

North East and North Cumbria Integrated Care Board

Confirmed QUALITY AND SAFETY COMMITTEE

**Minutes of the meeting held on 10 July 2025 from 1pm
Joseph Swan Suite, Pemberton House, Sunderland**

Present:

Sir Pali Hungin, Independent Non-Executive Member (Chair)
Christopher Akers-Belcher, Regional Co-ordinator Healthwatch Network
Dr Maria Avantaggiato-Quinn, Director of Allied Health Professionals
Ann Fox, Deputy Chief Nurse
David Gallagher, Chief Procurement and Contracting Officer
Kirstie Hesketh, Deputy Director of Quality - deputy for Sarah Dronsfield, Director of Quality
Louise Mason-Lodge, Director of Nursing (Safeguarding)
Alex Kent, Medical Director – deputy for Dr Neil O'Brien, Chief Medical Officer
Dr Saira Malik, Primary Medical Services Partner Member
Dr Rajesh Nadkarni, Foundation Trust Partner Member
Vicky Playforth, Interim Director of Nursing (South)
Claire Riley, Chief Corporate Services Officer

In Attendance:

Jen Coe, Strategic Head of Involvement and Engagement
Marie Cunningham, All Age Continuing Care (AACC) Deputy Director of Nursing
Rachel Weddle, Deputy Chief Nurse, Tees, Esk and Wear Valleys NHS Foundation Trust (observer)
Bethany Brown, Corporate Governance Administrator (observer)
Rebeca Herron, Corporate Committees Officer
Jane Smailes, Corporate Governance Support Officer (minutes)

QSC/2025/07/1

Welcome and Introductions

The Chair welcomed all those present to the meeting.

QSC/2025/07/2

Apologies for Absence

Apologies were received from:

Ken Bremner, Foundation Trust Partner Member
Sarah Dronsfield, Director of Quality
Hilary Lloyd, Chief Nurse and AHP Officer
Ewan Maule, Clinical Director Medicines Optimisation/Pharmacy

Official

Kate O'Brien, Director of Nursing, Mental Health, Learning Disabilities, Autism and Complex Care
Dr Neil O'Brien, Chief Medical Officer
Richard Scott, Director of Nursing (North)

QSC/2025/07/3

Declarations of Interest

The Chair reminded members of the Committee of their obligation to declare any interest they may have on any issues arising at the Quality and Safety Committee meeting which might conflict with the business of the ICB.

Declarations made by members are listed on the ICB Register of Interests. The Register is available either via the Committee Secretary and an extract included in the meeting papers.

No additional declarations of interest were noted.

QSC/2025/07/4

Quoracy

The Chair confirmed the meeting was quorate.

QSC/2025/07/5

Minutes of the Previous Meeting held on 8 May 2025

RESOLVED

The Quality and Safety Committee **AGREED** that the minutes from the meeting held 8 May 2025 were a true and accurate record.

QSC/2025/07/6

Matters Arising from the Minutes and Action Log

QSC/2025/05/7.4.1 - ICBP001 Access and Choice Policy

The Corporate Committees Officer working with the Communications Team to provide a QR code for use on printed documentation from Healthwatch to access the policy.

QSC/2025/05/10.1 - Overview Assurance Report of Safeguarding Children, Adults and Cared for Children Executive Summary

The Director of Nursing (Safeguarding) advised they were working through the Safeguarding Health Executive Group to identify appropriate lead to present a report regarding the loss of life due to self-harm, within the 16-25 age group.

QSC/2025/07/7.1

Quality and Safety Board Assurance Framework and Risk Management Report – Quarter 1, 2025/26

The Chief Corporate Services Officer provided the Committee with an update to the Board Assurance Framework (BAF) for Quarter 1, 2025/26 and an updated corporate risk register for review and consideration.

The Chair commented on the number of risks highlighted in the

report regarding the social circumstances affecting health inequalities. It was noted that targets had been set of closing the gap for the population in North East however the indices seem to have broadened.

The Chief Corporate Services explained the wider strategic goals of the Integrated Care Partnership, including the social aspects of improving health inequalities were part of the statutory duties of the ICB and were included in the BAF and Risk Register. The Committee recognised that addressing health inequalities was a long-term challenge requiring system-wide collaboration and Government levers, for example in the recently published 10 year plan.

