### NHS VALE OF YORK CLINICAL COMMISSIONING GROUP

# Minutes of the meeting of the Quality and Performance Committee held on 19 March 2013 at Sovereign House, York

#### Present

Mr Keith Ramsay (Chair) Lay Member and Audit Committee Chair

#### In Attendance

Dr Shaun O'Connell GP Clinical Lead for Quality and Performance

Mrs Rachel Potts Chief Operating Officer

Mr Richard Reed (for item 5)

Joint Interim Head of Provider Performance, North

Yorkshire and Humber Commissioning Support Unit

Ms Michèle Saidman Executive Assistant

Mrs Liza Smithson (for item 5)

Business Intelligence Manager, North Yorkshire and

**Humber Commissioning Support Unit** 

Mrs Carrie Wollerton Executive Nurse

**Apologies** 

Dr Guy Porter Consultant Radiologist

A number of items were deferred to the next meeting due to the focus of discussion on the format and reporting relating to the Performance Dashboard.

#### 1. Apologies

As noted above.

### 2. Declarations of Interest

Declarations of Interest were as per the register of interests.

#### The Committee:

Noted the information regarding declarations of interest.

# 3. Minutes of the meeting held on 26 February 2013

The minutes of the previous meeting were approved subject to amendment at item 3 that the Committee approved the minutes of 29 January, not 11 December.

#### The Committee:

Approved the minutes of the meeting held on 26 February 2013, subject to the above amendment.

# 4. Matters Arising

Quality – Risk Matrix: Carrie Wollerton advised that the Risk Matrix would be developed to align with the Risk Register and quality risks would be incorporated in the CCG's Risk Register. Rachel Potts agreed to discuss this aspect of the Risk Register with Dawn Taylor, Corporate Services Manager, Commissioning Support Unit (CSU), who was developing the Risk Register.

Safeguarding Adults and Children and Looked After Children: Carrie Wollerton was seeking confirmation from the Area Team regarding resource implications for Safeguarding Independent Medical Reviews.

All other matters arising were either agenda items or had been completed.

#### The Committee:

- 1. Noted the updates.
- 2. Noted that Rachel Potts would discuss incorporation of quality risks with the CSU.

## 5. Performance

Richard Reed and Liza Smithson attended for this item

# 5.1 Dashboard, Fast Track and Exception Reporting

Liza Smithson tabled an updated draft Dashboard, a draft reporting schedule of CCG specific data and a draft reporting timetable relating to the Committee and the Governing Body. Richard Reed detailed a number of data flows – weekly, fast track, monthly and quarterly – and current circulation as per availability and the CCG's service specification with the CSU. He noted that fast track data was not validated; this process currently took six weeks. Carrie Wollerton advised that operationally the CCG was working with as close to real time data as possible.

Detailed discussion ensued on the updated Performance Dashboard and associated concerns. In respect of ambulance turnaround times, inclusion was requested of an indicator against the nationally recognised 25 minute turnaround time and case mix for A&E attendances.

Carrie Wollerton advised that ambulance turnaround times were subject to a regional collaborative action. She agreed to circulate the plan and also noted that, once confirmed, the minutes from the Performance Summit would be presented to the Committee; the ambulance turnaround information would also be in the Performance Dashboard to the April Governing Body meeting

In terms of the exception reporting Liza Smithson highlighted:

 A new indicator in Domain 1 Preventing people from dying prematurely on the exception reporting: percentage of patients referred by a primary care professional for treatment/investigation of breast symptoms (excluding those where cancer was suspected) who are seen by a specialist within 14 days. She noted that the performance of 92.7% against a plan of 93% related to North Yorkshire and York patients at York Hospital.

- Domain 2 Enhancing quality of life for people with long term conditions: Number of episodes of crisis resolution/home treatment care period: Richard Reed would seek to obtain CCG specific data which was currently a PCT indicator for discussion with Gareth Winter, Senior Contract Manager.
- Domain 4 Ensuring that people have a positive experience of care: Additional analysis had been added in respect of 95<sup>th</sup> percentile for admitted patients who were on a referral to treatment pathway for which actual performance was 24 weeks against a 23 week plan.

#### Further discussion related to:

- Potential designation of 36 week waits for referral to treatment at York Teaching Hospital NHS Foundation Trust as a Never Event in the 2013/14 contract.
- Clarification of targets relating to specific sites.
- A recent mixed sex accommodation breach
- Choose and Book being incorporated in the Referral Support Service.
- Clostridum difficile cases had reached 37 as at 8 March; three of these were being appealed. Implementation of the £3M potential financial penalty required clarification.

