



Report to:	Integrated Care Board
Date of Meeting:	9 th November 2022
Subject:	Report of the meeting of the Quality Committee
Director Sponsor:	Mark Chamberlain, Committee Chair
Author:	Teresa Fenech, Executive Director of Nursing and Quality

STATUS OF THE REPORT: *(Please click on the appropriate box)*

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT: *(A short summary of the key points set out within the report)*

The report is a summary of the meeting of the Quality Committee held on 5th October 2022.

RECOMMENDATIONS: *(Specify the recommendation(s) being asked of the meeting - use additional points as appropriate):*

Members are asked to:

- I. Note the report and the items that were discussed for the purposes of providing assurance.
- II. Discuss any items that require further clarification
- III. Note the approval of a range of policies on behalf of the ICB
- IV. Note the development needs of the committee.

ICB STRATEGIC OBJECTIVE *(please click on the boxes of the relevant strategic objective(s))*

Realising our vision	<input type="checkbox"/>
Improving outcomes in population health and healthcare	<input checked="" type="checkbox"/>
Supporting broader social and economic development	<input type="checkbox"/>
Tackling inequalities in outcomes experience and access	<input type="checkbox"/>
Delivering our operational plan 2022/23	<input type="checkbox"/>
Developing our ICS	<input checked="" type="checkbox"/>



IMPLICATIONS <i>(Please state N/A against any domain where none are identified)</i>	
Finance	NA
Quality	Areas for development to assure quality assurance functions that are the responsibility of the committee.
HR	Note workforce risks identified with safeguarding
Legal / Regulatory	Regulatory implications
Data Protection / IG	NA
Health inequality / equality	NA
Conflict of Interest Aspects	None
Sustainability	NA

ASSESSED RISK: *(Please summarise the key risks and their mitigations)*

MONITORING AND ASSURANCE: *(Please summarise how implementation of the recommendations will be monitored and the assurances that can be taken from the report)*

Risk

Mitigation

ENGAGEMENT: *(Please provide details of any clinical, professional or public involvement work undertaken or planned. Summarise feedback from engagement and explain how this has influenced your report. If you have not yet engaged with stakeholders include a summary of your plans.)*

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

If yes, please detail the specific grounds for exemption



Report of the Meeting of the Quality Committee

Introduction

The Quality Committee has been established to provide the ICB with assurance that it is delivering its functions in a way that secures continuous improvement in the quality of services, against each of the dimensions of quality set out in the Shared Commitment to Quality and enshrined in the Health and Care Act 2021. This includes reducing inequalities in the quality of care.

The Committee exists to scrutinise the robustness of, and gain and provide assurance to the ICB, that there is an effective system of quality governance and internal control that supports it to effectively deliver its strategic objectives and provide sustainable, high-quality care.

The Quality Committee met on 5th October 2022 and was quorate. Agenda items included;

- Governance
 - Review of Terms of Reference (TOR)
 - ICB Policies
 - Deep Dive - Safeguarding
- Quality Matters
 - Legacy Serious Incidents
 - Data reports
 - Patient Experience reports
 - NHS Resolution (Primary Care) report
 - Ockenden Thematic review progress report
- Strategy
 - Risk register
 - AOB: Panorama Edenfield

Governance

The TOR were amended to reflect the addition of two retained members – Sue Proctor and Bryan Gill.

The following policies were approved;

- a. Safeguarding Children Policy
- b. Safeguarding Adults Policy
- c. Managing allegations against staff Policy
- d. Staff experiencing domestic abuse Policy
- e. Safeguarding Supervision Policy
- f. Management of Concerns and Complaints Policy
- g. Serious Incident and Incident Policy



The arrangements for safeguarding established as part of the transition to the ICB were set out alongside the NHSE assessment process that has been used to provide assurance around the safeguarding function. The key risk to the provision of a robust safeguarding function across the ICB was noted to be staffing, with shortfalls and a number of key staff nearing retirement.

A safeguarding committee will be established reporting to the Quality Committee.

Quality Matters

The Quality Committee held in July received the handover of quality issues from each CCG. The Quality Committee is keen to ensure that legacy quality issues are addressed. The committee received a report into the progress on closure of open Serious Incidents from the handover.

Place	SI at handover to ICB 1 st July 2022	SI open as at 30 th September 2022	HSIB	SI reported since 1 st July 2022
Hull & East Riding	169	45	3	29
N. Lincolnshire	41	35	0	16
NE Lincolnshire	64	55	1	15
N. Yorkshire & York	207	123	4	70
TOTALS	481	258	8	130

Future reports will address the learning from such incidents.

Data reporting for the ICB is still in development. There was a discussion regarding the appropriate range of data reports that would be meaningful for the committee going forward. The lack of data outwith hospital services requires a specific focus.

A task and finish group will be established to look at data for quality – in particular for primary care.

Patient experience reports were received, and 200 open complaints were noted. The next report will include response times to complaints.

The findings of the thematic reviews of maternity services, undertaken over the summer in response to the Ockenden (1) report demonstrated that progress has been made across most domains. There were no domains with unmet criteria. There are a number of domains however that show only partially met. Actions to address this include improving audit programmes and greater involvement of service users.

Strategy

The risk register is in development but the highest risks to quality and safety were noted to include Mental Health (LD assurance specifically), UEC and Cancer delays. Risks to delivery of statutory functions are predominantly related to availability of workforce.



Panorama – Edenfield was discussed, and a paper will be presented to the December committee setting out actions in response.

It was noted that CQC will be conducting a national self-assessment exercise for social care services in November 2022 with a focus on prevention and system leadership.

Summary

The committee requires time to mature both in terms of the information it receives, and the nature of the discussions held. Progress is however being made with strengthening the terms of reference and setting expectations of attendees. The addition of the two retained members will provide a step change in the development of the committee.