North Central London

MEETING:	Meeting of the Joint Boards of NHS North Central London
DATE:	Friday, 20 July 2012
TITLE:	Quality and Safety Committee – Chairs Report
LEAD DIRECTOR:	Alison Pointu, Director of Quality and Safety
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SUMMARY:

The oversight and assurance functions for Quality and Safety for NHS North Central London are discharged on behalf of the Joint Boards by the Quality and Safety Committee. This paper provides an account of the work of the committee and an assurance opinion.

The information included is derived from papers presented to the NHS North Central London Quality and Safety Committee on 5 July 2012. It builds on the areas of progress since the previous committee in May 2012 and highlights concerns and further recommendations.

SUPPORTING PAPERS:

This paper draws upon the content of the papers presented to the Quality and Safety Committee that are listed in section 2 of the report below. Copies of any of those reports can be supplied to Board Members on request to the committee secretary.

RECOMMENDED ACTION:

The Joint Boards are asked to:

- **NOTE** the content of the report.

LINKS TO NHS NORTH CENTRAL LONDON STRATEGY

This section should summarise the report's explicit links to the organisation's Joint Strategic Needs Assessment and/or the Case for Change.

For example, authors could demonstrate how the report links to the Cluster's aim to move care into the primary and community settings, or reference a specific health need such as prevalence of CVD.

GOVERNANCE:

Voting: *Please indicate which Board(s) has voting rights on this matter (if applicable)*

Barnet ☐	Camden ☐	Enfield ☐	Haringey ☐	Islington ☐
Paula Kahn David Riddle Caroline Rivett Bernadette Conroy John Carrier Robert Sumerling Caroline Taylor Ann Johnson Andrew Burnett Philippa Curran Alison Pointu	Paula Kahn John Carrier Caroline Rivett Robert Sumerling Karen Trew Deborah Fowler Caroline Taylor Ann Johnson Quentin Sandifer Marek Koperski Joanne Wickens	Paula Kahn Karen Trew Caroline Rivett Deborah Fowler Cathy Herman Sue Baker Caroline Taylor Ann Johnson Shahed Ahmad Mohammed Abedi PEC Nurse (vacant)	Paula Kahn Cathy Herman Caroline Rivett Sue Baker Anne Weyman Sorrel Brookes Caroline Taylor Ann Johnson Jeanelle De Gruchy Mayur Gor Karen Baggaley	Paula Kahn Anne Weyman Caroline Rivett Sorrel Brookes David Riddle Bernadette Conroy Caroline Taylor Ann Johnson Sarah Price S. Gillian Greenhough Jennie Hurley

Objective(s) / Plans supported by this paper: NHS North Central London has set as one of its principal objectives. To ensure we commission services which are safe and of increasing quality for the people we serve.

The Strategic Objectives underpinning that are:
1. To review all commissioned services against key safety criteria and agree action plans to address any shortfalls
2. To establish quality markers for all commissioned services and agree improvement trajectories
3. To secure improvements in patient experience

Patient & Public Involvement (PPI): Service users were engaged and contributed to the development of the Quality & Safety strategic plan. The Chair and Director of Quality and Safety meet with representatives of LINKs ahead of each Quality and Safety Committee, which provides an opportunity for discussion on agenda items, and to share experiences/concerns reported to them by patients, or through their visits to commissioned services. The Quality and Safety Committee also incorporates an hour to hear patient experiences of health services. The patient stories on 5 July focussed on carers and their experience of care homes in NHS North Central London.

Equality Impact Analysis: NA

Risks: There are no risks associated with this paper

Resource Implications: There are no resource implications associated with this paper.

Audit Trail: This paper has not been received by any other committee but is a summary of papers reviewed at the NHS North Central London Quality and Safety Committee on 5 July 2012. It will be shared with Clinical Commissioning Groups for each borough.

Next Steps: This bi-monthly chair's report is produced after each Quality and Safety Committee and presented to the NHS North Central London Joint Boards and also to the Clinical Commissioning Groups for North Central London.

