primary Care Report - To raise at the Quality Surveillance Group (QSG) regarding incidents that are referred to NHSE for escalation and the feedback from them.

Ms Higgins advised that she had raised this issue and NHSE had said that they couldn't feedback on any individual performance queries raised.

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

QSC/19/099.7: Quality Assurance in CHC Report: Fast tracks – To share information about who asked Dr Rajcholan to sign a fast track form by a nurse.

Dr Rajcholan advised that this was for a COPD patient and would let Ms Danks know which nurse had asked her to sign the form.

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

QSC/19/088.1: Quality Report: Pressure Ulcers - Mrs Roberts advised that full RCAs are always undertaken and in care homes some pressure ulcers are on admission; will provide an update next month as to further analysis of this data and will include origin of PU.

Mrs Roberts advised that this information was in the report in item 5.4.

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

QSC/19/118 Matters Arising

There were no matters arising.

QSC/19/119 Performance and Assurance Reports

QSC/19/119.1 Quality Report (Item 5.1)

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

Cancer Performance (Red rated) – This was showing an improving picture and for the two week wait for breast, RWT was best in the Black Country at the moment; Walsall was working on day 27 and Dudley was on day 23 and the backlog had been reduced. RWT is

still having late tertiary referrals; Harm reviews continue to be conducted and no harm has been identified as yet. This still needs to stay as a red risk at the moment.

Referral to treatment time incomplete pathway performance has not achieved the 92% target and is deteriorating (Red rated) – An update has been provided and there was a slight improvement in October; a robust remedial action plan is in place. There are still issues in endoscopy and neurophysiology; there are no 52 week breaches but if there are they will go through a harm review process.

Mortality: Standardised Hospital Mortality Index (SHMI) (Amber rated) – This is showing an improving picture with the latest SHMI being at 1.14. PWC developed a tracker to show where they should be and they were hoping the trust will be within the funnel plot on the next data release.

Mrs Roberts added that RWT haven't been in the funnel plot in two years.

Ms Higgins stated that RWT was 122 out of 132 trusts across the Country. Work continues around End of Life pathways and the recognition and response of deteriorating patient; the trust is receiving fewer Dr Foster alerts.

Mr Oatridge asked if the tracker shows where they expect it to be.

Ms Higgins replied that it generates an expected SHMI; so far it has been quite accurate.

Mrs Roberts advised that she feels quite assured, the front door activity is good and patient flow is also good the trust is admitting the right patients with higher acuity of patients; however, there is still more work to do in the Community.

Concerns around Sepsis Pathways (Amber rated) – ED has shown sustained improvement. ED data is prevalence data. Inpatient areas data still remains concerning, although some improvement is apparent.

Dr Rajcholan stated that the report says that the PGDs are due to be in place by November 2019 and added that it would be good to mention it at CQRM.

C Diff Numbers – Ms Higgins advised that the trust is over trajectory for *C Diff* and added that the new reporting is being given as an issue.

Mr Parvez added that there was a spike in the number of cases in September and the trust are reviewing staff training.

BCP Workforce issues including 12 hour breaches and MH capacity (Amber rated) – CQC have inspected and the Trust are awaiting the report; workforce issues remain as amber; sickness rates have reduced. Challenge continues regarding improved reporting to CQRM; Wolverhampton CCG presented the suicide themed review they had undertaken and BCP thanked the CCG for it; the trust response to the review will be presented in January. There was a 12 hour breach recently, but this was due to them awaiting bariatric transport.

Mrs Roberts advised that the 12 hour breaches have improved.

Mr Oatridge asked where they were at with the merger and what it meant for management as he felt it may impact on quality.

Mrs Roberts replied that they had interviewed for their Chief Executive. She is having conversations with the two current Chief Nurses and they are aligning their work. They are working on the merger by the 1st April 2020.