ACTION

The Chief Medical Officer to present a future agenda item regarding Population Health, noting the work of the Health and Fairer Group.

The Committee requested enhanced explanatory notes and mitigation details to better understand the risks and their social/economic impacts.

ACTION

All Directors to inform risk owners to update their risks with enhanced explanatory notes and mitigations.

RESOLVED

The Quality and Safety Committee

- Was ASSURED that the Board Assurance Framework accurately reflected the principal risks to achieving the ICB objectives as well as their current mitigations;
- RECOMMENDED the approval of the Board Assurance Framework for quarter 1 2025/26 by the Board;
- RECEIVED and REVIEWED the corporate risk register for assurance;
- NOTED the quality and safety risks scored below 12;
- NOTED the quality place risks with a residual rating of 12 and above.

QSC/2025/07/7.2 Inter-agency Disputes Policy

The Inter-agency Disputes Policy would replace the current Partner Disputes Policy which was out of date since January 2025 and had been in place since the transfer of Clinical Commissioning Groups (CCGs) to the ICB in 2022. The National Continuing Healthcare Framework (2022) had been updated and the changes were reflected in the proposed new policy.

The Committee was advised the policy had been extensively coproduced with Local Authorities and key stakeholders and had included a significant review of national disputes policies as well as feedback from all Local Authorities in the NENC ICB geography and

Official

consideration of the national framework. The policy had been regularly discussed at the All Age Continuing Care Strategic Board, All Age Continuing Care network meetings and agreed by the 14 Local Authorities Directors of Adult's and Children's Social Care.

The All Age Continuing Care (AACC) Deputy Director of Nursing joined the meeting at 1315.

The Interim Director of Nursing (South) highlighted the need to keep the individual at the centre of the process and ensure a person-centred approach to decision-making, with funding decisions made without prejudice. It was confirmed that the policy looked to reduce the frequent funding disputes and legal challenges.

The Committee discussed the timescales for disputing the assessment recommendation for funding, noting the impact on patients and payment accruals.

RESOLVED

The Quality and Safety Committee APPROVED that due to rewrite of this policy the Partner Dispute Policy is withdrawn and replaced with the Interagency Dispute Policy.

The All Age Continuing Care (AACC) Deputy Director of Nursing left the meeting at 13:30.

The Corporate Governance Administrator joined the meeting at 13:30.

QSC/2025/07/8.1

Patient Story – Example of Lived Experience across the North East and North Cumbria

The Committee watched a video detailing the importance of medical staff understanding the role of a special guardian. The lived experience was shared through South Tyneside and Sunderland NHS Foundation Trust. The individual spoke about the impact that a lack of awareness of special guardians could have in a medical setting. In particular, the impact of having to explain the reason they have parental responsibility in front of the child they care for.

The Committee discussed ways to improve awareness among care providers and Trusts whilst recognising the challenges in high pressured environments such as A&E departments. It was noted that whilst learning was shared through provider collaboratives more could be done through internal communications, such as the ICB Pulse newsletter and general practice training sessions and public-facing platforms such as the ICB website.

ACTION

The Strategic Head of Involvement and Engagement to work with the Communications team on internal and external coms to share the learning from the lived experience video.

ACTION

The Strategic Head of Involvement and Engagement to write a letter thanking those that had contributed to the video.

RESOLVED

The Quality and Safety Committee:

- ACKNOWLEDGED the feedback shared through the lived experience example,
- RECEIVED the report as a source of reassurance and THANKED those who had contributed.
- REFLECTED on the value of the patient stories brought to Committee and NOTED any resulting actions.

QSC/2025/07/8.2

Involvement and Engagement Update and the Annual Involvement Report 2024/25

The Strategic Head of Involvement and Engagement introduced the report which provided the Committee with a summary update on the ICB's involvement and engagement activity across the North East and North Cumbria. The report included how the ICB was continuing to involve people in conversations around health services at community, place, area and at ICB-wide levels and highlighted the partnership working with Healthwatch.

The Chief Corporate Services Officer commended the work of the team and Healthwatch which demonstrated the benefits and importance of listening and working with the local population to inform service development and strategic planning.

The Committee acknowledged the recent Government announcement which meant an uncertain future for Healthwatch, however it would business as usual until there were legislative changes.

