

**NHS BOLTON CLINICAL COMMISSIONING GROUP**  
**Public Board Meeting**

**AGENDA ITEM NO:** .....13.....

**Date of Meeting:** .....14<sup>th</sup> January 2022.....

<b>TITLE OF REPORT:</b>	CCG Quality & Safety Committee Minutes	
<b>AUTHOR:</b>	Michael Robinson, Associate Director Integrated Governance & Policy	
<b>PRESENTED BY:</b>	Dr Jane Bradford, Clinical Director Clinical Governance and Safety	
<b>PURPOSE OF PAPER: (Linking to Strategic Objectives)</b>	For the Board to receive and review the minutes of the Quality and Safety Committee meeting held on 10 <sup>th</sup> November 2021.	
<b>LINKS TO CORPORATE OBJECTIVES (tick relevant boxes):</b>	<b>Deliver the outcomes in the Bolton Joint Health and Care Plan.</b>	
	<b>Joint collaborative working with Bolton FT and the Council.</b>	
	<b>Supporting people in their home and community.</b>	
	<b>Shared health care records across Bolton.</b>	
	<b>Regulatory Requirement Standing Item</b>	√
<b>RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)</b>	The Board is asked to approve the Minutes. The key points the Board is asked to note from these minutes are:- <ul style="list-style-type: none"> <li>The Chair stated that the discussion covered important issues and challenges across the system but nothing specific to be escalated.</li> </ul>	
<b>COMMITTEES/GROUPS PREVIOUSLY CONSULTED:</b>	CCG Quality & Safety Committee.	
<b>REVIEW OF CONFLICTS OF INTEREST:</b>	Conflicts of Interest are reviewed at every meeting.	
<b>VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:</b>	Patient views are not specifically sought as part of this report.	
<b>EQUALITY IMPACT ASSESSMENT (EIA) COMPLETED &amp; OUTCOME OF ASSESSMENT:</b>	EIA and an assessment is not considered necessary for the report.	

## MINUTES

### CCG Quality and Safety Committee

Date: 10<sup>th</sup> November 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)
Diane Sankey	Patient Safety & Governance Lead (DS)
Leah Payne	Senior Officer, Healthwatch (LP)
Kaleel Khan	Designated Adults Safeguarding lead (KK)
Chris Haigh	Head of Medicines Optimisation (CH)
Zeida Ali	Lay member (ZA)
Lynda Helsby	Associate Director, Primary Care and Health Improvement (LH)
Nicola Onley	Associate Director, Communication and Engagement (NO)

In attendance: Julie Darbyshire, Healthwatch (JD)  
Christine Dixon, Bolton CCG [for item 10]  
Matthew Hindle, Commissioning Manger

Minutes by:

Joanne Meaney	Personal Assistant (JM)
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Minute No.	TOPIC	
101/21	<p><b><u>Apologies for Absence</u></b> Apologies were received from :</p> <ul style="list-style-type: none"> <li>Gill Baker, Acting Associate Director, Commissioning</li> <li>Helen Lilley, Nurse Board Member</li> </ul>	
102/21	<p><b><u>Declarations of Interest</u></b> 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: <a href="http://www.boltonccg.nhs.uk/about-us/declarations-of-interest">http://www.boltonccg.nhs.uk/about-us/declarations-of-interest</a></p> <p><b>There were no items declared.</b></p>	
103/21	<p><b><u>Minutes from the last meeting held on 8<sup>th</sup> September 2021 and action log</u></b></p>	