1. Assurance Summary

1.1 The focus of the committee and the Quality and Safety Directorate is turning to transition, subject to the overriding commitment to dealing effectively with patient safety issues.

1.2 Under transition, the Committee is encouraged that all Clinical Commissioning Groups (CCGs) now have plans to address their quality responsibilities from April 2013, albeit at different stages of readiness. The Committee will invite the Quality Lead from each CCG to meet the committee for a discussion on progress at the next meeting. In the general context of transition the Chair reported that the LiNKs representatives had expressed their worries that the structures set up by NHS North Central London to see the big picture across the cluster, and the support for LiNKs working together on quality, might be at risk under the new landscape.

1.3 Islington LiNK have carried out a substantial survey of patient views on the quality of services known as “1000 Voices” which had been well received by Islington CCG and Council. This is a good example of how well organised volunteers in LiNKs can make a real contribution to the development of improved services. The themes emerging from the survey were consistent with the themes seen in PALs and Complaints work, but here there was a specific borough focus.

1.4 Under patient safety, the Committee has noted how the NHS North Central London team, with partners, is actively responding to concerns about quality at North Middlesex University Hospital NHS Trust, Moorfields Eye Hospital NHS Foundation Trust and in care homes in Barnet and Enfield. These concerns will be kept under review by the committee. There is an opportunity to promote learning across the cluster from some innovative work being done by clinicians in Enfield to improve quality in care homes

1.5 Arrangements for monitoring of quality and safety performance by community services providers are still a concern, particularly for Camden, where there is as yet little evidence by way of assurance. The Committee has invited senior representatives from the Provider, Central and North West London NHS Foundation Trust (CNWL), to attend the next meeting in September, with representatives from the CCG and the NHS North Central London Contracts Directorate with a view to resolving this long standing concern.

1.6 A short and focused review of the Dementia care pathway in Barnet and Enfield has shown significant scope for improvement, and the need for leadership and co-ordinated effort to develop an effective pathway. Some of the features of services observed in this short review were echoed and reinforced by presentations by Carers during our Patient Voices session before the committee. There is considerable challenge, and urgency, for commissioners and providers in North Central London in the pursuit of improved services over the next few years.

1.7 The Committee endorsed a request from CCGs for an early report on performance of the 2011/12 Commissioning for Quality and Innovation Schemes (CQUINs) and early planning for 2013/14 CQUINs in close dialogue with CCGs.

2. Introduction

On 5 July 2012, the following agenda items were discussed at the Quality and Safety Committee for discussion/approval:

- Executive Report on Quality and Safety
- High Level Review of Mental Health Services
- Acute, community and mental health quality assurance dashboard
- Quality and Safety Risk Register
- Walk the pathway report: Dementia pathway
- Serious Incidents update report
- Individual treatment requests update
- Research Governance Annual Report
- Primary care update (verbal)
- Legacy, Handover and Closure Project Initiation Document for Quality and Safety
- Serious Incident Overview Panel minutes April 2012

The following sections provide an overview of the key areas from each paper that were discussed and the actions agreed.

3. Executive report on Quality and Safety

3.1 Equality and Diversity

A number of initiatives have taken place in relation to Equality and Diversity:

- NHS North Central London took part in the NHS Equality and Human Rights week in May 2012.
- The Equality and Diversity section of the intranet has been enhanced to incorporate more information on the NHS Equality Delivery System and a staff quiz.
- Work is under way to address the results of the staff survey, with a particular focus on discrimination. The Committee endorsed this work, since 9% of staff reported that they had experienced discrimination in the workplace. It was confirmed that equality and diversity is a key component of Clinical Commissioning Group authorisation process and will therefore remain a key priority in future arrangements.
- Progress has been made towards implementation of the three equality objectives for 2012/13:
    - Training, review and audit of the implementation of Equality Impact Assessments is underway
    - Improving access to healthcare for people with learning disabilities, including the use of Commissioning for Quality and Innovation (CQUIN) for vulnerable adults.
    - Improving the data collated on staff to identify patterns of discrimination