Reduced CQC rating of Wolverhampton Nursing Home (Amber rated) – This is also showing an improving picture; there are now no inadequate ratings for Nursing Homes across the City. GPs have commented on the D2A and the quality of discharge information coming from RWT as it is inappropriate or not effectively communicated.

Formal Complaints – Mrs Roberts advised that she has seen a significant improvement around formal complaints at Wolverhampton CCG; there used to be some regular complainants but have managed to divert them now and added that this is showing proper numbers of complaints now.

Ms Higgins referred the Committee to the appendix to the report (Quality Matters Report) which identifies that there is an increase in quality matters for BCP; this has gone to the trust and is mainly around access and pathways.

Mr Parvez added that there had been six issues raised in the last three quarters and is mainly around waiting times.

Dr Rajcholan referred to page 44 of the papers and added that the wellbeing service needs reviewing

Ms Higgins agreed that they are looking at reviewing services and added that Quality Matters works really well thanks to GPs and the teams and advised that the information is really valuable.

Ms McKie stated that it was helpful to see the scenarios.

Mrs Roberts confirmed that there are some concerns relating to pathways at BCP currently.

Dr Rajcholan commented on the access to some services.

Mrs Corrigan joined the meeting.

Mr Oatridge referred the Committee to the graph on page 12 of the report and thought he may be misunderstanding the numbers for BCP serious incident types reported.

Mr Parvez confirmed that there was an error on this graph as BCP didn't have any SIs reported for the month of October 2019.

Mr Oatridge confirmed that the numbers for BCP was still zero.

This was confirmed.

The Committee **received** the Quality Report for **assurance** purposes.

QSC/19/119.2 Primary Care Report (Item 5.2)

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

Serious Incidents – There were no current SIs for Primary Care. However, there were a few items to go to PPIGG.

Quality Matters – There were 13 open Quality Matters but in the narrative in the report it says there were 10 open, it was confirmed that there were 13 open Quality Matters.

Infection Prevention – The average IP rating was 95%; last year was 93% so it is improving.

Flu Programme – The uptake has not been as good as expected for the under 65s and pregnant women; there had been an issue with the under 65 vaccines initially.

MMR Vaccination Programme – The uptake for this was slightly lower than average. However 2018/2019 was the latest figures available.

Sepsis/E Coli – Training is taken place and now includes catheter care.

Mr Patel joined the meeting.

Complaints – There was no new complaints data available at present.

FFT – The uptake was really good in September 2019 with three practices not submitting; this was due to annual leave.

Collaborative Contracting Visits – The new cycle started again in November; they have visited Whitmore Reans which was a good visit. Four more visits are planned before March 2020.

CQC – There were two practices that had 'Requires Improvement' rating at the time of the report being written. However, one has been lifted and has got a 'Good' rating now.

Workforce Activity – Work around GP work continues; programmes are in place for staff that are due to retire to try and retain them. There is also a programme in place for newly qualified nurses being offered mentorship.

Mrs Roberts commented on flu generally and it has also been noted that there are some CCG staff that have had their flu vaccination and added that RWT staff flu immunisation data could be improved.

Mr Leak stated that he had received an update on the flu uptake: for over 65s it was 63.6%, for the under 65s it was 32.8% and pregnant ladies was 32.6%. The 'Flu Fighters' received an award yesterday for the work undertaken.

Mr Oatridge commented on the IP audits and that some areas were non-compliant for sinks and wondered if there were any remedial actions being put in place with this.

Mrs Corrigan replied that these issues are now with Estates; the areas receive an advisory notice rather than a mandatory notice and added that if they need to replace sinks they will. The areas are audited against hospital standards.

Mr Oatridge asked if the next report could highlight if the issues are advisory or mandated.

ACTION: Mrs Corrigan

Ms Higgins thanked Mrs Corrigan for her comprehensive reports and wished her well in her new role.

The Committee **received** the Primary Care Report for **assurance** purposes.

Mrs Corrigan left the meeting and Ms Brennan and Ms Stone joined the meeting.

