

NQB (15) 7th Meeting

NATIONAL QUALITY BOARD

MINUTES of a meeting held at Room 133b

Skipton House, LONDON

Friday 11 December 2015, 15:00 – 17:00

PRESENT			
Bruce Keogh (Chair)		Mike Richards (Chair)	
Lisa Bayliss-Pratt (telecon)	Peter Blythin		Gillian Leng
Hugo Mascie –Taylor	Ruth May		Andrea Sutcliffe
Kathy McLean	Jane Cummings (telecon)		Viv Bennett (telecon)
IN ATTENDANCE			
William Vineall (Deputy for Charlie Massey)		Malte Gerhold (CQC)	Charlotte Goldman (5YFV)
Christina Cornwell (CQC)	Kate Eisenstein (CQC)	Lauren Phillips (NHS England)	Lucy Holmes (NHS England)
APOLOGIES			
Charlie Massey	Paul Cosford	Wendy Reid	Steve Field
AGENDA <ol style="list-style-type: none">Welcome and IntroductionsMinutes of the last meetingQuality narrative for Shared Planning Guidance Quality Strategy <ol style="list-style-type: none">Defining qualityMeasuring quality Quality Priorities <ol style="list-style-type: none">Safe Staffing Operational Alignment <ol style="list-style-type: none">Reducing the burdenA.O.B			

ITEMS 1 & 2: WELCOME, INTRODUCTIONS AND MINUTES OF THE LAST MEETING

BRUCE KEOGH (Chair) welcomed members to the seventh meeting of the re-established National Quality Board (NQB).

MIKE RICHARDS (CHAIR) asked the NQB to agree / approve the minutes of the last meeting and to note that once agreed they would be published in due course, alongside the agenda and papers from the last meeting.

The NQB agreed the minutes of the last meeting.

ITEM 3: QUALITY NARRATIVE FOR SHARED NHS PLANNING GUIDANCE

The CHAIR explained that the original purpose of this item had been to seek input from NQB members on the “Quality Narrative” for inclusion in the NHS Shared Planning Guidance for 2016/17. He invited CHARLOTTE GOLDMAN (5YFV Strategic Programme Office), to explain the current position in respect of the Shared NHS Planning Guidance.

Charlotte explained that in summer 2015, the 5YFV CEO Board had agreed that the system should produce shared planning guidance for the service for 2016/17 under their oversight to ensure commissioning and provider plans are aligned. It was also agreed that the Shared Planning Guidance would be accompanied by a set of roadmaps to convey the main Planning Guidance parameters to key audiences, such as GPs, CCGs, hospitals and Local Authorities. Two events had been held on 4 December 2015 for Provider Chief Executives and CCG accountable officers where they had been briefed on the approach to planning for 2016/17 and beyond, ahead of the publication of the Shared NHS Planning Guidance which was due to be published on 18 December 2015.

Charlotte went on to explain that unfortunately it had not been possible to share a draft of the “quality narrative” either in advance of, or indeed at, the meeting. This was due to the planning guidance being re-drafted to reflect and blend with both the NHS England mandate and system-wide transformation agenda. Charlotte advised

that as soon as it was possible, the quality narrative would be shared with NQB members for comment.

The following points were raised in discussion;

- a) the NQB noted that the planning guidance would focus on local sustainability and transformation plans, in which local areas would develop and set out their strategic direction;
- b) the NQB appealed for a greater role in developing and shaping the Planning Guidance in future years, rather than commenting at such a late stage in its development; and
- c) it was confirmed that the document would be developed more sequentially in future years, providing more opportunity for input and joint development with the NQB.

BRUCE KEOGH (Chair) thanked members for their contributions.

CHARLOTTE GOLDMAN (5YFV) confirmed that the quality narrative would be circulated to members as soon as it was available for electronic comment and input.

QUALITY STRATEGY

As part of its quality strategy theme, the NQB discussed two aspects of this work; Defining Quality and Measuring Quality.

