



Agenda Item No:	10i
------------------------	------------

Report to:	Humber & North Yorkshire Integrated Care Board
Date of Meeting:	12 July 2023
Subject:	Report of the meeting of the Quality Committee held on 27 April 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: *(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 27 April 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

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

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

MONITORING AND ASSURANCE: *(Please summarise how implementation of the recommendations will be monitored and the assurances that can be taken from the report)*
Outstanding actions remain under Quality Committee Review.

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.)*
N/A

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

Report of the Meeting of the Quality Committee – 27 April 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 27 April 2023 and was quorate.

2. Agenda included:

Governance - details in item 3

- Review of the Quality Committee Terms of Reference (TORs)
- Quality Committee Annual Report
- Quality Committee Effectiveness Review – self assessment
- Data Reports – Quality Indicators Data Pack
- Risk Management Board Assurance Framework (BAF)
- ICB Policies:
 - Health Optimisation/Tier 3 Weight Management
 - Flash Glucose Monitoring (FGM) systems - *Freestyle Libre® CGM* Commissioning Policy Agreement
 - Primary Care Rebate Policy
 - Homely remedies – guidance and information
 - Patient Safety Incident Response Framework (PSIRF)
- Presentation on the pilot of Hull Teaching Hospital Trust (HUTH) Patient Safety Incident Framework (PSIRF)
- Update on the Serious Incident Audit Report and Safeguarding Audit Report
- Approval of the Modern Slavery Statement

Quality Matters – details in item 4

- Providers in Quality Improvement Groups
- CQC Single Assessment Framework
- Maternity and Neonatal Strategy
- Update – Domestic Abuse and Serious Violence (DASV)
- VCSE Sector and Collaborative overview and update
- Feedback from Regional Quality Group
- Place Quality Meetings
- Significant Issues
-

3. Governance

Quality Committee Terms of Reference (TORs)

The Terms of Reference were reviewed with minor changes to titles.

Annual Report

The Annual Report had been shared with members prior to the meeting. Feedback was invited and the report was approved subject to several minor amendments.

APPROVED: Titles for Sue Proctor and Bryan Gill to be changed from "retained members" to "Board Advisors".

Effectiveness Review – self assessment

The Effectiveness Review had been shared with members prior to the meeting. Feedback was invited and no comments received.

APPROVED: the Effectiveness Review – Self Assessment.

Data Reports – Quality Indicators Data Pack

The Chair of the Quality Committee highlighted that work continues to support its development with particular focus on information required and where gaps lie. Discussions included:

- Narrative to support understanding the data and where outliers sit within the metrics.
- Community services and primary care.
- Incident reporting in primary care.
- Mental Health including restrictive practices data to be incorporated.
- Healthwatch to support understanding of patient experience of health care.

A risk was recorded in terms of the aggregated data and the difficulties in understanding anomalies in the metrics. Work is ongoing to develop the data to include provider level information. Restrictive Practice data for MH LDA will be included in future reports.

It was noted that the System Oversight and Assurance Group (SOAG) and Community Collaborative teams are currently reviewing data for primary care and community. Friends and Family data is to be discussed at the next meeting of the Quality Committee. It was noted that provider quality boards provide a source of data, including for pressure ulcers and falls.

Risk Management Board Assurance Framework (BAF)

The BAF sets out the principal risks and objectives for quality and safety. Quality remains a high risk and a review of the mitigations, gaps in assurance and actions is required to identify any impact on what is in place currently. Comments in relation to 'gaps in assurance' included community and primary care. 'Gaps in control' included data availability. It was reiterated that the strengthening of data reporting will support this.

ICB Policies – Standing agenda item:

- **Health Optimisation/Tier 3 Weight Management**
The Quality Committee considered a report which highlighted the financial constraints; the approval processes are still under review and will be discussed by the ICB Executive Team.
- **Flash Glucose Monitoring (FGM) systems - *Freestyle Libre® CGM Commissioning Policy Agreement***
The Committee was given an explanation of the process to be applied and subsequently agreed the proposal. The policy itself is to be considered at the next meeting in June 2023.
- **Primary Care Rebate Policy**
Approved by the Quality Committee.
- **Homely remedies – guidance and information**
For information purposes only.
- **Patient Safety Incident Response Framework (PSIRF)**
The draft PSIRF policy was considered by the Quality Committee, and it was noted this is to be aligned with national guidance. Some mandatory training, to support cultural development, is to be implemented for all staff. The policy was approved with

the caveat that further detail will be included in support of the pathway and with engagement from Healthwatch.

RECOMMENDATION: For review/information and approval

APPROVED: Primary Care Rebate Policy

Patient Safety Incident Response Framework (PSIRF)

Hull Teaching Hospital Trust (HUTH) Patient Safety Incident Framework (PSIRF)

Members were provided with an update from HUTH, and a paper shared in support and included:

- an outline provided in terms of steps taken during the planning phases of HUTH's transition to PSIRF which details the approach the Trust took from April 2023.
- a PSIRF Implementation Steering Group meets fortnightly to support the transition from the Serious Incident Framework to PSIRF.
- a number of other providers are engaging with HUTH to support sharing of best practice.
-

Serious Incident and Safeguarding Audit Reports

The update included:

- that Audit Yorkshire had completed the audits.
- discussions continue due to disparities with two of the recommendations proposed and minor amendments have been requested in terms of data collection, with a particular focus on concerns regarding data reconciliation
- Audit Yorkshire will inform the ICB of their approval via written communication and members were assured that approval received from the committee is in principle only at this time. An update will be provided to members at the June meeting.