QSC/19/119.3 Medicine Optimisation Report (Item 5.7)

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

Mr Patel advised that there were two issues on the report that the Committee needed to be aware of:

Section 2.3 – Managing Medicines in Care Homes

Section 2.5 – Transfer of Care around Medicines (TCAM).

Section 2.3 – Managing Medicines in Care Homes: Pharmacists are going out doing appropriate reviews within the care homes; which has been commended locally and nationally.

Section 2.5 – Transfer of Care around Medicines (TCAM): Each service links the community pharmacy with local trusts. The system now delivers a discharge summary which goes to the GP and the pharmacy via e-mail through to GP from discharge. The Pharmacy then contacts the patient to identify if they have had a change of medications. This is helping with costs, time, risk, safety etc. We are the first in the region to go live

with this, Walsall are going live currently and Dudley and Sandwell following later. A reduction of Length of Stay has also been seen.

Dr Rajcholan asked how many community pharmacists there were.

Mr Patel replied that Wolverhampton have 67 community pharmacists.

Dr Rajcholan asked if this was linked to all GP practices.

Mr Patel replied that it was and it was mainly for high risk patients at the moment.

Mrs Roberts stated that she is meeting with Dr Odum (Medical Director at RWT) and Angela Davis (Head Pharmacist at RWT). It really works and it is good to properly evaluate the system.

Dr Rajcholan asked if they will benefit systems outcomes.

Mr Patel replied that yes it would.

Dr Rajcholan commented on the medication review service section on page 2 of the annual report and had noted that there were 5 fewer homes visited this year.

Mr Patel commented that there were 15 homes visited in the previous year and 10 this year. However, the homes are bigger and so they are get through a lot more.

Dr Rajcholan stated that it was very good work undertaken and led by Dr Hutchinson.

Mrs Roberts commented on RWT and their Medicines Safety and advised that they had identified issues around safety and she is not completely assured; she thought CQC may have picked that up too.

Mrs Roberts asked Mr Patel for an update on this in the next quarterly report.

ACTION: Mr Patel

Mrs Roberts stated that there is lots of really good work going on.

Mr Oatridge asked if there were any concerns around the next two to three months around medicines and have we got a system as to whom it will affect (Brexit).

Mr Patel replied that the system will identify patients and advised that legislative updates have come in now.

Mr Oatridge asked if there were any concerns about Wolverhampton patients.

Mr Patel stated that they have got everything in place that they can have.

The Committee **received** the report for assurance purposes.

Mr Patel left the meeting and Ms Henriques-Dillon, Mrs Thorpe and Mr Reid joined the meeting.

QSC/19/119.4 Safeguarding - Adults, Children and Children and Young People in Care Report (Item 5.3)

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

Safeguarding Adults

The new accountability framework has now been published and the team are working towards this.

WCCG Statutory Responsibilities: The Safeguarding Commissioning Assurance Toolkit (S-CAT) has been distributed by NHSE for completion by the WCCG Safeguarding Team by the end of November 2019.

Training: A CCG wide safeguarding training needs analysis has taken place.

Domestic Homicide Reviews (DHR) – There are currently 11 in progress.

Safeguarding Adult Reviews (SAR) – There was one SAR which was published on 9th August 2019 and the link was available in the report.

NHSE Funded Safeguarding Project (Hard to Reach Communities): £10,000 has been provided by NHS England to support extension of this project into other vulnerable communities.

Safeguarding STP Working Group: This collaborative work continues and there are nine workstreams each led by a designated professional from a CCG with members from both CCGs and providers from across the Black Country.

NHSE Funding – STP Training Event ‘Our Voices, Our Shoes’: The second event was held in September 2019. The conference saw 157 children, young people and professionals jointly exploring how health services can be delivered more effectively and was a great success. 127 pledges were made by the delegates of ways that the learning and messages they had been given on the day, were going to be taken in to their daily personal and working lives, in order to make changes and support this vulnerable group.

