

NELFT Community Services
Clinical Quality Review Group
1st April 2015 12.30pm – 2.30pm
Thames Room, Civic Offices

Present:	Jane Foster-Taylor (JFT)	(Chair) Executive Nurse, Thurrock CCG
	Diane Searle (DS)	Director of Nursing, Patient Safety, BTUH Health Economy
	Michelle Stapleton (MS)	Integrated Care Director, Thurrock
	Brid Johnson (BJ)	Integrated Care Director, Basildon
	Stephen Mayo (SM)	Deputy Chief Nurse, Basildon & Brentwood CCG
	Laura Davis	Quality & Patient Safety Manager, Thurrock CCG
	Lin Teasdale (LT)	Quality & Patient Safety Manager/Serious Incidents, Hosted Quality Team
	Lesley Buckland (LB)	Lay Board Member, Thurrock CCG
	Andrew Wright (AW)	Associate Director Contracting, NEL CSU
	Kay Marwick (KM)	Interim Business Manager, NELFT
	Dr L Grewal (LG)	GP Board Member, Thurrock CCG
	Nikki Livermore (NL)	Quality & Patient Safety Manager, Basildon & Brentwood CCG
	Alana Stokes (AMS)	Minute Taker, Thurrock CCG
Apologies:	Sue Cleall	Quality & Patient Safety Manager, Hosted Quality Team

1.	Welcome & Apologies
	The Chair welcomed the group and introductions were made. Apologies were received as stated above. The Chair asked if there were any conflicts of interest to note and none were declared, other than those recorded in the Register.
2.	Minutes of the meeting held on 4th March 2015
	The minutes from 4 th March 2015 were reviewed by the group. These minutes were accepted as an accurate record with the amendment of two typos “ratio” and “universal”, along with the inclusion of “photocopied signature” to page four End of Life section.
3.	Action Log & Annual Workplan
	1/15 – Estates has been added to the NELFT cycle of business reporting. Closed. 4/15 – DS updated the Committee on the current Microbiologist vacancy. 7/15 – JFT advised that the Pressure Ulcer workshop action remains outstanding but a date of delivery has been planned.

	<p>8/15 – Paediatric CEG item for allocation of health visitors to be shared with Dan Stoten. Closed.</p> <p>9/15 – Pressure ulcer responsibility and duty of candour will be progressed by Margaret Berry. Closed.</p> <p>10/15 – The new MSK provider presented the changes at the CEG meeting. Closed.</p> <p>11/15 – LB to query Quality impact assessment for changes to Children's Provider's in Public Health at the Thurrock CCG Board.</p> <p>12/15 – BJ agreed to further the workstream for supervision with SEPT and Family Nurse Partnership Services as NELFT are not responsible for supervision. Closed.</p> <p>13/15 – JFT requested an example to share of concerns regarding DNA CPR documentation. DS suggested auditing documentation of EOL pathway from Acute to Care Homes. Closed but to exception report examples.</p>
4.	<p>Maternity Update</p> <p>JFT advised that the Morecombe Bay Maternity report has now been published and is very critical of the hospital involved. There will be a review of maternity services following this report. DS advised that although NELFT do not provide maternity services they have reviewed for common themes and lessons learned.</p>
5.	<p>Children's Services Update</p> <p>JFT shared an update on Children's Services. It was noted that the Sickle Cell workstream is part of the SDIP.</p> <p>JFT updated that the ADHD cohort is to be reviewed on 16th February?? Did you mean Feb. BJ advised there will be a recommendation of care to CCGs. LB queried who within the CCG would take responsibility. It was answered that Mark Tebbs and the Thurrock Children's commissioners would be the leads. JFT confirmed that the issue is listed on the BAF as a high risk.</p> <p>BJ updated that NELFT are one of the final three providers that have bid for the CAMHS service provision. The contract will be awarded on the 10th April.</p> <p>JFT advised the Committee that the SEND agenda is continuing. The job description for Designated Medical Officer (DMO) was shared but there has been no response from Claire Mitchell as of yet. New workstreams will be involved in this role and BJ noted that the care delivery of SEND is recognised as a responsibility.</p>
6.	<p>NELFT Performance Reports</p> <p>JFT shared the performance reports for review with Hospital Acquired Infections; NELFT confirmed full engagement with the PIR for the recent MRSA bacteraemia.</p> <p>DS advised that the incident had been raised as an SI. LT was asked to confirm receipt of this information. LG asked if Thurrock CCG are represented. It was confirmed that Sheila O'Mahony, Head of Infection Prevention and Control represents Thurrock CCG.</p> <p><i>Patient Safety Thermometer</i></p> <p>DS advised the Committee regarding the previous Patient Safety Thermometer data issues and VTE assessments. The pre-populated data spreadsheet had the incorrect bed base so all data submissions were skewed. The inpatient unit information was wrong so has been stripped out of the report shared with the Committee. James Buschor, Head of Performance to meet with NELFT staff to address data errors.</p> <p><i>Safeguarding Adults</i></p>

