

**NATIONAL QUALITY BOARD****9 December 2019****14:00 to 17:00**

Skipton House (Room:232D), 80 London Road, London, SE1 6LH

MINUTES

PRESENT		
Steve Powis (Chair)		Ted Baker (Chair)
Imelda Redmond	Mark Radford	Aidan Fowler
Gill Leng	Ruth May	Catherine Swann (for Viv Bennett)
William Vineall (for Lee McDonough)	Hugh McCaughey	Jonathan Benger
Vicki Wells (for Rosie Benneyworth)		
IN ATTENDANCE		
Tim Atkins (CQC)	Dominique Black (Secretariat)	Kate Lupton (Secretariat)
Lucy Firth (Secretariat)	Lauren Hughes (NHSE-I)	Alf Collins (NHSE-I)
Amy Galea (NHSE-I)	Jacque White (NHSE-I)	Jane Docherty (NHSE-I)
Amy Dehn Lunn (NHSE-I)	Nick Clarke (NHSE-I)	Anna Stillwell (NHSE-I)
Natalie Warman (NHSE-I South East Region)	Matt Tagney (NHSE-I)	Sarah Pickup (LGA)
Jane Silvester (NICE)	Nick Ballie (NICE)	Will Warburton (The Health Foundation)
Paul Buckley (GMC)	Lee Stribling (Skills for Care)	Alison Smith (North Cumbria Integrated Care)
Michael West (King's Fund)	Martin Walker (TLAP)	Clare Stone (Surrey Heartlands ICS)
David James (CQC)		
APOLOGIES		



Wendy Reid	Rosie Benneyworth	Richard Owen
Viv Bennett	Lee McDonough	Yvonne Doyle
Kate Terroni		

AGENDA

1. Welcome & Minutes of Previous Meeting
2. THEME: SYSTEM TRANSFORMATION
 - a) Update on Planning Guidance – delivery of the Long Term Plan
3. THEME: WORKFORCE
 - a) Caring for Doctors, Caring for Patients – GMC report into mental health and wellbeing of doctors and medical students in the UK
4. THEME: SYSTEM TRANSFORMATION
 - a) Updating the Shared Commitment and National Guidance on Quality Surveillance Groups



1. **Welcome & Minutes from Previous Meeting**

- 1.1 STEVE POWIS (Chair) welcomed all to the fifth meeting of the National Quality Board (NQB) 2019. JONATHAN BENGER, Chief Medical Officer at NHS Digital was introduced and welcomed as an NQB member. Attendees and apologies were noted as above.
- 1.2 The minutes of the previous meeting on 9 October 2019 were approved and agreed as a true and accurate record and would be published in due course, alongside the associated agenda and papers.
- 1.3 The NQB agreed to bring back the following items to a future NQB meeting:
 - a) An update on the Learning from Deaths Programme;
 - b) An update on delivery of the Patient Safety Strategy;
 - c) An update on the Williams Review into Gross Negligence Manslaughter in Healthcare;
 - d) An update on the Review of the Shared Commitment and Model of Quality Surveillance Groups;
 - e) An item on HQIP recommendations.

2. **THEME: SYSTEM TRANSFORMATION**

Update on Planning Guidance and delivery of the Long Term Plan

- 2.1 MATT TAGNEY was invited to introduce this item as a verbal update, following discussion of the item at the NQB meeting in February 2019.
- 2.2. Local implementation plans were agreed with all regions on 15 November 2019; they are locally owned and clinically led, with a focus on partnership working (including with Local Authorities). The plans are focused on delivering key metrics and highlighting the areas of health and care that



require further support, including cross-cutting themes such as the NHS People Plan and Digital services.

- 2.3 Following the election, plans will be refined locally, with a view to publish the final versions in mid-January 2020. In the interim, plans will be shared with local boards on request.

The NQB was asked to:

- a) **Note** the update on the implementation of the Long Term Plan;
 - b) **Consider** how it could support implementation and any areas in particular.
- 2.4 The NQB noted the update and raised a question around whether the plans were prioritising the 'right areas' – including mental health and urgent and emergency care.

The NQB were reassured that:

- a) There is evidence of systems prioritising mental health;
 - b) The extent of the focus on prevention and inequality within local plans is encouraging;
 - c) The launch will not be a repeat of the Long Term Plan, rather an opportunity to demonstrate the progress made over the last few months – including key progress on prevention.
- 2.5 It was agreed that the Item would be brought back to the NQB when the reports were published.

