

Nottingham North and East Clinical Commissioning Group

Meeting Title	NHS Nottingham North and East CCG Governing Body	Date: 23 January 2018
Paper Title	Quality and Risk Committee Highlight Report from the meeting held on 9 November 2017	Agenda Item: NNE/GB/18011
Lead Director Report Author	Nichola Bramhall, Director of Nursing and Quality Click here to enter text.	
Purpose (tick one only)		
Approval	<input type="checkbox"/>	Acknowledge/ Note
	<input checked="" type="checkbox"/>	Review
	<input type="checkbox"/>	For Information
	<input type="checkbox"/>	<input type="checkbox"/>
Executive Summary		
Executive Summary	<p>The minutes from the meeting held on 9 November 2017 are not yet ratified and so will follow. Key highlights from the meeting are shown below:</p> <div style="border: 1px solid black; padding: 5px;"> <div style="background-color: #92d050; padding: 2px;">Assure</div> <ul style="list-style-type: none"> • Equality/ Quality Impact Assessments (EQIA): a log containing details of completed EQIAs was received. 4 had been completed in the last reporting period none of which required consideration by the committee. Discussions are underway regarding when details of EQIAs relating to financial recovery schemes that are still in development can be reported in public. Until then these will be considered in the confidential section. • Quarter 2 2017/18 Quality Report: reviewed in detail- issues for escalation to Governing Body agreed- including Healthcare Associated Infections (HCAI) with all 3 CCGs' being over target for Cdiff and NUH having had 1 MRSA case at end Q2, Nottinghamshire Transforming Care Partnership being 1 case over trajectory for numbers of inpatients at end Q2 and continued non achievement of target for communicating eligibility decision in continuing healthcare (CHC) within 28 days and target for <15% of assessments carried out in hospital settings along with action being taken to improve. Also noted that Rushcliffe CCG are low users of ehealthscope to report provider concerns. Reasons to be investigated via primary care quality group. • Clinical Risk Register: was reviewed. The following changes were noted: <ul style="list-style-type: none"> ➢ Sherwood Forest Hospital Quality- overall score 6 unchanged but likelihood and consequence scores reversed to align with Mid Notts clinical risk register. ➢ Care Home Quality- increased from 6 to 9 in light of pending capacity issues in the team following retirement of staff member and delayed recruitment due to organisational change. ➢ Primary Care Quality- reduced from 6 to 3 in light of 360 audit findings. ➢ Deprivation of Liberty Safeguards – reduced from 6 to 3 now scoping completed and process established. ➢ Equality/ Quality Impact Assessment Completion- reduced from 8 to 4 now that new process established. ➢ Circle Endoscopy Washer Issues- reduced from 9 to 3 as contingency in place and no significant impact. • Special Educational Needs and Disability: the bi-annual report was received which demonstrated good progress in Nottinghamshire in implementing reforms. • Annual Reports for 2016/17 were reviewed providing assurance in </div>	

relation to the following:

- Safe Management of Controlled Drugs
- Serious Incidents
- Nottinghamshire Safeguarding Childrens Board
- **Sub group minutes and/or highlight reports were received providing assurance in relation to the effectiveness of the following:**
 - Health and Safety Sub Group
 - Care Homes Sub Group
 - Safeguarding Committee
 - Nottinghamshire Safeguarding Children Board
 - Nottinghamshire Safeguarding Adults Board
 - Equality and Diversity Forum
 - Primary Care Quality Groups
- **Primary Care Quality Assurance 360 Assurance Internal Audit Report-** received with significant assurance and only 1 low risk recommendation.

