

<b>Meeting: Governing Body (Meeting in Public)</b>			
<b>Meeting Date</b>	22 September 2021	<b>Action</b>	Consider
<b>Item No.</b>	8a	<b>Confidential</b>	No
<b>Title</b>	Quality and Performance Committee Chair's Report		
<b>Presented By</b>	Peter Bury, Lay Member – Quality and Performance		
<b>Author</b>	Lindsay Johnson, Committee Secretary		
<b>Clinical Lead</b>	-		

<b>Executive Summary</b>
This paper is presented to the Governing Body to provide an update on key information submitted and recommendations made at the Quality and Performance Committee meeting held on 8 <sup>th</sup> September 2021.
<b>Recommendations</b>
It is recommended that the Governing Body: <ul style="list-style-type: none"> <li>Note the update provided.</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<b>SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.</b>	<input checked="" type="checkbox"/>
<b>SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.</b>	<input checked="" type="checkbox"/>
<b>SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.</b>	<input checked="" type="checkbox"/>
<b>SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.</b>	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF	

<b>Implications</b>						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

<b>Implications</b>						
relation to this report?						
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

<b>Governance and Reporting</b>		
<b>Meeting</b>	<b>Date</b>	<b>Outcome</b>
Quality and Performance Committee	08/09/2021	Items discussed

## **1. Key Items to highlight to Governing Body**

### **1.1 Workforce Race Equality Standard (WRES) Report**

- 1.2 The Quality and Performance Committee received an update on the CCG's compliance with the Workforce Race Equality Standard (WRES) 2020-21, the Race Disparity ratio and Inclusive Recruitment 6 high impact actions. The report also satisfied a number of regional and national returns and was supported by a number of appendices including the CCG's WRES Action Plan.
- 1.3 The report was well received by the Quality and Performance Committee and they noted the positive pieces of work detailed. They did however note that there continued to be a significant amount of work to do and as such recognised Bury CCG's and Bury Council's joined up approach and commitment in this in order to raise equality and drive change in Bury and across the system.
- 1.4 Following review, the Quality and Performance Committee recommended the report to Governing Body and it has been included on the agenda for the meeting today (22<sup>nd</sup> September 2021).

## **2. LeDeR (Learning Disability and Mortality Review) programme: national and local changes**

- 2.1 The Quality and Performance Committee received the LeDeR paper which highlighted to them the impact of and changes from the new national LeDeR policy.
- 2.2 The Committee was provided with a summary of the changes which included a change in focus, responsibilities and in remit. They were informed that the transfer of responsibility for the programme would be taking place from Clinical Commissioning Groups (CCGs) to Integrated Care Systems, however focus on monitoring actions and learning would hopefully remain the locality's responsibility which would be the preference in terms of having that local knowledge.
- 2.3 The Quality and Performance Committee also noted that there was a change in name and although this would still be known as LeDeR; the programme would now be called Learning from lives and deaths – People with a learning disability and autistic people.
- 2.4 It was highlighted to the Quality and Performance Committee that as part of the Quality Assurance process and review going forward that reviewers would present information at their local Quality Assurance Group and as such the Quality and Assurance Group would identify the actions required and they would also be held accountable with reports being issued to NHS England.
- 2.5 A timeline was provided to the Quality and Performance Committee which outlined that some policy changes had already been implemented with others would be taking effect from 1<sup>st</sup> April 2022.
- 2.6 The Quality and Performance Committee considered this report and welcomed further

updates as and when required.

### **3. Patient Services Activity Report**

- 3.1 This report provided the Quality and Performance Committee with information and statistical data on all Patient Services activity received from NHS Bury CCG patients between 1 April 2021 and 30 June 2021 (Quarter 1, 2021 – 2022).
- 3.2 The Quality and Performance Committee was directed to Section 4 in the report which advised them on the future developments following discussions at a previous Quality and Performance Committee where it was agreed that the work of the patient services team, and specifically the learning from complaints received, whether progressed for formal investigation or not, would need to be captured in order to inform quality and commissioning discussions.
- 3.3 The Committee noted that initial work commenced to scope this, however the demands on the team continued to impact on progress. They were informed that this remained an important piece of work as this would support the improvement agenda and this would be further developed at the earliest opportunity. Members of the Quality Team did advise the Quality and Performance Committee that whilst this work is progressed they have continued to provide as much support as possible with regular discussions taking place with the Patient Services Team as part of a joined up working approach.
- 3.4 The Quality and Performance Committee received the Patient Services report and noted the information provided.

**Peter Bury**  
**Lay Member – Chair, Quality and Performance**  
**September 2021**