3. **THEME: WORKFORCE**

Caring for doctors, Caring for patients – GMC report into the mental health and wellbeing of doctors and medical students in the UK



- 3.1 MICHAEL WEST (Guest) was invited to introduce this item with the associated paper (paper 1).
- 3.2 The presentation included the following key points:
- a) The strong link between compassionate leadership and improved delivery of health services;
 - b) The positive impact that prioritising staff wellbeing and leadership within an organisation has on levels of patient satisfaction and the quality of care provided;
 - c) The primary (rather than secondary or tertiary interventions) that an organisation can take to improve staff wellbeing – following the A (Autonomy/Control), B (Behaviours), C (Competency) Framework. This includes meeting basic core needs.

The NQB was asked to:

- a) **Note** the evidence arising from the review, the case studies of good practice across the UK and the recommendations contained in the report.
 - b) **Consider** how the NQB can help ensure that national bodies in England work together to implement the recommendations of the report.
- 3.3 During the discussion, the NQB noted the following points:
- a) The consistency between this report and the NHS People Plan - both highlight the issue of excessive chronic workload in primary and secondary care;
 - b) The commonality between this report, the GMC's Hamilton review into Gross Negligence Manslaughter in Healthcare and the Roger Kline Report (Making Sure Doctors are Treated Fairly);
 - c) The need to take action on the issues described in the report to ensure tangible improvement in the quality of the working lives of clinical and non-clinical professionals in the NHS;



- d) The importance of teaching trainee doctors and other professionals about effective team working;
- e) The recognition that whilst teaching trainee doctors to be resilient is useful, when under high levels of stress, it can be a 'toxic cocktail' and will never be a substitute for the support and direction that effective team working can provide.

4. THEME: SYSTEM TRANSFORMATION

4.1 Kate Lupton introduced this item with the associated paper (Paper 2). Kate outlined the work being undertaken by the NHSE-I Quality Strategy team on behalf of the NQB to refresh the Shared Commitment and national model of quality surveillance, to ensure they are fit-for-purpose for systems;

4.2 The presentation provided context to the three national quality frameworks (Shared Commitment, Quality Matters and Quality Framework for Public Health), and included the following key points:

- a) The methodology being taken to refresh the Shared Commitment;
- b) The emerging findings from the work to date and the key questions that need addressing.

4.3 The NQB was asked to:

- a) Help articulate what a **shared vision for quality in systems looks like** – the narrative required to lead and empower systems to work collaboratively around quality for the benefit of communities;
- b) Start to develop a **common understanding about how we describe and measure quality**;
- c) Identify what **levers** are available to NQB bodies to **help deliver this vision**;
- d) **Agree next steps and timeline.**



4.4 The NQB arranged themselves into three break-out groups for discussion. Key points of focus arising from the discussions included:

- a) General consensus that the overall definition of quality (five key principles) is still respected, but work is needed to 'bring it to life' and ensure it speaks to different system partners;
- b) The need to be clear on the audience for the refreshed definition and carefully consider geographies (given the variation in scale of ICSs);
- c) The need for the refresh to be focused on improving outcomes, not simply maintaining existing levels of quality;
- d) The importance of key principles such as trust, transparency and equality to any definition;
- e) The need to focus on the application of the definition of quality and find a 'common currency', which sits under the high-level definition, and provides structure for systems to deliver on quality;
- f) The need to consider how we socialise the framework and how to ensure it informs local planning;

4.5 The NQB noted the progress made to date and agreed that the item should be brought back to the February 2020 meeting. A few other comments were made:

- g) The need to co-produce the refresh in consultation with those using and delivering services, alongside other stakeholders;
- h) The need to roll out the refresh iteratively – with a period of testing in local areas;
- i) The need to ensure alignment across the three national frameworks.

4.6 The secretariat will:



- a) Collaborate with Quality Matters and PH Framework colleagues to identify ways to align the different frameworks;
- b) Engage with patient and service user groups;
- c) Test out our frameworks, principles and guidance with regional teams and local systems;
- d) Gather more feedback on effective use of data and evidence to support effective measurement of quality.

5. AOB

5.1 No business raised.

5.2 The next NQB meeting will be held on 20 February 2020.