Advise

- **Provider Dashboard and Quality Scrutiny Panel (QSP) Meetings:** reviewed in detail. The following current quality issues were identified:
 - **Nottingham University Hospital (NUH):** ED performance remains below target but quality indicators remain satisfactory. CCG staff attended an internal mock CQC inspection in ED with NUH- issues identified in relation to tracking and oversight of patients when the unit is overcrowded. Cancer below target for 62 day wait but improving- harm review process being embedded, numbers of over 104 day breaches reducing. Work continues with NUH and Dr Foster to undertake deep dives into mortality rates. Work also continues to strengthen maternity governance and improvements have been seen in incident reporting and investigation. Strengthened maternity leadership recruitment underway.
 - **Nottinghamshire Health Care Foundation Trust (NHCFT):** CQC well led inspection due to take place on 14-16 November 2017. Lings Bar Hospital (LBH) workforce turnover noted to be high, thought to be due to staff moving on to new roles associated with changing services. This will be further explored via QSP. Outbreak of Cdiff and increase in falls at LBH noted due to increasing complexity of cohort of patients admitted. Concern in relation to use of adult beds for children with Mental Health issues- noted that a new facility is being built which will be ready next year. Continued joint work between NHCFT and NUH to reduce unsafe transfers of care acknowledged.
 - **East Midlands Ambulance Service (EMAS):** concern raised in relation to further deterioration in meeting appraisal and training targets, noted EMAS currently undergoing workforce reconfiguration to meet new performance standard requirements. Agreed further assurance required in relation to impact of not meeting these workforce targets- this will be raised at the Clinical Assurance and Delivery Group.
 - **Ramsay Woodthorpe Hospital:** wrong site surgery never event reported. Comprehensive investigation report and action plan received.
- **Quarterly incident report:** received. Noted that reporting rates in Nottingham North and East CCG very low, especially in relation to Information Governance incidents. To be reviewed to ensure this is a real reflection and not underreporting.
- **The following Terms of Reference were approved:**
 - Circle Nottingham Quality Scrutiny Panel
 - Quality and Risk Committee
 - Equality and Diversity Forum
- **Escherichia Coli Action Plan-** Nottinghamshire wide action plan received- this will be further refined as learning from collection of risk factor data established.

		Alert			
		<ul style="list-style-type: none"> • Quarter 2 Quality Report- issues in relation to HCAI, transforming care and CHC as noted above. • Personal Health Budgets 360 Assurance Internal Audit Report and Action Plan Progress Update- report identified limited assurance, action plan to address recommendations already underway and update received demonstrating significant progress. 			
		Ratified minutes from the meeting held on 10 August 2017 are also provided for information (a contemporaneous highlight was previously provided).			
If paper is for approval, have the following impact assessments been completed?					
Quality Impact Assessment	Yes <input type="checkbox"/>	Equality Impact Assessment	Yes <input type="checkbox"/>	Privacy Impact Assessment	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>
	N/A <input checked="" type="checkbox"/>		N/A <input checked="" type="checkbox"/>		N/A <input checked="" type="checkbox"/>
Conflicts of Interest - Recommended action to be agreed by the Chair at the beginning of the item.					
<input checked="" type="checkbox"/> No conflict identified <input type="checkbox"/> Conflict noted, conflicted party can participate in discussion but not decision <input type="checkbox"/> Conflict noted, conflicted party can remain but not participate <input type="checkbox"/> Conflicted party is excluded from discussion					
Implications: <i>(please tick where relevant)</i>					
Integration	<input type="checkbox"/>	Patient Choice	<input type="checkbox"/>		
Reducing inequality	<input type="checkbox"/>	Patient & Public Involvement	<input type="checkbox"/>		
Constitution	<input checked="" type="checkbox"/>	Quality of Services	<input checked="" type="checkbox"/>		
Governance	<input checked="" type="checkbox"/>	QIPP	<input type="checkbox"/>		
Innovation	<input type="checkbox"/>	Research	<input type="checkbox"/>		
Learning and Development	<input type="checkbox"/>	Sustainability	<input type="checkbox"/>		
Finance checked by:					N/A
Appendices					
Report History	The Quality and Risk Committee Highlight Report is a quarterly standing item.				
Patient and Public Involvement					
Recommendation	The Quality and Risk Committee is asked to: ACKNOWLEDGE the content of the report, in particular the issues identified in the alert section.				