

**Minutes of the Quality and Finance Committee held on 28 June 2016
at West Offices, York**

Present

Mr David Booker (DB) - Chair	Lay Member
Mrs Michelle Carrington (MC)	Chief Nurse
Dr Tim Maycock (TM)	GP Governing Body Member, Lead for Primary Care
Dr Andrew Phillips (AP)	GP Governing Body Member, Lead for Urgent Care/Interim Deputy Chief Clinical Officer
Mrs Rachel Potts (RP)	Chief Operating Officer

In attendance

Mrs Karen Hedgley (KH) – for item 5.2	Designated Nurse Safeguarding Children and Children in Care
Ms Michèle Saidman (MS)	Executive Assistant
Mrs Debbie Winder (DW)	Head of Quality Assurance

Apologies

Mr Michael Ash-McMahon (MA-M)	Deputy Chief Finance Officer
Mrs Fiona Bell (FB)	Deputy Chief Operating Officer
Dr Mark Hayes (MH)	Chief Clinical Officer
Mrs Helen Hirst (HH)	Interim Accountable Officer
Dr Arasu Kuppuswamy (AK)	Consultant Psychiatrist, South West Yorkshire Partnership NHS Foundation Trust – Secondary Care Doctor Member
Dr Shaun O’Connell (SOC)	GP Governing Body Member, Lead for Planned Care and Prescribing
Mrs Tracey Preece (TP)	Chief Finance Officer

The agenda was discussed in the following order.

1. Apologies

As noted above.

2. Declarations of Interest in Relation to the Business of the Meeting

There were no declarations of interest in relation to the business of the meeting. All declarations were as per the Register of Interests.

3. Patient Story

MC shared a patient story.

The Committee:

Noted a number of issues experienced by the patient and their carer, from the patient story, from a discharge planning and primary care perspective.

4. Extended Quality Report

MC referred to the first Extended Quality Report which aimed to provide more rounded assurance in respect of services commissioned by the CCG and on the wider health economy noting that this should be read in conjunction with the draft Quality Assurance Strategy at item 6. The report provided information on Infection Prevention and Control, Serious Incidents, Patient Experience, Commissioning for Quality and Innovation (CQUIN), Evaluation of Schemes (Better Care Fund; Quality, Innovation, Productivity and Prevention (QIPP); and System Resilience Group), CCG Compliance with Staff Training, Quality Accounts, Regulatory Inspection Assurance, Dementia, Maternity, Clinical Research and Effectiveness Committee and Research Sub-Committee, Individual Funding Requests Annual Report and Partnership Commissioning Unit. Three appendices provided respectively Partners in Care Newsletter Update March – May 2016, Dementia Dashboard January 2016, and the Partnership Commissioning Unit Annual Report 2015/16.

DW highlighted concerns in respect of Infection Prevention and Control following the departure of the Lead from Commissioning Support (CS). She advised that increased assurance was being gained by CCG attendance at all Post Infection Reviews and noted the establishment of a CCG Infection Prevention and Control Locality Group with the aim of improving communication and practice across care settings; its inaugural meeting was scheduled for 30 June. The CCG had received the strategic action plan from the York Teaching Hospital NHS Foundation Trust external Infection Prevention and Control review; partnership working was now taking place to embed and sustain improvement. MC added that the intention was for the CCG to bring the function, previously provided by the CS, in house jointly with NHS Scarborough and Ryedale CCG.

MC clarified the potential financial penalties resulting from infection. In respect of Clostridium Difficile a fine was discretionary and would only be applied if there had been a lapse in care and the provider was over trajectory. For MRSA there would be financial consequences as the current position at York Teaching Hospital NHS Foundation Trust was two cases against the zero trajectory. Concern had been raised at Contract Management Board about the need to embed infection prevention and control.

