



**North East and
North Cumbria**

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	

BOARD MEETING 30 May 2023	
Report Title:	Highlight report and Approved Minutes from the Quality and Safety Committee
Purpose of report	
To provide the Board with an overview of the discussions at the meeting of the Quality and Safety Committee held in May 2023 and approved minutes from the Committee meetings held on 15 December 2022 and 16 February 2023.	
Key points	
<p>The confirmed minutes from the meeting of the Quality and Safety Committee held on 15 December 2022 and 16 February 2023 are attached at Appendices 1 and 2.</p> <p>The Committee considered several issues and supporting papers at its meeting held on 11 May 2023 including:</p> <ul style="list-style-type: none"> • Area quality exception reports/key risks, issues and assurances Cumbria, North, Central and Tees • Patient involvement and experience • Complaints report (quarters 3 and 4) • Transforming Care update • Excess Mortality and the Summary Hospital-led Mortality Indicator • Terms of reference • Risk register • Patient Voice subgroup terms of reference • Quality and Safety Committee annual review 2022/23 (Appendix 3) <p>The minutes from this meeting will be approved by the Committee at its meeting scheduled for 20 July and submitted to the Board for assurance at its next meeting on 25 July 2023.</p>	
Risks and issues	

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The Committee will continue to receive and review the corporate risks aligned to the quality and safety portfolio to provide assurance to the Board that the quality and safety risks contained within the corporate risk register reflect the current environment.

Assurances

The clinical quality exception report and other supporting reports provide the Committee with a range of data and assurance sources.

Recommendation/action required

The Board is asked to:

- Note the Quality and Safety Committee highlight report for May 2023;
- Receive the approved minutes for the Committee meetings held on 15 December 2022 (**Appendix 1**) and 16 February 2023 (**Appendix 2**) for assurance
- Receive the Committee annual review for 2022/23 for information and assurance (**Appendix 3**).

Acronyms and abbreviations explained

NENC – North East and North Cumbria
 SEND – special educational needs
 LeDeR – learning from Lives and Deaths, People with a Learning Disability and Autism

Sponsor/approving executive director	Eileen Kaner, Non-Executive Member of the Board and Chair of the Quality and Safety Committee / Claire Riley, Executive Director of Corporate Governance, Communications and Involvement
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Date approved by executive director	23/05/2023
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Reviewed by	Deborah Cornell, Director of Corporate Governance and Board Secretary
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Report author	Neil Hawkins, Head of Corporate Affairs
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Link to ICB corporate aims (please tick all that apply)

CA1: Improve outcomes in population health and healthcare	✓
CA2: tackle inequalities in outcomes, experience and access	✓
CA3: Enhance productivity and value for money	✓
CA4: Help the NHS support broader social and economic development	✓

Relevant legal/statutory issues

Health and Care Act 2022

Any potential/actual conflicts of interest associated with the paper? (please tick)	Yes		No	✓	N/A	
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If yes, please specify

Equality analysis completed (please tick)	Yes		No		N/A	✓
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If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken? (please tick)	Yes		No		N/A	<input checked="" type="checkbox"/>
Key implications						
Are additional resources required?	None at this stage – membership and terms of reference of the Committee are under review.					
Has there been/does there need to be appropriate clinical involvement?	Appropriate clinical representation within the membership of the Committee. Terms of reference to include representation from Nursing Directors and Medical Directors.					
Has there been/does there need to be any patient and public involvement?	N/A					
Has there been/does there need to be partner and/or other stakeholder engagement?	N/A					

Quality and Safety Committee Highlight Report

Introduction

The Committee has been established to provide the ICB with assurance that is delivering its functions in a way that delivers high quality safe patient care in commissioned services and 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 2022. 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.

Summary report

The Quality and Safety Committee, chaired by Eileen Kaner Non-Executive Member of the Board, met on the 11 May 2023 and considered a number of issues and supporting papers including:

Area Quality Exception Reports for Cumbria, North, Central and Tees

The Committee received a brief presentation outlining the current risks and issues within each of the four geographical areas within the ICB. Themes included:

- North Cumbria: Care Quality Commission inspection of maternity services at North Cumbria Integrated Care Hospital; Continuing healthcare (CHC) market fragility; and, safeguarding vacancies within the team
- North: SEND health funding and inspection framework; CHC fee rates, care management and service alignment; LeDeR reviewer availability to carry out reviews.
- Central: County Durham and Darlington Foundation Trust maternity services; safeguarding vacancies within the team; tuberculosis community service provision in Sunderland and South Tyneside.
- Tees Valley: Serious Incident reporting rates at the Foundation Trusts – improvement work continues; Tees Esk and Wear Valley Foundation Trust remain in quality escalation with action plans in place; independent provider market.

