

Meeting: Governing Body (Meeting in Public)			
Meeting Date	27 January 2021	Action	Consider
Item No.	7a	Confidential	No
Title	Quality and Performance Committee Chair's Report		
Presented By	Peter Bury, Lay Member – Quality and Performance		
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Clinical Lead	-		

Executive Summary
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 13 th January 2021.
Recommendations
It is recommended that the Governing Body: <ul style="list-style-type: none"> Note the update provided.

Links to CCG Strategic Objectives	
SO1 People and Place To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life.	<input checked="" type="checkbox"/>
SO2 Inclusive Growth To increase the productivity of Bury's economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value.	<input checked="" type="checkbox"/>
SO3 Budget To deliver a balanced budget.	<input checked="" type="checkbox"/>
SO4 Staff Wellbeing To increase the involvement and wellbeing of all staff in scope of the OCO.	<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 N/A	

Implications						
Are there any quality, safeguarding or	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Implications						
patient experience implications?						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
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"/>

Governance and Reporting		
Meeting	Date	Outcome
Quality and Performance Committee	13/01/2021	Items discussed

1. Key Items to highlight to Governing Body

1.1 LeDeR Barriers and Opportunities

1.2 The Learning Disability Mortality Review (LeDeR) programme is a national NHS England improvement initiative. It was introduced in 2017 to improve the quality of health care for people with a learning disability by reducing their ongoing premature mortality, often from preventable illness, and the ongoing health inequalities they experience. A paper was submitted to the Quality and Performance Committee on 9th December 2020 highlighting the barriers that limit the CCG's ability to act on the learning. The report detailed a number of recommendations which outlined proposals on how to achieve change and improve the quality of health and care services for Bury residents with a learning disability.

1.3 The Quality and Performance Committee revisited the LeDeR agenda item at their meeting on 13th January 2021 and held a discussion regarding next steps. They recommended that an updated report be submitted to the Strategic Commissioning Board meeting on 1st February 2021 in order for the Strategic Commissioning Board to agree the recommendations, decisions around governance ownership and actions required to progress. They also agreed that the approach taken by the Quality and Performance Committee be highlighted in the Chair's report to Governing Body on 27th January 2021 in order for Governing Body to be aware of the support provided by the Quality and Performance Committee.

2. Deep Dive and Retention Review

2.1 The Quality and Performance Committee was presented with a paper that listed two risks that were scheduled for a review at their meeting and these are detailed below:-

- **WS_ALL_CE_O_R_04 Datix: Resource requirements to maximise optimisation**
- **WS_MH_O_PE_R_03 PCFT Mixed Sex Accommodation (SSA Breaches)**

2.2 The Quality and Performance Committee reviewed, discussed and identified a number of actions in relation to both of these two risks which have been recorded in the Quality and Performance Committee minutes.

2.3 Datix: Resource requirements to maximise optimisation

2.4 The Quality and Performance Committee recognised that the risk score has remained static (at a level of 15). As previously reported, due to the impact of COVID-19 the delegation of management of Datix issues to CCG workstreams has been stood down and is therefore not yet fully implemented with system administration remaining a gap causing an impact on delivery of this work.

2.5 The Quality and Performance Committee was provided with an update in regards to the Council's Kickstart Grant Scheme opportunity (to create job placements for 16 to 24 year olds) which would address the resource gap in relation to this risk and as such will enable incident reporting in to the Quality and Performance Committee in the absence of the workstreams being stood down. The Quality and Performance

Committee was advised that the Kickstart Grant Scheme would involve collaboration with the Job Centres in identifying suitable candidates to be interviewed and therefore the proposed timeframe for someone starting in post may be another 4-6 weeks due to the process required.

- 2.6 A discussion took place in relation to this risk and in particular the information that is captured on Datix. It was mentioned at the meeting that currently the Datix information was more around performance issues (such as providers not following correct pathways etc.) and it was understood that Datix was currently not primarily being used to record safety issues as these should be progressed through the appropriate procedures and processes.
- 2.7 The Quality and Performance Committee therefore advised that they are concerned about this risk but due to the current climate and the impact being experienced, this did not cause significant concern at this current time. Although this was understood that this would be revisited the Quality and Performance Committee agreed to cover this in the Chair's report to Governing Body.
- 2.8 PCFT Mixed Sex Accommodation (SSA Breaches)**
- 2.9 The Performance and Quality Committee was made aware that the level of risk remained unchanged due to the estates reconfiguration which will take a considerable length of time to complete.
- 2.10 The Quality and Performance Committee was advised that in order to keep abreast of the situation the CCG was working closely with the provider and was monitoring the phased approach to the planned reconfiguration through weekly updates and monthly performance reports.
- 2.11 This risk was discussed in detail and the Quality and Performance Committee recognised the ongoing work that was taking place with officers across the CCG and the provider. They did however assign a number of actions to officers to progress in response to queries that they raised. In terms of next steps, the Quality and Performance Committee welcomed a further update and review.

Peter Bury
Lay Member – Chair, Quality and Performance
January 2021