

APPROVED

**Surrey Downs
Clinical Commissioning Group**

Minutes of the Clinical Quality, Clinical Governance and Safety Committee

held on Thursday 1st August 2013

at Park House, Randalls Road, Leatherhead, KT22 0AH

Part 1

Chair: Maggie Ioannou

| Present | | |
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| Members | | |
| EC | Eileen Clark (from 3.30pm) | Head of Clinical Quality, Clinical Governance and Patient Safety/Chief Nurse |
| RG | Dr Robin Gupta (from 2.30pm) | Clinical Lead –Dorking SASH |
| MH | Mark Hamilton (from 2.20pm) | Secondary Care |
| MI | Maggie Ioannou | Governing Body Register Nurse / Chair |
| SM | Dr Suzanne Moore | Clinical Lead – Medlinc/Mid Surrey - Epsom |
| Supporting Officers | | |
| HB | Helen Blunden | Designated Nurse for Safeguarding Vulnerable Adults in Surrey |
| SC | Sian Carter | Continuing Healthcare Lead |
| LC | Liz Clark | Medicines Management Lead |
| GC | Gavin Cookman | Governing Body Lay Member - Governance |
| MF | Miles Freeman | Chief Officer |
| JP | Jonathan Perrott | Transformation Lead/Minute Taker |
| JM | Jackie Moody | Clinical Quality and Safety Manager |
| GW | Georgette Welch | Complaints and PALS |

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| 1. | Welcome and introductions MI welcomed the attendees and expressed concern that the meeting was not quorate. A discussion took place on whether to postpone the meeting. It was decided to proceed as an informal meeting. This meant that the Quality Committee could not report formally to the Governing Body. | | CQC010813/ | 001 |
| | Full attendance at the meeting was emphasised and in future the Chair would be advised in advance if the meeting was not likely to be quorate so that appropriate action could be taken to ensure that the full business of the Committee could be conducted. | | CQC010813/ | 002 |

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| | It was noted that Surrey Downs CCG is the lead commissioner for Surrey CCGs on the Epsom and St Helier contract therefore any issues of concern arising from the Clinical Quality Review Group monitoring that contract should be brought to this Committee. The Committee requires an overview of quality on all contracts where it is an associate commissioner. | | CQC01083/ | |
| | The Chair drew attention to the fact that, to enable the Governing Body and Committee members to keep abreast of key concerns around quality of care where indicators were Amber or Red, a written report on quality should be available at each Quality Committee meeting, including a dashboard with benchmarking. | | CQC010813/ | 003 |
| | As agreed previously, the Committee would like to review the CCG Corporate Risk Register to assure itself that quality and safety risks have been captured and are being monitored. In late October 2013 a joint workshop is planned with the Audit, Corporate Governance & Risk Committee and the Clinical Governance, Clinical Quality and Patient Safety Committee will take place to discuss how risk is managed in the CCG. | | CQC010813/ | 004 |
| | EC, JM and Justin Dix to review the patient quality and safety elements of the Corporate Risk Register. | EC/ JM/ JD | CQC010813/ | 005 |
| | <p>Apologies for absence Apologies had been received from Miles Freeman and Karen Parson who were required to attend a Surrey & Sussex Area Team meeting and were addressing urgent matters related to the Epsom Downs Integrated Care Service contract.</p> <p>Apologies were also received from Denise Crone, Suzanne Moore and Phil Gavins.</p> | | CQC010813/ | 006 |
| 2. | <p>Declarations of interest The Surrey Downs Clinical Commissioning Group Governing Body maintains a register of members' interests. At meetings of Governing Body Committees members are expected, if appropriate, to declare interests in respect of items on the agenda.</p> | | CQC010813/ | 007 |
| | There were no additional declarations at the start of the meeting | | CQC010813/ | 008 |
| 3. | <p>Minutes of the previous meeting To approve the minutes of the Quality Committee meeting held on Friday 5th July 2013</p> | | CQC010813/ | 009 |

