

**Adopted Minutes of the Quality Assurance Committee meeting  
 held on Thursday 18 May 2017, 1.30 – 3.30 pm  
 in the Boardroom at 722 Prince of Wales Road, Darnall**

**Present:**

Ms Amanda Forrest, Lay Member (Chair)  
 Mrs Penny Brooks, Chief Nurse  
 Professor Mark Gamsu, Lay Member  
 Dr Terry Hudson, GB GP Member  
 Dr Zak McMurray, Medical Director  
 Dr Marion Sloan, GB GP Member

Item 20f

**In attendance:**

Ms Janet Beardsley, Senior Quality Manager  
 Ms Sue Berry, Senior Quality Manager, Primary Care  
 Mr Tony Clarke, Healthwatch Sheffield  
 Mrs Hilary Fitzgerald, Specialist Assurance Assistant Manager 360 Assurance  
 Ms Jane Harriman, Head of Quality  
 Mr Tony Moore, Senior Quality Manager, Commissioning  
 Ms Debbie Morton, Clinical Head of Services  
 Mrs Michelle Oakes, Business Manager (Notes)

Item	Item Description	
13/17	<b>Welcomes, Introductions and Apologies</b> Mrs Mandy Philbin and Ms Sarah Neil  The Chair declared the meeting was quorate.  The committee noted that the secondary doctor has been appointed and should be available for the next meeting.	
14/17	<b>Declarations of Interest</b>  The Lay Member declared an interest on the advocacy of DoLs report.	
15/17	<b>Minutes of the meeting held on 9 March 2017</b>  The minutes of the meeting held on 9 March were agreed as an accurate record.	
16/17	<b>Matters Arising/Actions</b>  05/17(iii) – Patient Participation groups. The Chair reported this was not complete and will follow up with Healthwatch regarding the lack of a PPG at his own GP practice.	<b>AF</b>

	<p>05/17(v)(b) – Domiciliary care. Action completed.</p> <p><b>Feedback from the Time Out on 9 March 2017</b></p> <p>The purpose of the time out was to rejuvenate the Committee and review reporting on quality both at this committee and at Governing Body. This was not achieved during the time limit. The group felt that the ice breaker went on too long but the time out gave a useful focus on how the QAC could be more focused, having a provider focus each meeting and look at how to reduce the number of papers presented.</p> <p>The Chief Nurse attended the South Yorkshire Quality Surveillance Group who have recently reviewed the reporting revamped their meeting which may be useful to look at.</p> <p>The Quality Assurance Committee provides assurance to the Governing Body on the quality of contracted services. There are contract meetings and individual 1:1 meetings with the providers; however performance is reported at this committee.</p> <p>The Lay Member attended health finance management training chaired by Phil Taylor and learned there are 6 foundation trusts which looked at the effect that CCG Assurance Committee has on provider ratings.</p>	
17/17	<p><b>Providers' Performance</b></p> <p><b>i Patient Transport</b></p> <p><b>Transport Services Assurance Report Q4</b></p> <p>The Chair enquired about City taxis KPIs not being met. The Senior Quality Manager for Primary Care confirmed this was only slightly under target for KPI 3 &amp; 4 and is not anticipated to be long term. The work of the Senior Quality Manager for Primary Care was recognised at South Yorkshire level - relating to the Flu Fighter award.</p> <p><b>ii GP CQC report Quarter 4</b></p> <p>The Head of Quality confirmed that all CQC inspections have been completed with 81 practices 93% good with one practice showing as inadequate. The CQC will return to the underperforming practices within 3 to 6 months. Access and governance were key issues. The Sheffield Scrutiny Board had raised concerns regarding DBS checks and the Quality team are taking action with practices to support improvements.</p> <p>The Lay Member asked about the level of interest in Patient Participation Groups. The GB GP member confirmed the CQC had requested to meet with their PPG and the PPGs had been mentioned in the CQC report. The Lay Member asked that the PPG information is included on the Public Equality Engagement Experience Group (PEEEG) agenda.</p>	MG