In relation to Serious Incidents MC referred to regular discussion at the monthly Quality and Finance Committee meetings. She noted the need to support Primary Care minor surgery providers in terms of assurance about implementation of the NHS England National Safety Standards for Invasive Procedures which would be standardised through clinical networks and included in indicative budgets for dermatology. MC explained the Duty of Candour requirements, noting that this had been included in the York Teaching Hospital NHS Foundation Trust contract for 2016/17, and advised that work was taking place to standardise definitions across the Yorkshire and Humber relating to closure of action plans for Serious Incidents. Concerns, which had been escalated to the Contract Management Board, had recently been identified in respect of Serious Incidents at Tees, Esk and Wear Valleys NHS Foundation Trust.

MC reported that the new CCG Patient Experience Officer would take up post on 4 July. She referred to the annual summary of complaints information and associated work to

ensure appropriate sign off and sharing of lessons learnt. MC additionally advised that work was taking place to triangulate reports received by the Referral Support Service and that NHS England was responsible for complaints directly to them regarding Primary Care and also for issues of performance management.

CQUIN information was detailed by provider with monitoring taking place through Sub Contract Management Boards.

In respect of CCG staff compliance with statutory and mandatory training, the information reported as at the end of April 2016 provided assurance about processes. Follow up was required of a staff training needs analysis. Compliance with training was noted to be good.

MC described the requirement for commissioners and other partners to write statements on their providers' Quality Accounts. She advised in respect of York Teaching Hospital NHS Foundation Trust's achievements reported for 2015/16 that the CCG had noted and advised the Trust on what they believed were inaccuracies in some indicators.

In terms of Regulatory Inspection Assurance MC highlighted York Integrated Care Team had been inspected by the Care Quality Commission and rated as an outstanding area of practice noting that further roll out was planned across the CCG. There were variable ratings of Care Homes and the Acting Designated Nurse Adult Safeguarding and the community Infection Prevention and Control Team was working with Local Authorities to make improvements. The 'YorInsight' site was available for raising concerns.

MC noted the ongoing work to improve primary care coding of dementia and highlighted inclusion in the report of the dementia dashboard used by York Teaching Hospital NHS Foundation Trust. She also noted that, in addition to the regional maternity dashboard previously reported to the Committee, a quality paediatrics dashboard was being developed to map with national standards.

MC referred to the risk reported at the monthly meeting of the Committee regarding Specialist School Nursing which had a maximum potential impact of £200k (full year). She reported that a further risk was emerging in relation to the generic School Nursing Service which had been taken in house by the Local Authority. Dr Emma Broughton was working with the Local Authority on this issue.

MC noted that the CCG was working with North of England Commissioning Support (NECS) on development of clear guidance and criteria for Individual Funding Requests and through the Clinical Effectiveness and Research Committee.

Whilst noting that the Partnership Commissioning Unit Annual Report was included for information and that their work should routinely be included in regular reporting, members welcomed the positive aspects described but highlighted that reference was not made to the issues raised by the CCG and internal audit reports and the steps being taken to address them. Members emphasised that the Partnership Commissioning Unit was part of the CCG.

The Committee:

Noted the extended quality report.

KH joined the meeting

5. Safeguarding

5.2 Safeguarding Children and Children in Care

KH presented the report which provided a comprehensive update on all aspects pertaining to Safeguarding Children and highlighted a number of areas.

In respect of the Internal Audit Action Plan KH reported that Local Quality Requirements and reporting processes for Tees, Esk and Wear Valleys NHS Foundation Trust had been agreed and work was now taking place to embed reporting processes. This included attendance by the Designated Nurse at relevant Quality Sub Contract Management Boards to offer expert support and challenge in respect of safeguarding children reports.

KH noted that she would share the Designated Professionals Strategic Plan for 2016/17, available on request, with DB and MC. This was included in her regular one to one meetings with MC.

KH explained that the Designated Nurses were providing Safeguarding Children training for CCG staff to provide assurance of understanding of the role.

KH noted that a further meeting of the North Yorkshire Safeguarding Children Board had been held since the report had been issued. There was nothing of significance to add.

