To	The Board
For meeting on:	12 December 2018
Agenda item:	10
Report by:	Jessica Dahlstrom, Head of Governance Sofia Bernsand, Deputy Head of Governance
Report on:	Corporate Report

Introduction

1. The Corporate Report brings together reports of all of NHS Improvement's Board committees. This report summarises the committees' activity since the submission of the September 2018 Board papers.

Provider Leadership Committee meeting – 26 September 2018

2. Terms of Reference and the work of the Non-Executive Appointments and Trust Resourcing Teams: The Committee considered the Terms of Reference and received an outline of the work currently conducted by the Non-Executive Appointments Team and the Trust Resourcing Team. A discussion took place on how work in these areas might change in the context of joint working with NHS England and closer working with other Arm's Length Bodies.

3. Board papers: The Committee considered in detail the papers which had been submitted to the private sessions of the May and September Board meetings, setting out early proposals in relation to the actions to be taken in response to Independent review into Liverpool Community Health NHS Trust.

4. The minutes of this and the July meeting of the Provider Leadership Committee are included as Confidential Annex A.

Quality Committee meeting – 21 November 2018

5. Patient Story: The Committee watched and discussed a video showing the experiences of older people entering emergency departments. Committee members commented that an emergency department could be frightening for patients of any age, and that all senses of patients, including the auditory sense and noise levels, should be considered.

6. Quality Dashboard and regional reports: The Committee reviewed the Quality

Dashboard and discussed trends in Never Events, Venous thromboembolism and E. Coli. A working group would be set up to determine the optimal set of data indicators to be included in the Quality Dashboard. This working group would also review quality governance more broadly, including consistency of regional reporting.

7. Winter preparations: The Committee considered a report which provided an overview of the work done since last winter to prepare for the winter 2018/19. A discussion took place on consistent management of norovirus cases and on the issues associated with the phased delivery of 'flu vaccines.

8. Quality Committee in Common: Committee members discussed the creation of a new Quality Committee in Common together with NHS England and noted that the working group mentioned above would also review the proposed Terms of Reference in detail.

9. Whistleblowing report: The Committee noted the report and recommended that data on whistleblowing would be included in the Quality Dashboard.

10. The minutes of this meeting are included as Annex B.

Nominations and Remuneration Committee meeting – 22 October 2018

11. Executive Director appointments: The Committee considered the appointment and remuneration of the new Executive Directors.

12. Monitor pay review: anomalies: The Committee received a paper on the anomalies which had been identified by the Monitor pay review and approved the paper's recommendations.

13. Annual pay uplift: Executive and Senior Management (ESM) and non-ESM staff: The Committee considered proposals in relation to pay uplifts for ESM and non-ESM staff and approved these.

14. The Committee considered an individual pay case.

15. The minutes of this meeting are available to Board members on request.

Recommendation

16. The Board is asked to note recent committee activity.

MINUTES OF A MEETING OF THE QUALITY COMMITTEE HELD ON WEDNESDAY 21 NOVEMBER 2018 AT 11.30am AT WELLINGTON HOUSE, 133-155 WATERLOO ROAD, LONDON SE18UG

Present:
Lord Ara Darzi, Non-Executive Director (Chair)
Tony Baldasera, Delivery and Improvement Director (North) (by telephone)
Jonathan Broad, Patient and Public Voice Member
Tim Ferris, Non-Executive Director
Aidan Fowler, National Director of Patient Safety
Margaret Kitching, Chief Nurse (North) (by telephone)
Ruth May, Executive Director of Nursing
Kathy McLean, Executive Medical Director and Chief Operating Officer
Oliver Shanley, Joint Regional Chief Nurse (London)
Nigel Sturrock, Regional Medical Director (Midlands and East)
Imogen Voysey, Patient and Public Voice Member
Richard Wilson, Director of Quality and Intelligence & Insight
Alice Webster, Deputy Regional Director of Nursing (South)

In attendance:
Jessica Dahlstrom, Head of Governance
Gianluca Fontana, Senior Policy Fellow and Director of Operations, Imperial College London

1. Welcome and apologies (oral item)

1.1. Apologies for absence had been received from Tim Kendall who was not able to attend to present his paper on mental health. This item had been deferred. It was noted that apologies had been received from a number of regional colleagues but that a representative from each region was present at the meeting.

1.2. There were no declarations of interest.

2. Patient story

2.1. Julia Holding, Head of Patient Experience, joined the meeting for consideration of this item.

2.2. The Quality Committee (the Committee) watched a video showing the experiences of older people entering emergency departments. A longer video would be made available to committee members via email.