Carrie Wollerton agreed to update the assurance column on the exceptions reporting for the Governing Body Dashboard and Richard Reed agreed to provide for a future meeting analysis of case mix by GP practice on A&E attendances.

The additional information in the draft Dashboard was welcomed and a number of further amendments were agreed. In terms of presenting this item to the Committee and ensuring that the Governing Body received the most up to date information available, it was agreed that the Dashboard would be circulated by email the day before the Committee with colour copies provided at the meeting.

#### The Committee:

- 1. Welcomed the additional areas of clarification provided in the Dashboard and requested a number of further amendments.
- 2. Noted that Carrie Wollerton would update the assurance column on the exceptions reporting.

3. Requested for a future meeting case mix by GP practice on A&E attendances.

## 6. Quality

- 6.1 Serious Incidents
- a) Update: Item deferred.
- b) Policy: Carrie Wollerton provided clarification on a number of aspects of the policy. Following detailed discussion minor amendments were agreed prior to the policy being recommended to the Governing Body at its meeting on 4 April.
- 6.2 Hospital and Community Acquired Infection

Item deferred.

6.3 York Hospital Performance Report.

Item deferred by the Committee but would be discussed at the Governing Body on 4 April.

6.4 a) Safeguarding Adults and b) Safeguarding Children, Looked After Children

Carrie Wollerton reported that a Serious Case Review was being published in York later in the week.

5. Commissioning for Quality and Innovation (CQUIN)

Item deferred.

6.6 Leeds and York Partnership NHS Foundation Trust Performance Report

Item deferred and Rachel Potts to request that Cath Snape, Governing Body GP Mental Health Lead, extract information in a comprehensive but succinct format.

6.7 Draft Commissioning Support Service Key Performance Indicators

Item deferred.

#### The Committee:

- 1. Requested incorporation of amendments to the Serious Incidents Policy prior to presentation at the Governing Body meeting on 4 April.
- 2. Noted that the York Hospital Performance Report would be discussed at the Governing Body meeting on 4 April.

- 3. Noted the forthcoming publication of a serious case review in York.
- 4. Requested the information from Leeds and York Partnership NHS Foundation Trust Performance Report be presented in a comprehensive but succinct format.

# 7. Service and Pathway Development

No items.

# 8. Governing Body

- 8.1 Matters to Escalate to the Governing Body:
  - York Hospital and Yorkshire Ambulance Service Performance as discussed at the Performance Summit
  - Serious Incidents Policy an agenda item at the Governing Body meeting

## The Committee:

Agreed the above would be highlighted by the Committee Chairman to the Governing Body.

# 9. Any Other Business

The item to agree on a process for developing and approval of Francis action plan was deferred.

# 10. Next Meeting

17 April 2013 at 8.30am, instead of 9am in The Goodricke Room (T015) 3<sup>rd</sup> Level, West Offices

# NHS VALE OF YORK CLINICAL COMMISSIONING GROUP QUALITY AND PERFORMANCE COMMITTEE SCHEDULE OF MATTERS ARISING/DECISIONS TAKEN ON 19 MARCH AND CARRIED FORWARD FROM PREVIOUS SCHEDULE

Meeting Date	Item	Action Required/Decisions Taken	Responsible Officer/Body	Action Completed/ Due to be Completed by (as applicable)
29 January 2013 19 March 2013	Quality – Risk Matrix	<ul> <li>Quality risks to be incorporated in CCG Risk Register by CSU</li> </ul>	Rachel Potts	
26 February 2013 19 March 2013	Safeguarding Adults and Children, Looked After Children	<ul> <li>Confirmation to be sought from the Area Team on resource implications for Safeguarding Independent Medical Reviews</li> </ul>	Carrie Wollerton	
19 March 2013	Performance Dashboard	<ul> <li>Agreed amendments to be incorporated</li> <li>Analysis of case mix by GP practice on A&amp;E attendances.</li> </ul>	Liza Smithson/ Carrie Wollerton Richard Reed	
19 March 2013	Serious Incidents Policy	<ul> <li>Amendments to be incorporated prior to presentation at the Governing Body meeting</li> </ul>	Carrie Wollerton	4 April 2013
19 March 2013	Leeds and York Partnership NHS Foundation Trust Performance Report	<ul> <li>Cath Snape, Governing Body GP Mental Health Lead, to be requested to extract information in a comprehensive but succinct format</li> </ul>	Rachel Potts	19 April meeting