3.2 Patient Advice and Liaison Service (PALs) and Complaints

Healthwatch England will be established as a statutory committee of the Care Quality Commission in April 2013 and will take on the signposting and information role currently provided by PCT PALs. The Committee expressed concern relating to the key risks associated with the transition to future arrangements for PALS/Complaints and asked that the five Local Authorities be asked to provide regular updates on progress with the development of Health Watch. The Chair advised the committee that the LiNKs had expressed concerns about the capacity of local Healthwatch organisations to deal with this work. The risks were identified as:

- Patents may not know where to access advice

- Healthwatch organisations may not be operational by April 2013

3.3 Emergency/Maternity Care Audit
There will be a review of national standards across five service areas in acute Trusts; emergency departments, critical care, fractured neck of femur pathway, maternity services and paediatric emergency services during July. This will include a self assessment and a site visit. The committee will review results and implementation of identified actions.

3.4 North Middlesex University Hospital Trust
Following examination of relatively poor results in National Inpatient and National Staff Surveys, work has commenced in conjunction with the Trust on the quality of care at North Middlesex NHS Trust. The Committee will continue to monitor this process.

3.5 Nursing Homes in Barnet, Enfield and Haringey
Following alerts regarding the quality of care provided in some nursing homes, the Quality Team has met with the Care Quality Commission, local borough representatives and local provider services to share knowledge. A working group is being established to identify actions that can be taken through a partnership approach. The Quality Team are also involved in the review of the specification for Funded Nursing Care. The Committee welcomed this positive approach.

3.6 Moorfields Eye Hospital NHS Foundation Trust
The Clinical Quality Review Group with Moorfields has raised some concerns that are currently being investigated in more depth. These are:

- There have been three intra ocular lens insertion errors (Never Events); an independent review is being undertaken.
- Glaucoma patients lost to follow up; Moorfields are currently reviewing and have been asked to provide urgent assurance to NHS North Central London.

3.7 Imperial College Healthcare NHS Trust
During a process of improving data quality and completeness by Imperial College Healthcare NHS Trust in March 2012, it was noted that cancer patients on an urgent two week wait pathway had been inappropriately excluded from the cancer priority treatment list (PTL), which included some North Central London residents. The Trust has sought the support of General Practitioners (GPs) in confirming the status of these patients to ensure no patient is still waiting for treatment and an expert panel has been convened with cluster representation. To date, no harm has been identified and all general practices in North Central London have contacted patients involved.

3.7 East Midlands Quality Observatory (EMQO) Acute Trust Dashboard
The EMQO aims to support the delivery of safe and effective services with high levels of patient satisfaction. Areas of exception for NHS London were highlighted to the Committee.
The Committee noted that on the whole the five acute Trusts in North Central London compare well when benchmarked with health services across England, particularly in relation to mortality rates under the preventing people from dying prematurely domain. It was however noted that the Royal Free Hospital NHS Foundation Trust performed below average for Emergency Care measures; these are being closely monitored by the performance and contracting teams. The Acute Trusts have not yet had the opportunity to comment on the EMQO and it is possible that their feedback will provide assurance on the areas highlighted. The Clinical Quality Review Groups will pursue all of the variances with relevant Trusts.

3.8 Development of quality assurance within Clinical Commissioning Groups (CCGs)
An update from each borough of NHS North Central London was reviewed by the Committee. This showed that each of the CCGs was making arrangements to meet their responsibilities for quality, with some more advanced than others. It was agreed that a meeting would be arranged as part of the next Quality and Safety Committee to discuss ongoing progress with the quality lead for each CCG. The Committee considered that the NHS North Central London Joint Boards can take assurance that at this stage active progress is being made. This is also a key dimension of the Quality Transition Plan.