	<p>The minutes of the meeting held on 8<sup>th</sup> September 2021 were approved as a correct record and the action log updated.</p> <p>Action log :</p> <ul style="list-style-type: none"> <li>- 4/21 – a copy of the survey detail has been shared with members - <b>Closed</b></li> <li>- 11/21 - Safeguarding training – de-escalated has this has now been rectified - <b>Closed</b></li> </ul>	
	<b><u>PATIENT EXPERIENCE</u></b>	
104/21	<p><b><u>Communications and Engagement</u></b></p> <p>NO provided an updated:</p> <ul style="list-style-type: none"> <li>- In light of ongoing changes recognition of the need to re-evaluate in terms of vaccination information and intelligence. CVS are undertaking some engagement work at vaccination sites and holding focus groups, meeting with black and caribbean communities and colleges; Pulling information together to develop new material and visuals and a new toolkit will be circulated to all partners;</li> <li>- GP video to be launched in response to pressures in primary care and abuse towards to primary care staff;</li> <li>- Think Twice winter campaign - series of articles in Bolton News and social media relating to urgent care, primary care and self-care;</li> <li>- Continue to work on flu campaign.</li> </ul> <p><b>The Committee noted the key messages of the campaigns.</b></p>	
105/21	<p><b><u>Healthwatch Update</u></b></p> <p><u>Information advice and guidance statistics</u></p> <p>LP presented the update report for the period 2<sup>nd</sup> September to 3<sup>rd</sup> November 2021 with 71 enquiries being received. The main theme being dentistry.</p> <p>Healthwatch have undertaken a survey on GP access in respect of accessing and consulting a GP and the findings will be shared at next meeting.</p> <p>LH reported that there is a patient information leaflet available that that can be shared with relates to GP access. Govt funding has been released and the CCG working through how to utilise this and further work is progressing in relation to wider primary care team professional offer.</p> <p><b>The Committee noted the update</b></p>	<b><u>JD</u></b>
106/21	<p><b><u>Governance and Safety Report – Q1 and 2</u></b></p> <p>The Committee received a copy of the Governance and Safety Q 1 and 2 detailing activity.</p> <p>The main areas highlighted :</p> <ul style="list-style-type: none"> <li>- Response time has slipped due to work pressures and staff capacity;</li> <li>- Incident reporting has been steady through this period. On the graph it was highlighted that behaviour column is showing a rise and this is in relation to incidents reported and that Bolton is not an outlier as certain homes specifically deal with challenging behaviour residents;</li> <li>- Discharge summary issues are being picked up via CCG &amp; BFT Quality &amp; Performance Committee and this was also a feature raised by patients in</li> </ul>	

	<p>the National Patient Survey, BFT results were published in October 2021. The Trust's Patient Experience Forum and Quality Assurance Committee discussed the findings of the survey and acknowledged this particular patient safety issue in respect of prescribed medication.</p>	
	<b>CLINICAL EFFECTIVENESS</b>	
107/21	<p><b><u>Nursing Home / Domiciliary Agency report</u></b> The report detailed the current position in terms of CQC ratings in nursing and residential and care homes.</p> <ul style="list-style-type: none"> <li>- infection prevention audits have recommenced and all homes have been given either an amber or green rating with minimal actions;</li> <li>- Care home resilience – NHS capacity tracker indicates that closed capacity is high and some homes are closed due to staffing pressures, demands of patient 1:1 and recruiting staff;</li> <li>- Vaccinations – approximately 50 staff are due to leave the care home sector as a result of vaccination requirements. The homes have reported that they are able to recruit;</li> <li>- Capacity tracker – there are particular roles that are proving difficult to recruit to in the areas of personal health budgets and PA's;</li> <li>- Four seasons is currently closed due to outbreak conditions – no positive residents but 5 staff with covid;</li> <li>- All homes have been offered vaccination plans and are being supported by community services;</li> <li>- Escalation groups Restore - engagement with 24 care homes (both Residential and Nursing) for implementation of the safe steps falls app and RESTORE2 Mini deterioration tool. Working very closely with local authority, health innovation Manchester and safe steps. The homes are implementing either the falls app, restore 2 or a combination of both, there has been positive verbal feedback from one of the Bolton homes who have implemented both of the quality improvements, that the falls app has provided great oversight for the large home.</li> </ul> <p><b>The Committee noted the detailed update.</b></p>	
108/21	<p><b><u>Serious Incidents Report</u></b> The report updated the Committee on patient safety incidents (SIs) or 'never events' reported by Providers and Bolton CCG to the NHS Strategic Executive Information System (StEIS) and Regulation 28 (Prevention of future deaths) reports issued by HM Coroner.</p> <p>The main highlights from the report were noted as:-</p> <ul style="list-style-type: none"> <li>• The number of ongoing incidents.</li> <li>• The Serious Incident Review Group has been renamed to 'Safety Improvement Review Group' in order to focus improvement and learning.</li> <li>• There were no reported Regulation 28.</li> </ul> <p><b>The Committee noted the update.</b></p>	
109/21	<p><b><u>Safeguarding update</u></b></p> <ul style="list-style-type: none"> <li>- <u>Q2 GM Quality Assurance report</u> – KK updated that the report outlines the statutory reviews. Compliance against training requirements has significantly improved. The local Adult Safeguarding Board have</li> </ul>	