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| | The draft minutes of the meeting of 5 July were reviewed and the following corrections made. The meeting was not quorate at this point therefore would be brought to the September meeting for ratification. | | CQC010813/ 010 |
| | Page 1 In attendance: 'Jackie Moody' replaced 'Jacky Moody'. | | CQC010813/ 011 |
| | Page 2 'Sian Carter has shared with EC the carer's and GPs feedback questionnaire and the care homes service review template. This matter will be considered by the CHC Reference Group' replaced 'Sian Carter has shared with EC the discharge questionnaire format used for nursing home visits. This matter will be considered by the CHC Reference Group'. | | CQC010813/ 012 |
| | Page 3 Para 5.4 'EC attended the Surrey Safeguarding Adults Board' replaced 'ES attended the Surrey Safeguarding Adults Board'. | | CQC010813/ 013 |
| | Page 3 Para 5.4 'Safeguarding Children CSH action plans will be taken through the Quality Committee meetings' replaced 'CSH action plans....' | | CQC010813/ 014 |
| | Page 3 Para 5.4 'Action: HB to map the adult safeguarding leads' replaced 'Action: HB to map the safeguarding leads' | | CQC010813/ 015 |
| | Page 3 Para 5.4 'There are currently four adult safeguarding Serious Case Reviews...' replaced 'There are currently four Serious Case Reviews...' | | CQC010813/ 016 |
| | Page 6 Section 7 Other 'elderly care, stroke, medical' replaced 'stroke, medical, elderly care' to highlight the importance of elderly care. | | CQC010813/ 017 |
| | Page 6 Section 10. MI stated Safety Alerts should be reported on at the September meeting. | EC | CQC010813/ 018 |
| | Page 6 Section 10. MI advised that the calendar for reporting was passed by Surrey PCT to Surrey Downs CCG and should be used by the CCG. | | CQC010813/ 019 |
| | Page 7 Page 7 'SASH has no Director of Nursing and part of the safeguarding lead Whole Time Equivalent has recently left and has not yet been replaced' replaced 'SASH has no Director of Nursing and several safeguarding staff had recently left'. | | CQC010813/ 020 |

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| 4. | Matters Arising a) Networks Workshop - no output has been received from the networks workshop and none is now expected. Clinical senates are now operating. | | CQC010813/ | 021 |
| | b) CSH Staff Survey – results had been received and an initial scan of report showed good results. This report and those from ESHT and SASH would be brought to the September meeting. | EC | CQC010813/ | 022 |
| | c) The Governing Body had provided clarification re delegated authority by agreeing the Terms of Reference of the Committee. These would be reviewed at the September meeting. | EC/MI | CQC010813/ | 023 |
| | Also, the Governing Body had delegated to the Committee the responsibility to review and, as appropriate, amend and approve PCN recommendations. The resulting adopted prescribing policies will be submitted to the Governing Body to note. | | CQC010813/ | 024 |
| | d) Antibiotic prescribing – on the agenda | | CQC010813/ | 025 |
| | e) Simon Turpitt is keen to engage with Surrey Downs CCG and will be invited to the Governing Body seminar on adult safeguarding in September 2013. | EC | CQC010813/ | 026 |
| | f) The CSH safeguarding children supervision model had been received and would be brought to the September meeting. | EC | CQC010813/ | 027 |
| | g) HB confirmed that the mapping of adult safeguarding leads in practices and training requirements was in progress. It would be brought to the September meeting. | HB | CQC010813/ | 028 |
| | h) HB confirmed that the Committee and Governing Body would be able to review the Surrey Downs CCG Serious Case Review after it had been published and not before. It would be brought to a future meeting. | HB | CQC010813/ | 029 |
| | i) Domestic Abuse presentation – on the agenda | | CQC010813/ | 030 |
| | j) Benchmarking data – would be included in the next Quality report | EC | CQC010813/ | 031 |
| | k) SECAMB Letter – follow up on whether MF had sent the letter. | JP | CQC010813/ | 032 |
| | l) CHC Review – Clarification on timescales will be sought | SC | CQC010813/ | 033 |
| | m) Report on the level of pressure damage within Community Providers and Care Homes – clarification on timescales will be sought | EC | CQC010813/ | 034 |