	<p>JFT highlighted the need for NELFT to identify a Designated Adult Safeguarding Manager within their organisation. DS advised NELFT are currently benchmarking their organisation against the Lampard report.</p> <p>Laura Davis to oversee the action for James Buschor to access information from NELFT regarding the retrospective PST correction. NL advised the group that Hayley Black is involved in the workstream.</p> <p>The KPIs for performance were reviewed. JFT asked for clarification on the double amber rating for Children’s Diabetes service. MS advised that the Consultant Paediatric Diabetes Clinics have been cancelled which affects overall NELFT performance. MS has met with Dan Stoten, Children’s Commissioner and requested a change to the KPI for this year to allow more accurate monitoring this is specific to NELFT staff.</p> <p>The group were advised of a change to Looked After Children’s health assessment for those who have capacity and refuse. NL asked if assurance has been sought that patients have appropriate information before refusal. MS advised that assurance has been confirmed with Tricia Perolls, Looked After Children’s Designated Nurse.</p> <p><i>Safeguarding Children</i> JFT noted the amber rating for Children’s safeguarding level 1 at 93%. All other safeguarding KPIs have been met.</p> <p>The falls data was reviewed and BJ advised there is a workstream with Essex County Council for data quality checking for 18 weeks. LG queried if GPs are advised that patients are refusing or will not engage. JFT expressed concern that data is different on two different charts for falls. BJ advised that the activity charts show BB residents also accessing a Thurrock falls service.</p> <p>It was noted that there are no new risks identified by the NELFT Chief Nurse on their risk and Quality and Safety report.</p> <p><i>STEIS</i> The open SIs were noted to be predominantly pressure ulcers. LT to send SI documentation to BJ, DS, KM and MS to keep them informed. A meeting is being arranged to discuss the seven open incidents from 2013.</p> <p>SM highlighted that sickness and vacancy rates would be interesting from a quality perspective if broken down for CCGs. JFT advised that the breakdown is shared through the RCA Pressure Ulcer Thematic Action plan for both BB and Thurrock CCG.</p>
7.	<p>Patient Experience</p> <p>The recent NELFT compliments were reviewed and JFT commented that the format was very worthwhile.</p> <p>The complaints reports were shared and it was noted that NELFT have been unsuccessful in their recruitment of the vacant complaints officer post. BJ advised that the investigation and letters are completed by the Operations team, and that further recruitment will continue.</p> <p>SM requested themes be shared from complaints which will allow for qualitative data to be shared. DS advised that the current six monthly reports show the complaint themes. JFT added that 5x5 survey data for each service line is also shared with the</p>

	<p>Committee. DS noted that the Sign Up to Safety initiative focuses on the themes identified.</p> <p>Action: BJ to request top three themes and qualitative data to be added to monthly complaints report.</p> <p>Action: SM to share examples of other providers complaint reports.</p>
<p>8.</p>	<p>Workforce</p> <p>BJ advised recruitment is on-going for permanent AFC staff, while fixed term agency staff are providing a level of continuity which has allowed for the beds to re-open and the quality initiatives to be progressed.</p> <p>NL asked if the Thorndon ward Stroke beds are empty when not occupied by stroke patients. BJ advised the group that the stroke beds are utilised for other patients when not in use for stroke patients. BJ also noted that there have not been any workforce issues with stroke nurses when a full cohort of patients are in place. MS clarified that the nurses have stroke training and not a stroke qualification.</p> <p>NL advised that some of the AFC beds and equipment had been found at BTUH during a recent visit. BJ confirmed that the current AFC equipment is being leased until returned from BTUH.</p> <p>BJ highlighted to this Committee the appointment of substantive medical cover to allow for increased ward leadership. Cover will be from Dr Keith Pritchard (NELFT).</p> <p>The workforce data was shared with the Committee for review and discussion. The NELFT annual staff survey uptake was reviewed and it was noted that there had only been a 30% return rate compared to previous years. The data provided in the papers was for the whole NELFT health economy. JFT requested the possibility of data breakdown by South West Essex. BJ discussed the issues that may have contributed to the data including restructures and reorganisation which unsettles staff.</p> <p>SM asked if NELFT will produce an action plan. BJ confirmed there will be.</p> <p>Action: HR NELFT action plan to be shared on workplan.</p>
<p>9.</p>	<p>Assurance Reports</p> <p>The data presented in the RCA Thematic Action Plan for Pressure Ulcers was reviewed and discussed.</p>
<p>10.</p>	<p>Schedule of NELFT Reports</p> <p>The NICE report was reviewed by the Committee. SM advised of possible improvements with the reporting style and agreed to share these with NELFT.</p> <p>Action: SM to send anonymised report to NELFT and JFT.</p> <p>The Medicines Management report was reviewed. It was noted that Mary Tompkins represents Thurrock at the Medication Safety Group. JFT requested analysis of the trends shown within the report as the bar chart showed a discrepancy with no explanation. DS advised that all information detailed is monitored monthly. SM queried the datix reports for insulin errors. DS advised these would be raised as SIs if harm.</p> <p>LG asked where Mary Tompkins shared the Medicines Management review</p>

