

NHS BOLTON CLINICAL COMMISSIONING GROUP
Public Board Meeting

AGENDA ITEM NO:13.....

Date of Meeting:11th June 2021.....

TITLE OF REPORT:	CCG Quality & Safety Committee Minutes	
AUTHOR:	Michael Robinson, Associate Director Integrated Governance & Policy	
PRESENTED BY:	Dr Jane Bradford, Clinical Director Clinical Governance and Safety	
PURPOSE OF PAPER: (Linking to Strategic Objectives)	For the Board to receive and review the minutes of the Quality and Safety Committee meeting held on 12 th May 2021.	
LINKS TO CORPORATE OBJECTIVES (tick relevant boxes):	Deliver the outcomes in the Bolton Joint Health and Care Plan.	<input type="checkbox"/>
	Joint collaborative working with Bolton FT and the Council.	<input type="checkbox"/>
	Supporting people in their home and community.	<input type="checkbox"/>
	Shared health care records across Bolton.	<input type="checkbox"/>
	Regulatory Requirement	<input type="checkbox"/>
	Standing Item	<input checked="" type="checkbox"/>
RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)	The Board is asked to approve the Minutes. There were no key points to note from these Minutes.	
COMMITTEES/GROUPS PREVIOUSLY CONSULTED:	CCG Quality & Safety Committee.	
REVIEW OF CONFLICTS OF INTEREST:	Conflicts of Interest are reviewed at every meeting.	
VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:	Patient views are not specifically sought as part of this report.	
EQUALITY IMPACT ASSESSMENT (EIA) COMPLETED & OUTCOME OF ASSESSMENT:	EIA and an assessment is not considered necessary for the report.	

MINUTES

CCG Quality and Safety Committee

Date: 12th May 2021

Time: 9.00am – 11.00am

Venue: Microsoft teams

Present:

Jane Bradford (Chair)	Clinical Director, Governance and Safety (JB)
Michael Robinson	Associate Director, Governance and Safety (MR)
Jayne Waite	Head Nurse for Personalisation and Choice (JW)
Helen Lilley	Nurse Board Member (HL)
Diane Sankey	Patient Safety & Governance Lead (DS)
Leah Payne	Senior Officer, Healthwatch (LP)
Julie Darbyshire	Healthwatch (JD)
Kaleel Khan	Designated Adults Safeguarding lead (KK)
Lynda Helsby	Associate Director, Primary Care & Health Improvement (LH)
Nicola Onley	Associate Director, Communication and Engagement (NO)
Jole Hannan	Interface Pharmacist/Non-Medical Prescribing Lead (JH)
Matt Hindle	Strategic Commissioning Manager – Unscheduled Care (MH)

In attendance: Jenny Gallagher, Bolton Hospice

Minutes by:

Linda Hughes	Personal Assistant (LH)
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Minute No.	TOPIC	
41/21	<p><u>Apologies for Absence</u></p> <p>Apologies for absence were received from:</p> <ul style="list-style-type: none"> Gill Baker, Head of Strategic Commissioning – Adult Acute and Community John Tabor, GP Representative Chris Haigh, Head of Medicines Optimisation Zeida Ali, Lay Board Member 	
42/21	<p><u>Declarations of Interest</u></p> <p>The Chair reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of NHS Bolton Clinical Commissioning Group.</p>	

	<p>Declarations declared by members of the Quality and Safety Committee are listed in the CCG's Register of Interests. The Register is available either via the Board Secretary to the Governing Body or the CCG website at the following link: http://www.boltonccg.nhs.uk/about-us/declarations-of-interest</p> <p>There were no items declared.</p>	
43/21	<p><u>Minutes from the last meeting held on 10th March 2021 and action log</u> The minutes of the meeting held on 10th March 2021 were approved as a correct record and the action log updated.</p>	
44/21	<p><u>Bolton Hospice Quality Account</u> Jenny Gallagher, Clinical Nurse Director, at Bolton Hospice presented an overview of the quality of services provided by the Hospice in the last 12 months along with the plans for the next 12 months. She informed the format of the document along with its values had been refreshed and now included comparison charts.</p> <p>The main points highlighted from the report were as follows:-</p> <ul style="list-style-type: none"> • Audit and Quality • Education and Training • Patient and Family Experiences • Priorities 2021-2022 • Refreshed Safeguarding Annual Report • Reviewed and updated the Trustee documentation and records • Quality monitoring calendar • Available courses <p>JB thanked Jenny on the comprehensive document. MR also thanked Jenny stating he felt it what exactly what quality account should look like and that it reflected well on the Hospice organisation. JB/MR to provide a statement to Jenny from the CCG to be included in the Hospice Quality Account. Jenny also confirmed that the Hospice is looking to appoint a Governance lead in the near future.</p> <p>Matt Hindle shared 3-years data which showed the number of referrals received by the Admission Avoidance Team (AAT) and how many of these had been discharged from hospital within the last 28 days. Overall AAT volumes have steadily increased but the number of referrals that were recent discharges has remained fairly static meaning the percentage has steadily reduced.</p> <p>The group agreed that it would be useful to see this data again in the future as it is a good indicator as to whether or not patient discharges to the community are safe and effective. GB to bring updated dated back to a future meeting.</p> <p>The Committee noted the Quality Accounts from Bolton Hospice.</p>	<p>JB/MR</p> <p>GB</p>
45/21	<p><u>Terms of Reference review</u> Members discussed the membership, in particular the lack of GP representation on the Committee. MR proposed that the GP representation would come from Jane Bradford's role in light of the future national changes to CCG's.</p>	