4. High Level Review for Mental Health Services and Learning Disabilities
4.1 The review was undertaken to provide assurance on the quality and safety of Mental Health and Learning Disability services. The Committee noted that the draft report had not yet been reviewed by the Trusts. Members also acknowledged the challenge of gathering reliable data for the purposes of effective comparison. Issues flagged in the draft report included:

- Workforce concerns at Camden and Islington Mental Health Foundation Trust (CIFT)
- Improvement needed on Care Programme Approach (CPA) reviews undertaken within one year at Barnet, Enfield and Haringey Mental Health Trust (BEH)
- Communication between Mental Health Trusts and General Practitioners.
- High Cost placements; NHS North Central London to work with BEH to bring these individuals into stepped down local services.
- Longer median length of stays at BEHMHT
- Low percentage of people with learning disabilities who have received an annual health check in Enfield, Camden and Islington

4.2 The committee asked that the report be enhanced to include data re ethnicity and equality, subject to it being available from the Trusts.

4.3 Bearing in mind that actions to address recommendations from the review will require sustained action beyond the life of the Cluster, the committee expected well defined recommendations for action with clear identification of the agency to lead on action.

4.4 A final draft, including incorporation of Trust comments, will be reviewed by the Quality and Safety Committee in September, before presenting to the NHS North Central London Joint Boards.

5. Quality Assurance Dashboard
5.1 The Organisational Health Intelligence (OHI) tool was not available from NHS London at the time of reporting. This report was therefore collated using data from a number of sources including NHS North Central London Board Performance Report, NHS London patient safety dashboard and local knowledge derived from Clinical Quality Review Meetings with each provider.

5.2 The Committee was troubled by the weak performance across North Central London on take up of bowel cancer screening. It was noted that the test is not comfortable for patients to self administer and this is probably the major factor which affects rates of uptake. New marketing approaches will be developed with a view to getting better take up. On the plus side, there has been improved early diagnosis due to the bowel cancer campaign.

5.3 The committee continues to seek assurance on quality reporting of services provided by the four trusts delivering community health services. At this stage, there is still no clear

evidence that the Central North West London NHS Trust (CNWL) (Camden services) are meeting NHS North Central London requirements. However, it was noted that Clinical Quality Review meetings with the Trust have now been established and the Trust has indicated its commitment to work with NHS North Central London and Camden CCG to demonstrate good quality management. The Committee asked that a CNWL representative be invited to the next Quality and Safety Committee, as well as representatives from Camden CCG and NHS North Central London Contracts Directorate, to report on quality monitoring in Camden services.

5.4 Performance against Health Care Associated Infections (HCAI) was noted by the Committee; Royal National Orthopaedic Hospital and Barnet and Chase Farm Hospital are both rated red against *Clostridium difficile* targets and are both taking part in the HCAI Peer review Process during July 2012, which will be monitored through the Clinical Quality Review Groups.

6. Quality and Safety Directorate Risk Register

6.1 The Committee was advised that the risk related to quality and safety in care homes had been increased following the alerts noted in section 3.5 of this report.

7. Patient Experience: Walk the Pathway report

7.1 A qualitative review of the dementia pathway, provided by Barnet, Enfield and Haringey Mental Health Trust at The Oaks, Barnet and Chase Farm Hospitals NHS Trust on Capetown Ward and Enfield Community Services at the Magnolia Rehabilitation Unit, was undertaken in March 2012. The review team included an NHS North Central London Non Executive Director and representatives of patients and voluntary organisations. The review found significant opportunity for closer working with care homes, multi-disciplinary training and use of skilled specialist staff along the pathway. Overall the team found some areas for improvement, good examples of innovation and best practice, with considerable scope for services to share expertise, improve integration and develop a more effective dementia pathway.

7.2 The committee was encouraged that all Trusts involved are committed to achieving this aim. It was noted that clinical input from commissioners would enhance this process and it was agreed that NHS North Central London would need to lead the process, in engagement with the Clinical Cabinet.

8. Serious Incident Update

8.1 The committee noted that there continues to be steady progress made on the closure of serious incidents and acknowledged that this work will aim to close all legacy serious incidents prior to April 2013 as requested by NHS London.

8.2 The Serious Incident Policy has now been adapted for independent contractors. The Local Medical Committee (LMC) has raised some issues relating to contractual arrangements for reporting incidents, which are currently being reviewed by the Primary Care Team. An update on progress will be provided to the Committee at the next meeting.

