

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

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

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. YA introduced JP to this group.
2.	Minutes of the meeting held on 3rd June 2015 The minutes from 3 rd June 2015 were reviewed by the group and accepted as an

	<p>accurate record, with an amendment to Section 11 on page 6 where the Stammer service was referred to.</p> <p>JFT noted the Pressure Ulcer meeting held after the previous NELFT CQRG had been helpful resolving a misunderstanding between the CCG and NELFT and improving timeliness in report signing off.</p>
3.	<p>Action Log & Annual Workplan</p> <p>11 – LB has raised QIAs at the Board meeting with Roger Harris who is responsible for Local Authority services. Closed.</p> <p>MS shared an update on the services available for the 5-19 age group, as half a million pounds had been removed from the budget. It was noted that the model was agreed, along with staffing and funds. The budgeted services include MASH. LB had discussed the details with Mandy Ansell to add the Local Authority cuts to the Thurrock CCG risk register.</p> <p>Action: JFT to discuss adding the Local Authority Financial cuts to the CCG risk register with an emphasis on mitigating risk within affected pathways.</p> <p>15/15 – BJ to share the Annual Staff survey breakdown with the membership of this Committee. 20/15 – Closed. 22/15 – It was advised that complaints have not been updated on the NELFT website. DS gave an update regarding the reformatting and the complaints will be updated quarterly. Closed. 24/15 – JFT discussed the proposed CIP regarding Names Nurse services within NELFT and their consultation. AW suggested bringing feedback to the Contract & Technical meeting. 25/15 – Action to be amalgamated into action 26/15. 26/15 – Patient Safety Thermometer data still inaccurate. LDavis to work with James Buschor and NELFT to ensure accurate and complete data reflected. To escalate to Contract & Technical meeting. 27/15 – Closed. (report included) 28/15 – Assurance report needs final sign off. MS to review and confirm to AW.</p> <p>JFT discussed CQUINs and changes to NELFT service lines. MS expressed concern over the vulnerability of staff during this process. LG queried how much risk there would be to Thurrock CCG if suggested BBCCG changes are implemented.</p> <p>Action: AW to forward BBCCG letter to NELFT and LG.</p> <p>29/15 – BJ shared examples of local data from the Clinical Audit report. KM noted the data also included cancelled that were not completed in the year. Updated report requested. Action KM</p>
4.	<p>Maternity Update</p> <p>JFT advised that there was no update to be shared regarding Maternity services.</p>
5.	<p>Children's Services Update</p> <p>The Committee were advised by BJ that NELFT are preferred bidder for CAMHs but they will not be responsible for the services until November 2015. Thurrock and Basildon & Brentwood CCGs will be integrated service users.</p>

6. NELFT Performance Reports

JFT reviewed the NELFT Performance reports and noted there were several reference of “not applicable” used on the new reporting template. AW noted that this was due to the recent change and the team were implementing a new template which would be updated to complete any “not applicable” items.

The Committee discussed the handover of the school sheet.

The data was reviewed and JFT drew attention to the 58% reported level of capacity of stroke patients as there was concern that there was not full bed occupancy. It was suggested to clarify the figure for stroke patients on the document template as the rest of the beds were in use by non-stroke patients.

LDavis advised that the incorrect template had been used as there were references to an action plan but there was no accompanying action plan.

The delivery of Looked After Children (LAC) services was discussed and BJ explained that appointments for those on the waiting list were usually because the family could not attend etc. and these cases were likely not in the Thurrock area.

The group discussed patients readmitted after discharge and details their conditions. BJ advised that this had been reviewed and NELFT were awaiting feedback.

The red rated items within the KPI document were discussed and BJ advised that a complaint regarding Children’s Services was open at the time of the report but is now being closed and a letter sent to the patient and family. This case fell between NELFT and SEPT and was sent to Taverstock for a second opinion. BJ advised that NELFT would not sign off complaints if questions were not answered fully. The complainants would be advised of any delays.

One of the new complaints received was regarding a staff claim from a fall.

Long term conditions were discussed by the Committee.

BJ advised that the information received in the report regarding a moderate fall was an error. JFT noted that any medications related cases, if moderate harm occurred, an SI would be expected to be raised.

Action: Clarify what determines moderate harm from this error.

JFT noted that there had been a drop in the compliance for level 1 safeguard training. MS noted that there were no concerns as the training is continually promoted.

The Committee were advised that the Falls Service’s actual contacts were listed within Thurrock as zero within the report against 23 referrals.

Action: MS to clarify Falls Service referrals and feedback at the Contract & Management Group.

Issues with community dentists were discussed and the Committee suggested the item be forwarded to the Executive meeting.

