

NATIONAL QUALITY BOARD

19th April 2023

10:00 – 11:30

Virtual Meeting

MINUTES

PRESENT		
Chair – Sean O’Kelly	Allison Streetly	Rosie Benneyworth
Aidan Fowler	Charlotte McArdle	Deborah Sturdy
Janice Tillett	Jamie Waterall	Jeanette Hall (for Susan Hopkins)
Phil Perkins	Wendy Reid	Kate Terroni
Clenton Farquharson	Anna Severwright	
IN ATTENDANCE		
Dominique Black	Kate Lupton	Daniel McDonnell
Fiona Butterfield	Priscillia Jean-Noel	
APOLOGIES		
Steve Powis	Ruth May	Vin Diwakar
Mark Radford	Susan Hopkins	William Vineall
AGENDA		
1. Welcome and minutes of previous meeting		
2. CQC launch of integrated care systems (ICSs) and local authority (LA) assessments		
3. NHSE Operating Model for Quality and NQB Early Warning Signs Framework		
4. Chief Nursing Officer (CNO) Professional vision and strategy for Nursing and Midwifery		
5. Terms of Reference		
6. Any other business		

1. Welcome and minutes of previous meeting

- 1.1. SEAN O'KELLY (chair) welcomed all to the second National Quality Board (NQB) of 2023. Attendees and apologies were noted as above.
- 1.2. The minutes of the previous meeting on 8 February 2023 were approved and agreed as a true and accurate record. They will be published in due course, alongside the associated agenda and papers.

2. CQC launch of integrated care system (ICS) and (LA) assessments

- 2.1. KATE TERRONI updated the NQB about plans for CQC to begin work to assess local authorities and ICSs from April 2023.
- 2.2. The Health and Care Act 2022 gives CQC two new responsibilities to assess whether ICSs are meeting the needs of their local populations and the CQC will be looking at how well LAs meet their duties under the Care Act (2014).
- 2.3. CQC will assess how ICSs are working to tackle health inequalities and improve outcomes for people. This work will also provide independent and meaningful assurance to the public of the quality of care in their area.
- 2.4. The CQC's new single assessment framework will be used to make judgments about the quality of care for all service types and at all levels, from registration through to provider assessments, and assessments of ICSs and local authorities.
- 2.5. JANICE TILLETT talked to the presentation about her personal experiences across health and care and the importance of services working together to meet the needs of individuals. She explained how CQC's assessments of systems could help people using a range of services within a system.
- 2.6. The NQB was asked to provide views on the work so far and what should be considered in the development of the approach.
- 2.7. ANNA SEVERWRIGHT emphasised the importance of CQC putting people's experience at the heart of its assessments.
- 2.8. JAMIE WATERALL talked about the importance of knowing the full person and how we must improve the holistic overview of what's happening across the system.
- 2.9. ROSIE BENNEYWORTH asked when CQC were piloting the assessments and what would be happening with ratings.
- 2.10. KATE TERRONI explained that CQC would produce a national report focusing on equity in access in CQC's State of Care publication this autumn. She confirmed that more detailed pilots would take place in the summer. Kate confirmed CQC has the ability to score and rate and will do so if requested by HM Government. In the case of local authorities, she explained CQC will be rating in the near future.

3. NHSE Operating Model for Quality and NQB Early Warning Signs Framework

3.1. KATE LUPTON updated the NQB on the work being done within NHSE to review quality governance arrangements and support the prioritisation of quality in the new health and care landscape.

3.2. The paper provided an update on two publications currently being developed.

- 1) The NHSE Operating Model for Quality is a follow up to the Operating Framework.
- 2) The NQB Quality Early Warning Signs Framework has been modelled on a successful framework used by Healthcare Improvement Scotland. The proposal is to publish this framework as an NQB document, given the benefit of having a shared view of quality across different system partners.

3.3. The NQB was asked to:

- 1) Review and provide comments on the publications.
- 2) Consider the proposal to brand the Quality Early Warning /signs Framework as an NQB document.
- 3) Agree if and how NQB members would like to be involved in development of the Quality Early Warning Signs Framework.

3.4. ROSIE BENNEYWORTH emphasised the importance of drawing upon a range of sources of information including Healthwatch, Freedom to Speak up, Patient Safety Commissioner, HSIB and a range of others. She highlighted not just considering regulatory data in order to have a full picture and encouraged the framework to engage with all.

3.5. WENDY REID highlighted the importance of not just considering post graduate doctors, she said we should consider all undergraduate professions on the basis that we often hear about concerns before people qualify.

3.6. DEBORAH STURDY asked how the framework is hearing from adult social care providers.

3.7. KATE LUPTON said she would consider doing a pilot with an adult social care provider to consider this further.

3.8. ANNA SEVERWRIGHT emphasised that a whole team are part of quality, and their views need to be taken into account.

3.9. CLENTON FARQUHARSON asked how trust will be built. We also need to make sure we use the voice of people who use care and support.

4. Chief Nursing Officer (CNO) Professional vision and strategy for Nursing and Midwifery

- 4.1. CHARLOTTE MCARDLE updated the Board on the development of a professional strategy for nurses, midwives, and nursing associates in England. The strategy aims to set strategic direction of travel for the professions across the evolving health and care landscape over the next 3-5 years and beyond.
- 4.2. The NQB was asked to discuss and comment on the proposed structure of the strategy and how it can be used to support our ambitions on quality.
- 4.3. JAMIE WATERALL emphasised the synergy of the strategy and the work of the NQB.
- 4.4. CLENTON FARQUHARSON was encouraged by the co-production to develop the approach. He challenged how the strategy was going to help address disparity in outcomes, particularly in terms of inequalities.
- 4.5. CHARLOTTE MCARDLE confirmed that work was ongoing in relation to racial disparity, and this is central to the CNO strategy.
- 4.6. The NQB asked for the final draft of the strategy to be shared before publication.

5. Terms of Reference

- 5.1. DOMINIQUE BLACK updated the Board on the new terms of reference. This includes updating the six priority areas for the Board including supporting system transformation, improving population health, supporting the health and care workforce, safety, digital technology and research and innovations.
- 5.2. The NQB were asked to:
 - 1) Consider the changes to the Terms of Reference for ratification.
 - 2) Consider how the NQB will link in with the National Improvement Board
 - 3) Consider whether the NQB should extend membership to a nominated health inequalities lead.
- 5.3. The Board agreed the Directors call could be reinstated to support agenda forward planning and members agreed to nominate relevant individuals.
- 5.4. The NQB agreed that Population Health should explicitly reference health inequalities as a priority area.
- 5.5. The NQB agreed to continue to reflect the membership to ensure there is representation across health and social care. Members also asked to ensure there is health inequalities expertise too.
- 5.6. NQB Secretariat will share the updated terms of reference further to member's feedback.

6. Any other business

6.1. SEAN O'KELLY asked members if they had any other business to raise.

6.2. The next NQB meeting is 7th June 2023.