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| | n) EC had discussed Quality Accounts with Alan Streets. Issues will be flagged through contract meetings. Early warning of concerns will be brought to the Committee. | | CQC010813/ 035 |
| | o) The request for birth data from providers has not been made. This has reduced in priority now that BSBV has paused. | | CQC010813/ 036 |
| | p) EC had not yet received the information from the contract team re the number of ambulances currently providing non-urgent support. This would be followed up. EC | EC | 037 |
| | Key Areas of Focus | | CQC120813/ 038 |
| 5. | Antibiotic Prescribing LC presented a paper on Medicines Management & Infection Control. | | CQC120813/ 039 |
| | Key elements of analysis <ul style="list-style-type: none"> • Antibacterial prescribing for Surrey & Sussex Area Team by CCG, by SDCCG locality and by SDCCG practice • The volume of antibiotic prescribing by CCG and by practice • High risk antibiotics as a % of all antibiotics by CCG and by practice | | CQC010813/ 040 |
| | The Medicines Management team is keen to explore the ways in which GPs, and the care homes they provide services to, can be supported to reduce antibiotic prescribing and particularly quinolone and cephalosporin prescribing in line with Health Protection Agency guidance. | | CQC010813/ 041 |
| | Coinciding with the European awareness day in November, this data will be used to raise awareness of antibiotic prescribing, including strategies to reduce unnecessary prescribing, in the GP locality groups. | | CQC010813/ 042 |
| | Good links have been established with neighbouring CCGs with low volume of prescribing in order to share best practice. | | CQC010813/ 043 |
| | National formulary guidance will be released in October, then uploaded to GP IT systems. | | CQC010813/ 044 |
| | RG suggested that a process where prescribing leads cascade the analysis and guidance through the locality sub-committee would enable GPs share with their colleagues. | | CQC010813/ 045 |
| | Benchmarking and sharing peer data can be an effective tool to start to improve prescribing trends because where data indicates that certain practices or GPs are outliers, CCG prescribing/clinical leads can engage in discussions to support improvements. | | CQC010813/ 046 |

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| | The Medicines Management team would be undertaking a review in progress at six months and could provide year on year comparisons to take account of seasonal variations. | | CQC010813/ 047 |
| | The Committee supported the approach being taken by the Medicines Management team and would like to be informed of progress and outcomes in a six-monthly update on the work plan and timelines. | LC | CQC010813/ 048 |
| | This would be placed on the agenda forward plan for February 2014. | JP | CQC010813/ 049 |
| 6. | Safeguarding Adults | | CQC120813/ 050 |
| | <u>Domestic Homicide Reviews</u> HB presented an overview of Domestic Homicide Reviews (DHR). New Home Office guidance on domestic homicide came into effect on 1 August 2013 and it now came under adult safeguarding. | | CQC010813/ 051 |
| | The decision on whether or not to proceed with a DHR should be taken by the Chair of the Crown Prosecution Service within one month of a homicide coming to their attention. | | CQC010813/ 052 |
| | The Overview Report should be completed within a further six months of the date of the decision to proceed unless the Review Panel formally agrees an alternative timescale with the Crown Prosecution Service. Some DHRs will necessarily go beyond this further six month timescale due to the complex scope of Domestic Homicide Reviews and/or due to on-going criminal justice proceedings. | | CQC010813/ 053 |
| | The key purpose of DHRs is to enable lessons to be learned from homicides where a person is killed as a result of domestic violence and abuse. The aim in publishing reviews is to restore public confidence and improve the transparency of processes in place across all agencies, to protect victims. | | CQC010813/ 054 |
| | There were currently five DHRs in progress in Surrey, three of which had been submitted to the Home Office Quality Assurance Panel. None have been published to date. | | CQC010813/ 055 |
| | HB would present a summary of each published DHR to the Quality Committee. The Committee would provide a governance overview to identify whether any commissioned providers had acted inappropriately; to ensure that lessons learnt and improvements in providers or inter-agency processes had been put in place where gaps had been identified. | | CQC010813/ 056 |