	<p>mechanism. It was advised that this information should be brought to the Quality and Governance Committee. However, currently only the minutes of the Medicines Management Committee are shared.</p>
11. Quality Visits	<p>Laura Davis shared information from the recent quality visit report for the Integrated Care Team for Basildon as per the paper.</p> <p>The good practice was identified as;</p> <ul style="list-style-type: none"> • Embedding of patient self-management culture • Patient feedback from compliments • Compliance with mandatory training and appraisals • Staff feedback with regard to support of line management and the leadership culture of the team • Holistic caring approach to complex patients care
12. NELFT Contracting Arrangement	<p>Performance dashboard may need to be changed to meet the requirements. National requirements and local will be referenced for the system.</p> <p>A separate meeting will be held to look at NELFT CQUINs new technical guidance published.</p>
13. Exception Reporting & Contract Management Meeting	<p>Incorrect Safety thermometer data to be reviewed and corrected. Post contract signing the Contract & Technical meeting will be reinstated.</p>
14. CCG Update for Providers	<p>JFT updated that the CCG are looking to increase staff capacity and that there will be some employment opportunities via NHS jobs.</p>
15. Escalation to Board Assurance Framework	<p>None.</p>
AOB	<p>The Nurse Revalidation report was shared by NELFT. JFT advised that this information is to be raised at Thurrock CCG Board as a risk in primary care.</p> <p>The group discussed that Tricia Perolls, Looked After Children’s Designated Nurse has approached NELFT to run clinics for “mop up” sessions for LAC without full immunisations status.</p> <p>The current service directory that is available for NELFT services does not reflect the current service offer. An update was requested and BJ noted that there is a Trust-wide process. MS advised the group that NELFT are due to change phone lines which will also need to be reflected in this review.</p> <p>A request for information regarding beds was shared and JFT advised that she would forward an email to NELFT regarding complexities of patients within the community setting.</p> <p>Concerns were shared regarding the paperless District Nurse notes at the End of Life care packages with St Francis Hospice. MS noted that a review of three patients had been received from St Francis with no prior notification or joint working. MS stated disappointment in this email receipt. MS will escalate and follow-up directly with St</p>

Francis however, raised concerns that Quality Issues should be investigated by the employing organisation and the lead CCG.

Action: MS to update the Committee following this meeting.

LT noted that there would be a meeting to review the new SI guidance and Duty of Candour.

MS advised the group that Connect are now delivering the MSK service. LG asked if a bank of patients had been handed over from the previous system and MS confirmed this was completed by courier and electronic data. Rahul Chaudhari and Karen Wesson were noted as leading on the workstream and the Committee advised that a progress report would be needed.

The group discussed Pulmonary Rehab and Oxygen in relation to the registers / lists for patients of both services. LB asked if information had been shared directly with GPs. MS confirmed that details had been given at the GP Time 2 Learn meeting and fliers will be shared by CCGs. MS also advised that the Thurrock Medicines Management team have been working closely with NELFT for clarity regarding quality aspects.

BJ updated the Committee that NELFT has served notice on the BCH Outpatient clinics that they deliver.

Discussion on the need to be sighted on NELFT CIPs and an agenda meeting for May. JFT to meet prior to this to understand high level data suggestions.

Date of Next Meeting

6th May 2015 12.30-2.30pm, Civic Offices, 2nd floor, New Road, Grays, RM17 6SL