ITEM 4: DEFINING QUALITY

CHRISTINA CORNWELL (NQB Secretariat) introduced *Paper 1: Defining Quality*. Defining quality was a central theme in the NQB's Quality Strategy workstream and the purpose of this paper was to stimulate discussion in respect of "Defining Quality" and what this meant for the NQB in the development of a national Framework for improving quality across the system.

The paper contained the following sections:

- The definition of quality: where are we now and where might we go in the future, proposing a number of alternative / different approaches to defining quality for consideration; and
- Our collective approach to improving quality: building on the Darzi Quality Framework, and suggesting the use and articulation of six connected key elements.

The NQB was asked:

- discuss and confirm they were content with the emerging thinking described, both in relation to the definition of quality and the collective approach to improving quality;
- reflecting on the session with Sheila Leatherman and the Health Foundation on 9 December 2015, consider any areas of alignment, or indeed gaps in the emerging thinking; and
- consider whether an NQB Strategy Working Group should be established to lead on developing this model for discussion at the next meeting of the NQB.

The following points were raised in discussion;

- d) it was acknowledged that there were currently several definitions of quality in place across the health system and that there were several 'lenses' from which quality was viewed and could be understood. Appreciation of these lenses or perspectives on quality was essential in moving towards a joint definition which would be meaningful and relevant;
- e) there should be a focus on the development of a quality framework, which should be in the context of a clearer articulation of how quality was defined. Defining quality should therefore be the basis of starting to develop the framework;
- f) there was little appetite amongst the NQB for a totally new definition of quality. It was agreed that the Darzi definition of quality (patient safety, patient experience and clinical effectiveness) worked well and had provided a good foundation for establishing a system wide understanding of quality. The momentum already in place should not be lost. The NQB called for

simplicity, with the emerging “shared vision of quality” to be built on the existing model, expanding it rather than replacing it;

- g) a theme around ‘support for quality improvement’ was missing in the existing quality framework;
- h) both the “innovate” and “safeguard” element in the existing framework were more “aims” than they were part of the approach to improving quality;
- i) this approach would benefit from greater input and further exploration of some of the issues raised in relation to defining quality;
- j) the model should continue to be developed for presentation at the next NQB meeting; and
- k) a Quality Strategy Working Group be established to lead on developing this model. Members of the NQB were asked to either volunteer, or nominate representatives from their organisations to join the Quality Strategy Working Group to take forward this work.

BRUCE KEOGH (Chair) thanked members for their contributions and re-iterated the call for simplicity, with the emerging “shared vision of quality”, expanding on the existing definition and framework, rather than replacing it. He confirmed that an NQB Strategy Working Group should be established to further develop the emerging thinking and model for consideration at the February 2016 meeting of the NQB.

ITEM 5: MEASURING QUALITY

CHRISTINA CORNWELL (NQB Secretariat) introduced Paper 2: NQB’s role in measuring quality – update and next steps.

Christina explained that the purpose of the paper was to provide an update to NQB members on the Measuring Quality element of the NQB’s Quality Strategy workstream, including: background to the work, an overview of progress to date and the purpose and aims of the work.

In respect of the purpose and aims of the measuring quality work, the NQB was asked to consider:

- Whether the right ambition had been established?

- How far could the work on measuring quality be taken at this stage?
- Did we need to define a shared view quality before we could measure it?

The following points were raised in discussion:

- l) members welcomed the stated ‘ambition’ of the Measuring Quality Working Group and were supportive of the overall, high-level approach;
- m) the group considered that perhaps “assessment” rather than “measurement” was a more appropriate term to use to describe this work. This was due to the term ‘assessment’ better recognising the value of qualitative data, rather than just quantitative data. This was for further consideration;
- n) the NQB requested that the Working Group give further consideration to the core deliverables in both the short-term and the long-term in respect of this workstream. The following suggestions were made:
 - to “define the quality gap”;
 - to support NHS Improvement and CQC in their respective assessment of providers to use the same core data set;
 - to set a challenge to the system - i.e. describe what the problems were in respect of quality assessment / measurement at present and emphasise that we all had a role to play in solving these problems.
- o) it was suggested that the Working Group consider presenting an assessment / measurement framework for discussion at a future NQB meeting, based around the five key questions and efficiency; and
- p) the NQB acknowledged the link between this work and the “reducing the burden” workstream and it would be important to ensure both programmes of work were aligned.