	<p>appointed a new Chair and there is a new Domestic Abuse Board in GM and Bolton providers are supporting this arrangement. There are 7 Prevent cases and a number of ongoing projects and there has been an increase in court of protection cases.</p> <ul style="list-style-type: none"> <li>- <u>Safeguarding Annual Report</u> – the annual report outlines that there has been a lot of work as a team against agreed priorities and intentions. There is a clear safeguarding structure in place and assurance processes. The team have continued to provide training and support to primary care.</li> <li>- <u>Looked After Children Annual Report</u> – the annual report provided an overview of the progress and challenges in supporting and improving the health of children looked after by Bolton Council and the proposed priorities for 2021/22. It outlined the involvement of young people, the needs and has a focus on permanency figures and the work with care leavers and their transition and the introduction of the prescription for care scheme. Providers have maintained contact with children during the recent pandemic.</li> </ul> <p><b>The Committee noted the comprehensive update.</b></p>	
110/21	<p><b><u>NHSE Patient Safety Updates – September and October</u></b> The updates were reviewed and it was noted that this was also an item that these are distributed widely and discussed at the Clinical Leads meetings.</p> <p><b>The Committee noted the report.</b></p>	
111/21	<p><b><u>Cumberledge Report : ‘First Do No Harm’</u></b> The report focusses on the voice of the female within healthcare. There are no specific actions for CCGs, but there are three major areas of focus : pregnancy test kits, sodium valproate and pelvic meshes. The Committee were assured that the kits are not an issue locally; work has been undertaken around sodium valproate, with support for primary care and the setting up pathways with secondary care colleagues and the CCG is actively monitoring against any pelvic mesh procedures undertaken in primary care.</p> <p><b>Members noted the update report.</b></p>	
112/21	<p><b><u>Key themes from HSIB investigations 2021 &amp; PSIRF update</u></b> DS gave an overview of the report and the analysis used a robust, scientific approach and identified the following three recurring patient safety themes, similar to issues locally – transition of care, communication and checking at the point of care.</p> <p>MR suggested that a copy of an HSIB report be shared with members for information.</p> <p><b>Committee noted the update report.</b></p>	<b>DS</b>
113/21	<p><b><u>National Overprescribing Review – Good for You, Good For Us</u></b> CH gave an overview of the review report outlining the high level recommendations contained within the report.</p>	

	<p>The CCG is already addressing a lot of the content within this report in the form of the BQC, reducing waste and other initiatives.</p> <p>It was highlighted that there was nothing too radical within the report but recognised the longer view to change culture around medication.</p> <p>MR stated that this is an example of how in Bolton and in GM how much further ahead of the game we are on some of these initiatives and expressed his thanks to the medicines management team and primary care team who have majored on a lot of these areas already.</p> <p><b>The Committee noted the report.</b></p>	
114/21	<p><b><u>Quality and Safety Annual Report</u></b> Committee received a copy of the annual report which evidences activity undertaken by the Quality and Safety Committee throughout the year in line with the remit and responsibilities as outlined in the committee's terms of reference.</p> <p><b>The Committee noted the report.</b></p>	
115/21	<p><b><u>Bolton Health Economy External Reports Log</u></b> The report was received for information.</p> <p><b>The Committee noted the report.</b></p>	
116/21	<p><b><u>GM Quality Board papers and dataset</u></b> The Committee reviewed the report and noted there were no significant issues.</p> <p><b>The Committee noted the report.</b></p>	
<b><u>Items for Information</u></b>		
117/21	<p><b><u>Notes of associated meetings</u></b> The Committee received the notes for information.</p>	
118/21	<p><b><u>Any Other Business</u></b></p>	
118.1	<p>JB reported that an update on the Medical Examiner role will be brought to the next meeting. This role has a remit to look a proportion of deaths in hospital, the circumstances and learning.</p> <p>KK updated in relation to safeguarding medical examinations for people who sustain injuries and who are vulnerable and a national model is being developed.</p> <p><b>Noted</b></p>	<b><u>JB</u></b>
119/21	<p><b><u>Items for the next or future meetings</u></b></p> <ul style="list-style-type: none"> <li>- LPS update</li> <li>- Quality Strategy Update</li> <li>- SI Framework</li> <li>- EDHR Annual Publication</li> <li>- NHSE EUR consultation</li> <li>- Health Innovation Manchester update</li> </ul>	

120/21	<p><b><u>Chair reflection and significant decisions/actions/risks that may need reporting to the Board through these minutes</u></b></p> <ul style="list-style-type: none"> <li>- JB stated that the discussion covered important issues and challenges across the system but nothing specific to be escalated.</li> </ul>	
121/21	<p><b><u>Time and Date of Next Meeting</u></b></p> <p>Agreed as 12<sup>th</sup> January 2022 at 9am</p>	