



Report to:	Humber & North Yorkshire Integrated Care Board
Date of Meeting:	8 March 2023
Subject:	Report of the meeting of the Quality Committee held on 23 February 2023
Director Sponsor:	Mark Chamberlain, Chair, Quality Committee
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:

The report is a summary of the meeting of the Quality Committee held on 23 February 2023.

RECOMMENDATIONS:

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. See items below.

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 checked="" type="checkbox"/>
Developing our ICS	<input type="checkbox"/>

IMPLICATIONS *(Please state N/A against any domain where none are identified)*

Finance	N/A
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Report of the Meeting of the Quality Committee – 23 February 2023

1. 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 23 February 2023 and was quorate. Agenda items included:

2. Governance

- Data Reports – Quality Indicators Data Pack
- Risk Management Board Assurance Framework (BAF)
- ICB Policies – Standing agenda item:
 - Clinical Policy Review & Recommendations
 - Adult Bariatric Surgery Policy
- Quality Summary Report
- NEW Domestic Abuse & Serious Violence (DASV)
- UPDATE: Dynamic support register and Care (Education) and Treatment Review

3. Quality Matters

- SEND statement and update
- Maternity:
 - 2022 CQC Maternity Survey & survey report
 - Maternity Voices Partnership (MVP) work across the ICB
- Preparing for the move to the new Patient Safety Incident Response Framework (PSIRF)
- Serious Incidents
- Place Quality Meetings
- Significant Issues
 - Hesley Group of Schools – Complex Case Review
 - Intraocular Lenses
 - York & Scarborough Foundation Trust Report – Section 31
 - Hull University Teaching Hospitals Report – Section 31
 - Northern Lincolnshire and Goole NHS Foundation Trust
 - Tees, Esk and Wear Valleys NHS Mental Health Trust
 - Feedback from Regional Quality Group



4. Governance

Data Reports: Quality Indicators Data Pack

The Committee received the Data Pack which contained information on safety measures, infection rates and UEC data. Background detail and contextual narrative was requested as members wished to understand the variations of the data and age ranges of patients attending. It was noted that ambulance hand-over data was not included but was considered at performance meetings. It was confirmed that data presented at the Committee is under review.

Board Management Board Assurance Framework (BAF)

The BAF was presented to the committee in particular Risks 2.1 Clinical Quality and Safety. The committee commented and the updated BAF will be submitted to the ICB Board.

Clinical Policy Review and Recommendations

The Executive Director Clinical and Care Professional presented the policy review framework and adult obesity bariatric surgery policy for approval. Discussions were held regarding benchmarking and improving areas of inequality and it was clarified that such issues will be considered at the Ethical Group to ensure harmonisation of policies. It was noted that Equality Impact Assessments are completed for all policies. A suggestion was made for "easy-read" versions to be available.

5. RECOMMENDATIONS:

Members were asked to:

- Approve the Policy Review Framework.
- Approve the extension of all current clinical policies to 30 September 2024.
- Approve the Adult Obesity Bariatric Surgery Policy and the intention to inform local Tier 4 providers and IFR panels

The Quality Committee:

APPROVED - The Policy Review Framework.

APPROVED - Extension of all current clinical policies to 30 September 2024.

APPROVED - The Adult Obesity Bariatric Surgery Policy.

Quality Summary Report

Members were provided with a paper detailing place priority areas.

New – Domestic Abuse and Serious Violence (DASV)

An update was provided, confirming there is a new statutory duty from 31st January 2023 for the HNY ICB to undertake a strategic needs assessment and produce a plan to tackle serious violence with partners including the Police. Guidance will be developed and included in the Joint Forward Plan.

Dynamic Support Register (DSR) and Care Education and Treatment (CETR)

An update was provided on key national changes made to DSR's and CETR's which further support patients to live and stay in the community.



5. Quality Matters

SEND statement and update

Committee members were provided with a Specialised Education Needs and Disability (SEND) update with an summary position for those places with written statement of actions - Hull and East Riding of Yorkshire.

Members were also updated on a SEND revisit in:

- York (November 2022) which determined sufficient progress in addressing all significant weaknesses identified at the initial inspection had been made. Comments from the report included good joined up working with parents and carers. Learning from the exercise will be shared across the ICB.
- North Yorkshire are awaiting an inspection date imminently.

A Head of SEND will be appointed as part of the ICB restructure to oversee SEND

Maternity:

○ **2022 CQC Maternity Survey & survey report**

The paper set out the results of the 2022 Maternity Survey which was carried out in February 2022 and provides information about the results including comparisons with national and regional performance. A narrative summary and interactive data summary were provided and shared with members which included but is not limited to:

- Overall trusts are performing within the national statistical limits with few areas of statistically significant deviation.
- Data was shared at the LMNS board of 30 January 2023 and the ICB have had access to this information.
- Some of the areas such as 'choice of place of birth' are being addressed at LMNS level whilst others are being picked up by Trusts individually.
- This process of improvement will be overseen by the LMNS Choice and Personalisation workstream.
- Discussions were held regarding safe and appropriate services and the patients' ability to choose a place of birth that can be fully supported.

○ **Maternity Voices Partnership (MVP) work across the ICB**

Committee members were updated that engagement groups across the ICB locality for maternity and neonatal services are in place; this was mandated as part of the Ockenden recommendations, and includes:

- audit work;
- outcomes and deliverables being disseminated across the system;
- mapping to identify what resources are available to support patients currently and what additional resources are required going forward;
- discussions continue with groups and a Cultural Development Lead has been employed one day per week;
- Healthwatch colleagues will link with ICB to provide support;
- Support continues to address issues with recruitment and retention of staff in the Maternity and the Neonatal sector.

Preparing for the move to the new Patient Safety Incident Response Framework (PSIRF)

An update was provided in support of the new approach to serious incidents (SIs) reporting i.e to PSIRF. This will require an organisational change in staff behaviours and values. The



ICB has specific oversight and the Quality Committee will have the role to agree the provider standards which applies to every organisation that has an NHS contract.

A policy will be developed. Some providers will be ready early and the ICB is working with them on implementation. It was noted this change does not apply to primary care.

Serious Incidents

Existing reporting processes continue but noted there will be changes in line with the new PSIRF. Good progress has been made reducing legacy Sis by approximately 2/3rds.

Place Quality Meetings

Members were updated that each place has an established Place Quality Group meeting and there is collaborative working and mutual benefits. Healthwatch representatives attend each place meeting and provide a high profile for patient and staff voices.

The Quality Committee was provided with an overview of key discussions and issues from each place.

Significant Issues

The quality committee received reports across a range of significant quality issues, discussed the actions being undertaken especially in relation to maintaining patient safety and gained assurance that appropriate oversight was in place.

Feedback from Regional Quality Group January 2023

System pressures continue to affect performance; specifically with urgent and emergency care such as long ambulance waits and safety issues. The organisation continues to learn lessons and will reflect on activity over Christmas and New Year.

6. Summary

The committee continues its journey to maturity and members noted good progress is being made.