2.3. Committee members commented that an emergency department could be frightening for patients of any age, and that all senses of patients, including the

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auditory sense and noise levels, should be considered. An interesting video had been produced by Torbay and South Devon NHS Foundation Trust giving the patient perspective on this.

2.4.   The Chair of the Quality Committee provided an overview of the plans for the Committee as NHS Improvement started to work increasingly jointly with NHS England. Committee members considered the role the Committee could play in assurance of core quality standards and in relation to improvement and culture. A discussion took place on the announcement made by the Care Quality Commission (CQC) on criminal prosecutions. The need to ensure local systems were engaged in the planning, improvement and assurance of quality was highlighted.

3.   Minutes and matters arising from the meeting held on 20 June 2018 (QC/18/19)

3.1.   The minutes for the meeting held on 20 June 2018 were approved and matters arising were noted. A number of actions could be closed and the Head of Governance would present an updated action log at the next meeting.

4.   Quality Dashboard (QC/18/20)

4.1.   The Director of Quality and Intelligence and Insight introduced the key findings set out in the Quality Dashboard. The Committee noted developments in relation to Never Events, Venous thromboembolism and E. Coli. A detailed update on Healthcare-Associated Infections would be presented at a future meeting of the Committee. This would include an analysis of any impact from hot weather.

ACTION: RM

4.2.   A discussion took place on Never Events and their definition, which referred to the fact that incidents were preventable rather than necessarily severe. Committee members commented that it would be helpful to include a mark on charts where definitional changes had taken place.

4.3.   Consideration was given to coding and data issues associated with the reporting of hip fractures. A discussion took place on some of the indicators where improvement had taken place, such as the friends and family test. It was noted that this might measure the 'caring' nature of the care received rather than the outcomes. The Committee discussed the readmission rates and noted that in some cases what was shown as a readmission was in fact part of an excellent pathway of care including follow up.

4.4.   Committee members suggested that it would be useful to have a discussion on the optimal set of data indicators to be included in the Quality Dashboard. The current dashboard was limited by data availability, but it may be possible to obtain additional data in future.

5. Regional updates (QC/18/21)

5.1. The Committee received updates from each of NHS Improvement's regions. From the South, this included updates on Sussex Healthcare, North Kent Pathology Service and on shower rail standards. A discussion took place on the role of the Committee, and regulators more generally, in relation to ligature risk.

5.2. In relation to the London region, positive movements in CQC ratings were discussed. There were no providers in London rated Inadequate. The challenges experienced in the Midlands and East region were noted and seven providers were in special measures for quality reasons. The support provided to these trusts was outlined.

5.3. The North region had no providers rated Inadequate, and Committee members noted that the 'Moving to Good' programme had been very well received.

5.4. The Committee asked for the reports from the regions to be standardised by April. A working group would be brought together to discuss this, the Terms of Reference for the Committee and the content of the Quality Dashboard. This working group should include medical, nursing and regional representation. The role of the Quality Accounts should also be considered.

ACTION: RM, KMcL, JD

6. Winter preparations (QC/18/22)

6.1. Pauline Philip, National Director of Urgent and Emergency Care, joined the meeting for consideration of this item.

6.2. The Committee considered the report which provided an overview of the work done since last winter to prepare for the winter 2018/19. The processes put in place for management of the winter period were outlined. These processes would be formally commenced on 3 December and national and regional control rooms would open on that date. Issues flagged included the need to avoid corridor waits and speed up ambulance turnaround times. The need to plan the elective programme carefully was also highlighted.

6.3. A discussion took place on the regional and local variation in the management of norovirus cases. A national policy produced by Public Health England was in place, but variation arose for example because of building design. The National Patient Safety Director and Executive Director of Nursing undertook to promote the national policy to ensure consistency in implementation.

ACTION: AF, RM

6.4. Committee members discussed the issues with the supply of 'flu vaccinations. The phased delivery of vaccines had created difficulties in the primary care sector. Lessons had been learned from this experience. The importance of protecting staff and staff morale throughout the winter period was highlighted.

7. Quality Committee in Common (QC/18/24)

7.1. The Committee considered a report which set out proposed Terms of Reference for NHS Improvement's new Quality Committee. It was noted that this Committee would meet in common with NHS England's Quality Committee.

7.2. A working group would be set up as mentioned under 5.4 above. The importance of clear definitions regarding who was responsible and who was accountable for the quality of care delivered by the NHS was highlighted.

8. Whistleblowing report (QC/18/25)

8.1. The Committee noted the report and recommended that data on whistleblowing would be included in the Quality Dashboard.

ACTION: RW

9. Any other business

9.1. There was no other business.

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