KH described four cases – a Health Single Agency Review, two Learning Lessons Reviews and a Case Consideration – providing clarification of the associated actions. Lessons learnt had been shared with GPs via the ‘Hot Topics’ and briefings referred to at section 14 of the report on Primary Care.

KH noted that City of York Council had chosen to take the 0-19 service in-house from 1 April 2016. This included all School Nurses and Health Visitors. KH was working with the Director of Public Health to provide interim arrangements to the end of September 2016. The Local Authority was giving consideration to two potential options thereafter: to continue with an in-house Safeguarding Children service or to commission the service from a local provider. KH assured members that she would raise any concerns that emerged.

KH highlighted that the Wood Review would have implications for Local Safeguarding Boards noting that further information was awaited and advising of the expectation of change to the footprint of the Local Safeguarding Boards. The Child Death Overview Process review was more pertinent regionally and further detail was awaited in respect of the Serious Case Review system.

In respect of Children in Care KH reported that all CCGs across NHS England Northern Region had taken part in a benchmarking exercise to provide assurance regarding compliance with *Statutory Guidance 'Promoting the Health and Wellbeing of Looked After Children (2015)*. In the RAG rating NHS Vale of York CCG had been identified as having two 'reds', 11 'ambers' and 20 'greens'. It was noted by all participants that where full compliance was not achieved this was frequently as a result of interdependency on partnership working with colleagues in Local Authorities.

KH noted progress towards introducing Health Passports for all Children and Young People in Care across City of York. Health Passports were already in place in North Yorkshire as a result of a recommendation arising from the Local Authority's Ofsted Inspection in 2014.

KH additionally reported that notification had been received of a SEND (Special Educational Needs and Disabilities) Inspection by the Care Quality Commission week commencing 27 June. She had attended a meeting to provide evidence; the formal feedback session was on 1 July which MC was attending.

KH also reported on responsibilities relating to Syrian refugees advising of specific responsibilities to the 3000 parentless children in the UK who would be classed as Children in Care. KH also noted that there would be responsibilities for the 0-19 service. KH advised that clarification would be sought as to what would be required of the CCG at the Strategic Partnership Board for Children in Care.

In response to DB seeking assurance, KH confirmed that the level of support she received was good but advised in terms of resources that the NHS England Safeguarding Assurance Assessment would be 'red' as the CCG only had half the resource recommended in guidance which stated that there should be one Designated Nurse Safeguarding per 70,000 children and one Designated Nurse for Children in Care per 70,000 children. The fact that there was only one Designated Nurse covering both was mitigated by employment of a Nurse Consultant for Primary Care. KH noted that discussion was taking place in this regard with the Executive Nurses.

5.1 *Safeguarding Adults*

MC referred to the report provided by Christine Pearson, Acting Designated Nurse Safeguarding Adults, whose secondment to the Safeguarding Adults Team had been extended until 1 September 2016 in view of long term sickness in the role at the Partnership Commissioning Unit. A review was to be held on 26 July regarding discussion of proposed alternative models.

In relation to the Southern Health NHS Trust Report by Mazars MC highlighted the detailed recommendations for commissioners. The Partnership Commissioning Unit would develop an action plan with a timeframe, working with Tees, Esk and Wear Valleys NHS Foundation Trust, for implementation of the commissioning recommendations.

MC reported that the North Yorkshire Suicide Audit Report was available; the first draft of the City of York Suicide Audit Report was expected in July. MC highlighted that the fixed term post of Senior Suicide Prevention Co-coordinator, which had been funded by

North Yorkshire Police and North Yorkshire and York Public Health and hosted by the Partnership Commissioning Unit, would come to an end in July 2016. The functions of the role would be shared through existing roles within Public Health and the Police.

MC noted that the North Yorkshire Safeguarding Adults Board and City of York Safeguarding Adults Board had met respectively on 11 May and 6 June.