	<p>The Medical Director suggested including PPC on the neighbourhoods agenda, and to feed into the city wide network for PPGs.</p> <p>The committee was advised that the next round of CQC inspections for GP practices will be carried out in five years for those not already inspected.</p> <p>The committee was concerned about the inconsistency of inspections raised by GPs, however this is a national CQC issue and dependent on the competence of the inspectors. The Committee agreed that the practices who were rated as underperforming were provided with extra support. This is provided by the Locality Managers and the Quality Manager for Primary care.</p> <p><b>iii. Foundation Trusts and Private Providers</b> Quality Dashboard Quarter 4 Summary including:</p> <p>a) <b>Sheffield Teaching Hospitals NHS FT</b> There had been a number of never events since December 16 relating to wrong site surgery/two cataract wrong lens and eye. A formal letter has been sent to David Throssell from the Medical Director relating to Cataract surgery to raise the question of an external review. This will be reviewed when the final reports are due by 30<sup>th</sup> June.</p> <p>The 2 day reporting still needed to improve, however the trust is undertaking a review and improvements should be seen next quarter.</p> <p>b) <b>Sheffield Health and Social Care NHS FT</b> The Senior Quality Manager confirmed the CQC report has been published which is now rated 'good' and reflects the improvements made in the trust. The safety domain still 'requires improvement' however. The CQC also undertook a review of Mental Health act legislation in March and the trust are still awaiting feedback from this.</p> <p>c) <b>Sheffield Children's NHS FT</b> It was reported that patient experience processes in the trust still continue to need improvement. The Quality Manager for Patient Experience is supporting the trust to facilitate the use the NHS toolkit to enable assessment of complaints handling. Ms Forrest, Phil Taylor and Margaret Ainger visited the new wing of the Children's Hospital and were very impressed with the overnight stay for guardians of children.</p> <p>d) <b>Claremont, Thornbury, St Luke's</b> The GP GB member raised the issue that a patient attending Thornbury Hospital for a colonoscopy was not able to have access</p>	<p><b>ZMcM</b></p>
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	<p>to histology. This only appears to occur if a patient is treated privately and not via choose and book. This should be dealt with via the GP to the surgeon via One Health Group.</p> <p>Claremont never event report (wrong site surgery) is still awaited St Luke's Hospice was rated as outstanding by the CQC. Thornbury - CQC had returned to the Hospital and there were still two issues outstanding but are now being addressed.</p> <p><b>iv. Care Homes and Domiciliary Providers (Care Home focus - 40 mins)</b></p> <p><b>a) Quality in Care Homes Quarter 4 Report</b></p> <p>The Clinical Head of Services outlined the report. A heat map which demonstrates themes and rag rating of care homes is expected to be finished by June. The Medical Director suggested patient opinion is involved. There is also a new shared intelligence group for care home quality held jointly with the Local Authority.</p> <p><b>b) Quality in Care Homes Annual Report 16/17</b></p> <p>The Clinical Head of Services reported that during 16/17, 42 homes were visited and 570 actions agreed with individual homes. 193 of the visits were unscheduled. The Medical Director reported of a pilot run by the medicines management team around dieticians with 2 neighbourhoods and nursing homes. There will be a joint Care home strategy and action framework presented to the next meeting.</p> <p><b>c) Quality Assurance in Care Home Review</b></p> <p>The Head of Quality reported that a 360 degree review took place in February 2016, and there are now plans to deliver these actions by the deadlines. The team have also been subject to a team review in April / May 2017 and the recommendations are to review its role, function, governance, partnership working, strategic direction and capacity. There are now actions in place relating to a change in leadership of the team.</p> <p><b>d) Care Home Data review</b></p> <p>The Senior Quality Manager for Primary Care delivered the report reviewing the data available within care homes in order to plan care pathways, services and measure outcomes. There is large amount of data available that is either old or with no facility to collect it. Dr Sally Fowler, SHU is leading on the overall population based research. Adult social care has been involved specialising in care homes from the Local Authority and Universities. The Specialist Assurance Manager reported that an audit for the CCG had been carried out stating there is generally very little data on care homes with the government putting out a tender to do some research on how to monitor care in care homes. There is an</p>	<p><b>JH</b></p> <p><b>AF/MG</b></p>
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	<p>opportunity for us to set the project outline both from an operational perspective and strategic level. The Lay Member suggested that Governing Body discuss this at a strategic session.</p> <p>e) <b>Home Care and Supported Living Providers Quarter 4 Report</b></p> <p>The Clinical Head of Services reported there are 7 providers for supported living, and one showing as red but expecting this reduce. Carers often move round the system between providers who work in difficult circumstances. A report has been received from Phil Holmes at the LA regarding Home Care which was sent to the CCG Governing Body and it was agreed that this will be shared with the committee.</p> <p>f) <b>DOLs in the community report Q4</b></p> <p>The Clinical Head of services reported that work is ongoing with just over 400 cases in the community. The objectives are to embed the practice and deliver training with the LA. Targets are being met but there is a specific back log on care homes. A learning lunch was suggested within the CCG. There is also a leaflet available for the public.</p> <p>The Chair asked if there was capacity within the team to deliver this agenda. The group were informed there is currently a vacancy with staff presently acting up into positions; however DM is reviewing leadership and responsibilities. The Chief Nurse felt confident that this is being carried out and suggested that the team feedback to QAC in the future.</p> <p>The Chair asked if there are signs that nursing homes and care homes are getting involved in the neighbourhood model. The Medical Director stated there are good examples of relationship between care homes and practices and is an opportunity with the virtual ward and Vickie Holden of Primary Care Sheffield.</p>	<p><b>CH/MO</b></p> <p><b>DM/ Jo H</b></p>
<b>18/17</b>	<p><b>Patient Experience</b></p> <p>i <b>Patient Experience Report</b></p> <p>The report highlights issues with STHFT care opinion feedback relating to MSK identified themes. STHFT have undertaken a deep dive with changes made around process of appointments. This will be fed back to the Elective Care Portfolio.</p> <p>Feedback had been received regarding a neurology consultant not being able to speak English and this has been investigated.</p> <p>ii <b>National Guidance on Learning from Deaths</b></p> <p>This briefing paper is to raise awareness of the guidance from the NHS Quality Board aimed at provider organisations mention. The</p>	