The DV1s from Essex police were discussed and YA noted that the team are aware of teething problems. JFT advised that Castle Point and Rochford CCG are leading on

	<p>this workstream. LG requested clarity on the domestic violence pathway within Primary Care.</p> <p>LAC immunisations were discussed and the teams have been working with NELFT regarding back dated immunisations needed which are now complete.</p>
7.	Patient Experience
	<p>The complaints report dashboard was reviewed and DS advised that many of the issues highlighted are with NELFT London services. JFT requested local data on Southwest complaints to confirm timeliness of complaint responses.</p> <p>BJ shared the details of a complex complainant regarding a leg ulcer.</p> <p>The Quality reports for the whole of NELFT were shared in the report and JFT noted that the CCG can confirm all SIs within 2013 are closed, however 2 remain open for 2014.</p> <p>The compliments received by NELFT for the month were reviewed and noted as very positive.</p>
8.	Workforce
	<p>The group discussed the Safer Staffing data and noted that there had been more one to ones completed since the last report.</p> <p>LG queried if there was a solution to issues with block booking of staff. JFT advised the Committee that there would be a salary review of any staff on a higher wage than the Prime Minister.</p> <p>The benchmarking data was reviewed with the RCN guide. It was noted that turnover for AFC staff was low. Thorndon Ward is now rated red for high turnover of staff.</p> <p>AFC sickness rates were discussed and it was also noted that both Mayflower Hospital and Thorndon Ward were rated red based on a head count of their own staff.</p>
9.	Assurance Reports
	<p>DS advised the Committee that the RCA Thematic Action plan was not available this month. The new ICT lead will be progressing the PU group and will have the updated thematic action plan available for the next meeting.</p> <p>Action: DS to ensure new RCA Thematic Action Plan available for SEPT CQRG.</p> <p>JFT queried why there was no training for MCA / DOLs. BJ advised that the training matrix agreed had included band 5 and above inpatient unit staff.</p>
10.	Schedule of NELFT Reports
	<p>The Complaints Annual report, NRLS incident benchmarking report and Intensive Review were reviewed and discussed for information.</p>
11.	Quality Visits
	<p>LDavis updated the Committee regarding the recent Quality visits. The first report was the Diabetes Service based at Craylands Clinic, Basildon. It was noted that they are now using the new star rating system with the use of Skype, although there is only one computer. MS advised that Facetime is a better resource.</p>

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	<p>Areas of improvements were shared as per the report as well as recommendations. MS noted that these suggestions were discussed and actioned within the service.</p> <p>The Committee considered the merit of more training on the Daphne and Desmond system.</p> <p>The report for the Mayflower Hospital Inpatient Unit was reviewed and the suggested improvements were shared, including details for care plan to reflect current patient needs. The Committee were also updated on the good practice at the Mayflower Inpatient Unit.</p> <p>LB queried where the learning from outcomes and good practice could be seen being put into place. BJ noted the success of the same matron covering all the key areas and noted the need for this to be implemented across the organisation.</p>
12.	NELFT Contracting Arrangement
	<p>AW discussed the KPIs and scorecards, as well as the agreed programme of meetings. The first Technical meeting would be held next week.</p> <p>Information was shared regarding waiting times and NELFT agreed to add quarterly waits per service. LG suggested slides be made available for information at the CEG meeting and for Joy Joses to share with the Thurrock membership.</p> <p>AW discussed the Basildon & Brentwood CCG proposal to the NELFT contract and the possible implications for Thurrock CCG. BJ advised the group on the letter of agreement and what was included. JFT suggested a sentence be added regarding the CQUIN to include “any changes in year that affect NELFT’s ability to deliver CQUIN service will not affect payment”. AS to take to Contract & Technical meeting.</p>
13.	Exception Reporting & Contract Management Meeting
	None.
14.	CCG Update for Providers
	JFT updated the providers to note the Len Green has retired as Lay Member and Deputy Chair for Thurrock CCG. JFT advised that LB had been confirmed as Deputy Chair.
15.	Escalation to Board Assurance Framework
	It was agreed that Thurrock Council’s budget cuts would be escalated to the Board Assurance Framework.
	AOB
	<p>LDavis advised that NL had raised concern regarding the falls data. DS advised that the new datix lead has adjusted the reporting to include trips, slips and falls which will improve reporting of genuine falls.</p> <p>The Continence review was included in the meeting papers. MS noted that SW ESSEX Continence data must be confirmed. DS advised that there are issues regarding training in the Continence service. MS had worked with William Guy to identify the issues. It was noted that SEPT have changed the processes regarding pad provision with a limit on pads.</p> <p>Action: JFT to escalate impact of pad provision to SEPT’s Contract and</p>

Technical meeting.

JFT noted the Basildon and Brentwood and Thurrock Health Economy reports that were included for information.

The Committee discussed the Community Paediatric follow-up waiting list as well as the new deadlines that had been agreed.

Date of Next Meeting

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

DRAFT