The Committee also acknowledged the challenges in reaching those groups and individuals that were less vocal. The Regional Co-ordinator Healthwatch Network highlighted the ongoing work regarding a gap analysis for these groups.

A key area of note was a pilot approach to digitally collating community feedback through the Community Engagement Library (previously called the Insight Bank). The library will help to reduce duplication of engagement work.

RESOLVED

The Quality and Safety Committee

- RECEIVED the report for information and assurance that the ICB continues to fulfil its statutory involvement and engagement duties.
- APPROVED the annual involvement report 2024/25.

The Strategic Head of Involvement and Engagement left the meeting at 1356.

QSC/2025/07/9.1

North and South Area Quality Reports

The report provided the Committee with oversight of key quality themes, risk and exceptions outlined in the ICB Area Quality reports for the North and South ICB footprint.

The Interim Director of Nursing (South) explained there remained challenges around Healthcare Associate Infection (HCAI) rates with many Trusts not meeting their trajectories for Infection Prevention Control (IPC). County Durham and Darlington Foundation Trust (CDDFT) has seen increased IPC activity and the ICB will be undertaking a site visit on 11 July 2025 to support and understand their IPC work.

The Committee's attention was drawn to the ongoing work to support maternity services, paediatric audiology and cancer standards. The ICB has established a rapid quality review group with Cumbria, Northumberland, Tyne and Wear Foundation Trust (CNTW) supported by NHS England and Care Quality Commission (CQC) to provide oversight and assurance on delivery of CQC inspection actions.

Following a query, it was confirmed the Local Maternity and Neonatal System (LMNS) are undertaking targeted work with providers regarding midwifery vacancies and whilst fill rates have improved there do remain challenges with sickness rates.

There was a discussion regarding the role of the Committee in receiving the report and being assured that the information was accurate and that actions were effective and sustained.

It was noted that the Patient Safety Incident Response Framework (PSIRF) update, with action plan is scheduled to be presented to the QSC meeting in September.

RESOLVED

The Quality and Safety Committee **RECEIVED** the North and South Area Quality Reports for information, assurance and discussion.

QSC/2025/07/9.2

ICB Safe Staffing Assurance against the Developing Workforce Safeguards Standards

The Deputy Director of Quality provided some background information advising that the report presented the findings of a scoping review of safer staffing reportable requirements within acute and mental health NHS Trusts across North East and North Cumbria. The review was requested by the Chief Nursing Officer for England to raise awareness and discuss the current compliance with regulatory frameworks with regards to nurse safer staffing. NHS

England has requested the ICB to lead on their behalf regionally and the report will form part of a larger report to be shared nationally.

The Committee was advised there was reasonable assurance across most Trusts and that the Trusts had found the process to be a good learning exercise and highlighted the importance of investment in Safer Staffing Fellows.

Following a query from the Chair, it was acknowledged that the reports focus was on nursing and midwifery workforce challenges. Medical workforce shortages were picked up by provider organisations who would then let the ICB know if there were any service risks. It was suggested that the application of Safer Staffing may not be as effective as in mental health trusts.

The Committee discussed the need for clearer workforce plans and assurance mechanism and how the impact on quality, especially as commissioning arrangements evolved,

RESOLVED

The Quality and Safety Committee

- RECEIVED the report for information and for assurance purposes,
- NOTED the actions outlined which had been escalated to the Regional team to support an overarching action plan.

QSC/2025/07/9.3

NENC Equality Quality Impact Assessment (EQIA) Update – June 2025

The report provided the Committee with an updated position regarding the completion of Equality Quality Impact Assessments (EQIA) as of June 2025 and highlighted the approach, policy and process.

The Deputy Director of Quality explained that the process was not embedded across the organisation and highlighted key areas of note, for example, inconsistent EQIA completion; incomplete and uncoordinated tracking; training gaps; operational delays and limited assurance on provider-led changes.

The National Quality Board (NQB) on behalf of NHS England have now released a framework for EQIA which includes more robust tools and forms. Therefore, the Quality Team would like to re-evaluate their position and look to launch an improved process for the ICB to include bite size training workshops or webinars, in order to improve the quality of EQIA submission and capacity within the team.

ACTION

The Director of Quality to present an EQIA update to the Quality and Safety Committee in September.

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A Star Chamber Panel with the Chief Nurse and Medical Director has been introduced to review completed EQIAs rated as amber or red.