Wolverhampton Safeguarding Together (WST) – Guidelines were put out at the end of September and officially commenced on the 29th September 2019.

Section 11 Audit – A regional template was provided to self-assess services against the score descriptors assessing whether we are outstanding, good, requires improvement or inadequate which was completed by the safeguarding children designates. Positively the rating in 96% of areas within the CCG was either Outstanding or Good. An action plan is to be formulated to support the CCG becoming outstanding in all areas of this audit.

Learning Disabilities Mortality Reviews (LeDeR) – Wolverhampton continue to be at the most favourable place in the Black Country and work is ongoing across the STP.

Mrs Roberts referred to section 2.4 of the report and advised that the table top review was in regards to the West Park murder and that they are expecting significant learning. With regards to LeDeR, we are in a good position for Wolverhampton but the Black Country as a system is an issue and will continue to be scrutinised until we have zero outstanding cases.

Black Country Partnership Safeguarding Review –A meeting is planned over the next couple of weeks in regards to the concerns previously raised.

Dr Rajcholan commented that the report stated that DoLs is being replaced by Liberty Protection Safeguards in October 2020 and wondered if awareness of this had been raised with GPs and the Community.

Ms Higgins advised that she would take this query back to Ms Lawrence.

ACTION: Ms Higgins

Children and Young People in Care (CYPiC)

Local Demographics – The numbers of our CYPiC has dropped slightly over the last quarter, from 613 (June 2019) to 595 in September 2019, with Wolverhampton being one of only three authorities in the region that has reduced in numbers. Looked After Children kept in Wolverhampton has gone from 40% - 50%. Children currently placed further than 50 miles away remains low at 8%.

With regards to the STP; the commissioning arrangements for CAMHS is being bought together and should help with transferring children across areas.

Raising the profile of Safeguarding of LAC – Discussions are taking place at Safeguarding Wolverhampton Together meetings.

Mr Oatridge referred to section 5.0 of the report - Providers and commented that there appears to be a capacity issue at RWT.

Ms Brennan replied that the CCG contracts team are reviewing this.

The Committee received and **noted** the report

Ms Brennan and Ms Stone left the meeting.

QSC/19/119.5 Quality Assurance in Care Home Report (Item 5.4)

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

Serious Incidents – Wulfrun Rose have been experiencing some issues, but have now got a new team leader.

Mr Oatridge left the meeting.

Pressure Ulcers – Training has not been embedded in some homes.

Slips, Trips and Falls – There were two incidents with serious injury reported in quarter 2. Failings were due to the lack of robust assessments which also correlates with not recognising deterioration.

Performance Data – A lot of work has been done around this. A &E attendances have decreased from 8% to 5.1% and hospital admissions from 4.6% to 2.7%.

Ms Higgins added that as we are going into the Winter months, we might see a peak in this.

Ms Henriques-Dillon advised that the highest call out rates were from two homes that are dual registered as nursing and residential care homes (Wulfrun Rose and Sunrise).

Ms Higgins advised that the CCG has had their first FREED meeting and they have agreed to widen the remit to also include residential and care homes.

Ms Henriques-Dillon advised that the top reasons for call outs were respiratory, falls and suspected sepsis.

Utilisation of the RITS Team – There has been a reduction in GP call outs, but this is fluctuating month on month.

Mr McKenzie joined the meeting.

Mrs Roberts added that enhanced ward rounds will help with this and they will continue to get this data.

Ms Henriques-Dillon advised that they will review which homes this is for in the next quarter.

Mortality Data – This is showing an improved picture; people are dying in their preferred place of care/preferred place of death.

Dr Rajcholan commented on the end of life and the DNACPR forms and advised that she had tried to send a form to WMAS but they have now got another form.

Ms Higgins stated that WMAS have now said that whatever form is provided WMAS will accept and added that the system will now go with RESPECT too.

CQC Rating – There are more nursing homes in the city rated 'good' by CQC now.