The Committee discussed some common themes and suggested there may be one or two areas where the Committee could do a 'deep dive' at future meetings – namely CHC and safeguarding.

The Committee also received an update concerning area quality reporting that will be presented to the Committee in future. Work is underway to design the format and content of the reports which will be presented to the Committee at the next meeting.

Patient Involvement and Experience

The Committee received an update report from the involvement team concerning how the ICB is involving people in conversations around health services at community, place, area and ICB-wide levels. The report provided a high-level summary of some key activities currently taking place across the NENC region to actively support the implementation of the strategy and provide assurance of the ICB's commitment to listening to patient experience and voice.

Complaints Report (Quarters 3 and 4)

The Committee received two reports which provided assurances that the ICB had fulfilled its statutory responsibilities regarding complaints management. The reports provided an overview of the issues raised in complaints/concerns during quarter 3 and 4 along with learning for the ICB following complaint investigations. The main categories of ICB complaints/concerns were Continuing Healthcare and Covid 19 issues. The transfer of accountability of primary care complaints from NHS England to ICBs, including clinical review and sign-off of complaint responses, will be effective from 1 April 2023; staff/resources will transfer on 1 July 2023. A key risk associated with this transfer includes identification by the ICB of resource for clinical review of complaint findings.

Transforming Care Update

The Committee received an update on Transforming Care programme for people with learning disabilities and autistic people. The NENC as a system is traditionally a high user of hospital beds. The programme aims to meet the NHS Long Term Plan deliverables for people with a learning disability and autistic people by having the right care and support available in the community. At the end of March 2023 there were 162 adults in hospital – which is 37 people above the inpatient trajectory and 7 young people under 18 which is below the trajectory. Kate ran through the main elements and priority actions within the programme for the Committee.

Excess Mortality and Summary Hospital-led Mortality Indicator (presentation)

The Committee received a comprehensive presentation concerning excess mortality and the summary hospital-led mortality indicator (SHMI) data. The discussion highlighted the difficulty to unravel the issue of excess mortality from the data available. The usefulness of the SHMI data had been adversely impacted by the pandemic but still provided valuable data to try to understand the causes of excess mortality over time. The SHMI data provides a window into the issue but does have limitations (e.g. it lacks adjustment for severity or acuity of illness).

Terms of Reference

The Committee considered the updated terms of reference and approved the draft for submission to the Board for ratification. The membership had been reviewed to ensure appropriate representation and to reflect the Committee's responsibility for public and patient involvement assurance.

Risk Register

The Committee received the regular risk report highlighting risks within the remit of the Quality and Safety Committee. Two new risks were included in the report, one concerning the difficulty of finding and maintaining suitable placements for patients with complex needs, and the other concerning high levels of potential suicides identified across the North East and North Cumbria which has the highest suicide rate in England. The Committee asked that the scores of the residual risks be raised with the risk owners to ensure they were scored appropriately.

Patient Voice Subgroup Terms of Reference

The Committee was presented with the terms of reference for the proposed subgroup which was to be established as a formal subgroup of the Quality and Safety Committee. Its focus will be to:

- Champion robust and meaningful patient and public involvement underpinned by principles of equality and inclusion
- Oversee involvement and engagement activities to provide assurance to the Quality and Safety Committee and Board that the ICB is fulfilling its statutory duties and legal requirements with regards to involvement
- Monitor and review the ICB's fulfilment of its duties to inform and consult as set out in the NHS Constitution and the *Health and Care Act 2022*.
- Seek assurance that the ICB is meeting the requirements for commissioners as set out in the *Equality Act 2010*

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- Work with the Quality and Safety Committee to provide assurance to the Board that providers are fulfilling their statutory duties with regards to involvement
- Provide a forum to enable a focus on emerging feedback trends, alerting the Quality and Safety Committee, other relevant committees and/or the Board on themes and trends as a result of the triangulation of intel and insight from multiple sources of information
- Coordinate the engagement of bespoke public perception research to ensure consistency and reduce duplication.

The Committee approved the creation of the patient voice subgroup including the proposed terms of reference.

Quality and Safety Committee annual review 2022/23

In line with its terms of reference, the Committee must undertake an annual review of its performance and provide an account of its work to the Board. The Committee received the report which provided a summary of the main areas of work and achievements throughout 22/23. The report was received and is attached as Appendix 3 to this report.