	<p>Members discussed the need to ensure all areas continued to be overseen and brought through the wider GM channels, where applicable, to ensure all lines of enquiry are covered.</p> <p>The Committee approved the Terms of Reference and Membership, acknowledging that the GP representation would be provided by Jane Bradford.</p>	
<p>46/21</p>	<p><u>Communications and Engagement</u> NO provided an update to the Committee on the main highlights from the Covid vaccination programme.</p> <p>Key points raised were:-</p> <ul style="list-style-type: none"> • Roll out of the vaccination bus to encourage further uptake. • Work developing with the GP Federation to target particular pockets of concern. • Work developing with various communities. • The current outbreak situation in the BL3 area and the communication and engagement initiative being undertaken. • The work across community leaders to encourage local communities to work together. <p>JD offered further help and support from Healthwatch.</p> <p>The Committee noted the update.</p>	
<p>47/21</p>	<p><u>Healthwatch Update</u> <u>Information advice and guidance report</u> LP presented the update report for the period 5th March to 6th May 2021 noting they had dealt with 40 enquiries. The following areas were highlighted:</p> <ul style="list-style-type: none"> • NHS dentistry. • GP enquiries. • Covid-19 Vaccination side effects. • Complaints about NHS111. <p>Members discussed the issues raised regarding access to dental services and in particular the actions taken across health partners to resolve some of these issues for patients. It was noted that work is ongoing to encourage more family friendly dentists. Members were also informed of the work developing with dental injuries cause by domestic abuse.</p> <p>The Committee also discussed in detail the issues raised regarding GP access and the problems being raised regarding face to face consultations. It was highlighted that the primary care team has recently undertaken an access audit and the findings of this are currently being reviewed. It was also noted that the Royal College of Practitioners are recommending telephone triage in the first instance. It was also reported that there are plans developing to upgrade practice telephone systems which will help support easier access.</p> <p>LH further informed the Committee that government guidelines are to triage first and to see patients face to face if this is clinically appropriate. It was reported that all practices are undertaking face to face consultations, though numbers are</p>	

	<p>variable. The Primary Care Team are reviewing this information but members were asked to forward any examples to Primary Care for further investigation.</p> <p>HL enquired whether there was any information on A&E data of people attending who were unable to get a GP appointment. It was reported that the access audit was being presented to the CCG Executive, Urgent Care Board and the Primary Care Commissioning Committee to review the findings further.</p> <p><u>Peoples experiences leaving hospital</u> The Committee noted the report which has been shared with the hospital trust.</p> <p>The Committee noted the updates received.</p>	
48/21	<p><u>Q4 Governance and Safety Report</u> The Committee received a copy of the Governance and Safety report detailing activity during Quarter 4 and outlined information in relation to the Covid issues which have been addressed.</p> <p>The main highlight from the report was an update on the work by 3 GP practices and the LMC to encourage incident reporting. Members discussed the processes for feeding back to relevant organisations on the incidents raised and lessons learnt.</p> <p>The Committee noted the report.</p>	
CLINICAL EFFECTIVENESS		
49/21	<p><u>Nursing Home / Domiciliary Agency report</u> The report detailed the current position in terms of CQC ratings in nursing and residential and care homes.</p> <p>JW informed members of a new a new registered nursing home provider, Edge Brook. Members discussed the services provided by this home which included services to children 0-18, patients with eating disorders and learning disabilities.</p> <p>It was also noted that the residential care home, Lever Edge has received a CQC rating of inadequate and is therefore suspended from allowing any new admissions. This home is being supported, to improve the situation.</p> <p>Members were also informed that there are 14 care homes in the BL3 postcode area, 2 of which are nursing homes. It was noted that there is currently only 1 resident and 6 staff who have tested for Covid. All CHC deferred assessments were expected to be finalised by 31March. It was noted that Bolton's assessments had been completed by 31st January and all eligible patients will be offered a offered a personal health budget. It was also reported that the CHC team continue to work with the wider MDT team to deploy into nursing and care homes.</p> <p>DS queried whether the new nursing home has been informed of the incident reporting process and HL queried whether CCG had yet met with the nursing home managers.</p> <p>The Committee noted the detailed update.</p>	

54/21	<p><u>NHSE Patient Safety Updates</u> The update was reviewed and it was noted that this was also an item that was being discussed at the Clinical Leads meeting.</p> <p>The Committee noted the report.</p>	
55/21	<p><u>EUR Project Group update</u> It was noted that there was nothing specific to report under this item.</p>	
56/21	<p><u>Bolton External Log Report</u> The report was received for information.</p> <p>The Committee noted the report.</p>	
57/21	<p><u>GM Quality Board papers and dataset</u> The Committee reviewed the report and noted there were no significant issues.</p> <p>The Committee noted the report.</p>	
	<p><u>Items for Information</u></p>	
58/21	<p><u>Notes of associated meetings</u> The Committee received the notes for information.</p>	
59/21	<p><u>Any Other Business</u> There was no other business discussed.</p>	
60/21	<p><u>Items for the next or future meetings</u></p> <ul style="list-style-type: none"> - LPS update - Quality Strategy Update - SI Framework - EDHR Annual Publication - NHSE EUR consultation - Health Innovation Manchester update 	
61/21	<p><u>Chair reflection and significant decisions/actions/risks that may need reporting to the Board through these minutes</u> There was no significant items to raise.</p>	
62/21	<p><u>Time and Date of Next Meeting</u> Agreed as 14th July 2021 at 9am</p>	