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| | RG outlined the challenges faced by GPs when they have reported to concerns to Social Services and these appear not to have been acted on. | | CQC010813/ 057 |
| | While there is grave concern over ongoing case of domestic homicide, some children have been better protected as a result of Domestic Homicide Reviews and the resulting greater transparency and application of proper processes. | | CQC010813/ 058 |
| | The Committee would wish to have access to information that might protect individuals, however it is not possible for the Committee to review Domestic Homicide Reviews in progress. | | CQC010813/ 059 |
| | <p><u>Serious Case Reviews (SCR)</u></p> <p>HB explained that a Serious Case Review is a multi-agency review conducted when there is a death, serious harm or injury to an adult at risk where abuse and / or neglect has occurred or is suspected and where there may have been multi agency failings. The Surrey Safeguarding Adults Board (SSAB) has the lead responsibility for conducting a serious case review. Any agency can refer an incident to the CSR sub-group of the SSAB. It is considered against clear criteria, and if the group feel it meets the SCR criteria, a recommendation is made to the SSAB Chair for a decision. If the Chair agrees he will appoint a Chair for the Review and commission an author. If he does not agree, a clear explanation will be submitted to the Board.</p> | | CQC010813/ 060 |
| | One of the key aims of a serious case review is to identify and promote learning and best practice so those adults at risk are better protected by improving multi agency working. | | CQC010813/ 061 |
| | At the time of meeting there were currently four SCRs in progress in Surrey. It was anticipated that all four would be published in the autumn. | | CQC010813/ 062 |
| | The SSAB is planning a multi-agency event toward the end of the year to review the recommendations and lessons learned from the DHR's and SCR's. | | CQC010813/ 063 |
| | HB would bring to the Committee a flowchart summarizing the Domestic Homicide Reviews and Serious Case Review process in October. | HB | CQC010813/ 064 |
| 7. | <p>Quality Update</p> <p>EC gave a verbal update on key matters of concern.</p> | | CQC120813/ 065 |

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| | <p><u>Kingston Hospital – C. Difficile</u></p> <p>EC had met with Kingston CCG to address concerns re Kingston Hospital implementation of the action plan to address a rise in C. difficile infections. There were ongoing discussions with Kingston Hospital quality lead. Infection control nurses in S W London are reviewing the situation. EC would attend the next Clinical Quality Review Group.</p> | | CQC120813/ 066 |
| | <p><u>Mixed Sex Accommodation (MSA) breaches</u></p> <p>One mixed sex breach was reported at St Georges, 12 breaches at Epsom and St Helier (ESHT). EC, the ESHT Director of Nursing and the Sutton CCG quality lead would be meeting to discuss ESHT's management of MSA breaches. The contract management team will not be making payments for care of patients who were the subject of mixed sex breaches.</p> | | CQC120813/ 067 |
| | <p><u>Epsom and St Helier – C. difficile</u></p> <p>The ESHT C.diff situation had improved.</p> | | CQC120813/ 068 |
| 8. | AOB | | CQC120813/ 069 |
| | <p><u>Complaints and PALS</u></p> <p>GW confirmed that a Complaints/PALS report would be presented to the next meeting.</p> | GW | CQC120813/ 070 |
| | <p><u>Quality Update</u></p> <p>The team was now at full establishment and the work plan was under development and would be brought to the Committee at the earliest opportunity.</p> | EC/ JM | CQC120813/ 071 |
| | <p>The corporate risk register was under review and would be brought to the September meeting, focussing on the risks affecting quality and safety.</p> | | CQC120813/ 072 |
| | <p>Formats for Committee papers would be reviewed and adopted for the next meeting.</p> | | CQC120813/ 073 |
| 11. | <p>Date of Next Meeting 5 September 14:00-16:00</p> | | CQC120813/ 074 |