Safeguarding Referrals – There are not many referrals coming through now and processes are in place.

Outbreaks in Care Homes – There have been a Norovirus outbreak in one nursing home and one residential home.

Flu – The team are promoting flu prevention; based on patients address they are targeting homes that are showing less than 60% of residents who have been vaccinated.

Quality Improvement – The team have produced a 'Best Practice Guidelines' pocket guide to support and implement best practice and NICE guidelines. As part of digital transformation there were eight nursing homes that had completed the Information Governance Toolkit and have nhs.net account to facilitate safer data transfer. Since the report was written that are now 26 homes across the City with NHS.Net.

Ms Higgins stated that the pocket sized best practice guidelines are really good.

Dr Rajcholan congratulated Mrs Henriques-Dillon and the team.

Mrs Roberts stated that the report was really good and had lots of detail in it and was commendable work.

The Committee **received** the report and **noted** the positive outcomes the QNA team are having with improving quality, safety and admission avoidance across the nursing care home sector.

Ms Henriques-Dillon left the meeting.

QSC/19/119.6 SEND Update (Item 5.5)

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

The SEND Health Local Offer review has now been reviewed. A Strategy has been co-produced and the three year delivery plan is also in place. The team are now working on what the review findings were saying. CAMHS continue to be highlighted by parents. Governance processes for SEND have now been strengthened.

Mrs Roberts advised that the system is now overdue an inspection and it was expected to be before March 2020.

The Committee **received** and **noted** the content of the report.

QSC/19/119.7 Cancer and End of Life Update (Item 5.6)

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

Projects Ongoing:

Swan Project –The Swan emblem is a visual guide and one that forms recognition that the patient is entering the last phase of their illness. It acts as a prompt for all cares and professionals to act appropriately, whatever their role is, to protect the patients' dignity and respect, whilst supporting the families and carers. This philosophy is to be rolled out into Wolverhampton care homes and community care. The ICA End of Life group has a Task and Finish group looking at the roll out of the Swan program into primary care.

Red Bag Project – A new project lead has now been appointed.

Mr King joined the meeting.

STP Community Cancer Champions – They have won £30,000 to improve screening and they have asked for members of the public who would be interested in for training programmes.

RESPECT – This is being rolled out next year; Mrs Thorpe is going to Worcester to see how they have implemented it.

Stop and Watch Early Warning Tool - This project is also being rolled out and is an early warning tool for relatives, carers and nurses to use to spot soft signs of deterioration.

Wolverhampton's Collaborative Cancer Strategy (2019 – 2024) – This is available to review if anybody wants to see it.

The Committee **received** the report and noted the work being undertaken by the Macmillan Primary Care Nurse Facilitator.

Mrs Thorpe left the meeting.

QSC/19/119.8 Equality and Diversity Report (Item 5.8)

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

Mr King advised that the CCG publications are where they should be. He recently attended the CQRM (RWT) and he advised them that there were some things missing on their website. This will be reviewed for the next quarterly update as they had informed Mr King that they were addressing it.

Mrs Roberts replied that they had received good assurance. She added that they had undertaken an internal audit of the CCG and there was nothing to flag; there was one low level assurance. Further information will be provided to the next meeting.

ACTION: Mrs Hough

The Committee **received** and noted the contents of the report.

Mr King left the meeting.

QSC/19/119.9 Infection Prevention Service Update (Item 5.9)

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

Matt Reid presented the Infection Prevention Service report and highlighted the following:

Outbreaks – Over the last quarter there was one norovirus outbreak across the homes across the region. There had also been a flu outbreak.

GP Audit data – The scores are good; there is some non-compliance and feedback is given to the areas at the time.

C Diff – The trust has got a trajectory of no more than 40 cases for the year and they are currently at 32 with there being one last month. The CCGs trajectory was no more than 48 cases for the year and they were at 29 by mid-December. It is not possible to compare data with where they were last year as the definitions have changed.