The Committee was advised that there had been no impact on pathways or clinical areas of work as a result of the EQIA process.

RESOLVED

The Quality and Safety Committee NOTED the identified risks to quality and safety and the actions take to date to mitigate risks and improve completion of EQIAs.

QSC/2025/07/10.1

NENC ICB 2024-25 Safeguarding Annual Report

The Director of Nursing (Safeguarding) advised the 2024/25 Safeguarding Annual Report provided assurance to the Committee regarding the ICB Safeguarding functions and outlined the continued fulfilment of its statutory duties. The main change from the previous years' report was the separation of the Children in Care section which would be presented in a separate report to the Safeguarding Health Executive Subcommittee.

The report highlighted the work undertaken with key partners, specifically in relation to the revised Working Together to Safeguard Children 2023 guidance, which was aimed at strengthening multi agency safeguarding arrangements and the requirements for new lead roles. Other key highlights included the continued high volume of Domestic Abuse Related Deaths Reviews (DARDR), previously known as Domestic Homicide Review (DHR) and associated learning and practice improvements.

The Committee was advised that funding had been secured for a senior leadership engagement event in relation to Eyes on the Baby, a multi-agency Sudden Unexpected Death in Infancy (SUDI) prevention programme.

The Director of Nursing (Safeguarding) noted that the ICB's responsibilities and key statutory roles were outlined in legislation and would not change as a result of the ICB transitions, though priorities may need to be reviewed.

RESOLVED

The Quality and Safety Committee

- RECEIVED the report for information and assurance.
- NOTED that the report would need to be shared at the ICB Board and then subsequently shared with relevant safeguarding partnerships for assurance purposes.

QSC/2025/07/10/2

Modern Slavery Statement 2025 Annual Update

The Director of Nursing (Safeguarding) explained the ICB's approach for the Annual Modern Slavery and Human Trafficking

Statement was governed by compliance with legislative and regulatory requirements and the maintenance and development of best practice in the fields of contracting and employment. A formal update to the Modern Slavery Act 2015 is expected following a government consultation which ended in June 2025.

There are a wide range of areas that would be relevant to the ICB, including research, education, IT, legal services healthcare supplies. There would also be an indirect responsibility through the ICB's commissioning arrangements with, for example, local authorities and the employment of staff in care homes. The Modern Slavery Statement also highlighted the importance of raising awareness among staff and ensuring compliance through the NHS contract and internal policies.

The Modern Slavery Statement is also included in the ICB's Annual Report 2024/25 which will be published on the ICB website following the Annual General Meeting (AGM) on 29 July 2025.

RESOLVED

The Quality and Safety Committee APPROVED the Modern Slavery Statement for publication to the ICB's website.

QSC/2025/07/10.3

Overview of Regulation 28 Prevention of Future Deaths (PFD) reports issued across the North East and North Cumbria

The Deputy Director of Quality advised that the report provided an overview of the Regulation 28 Prevention of Future Deaths (PFD) reports issued to NHS organisations and services commissioned by the North East and North Cumbria Integrated Care Board (NENC ICB) between April 2023 and 31 May 2025. The regulation empowers coroners to issue a PFD report when an inquest identifies concerns that, if left unaddressed, could result in future fatalities.

Since 2023/24 a total for 58 PFD reports had been issued to providers and organisations across the North East and North Cumbria, with an increase of 39% between 2023/24 and 2024/25. The themes of the PFD notices included falls, IT/Digital systems, discharge processes, safeguarding, medicines safety and delays in incident investigations.

Whilst learning from PFDs was taking place within individual organisations there was a repetition of similar themes across multiple providers which indicated the need to consider wider collective learning and improvement. The ICB Patient Safety Centre could be a mechanism to take this forward and could include triangulation of information by organisation, to increase awareness for the ICB.

The ICB works with providers to try and have a collective conversation and co-ordination about responses to Regulation 28 reports and ensure they are published on provider website in a

timely manner.

The Deputy Chief Nurse left the meeting at 1457.

It was acknowledged that shared learning amongst General Practices, outside of specific Local Medical Committee (LMC) areas was more complex and there could be a role for the ICB to facilitate learning through the primary medical frameworks and a patient safety newsletter.