8.3 There have been a total of five Never Events occurring in North Central London since April 2012; three of these relating to retained swabs within maternity services. Implementation of remedial action plans will be reviewed at the Clinical Quality Review Meetings with the Trusts and also monitored by the maternity network.

Location	Never Event Category
Whittington Health	Retained foreign object – retained swab, maternity
North Middlesex	Retained foreign object – guide plate
	Retained foreign object – vaginal pack, maternity
University College Hospital	Wrong implant/prosthesis – wrong knee implant
Barnet and Chase Farm Hospital	Retained Foreign Object - retained swab, maternity

8.4 The Quality Directorate and the Maternity Network consider that there may be a system issue with blood spot screening at Barnet and Chase Farm Hospitals NHS Trust; the investigation of two serious incidents is being closely monitored by the Maternity Network and the NHS North Central London Public Health Lead.

8.5 The Committee asked for assurance in relation to processes to investigate six data breaches between 1 April 2012 and 13 June 2012. These are all being investigated and reviewed for themes to ensure data handling is improved. The Committee asked that the Audit Committee be alerted to this issue.

9. Individual Funding Requests update

9.1 The Committee received the update on the processes for dealing with individual funding requests (IFRs) with North Central London.

9.2 A total of 98 cases are currently open, the majority of which are currently with providers for additional information to support decision making.

9.3 It was noted that there continue to be a high number of requests from General Practitioners, in particular from Enfield, and also from the Royal Free Hospitals Foundation Trust. The Committee asked for further work to be done by way of analysis of the reasons for these patterns.

9.4 The committee reiterated the request made at the May meeting for additional information on the timeliness of decisions in the form of analysis of all cases decided in 2011/12 to show the length of time between the application and the decision, The IFR Team in the Contracts Directorate agreed that the review of timelines for 2011/12 would be completed by the end of July. The Chair will circulate that to members. It was reported that a system is now in place to enable the progress of cases to be reported regularly in future without resource intensive manual data extraction.

10. Research Governance Annual Report

10.1 A summary of the process used to approve research that takes place in North Central London and a list of the studies approved and rejected during 2011/12 was noted by the committee. Only two requests have been rejected; one on the basis of lack of staff to facilitate data collection and the other due to significant excess treatment costs.

10.2 The Committee asked for assurance around how we learn from the findings of the research and was advised that this is the responsibility of the Research Ethics Committee.

10.3 The Committee asked for clarification about future arrangements for Research Governance. North Central London Research Network (NoCLoR) will be asked to provide feedback on how this process will work beyond March 2013. This is included in the Quality and Safety Transition Plan.

11. Primary Care Update

11.1 The Committee received a verbal update on Primary Care quality monitoring; including ongoing performance management processes. No concerns were raised.

12. Legacy, Handover and Closure Project Initiation Document

12.1 Legacy, Handover and Closure is a priority programme for sending organisations e.g. Primary Care Trusts, which is being led by Victoria Grimsell, Programme Manager and a programme lead for each work stream.

12.2 The draft plan, which has been shared with NHS London, was reviewed by the Committee. The Committee noted that attention needs to be given to the sharing of legacy data and future ownership of systems such as Datix.

12.3 The CCG representatives advised that the CCGs would need considerable support with training and handover, which is a key component of the transition plan. This will be incorporated into CCG Board development days.

12.4 The Committee were advised that one of two Quality Leads for Transition have been appointed and recruitment is under way for the second post to support the transition work.

13. Minutes of the Serious Incident Overview Panel

13.1 The Minutes were noted by the Quality and Safety Committee as assurance of the process for the review of serious incidents in NHS North Central London.

14. Conclusion

The Quality and Safety Committee will continue to maintain an oversight of the quality and safety of all commissioned services in North Central London and report areas of concern and implementation of actions to the NHS North Central London Joint Boards and Clinical Commissioning Groups. The Committee will also continue to oversee the plans for Quality and Safety during the transition period to ensure that safety continues to be given a high priority.