Gram Negative Bacteraemia – There is a meeting at the trust on 18th December 2019 regarding this and there is Quality Improvement work being undertaken around urinary catheters and documentation.

Ms Higgins suggested that it might be useful to have a Nursing Home manager present at

the meeting.

Total Gram Negative – There has been a slight decrease this year.

Ms Higgins commented that they will hopefully see an impact of the Dip or Not to Dip project soon.

Mrs Roberts stated that it was really helpful to see the data in the report with a good level of assurance.

The Committee **received** and **noted** the contents of the report.

Mr Reid and Mrs Roberts left the meeting.

QSC/19/119.10 Public Health Update (Item 5.10)

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

Mr Leak presented the Public Health report and advised that it was the first report from Public Health in its current format. Mr Leak asked what the Committee would like to see with regards to the Primary Care data. He added that there is now a principal specialist over each area within Public Health and thought it would be more useful to have quarterly reports and updates from the leads.

Ms Higgins stated that she would meet with Mr Leak to discuss this with him and she would let the Committee know what will be presented.

The Committee **received** the update of NHS facing Public Health commissioned services and other specific areas of interest for assurance and scrutiny.

QSC/19/120 Risk Review

QSC/19/120.1 Risk Register (Item 6.1)

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

There was one new risk that had been added to the Committee's risk register which was with regards to the nasal vaccine shortages (QS14). It needed to be reviewed and the Committee was asked if they wanted to reduce the current score of 12 or for it be removed.

The Committee **agreed** for the risk to be removed from off the risk register.

RWT 2 week wait breast (QS09) – The Committee were asked if they wanted to decrease the current score of 12 as the trust has sustained it for a while now.

Mr McKenzie advised that the risk was due for a review.

The Committee **agreed** to decrease the rating.

Safeguarding Transition (QS11) – Ms Higgins advised that this might need to be reviewed too.

QSC/19/121 Items for Consideration

QSC/19/121.1 CCG Complaints Policy (Item 7.1)

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

Ms Higgins advised that an extra section has been added to the complaints policy around vexatious complainants, she added that it had been to SMT and approved there.

The Committee **agreed** to the changes of the Complaints Policy.

QSC/19/121.2 Information Governance – Caldicott Guardian (Item 7.2)

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

Mr McKenzie advised that this was a formal request to change the CCG Caldicott Guardian from Helen Hibbs. He added that the guidance states that it should be a senior clinician and Sally Roberts was suggested and she was happy to take that on.

The Committee **agreed** to designate the Chief Nurse, Director of Quality (Sally Roberts) as the organisation's Caldicott Guardian.

QSC/19/122 Any Other Business (Item 8)

There were no items to be raised as any other business.

QSC/19/123 Feedback from Associated Forums

QSC/19/123.1 Commissioning Committee Minutes (Item 9.1)

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

QSC/19/123.2 Primary Care Operational Management Group Minutes (Item 9.2)

The Primary Care Operational Management Group minutes from 23rd October 2019 were received for information/assurance.

QSC/19/123.3 CCG Governing Body minutes (Item 9.3)

The CCG Governing Body minutes from 10th September 2019 were received for information/assurance.

QSC/19/123.4 Finance and Performance Report (Item 9.4)

The Finance and Performance quarterly report was received for information/assurance.

QSC/19/123.5 Quality Surveillance Group Update (Item 9.5)

The Quality Surveillance Group update was received for information/assurance.

QSC/19/123.6 Health and Wellbeing Board Minutes (Item 9.6)

The Health and Wellbeing Board Minutes from 16th October 2019 were received for information/assurance.

QSC/19/124 Items for Escalation/Feedback to CCG Governing Body

There were no items for escalation/feedback to CCG Governing Body.

QSC/19/125 Date of Next Meeting: Tuesday 14th January 2020 at 10.30am in the Main Meeting Room, Wolverhampton Clinical Commissioning Group.

Meeting closed at 12.40pm

Signed: Date:
Chair