RESOLVED

The Quality and Safety Committee is asked to note:

- NOTED the year-on-year increase in the number of Regulation 28 Prevention of Future Deaths reports issued across the NENC ICB region. Additionally, the Committee NOTED it was difficult to interpret the data in terms of trends.
- NOTED The recurrence of key themes such as falls, discharge processes, safeguarding, digital infrastructure, and medication safety.

The Chief Nurse re-entered the meeting at 1459.

QSC/2025/07/10.4

Redcar and Cleveland Joint Targeted Area Inspection (JTAI) Summary Report

The Interim Director of Nursing (South) explained the report highlighted the findings of the Redcar & Cleveland Joint Targeted Area Inspection (JTAI) on domestic abuse and the impact on children aged between unborn to 7 years of age which took place in April 2025. The JTAI highlighted several areas of good practice and positive multi agency working.

Whilst no priority risks were identified several recommendations for improvements were made which require a response to Office for Standards in Education, Children's Services and Skills (Ofsted) by 16 September 2025. The areas for improvement include strengthening of governance arrangements, prioritising of children as victims of domestic abuse and strengthening the voice of the child.

A South Tees Safeguarding Children Partnership (STSCP) improvement planning session has been arranged to develop the improvement plan

Following a query, the Interim Director of Nursing (South) outlined the process for a JTAI, noting it was a national programme that provided two weeks' notice and lasted three weeks.

RESOLVED

The Quality and Safety Committee are requested to:

- NOTED the contents of the report, the good practice and recommendations made.
- RECEIVED assurance from the South Tees Safeguarding

QSC/2025/07/11.1 Chief Nurse Report by Exception

The Deputy Chief Nurse advised a Special Educational Needs and Disabilities (SEND) inspection was taking place in North Cumbria. The outcome of the inspection would be brought to the Committee in due course.

The Deputy Nurse explained that the Oliver McGowan Training on Learning Disability and Autism was laid before Parliament in June. The ICB already has education and training in place but as the training is to be enshrined in law there will be a need to seek assurance from providers on their level of compliance. The ICB's Executive Committee has approved development of the training plan using the funding received from NHS England and will work the voluntary sector for experts by experience.

RESOLVED

The Quality and Safety Committee NOTED the Chief Nurse verbal update.

QSC/2025/07/12 For information / assurance items escalated from Subcommittees

QSC/2025/07/12.1 Integrated Delivery Report – June 2025

RESOLVED

The Quality and Safety Committee RECEIVED the Integrated Delivery Report (June 2025) for information and assurance.

QSC/2025/07/12.2 ICB SEND Assurance Subcommittee Minutes – 25 February 2025

RESOLVED

The Quality and Safety Committee RECEIVED the ICB SEND Assurance Subcommittee Minutes from 25 February 2025 for assurance.

QSC/2025/07/12.3 System Quality Group Minutes – 13 February 2025

RESOLVED

The Quality and Safety Committee RECEIVED the System Quality Group Minutes from 13 February 2025 for assurance.

QSC/2025/07/12.4 South Area Quality and Safety Subcommittee Minutes – 22 April 2025

RESOLVED

The Quality and Safety Committee RECEIVED the South Area Quality and Safety Subcommittee Minutes from 22 April 2025 for

assurance.

QSC/2025/07/12.5 North Area Quality and Safety Subcommittee Minutes – 15 April 2025

RESOLVED

The Quality and Safety Committee RECEIVED the North Area Quality and Safety Subcommittee Minutes from 15 April 2025 for assurance.

QSC/2025/07/12.6 Antimicrobial Resistance (AMR) and Healthcare Associated Infections (HCAI) Subcommittee Minutes – 2 April 2025

RESOLVED

The Quality and Safety Committee RECEIVED the Antimicrobial Resistance (AMR), and Healthcare Associated Infections (HCAI) Subcommittee Minutes from 2 April 2025 for assurance.

QSC/2025/07/13 Any Other Business

No additional items of business were noted.

QSC/2025/07/13.1 New Risks to add to Risk Register

No new risks were identified.

QSC/2025/07/14 Meeting Critique

No additional feedback or comments were made.

QSC/2025/07/16 Date and Time of Next Meeting

The next meeting of the Quality and Safety Committee will be held Thursday 11 September 2025.

CLOSE

The meeting was closed at 1506

Signed



Position Chair

Date 11/09/2025