	<p>trusts in Sheffield have put in place a number of actions to implement the guidance which is meant to help to share learning both nationally and locally. One of the subset of deaths relates to learning disabilities and this raised a question for discussion regarding the role of General Practice. The Clinical Head of Services reported there is a city wide process for LD deaths and communication will be sent to General Practice regarding this.</p>	
<b>19/17</b>	<p><b>Papers for Information</b></p> <p><b>Medicines Safety</b></p> <ul style="list-style-type: none"> <li><b>i</b> Medicines Safety Group Quarter 4 Report</li> <li><b>ii</b> CD LIN update Quarter 4</li> <li><b>iii</b> Commissioning for Quality Action Plan 2016/17 Quarter 4 update</li> <li><b>iv</b> Patient Experience Strategy Action Plan 2016/17 Quarter 4 update</li> </ul> <p>The above papers were all noted.</p>	
<b>20/17</b>	<p><b>Key messages to Governing Body</b></p> <ul style="list-style-type: none"> <li>• CQC ratings and primary care</li> <li>• Choose and book (this is being dealt with by the GP)</li> <li>• Care Homes Significant work is being undertaken jointly with the CCG and LA relating to quality of care and care home provision.</li> <li>• Serious incident reporting in Primary care - no formal agreement on responsibilities.</li> </ul>	
<b>21/17</b>	<p><b>Any Other Business</b></p> <p>The Senior Quality Manager for Primary Care reported on the issues where GPs report SIs. There is no formal agreement between the CCG and NHSE regarding who will take on the role of managing Primary care SI's and it was informally agreed that this would remain with NHS England, The Senior Quality Manager for Commissioning is meeting with NHS England to review this and asked for a formal MoU. The Chief Nurse stated that Carole Lavelle is also aware.</p> <p>The Chair reported that this was The Senior Quality Manager for Commissioning last meeting before retiring. The Chair thanked him for his contribution to this committee for many years and stated that he would be hugely missed.</p>	

22/17	<b>Date and Time of Next Meeting</b> Thursday 31 August 2017, 1.30 pm – 3.30 pm, 722 Boardroom	
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