BRUCE KEOGH (Chair) thanked members for their contributions and confirmed that the NQB were supportive of the Measuring Quality Working Group’s approach and high-level ambition. He asked that the Working Group do further work to describe both the short and longer term deliverables in respect of this work and present the outputs at a future meeting of the NQB.

QUALITY PRIORITIES

As part of its quality priorities theme, the NQB discussed one aspect of this work; Safe Staffing.

ITEM 6: SAFE STAFFING

RUTH MAY (MONITOR), PETER BLYTHIN (TDA) and JANE CUMMINGS (NHS England) introduced *Paper 3: Safe Staffing Guidance Update*.

The paper provided an update on the plans to:

- refresh the existing NQB guide to nursing, midwifery and care staffing capacity and capability; and
- develop specific guidance documents across a range of care settings.

The NQB was asked to note the plans and provide any feedback to ensure successful delivery.

The following points were raised in discussion:

- q) the previous NQB Guidance in respect of Safe Staffing was published in November 2013; there was now new evidence and context in place which meant that the guidance should be "refreshed";
- r) the NQB had "final approval" on the refreshed guidance, but noted the list of specific individuals (slide 5) who would also need to be content with the new document;
- s) it would be vital that all NQB members were actively engaged between now and February 2016 in the development of the updated Guidance and as such a first draft would be shared with NQB members electronically before Christmas 2015; and
- t) a request was made for members of the NQB to also nominate individuals from their organisation to input into the development of this work.

In summing up, MIKE RICHARDS (Chair) thanked members for their contributions. He requested that NQB members be given a number of opportunities to comment

electronically on the draft guidance, before discussion at the NQB meeting on 17 February 2016.

OPERATIONAL ALIGNMENT

As part of its operational alignment theme, the NQB discussed one aspect of this work; Reducing the burden.

ITEM 7: REDUCING THE BURDEN

HUGO MASCIE-TAYLOR (MONITOR) introduced Paper 4: Reducing the burden on providers – existing services and potential avenues for the NQB.

Hugo explained that the paper acknowledged the numerous historical attempts to reduce the regulatory and inspection burden on providers and summarised the current ongoing work in this area. He explained that the paper suggested that the impact of such initiatives had been tempered by both a focus on data collection only; and the prevailing cultures within regulating and inspecting organisations.

The NQB was asked to consider the information in the paper, particularly with regards to the existing burden reduction initiatives and scope for NQB involvement, and specifically to consider the recommendations that the NQB focus its burden-reduction work on:

- addressing the culture of non-compliance with recommendations in regulating organisations; and
- addressing the burden associated with visits, discussions and meetings with regulating organisations.

The following points were raised during the discussion:

- u) the NQB noted that the “Regulation Survey 2015”, published today by NHS Providers reported that 87% of respondents felt that the overall regulatory burden had increased over the last 12 months, as well as the number of ad hoc requests (76% felt that ad hoc requests had increased). This was felt

more strongly by respondents from foundation trusts (98%) than NHS trusts (69%);

- v) the Health and Social Care Information Centre, which had a statutory responsibility to minimise the burden of data collections on the NHS would welcome support from the NQB in providing collective leadership across the system in this area;
- w) it was felt that there was often a void between the data requested and collected from organisations, and how the results of this data and collated information was fed-back to those who had provided it, which further enhanced the burden;
- x) members acknowledged the strong links with this work and the measuring quality workstream. It should take into account the existing burden on organisations when considering what was currently measured across the system; and
- y) it might be useful to ask a selection of providers to complete a diary of requests for information, meetings with regulators etc to assess the current burden and use as the basis for how such requests might be rationalised.

MIKE RICHARDS (Chair) thanked members for their contributions and confirmed NQB support for the work.

ITEM 8: ANY OTHER BUSINESS

MIKE RICHARDS (CHAIR) advised that the next meeting of the NQB was currently scheduled for 17 February 2016.