Modern Slavery Statement

The statement is being implemented by the ICB in support of the Modern Slavery Act which was introduced in 2015. The update included the approach the ICB will be taking to be compliant with the Act, which included:

- Reviewing and updating policies and arrangements.
- Ensuring staff training is in place.
- Due diligence is in place in support of the process in Supply Chains.
- Risk assessment and management is robust.
- Key performance indicators are in place to measure effectiveness of steps being taken.

RECOMMENDATION:

- 1. Gain and confirm assurance that this Modern Slavery Statement meets the requirements of the Modern Slavery Act 2015**
- 2. Approve the NHS Humber and North Yorkshire ICB Modern Slavery Statement**

APPROVED: Modern Slavery Statement

**4. Quality Matters
Significant Issues**

Members were updated on significant issues across the ICB. This included concerns raised and assurance of actions underway.

Providers in Quality Improvement Groups

The Quality Committee were updated on providers in QIG, as follows:

- York & Scarborough NHSFT
- Hull University Teaching Hospital Trust (HUTH)
- North Lincolnshire & Goole NHSFT
- Tees, Esk & Wear Valley MH Trust

Focus was brought to HUTH, which included:

- a Maternity Section 31 Notice.
- the CQC reinspecting the Hull Maternity department following whistleblowing.
- poor practices in terms of governance along with cultural issues highlighted;
- further investigations with support provided by the ICB to improve the quality of care during this time.

CQC Single Assessment Framework

The new CQC Single Assessment Framework will apply to all areas across the system to include providers, local authorities, and integrated care systems. An outline of the methodology was provided which included:

- replacing existing frameworks;
- CQC ratings (in the form of updated quality statements) will remain central to the process;
- providers to be assessed more flexibly to enable CQC to better identify themes.

Maternity and Neonatal Strategy

The three-year delivery plan supports the NHS to make care safer, more personalised, and more equitable for all women, babies, and families and aims to deliver change rather than set out new policy. The four themes are as follows:

- Listening to, and working with, women and families with compassion.
- Growing, retaining, and supporting our workforce with the resources and teams they need to excel.
- Developing and sustaining a culture of safety, learning, and support.
- Standards and structures that underpin safer, more personalised, and more equitable care.

A helpful case study was shared at the Quality Committee under the remit of 'Ask a Midwife' which was welcomed. Members were assured that the priorities agreed had taken account of the Ockenden report and recruitment is underway to secure a quality and safety lead to oversee the work.

Place Quality Meetings

A place quality report included current themes and areas of concern, mitigations, support, and actions in train. Themes included:

- Impact of system pressures in urgent and emergency care.
- Workforce.
- Asylum seekers.
- Cost of living.
- Industrial action.
- Vulnerable children.
- Initial health assessments.

- Learning, disability, and Autism placements including eating disorders.

Assurance was provided to members that the nursing and quality team continue to support providers with quality standards and improvements in patient care.

Update – Domestic Abuse and Serious Violence (DASV)

The DASV came into force on 31 January 2023. Members were updated and assurance provided where applicable as follows:

- the system continues to work towards prevention of violence;
- the statutory duty applies to ICBs, and accountability sits with them. The definition of 'serious violence' includes domestic abuse and sexual offences;
- there are two Violence Reduction Units in the Humber and North Yorkshire area which deal with, for example violence against women and girls and homicide; funding is sourced via the Home Office. Engagement with communities and young people and meaningful data is essential to support improvements.

A recruitment campaign will be developed and implemented in support of sourcing Emergency Department Care Navigators, particularly for sexual violence.

Voluntary, Community & Social Enterprise Sector and Collaborative overview and update

An update on the VCSE sector included:

- The VCSE has 6000 registered charities and 13500 organisations.
- The smaller organisations exist on receiving grants and subscriptions. Volunteers are not paid.
- Quality assurance within the VCSE is challenging due to lack of quality frameworks.
- The Quality Committee being sighted on areas where there are quality issues and where support is required.
- It was noted that the system works well for those VCSE partners who are under contract with the ICB, but that procurement processes are extensive.
- Engagement with the VCSE sector continues to be strengthened in support of both formal and informal considerations i.e if a service is commissioned or not. This will support helping the VCSE understand the implication of quality concerns being raised at the Quality Committee.

Feedback from Regional Quality Group

The recent Regional Quality Group was attended by Richard Barker (RB). The update included:

- the importance of quality groups;
- a keenness to ensure the quality agenda continues to improve;
- independent ambulance providers and NHS England's input;
- challenges in the system with mental health and learning disability services, in particular delayed transfers of care. Work continues with regional NHS colleagues to engage with service users and families in support of improving inpatient services
- Recent escalations to the national team include the significant increase in the number of suicides and quality issues with surgical oncology.

Any other business

Industrial Action was reported due to the Royal College of Nursing strike on 29 and 30 April 2023. It was noted Unite and Ambulance staff are also striking. The ICB was not largely impacted, and quality concerns were being closely monitored.

June 2023