

Nottingham North and East Clinical Commissioning Group

Meeting Title	NHS Nottingham North and East CCG Governing Body	Date: 20 March 2018
Paper Title	Quality and Risk Committee Highlight Report from the meeting held on 14 February 2018	Agenda Item: NNE/GB/18039
Lead Director Report Author	Nichola Bramhall, Chief Nurse/ Director of Quality Rebecca Stone, Deputy Director of Nursing and Quality	
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 14 February 2018 are not yet ratified and so will follow. Key highlights from the meeting are shown below.</p> <p>Ratified minutes from the meeting held on 09 November 2017 are also provided for information (a contemporaneous highlight was previously provided).</p>	
Assure		
	<ul style="list-style-type: none"> • Equality/ Quality Impact Assessments (EQIA): a log containing details of completed EQIAs was received. There had been three EQIAs (not related to financial recovery) received since the last meeting, none required consideration by the committee. Schemes related to financial recovery were reported on in the confidential section of the committee. • Clinical Risk Register: Reviewed and following changes noted: <ul style="list-style-type: none"> ➤ Circle Endoscopy Washer Issues - agreed to archive as contingency in place and no significant impact. ➤ LeDeR - Reduction of risk from 12 to 6 due to training of staff, oversight and working arrangements in place to support review processes. ➤ ED - Due to the recent SIs and current escalation agreed to increase this risk to 4 by 4 making it 16 which would escalate to Governing Body Assurance Framework. ➤ Agreed that a risk should be added in relation to the risks to quality in particular patient safety associated with the scale and pace of commissioning extra community beds to relieve acute pressures. • Sub group minutes and/or highlight reports were received providing assurance in relation to the effectiveness of the following: <ul style="list-style-type: none"> ➤ Health and Safety Sub Group ➤ Care Homes Sub Group – Received in Confidential section ➤ Safeguarding Committee ➤ Nottinghamshire Safeguarding Children Board ➤ Nottinghamshire Safeguarding Adults Board ➤ Equality and Diversity Forum ➤ Primary Care Quality Groups • NHCT – Mental Health Service – Deep dive: Report received which covered workforce, turnover, staff sickness and mitigations taken to support staff including safer staffing levels action. Information on Incidents indicated the highest category reported in Q1-3 (2017/18) were combined self-inflicted harms (includes suspected suicide and potentially avoidable death related incidents). Quarterly quality review meetings held to provide assurance around self-harm and suicide incidents. 	

Recent CQC inspection rated as overall 'Good'.

Advise

- **Provider Dashboard and Quality Scrutiny Panel (QSP) Meetings:** reviewed in detail. The following current quality issues were identified:
 - **Nottingham University Hospital (NUH):** Reducing trend of 104 day cancer waits (40 in Dec 2016 compared to 11 in Dec 2017). ED – Satisfactory indicators include no 12 hour breaches, sustained performance for ambulance handovers within 15 and 30 minutes, low number of complaints (12 during Sept-Nov 2017 out of 44,644 ED attendances). Continued outlying position for HSMR, however SHMI was within limits.
 - **Nottinghamshire Health Care Foundation Trust (NHCFT):** LBH increase in falls seen due to D2A pathway patients having increased complexity/frailty. Quality visit undertaken indicating good leadership and engaged staff.
 - **Sherwood Forest Hospitals Foundation Trust (SFHFT):** ED performance starting to decline, 8 x 12 hour breaches. 11.4% of ambulance handovers took longer than 30 mins (Nov 2017). Recovery plan in place which is monitored by Co-ordinating Commissioner.
 - **East Midlands Ambulance Service (EMAS):** Not meeting new performance targets as yet. Improvement seen though with most clinically unwell patient cases.
 - **Circle Nottingham:** Current re-procurement exercise underway, potential to destabilise workforce noted. Cluster of SIs related to pulmonary embolisms (PEs) following general surgery. To be followed up with quality visit to ensure actions implemented.
- **Policies and procedures for approval:** Agreed to defer until alignment of Greater Nottingham CCGs complete as this would impact on changes to policies.
- **CCG Quarterly Incident report:** Received and noted low numbers of incidents with the majority being IG related, reporting through IGMT committee. Low numbers of incidents.
- **Escherichia Coli report:** Received. Locally E.coli rates higher than the England average although national benchmarking doesn't compare like for like. No emerging themes to target improvement work. Hydration campaigns undertaken and noted it may be possible to meet 10% target reduction for 2017/18.
- **Safeguarding:** The 'Working Together' guidance had been published which meant Safeguarding Boards would be disbanded and new multi-agency safeguarding arrangements put in place. The CCGs, LA and police are working together to take this forward locally.
- **Local Maternity Systems (LMS):** Governance structure in place, LA and CCGs working with providers for a common set of quality indicators. Plan submitted. Based on four considerations:
 1. Understanding local population and needs for maternity services.
 2. Analysis of gap between current service provision and vision set out in Better Births.
 3. Alignment with other local plans
 4. Financial case for change

Alert

- **Quarter 3 2017/18 Quality Report:** issues for escalation to Governing Body agreed as:
 - Healthcare Associated Infections (HCAI) with all 3 CCGs' (except NNE) and NUH being over target for C diff, NW's position is now unrecoverable for the year with the annual limit already exceeded.
 - Four recent Serious Incidents in or related to ED at NUH; ongoing investigation. Unannounced mock CQC inspection in October 2017

	<p>indicated issues around tracking and oversight of patients in blue central area. A joint CCG/NHS I quality visit to ED scheduled for 15 February 2018 to follow this up.</p> <ul style="list-style-type: none"> ➤ Associated risk – additional community capacity, scale and pace to commission extra 90 beds, need to ensure risks and mitigations identified for quality and safety; matrix established and tracking of all patients in to community. ➤ Transforming care – over trajectory, plan in place to meet target by end of March 2018. <ul style="list-style-type: none"> • E.coli report - High numbers and difficulty in reducing these as no common risk factors/ themes emerging from case analysis.
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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.

- No conflict identified
- Conflict noted, conflicted party can participate in discussion but not decision
- Conflict noted, conflicted party can remain but not participate
- Conflicted party is excluded from discussion

Implications: *(please tick where relevant)*

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.