MC advised that the interim statement from the Law Commission response to the consultation on Deprivation of Liberty Safeguards would have impact on providers. Further information was awaited.

The Association of Directors of Adult Social Services had updated their guidance on out of area safeguarding adults arrangements to reflect the Care Act. The Partnership Commissioning Unit was progressing the associated responsibilities on behalf of the Safeguarding Adults Board.

MC noted that the East Riding Adults Safeguarding Board had not met within the report timeframe and also highlighted the need for a review of Adult Safeguarding support as one person currently held this responsibility across the four North Yorkshire CCGs.

The Committee:

1. In relation to Safeguarding Children and Children in Care:
 - i. Noted the progress against the Safeguarding Children Internal Audit action plan.
 - ii. Noted the outcome of the NHS England Children in Care Benchmarking Exercise and agreed to receive updates at future meetings.
 - iii. Noted the developments in supporting safeguarding children arrangements in Primary Care.
 - iv. Agreed to receive the outcome of the NHS England Safeguarding Children Assurance visit in the quarter 2 report.
2. Noted the update and assurance in respect of Safeguarding Adults.

6. Draft Quality Assurance Strategy

DB had provided MC with comments on the draft Quality Assurance Strategy at a pre-meet. MC noted that the draft presented would be the subject of further work prior to presentation at the September Governing Body meeting. A 'patient friendly' version would also be produced. MC advised that the content of the draft Strategy had been informed by similar strategies from other organisations.

Detailed discussion included the context of the patient story at the start of the meeting and the potential for this item to inform discussion of commissioning for population health and contracting for outcomes. The need for the Quality Strategy to be aligned with the CCG's emerging Commissioning Strategy and the theme of patients telling their 'story' only once was emphasised.

DB requested that the revised draft be based on the Key Drivers for Quality detailed in Appendix 2 and that it be reduced in length prior to circulation for comment in advance of presentation for approval at the September Governing Body meeting.

The Committee:

Agreed that, following further work, a revised Quality and Assurance Strategy would be presented at the September Governing Body meeting.

7. Governance and Reporting Arrangement of this Meeting

DB noted that the Committee was not a forum for solutions but was seeking assurance. He also noted previous concerns raised by members that they attended various meetings where the same items were discussed. DB highlighted that the Committee required assurance in regard to Safeguarding.

Further discussion included external expectations relating to assurance, the difference between the quality agenda informing clinical strategy and assurance, and welcoming of the patient story at the start of the meeting with the potential for this to inform the dialogue.

MC sought views on presentation of the extended quarterly Quality Report to the Governing Body. It was agreed that an executive summary approach be adopted.

Further consideration of the quarterly quality focused meeting would be given in the context of the discussion at the Governing Body Workshop on decision making and reporting on 7 July

The Committee:

Agreed that further consideration of the quarterly focused meeting take place in the context of the discussion at the Governing Body Workshop on 7 July 2016.

8. Key Messages to the Governing Body

The Committee:

Agreed that the discussion at this meeting would be incorporated in the Governing Body Workshop on CCG decision making and reporting on 7 July.

9. Next meeting

9am on 21 July 2016

NHS VALE OF YORK CLINICAL COMMISSIONING GROUP QUALITY AND FINANCE COMMITTEE

SCHEDULE OF MATTERS ARISING/DECISIONS TAKEN ON 28 JUNE 2016 AND CARRIED FORWARD FROM PREVIOUS MEETINGS

Reference	Meeting Date	Item	Description	Responsible Officer	Action Completed/ Due to be Completed by (as applicable)
QF-Q1	28 June 2016	Draft Quality Assurance Strategy	<ul style="list-style-type: none"> Revised Quality Assurance Strategy to be presented to Governing Body 	MC	1 September 2016
QF-Q2	28 June 2016	Governance and Reporting Arrangement of this Meeting	<ul style="list-style-type: none"> Arrangements to be agreed following Governing Body discussion on 7 July 	MC	Ongoing