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## Merton Clinical Commissioning Group Governing Body

**Date of Meeting:** 28<sup>th</sup> September 2017

**Agenda No:** 10.1

**Attachment:** 13

<p><b>Title of Document:</b> Summary Report of the Merton CCG Clinical Quality Committee meetings held on 5<sup>th</sup> July 2017 and 8<sup>th</sup> August 2017.</p>	<p><b>Purpose of Report:</b> To Receive and Note</p>
<p><b>Report Author:</b> Tony Foote, Board Secretary, Commissioning Support Unit.</p>	<p><b>Lead Director:</b> Clare Gummatt- Governing Body Led PPE</p>
<p><b>Executive Summary:</b> This report summarises the key items discussed at the Clinical Quality Committee meetings held on 5th July 2017 and 8th August 2017. Note: this summary is not intended to replace the formal minutes of this meeting. Those minutes are available upon request.</p>	
<p><b>Key sections for particular note (paragraph/page), areas of concern etc:</b> All of the report.</p>	
<p><b>Recommendation(s):</b> The Merton Clinical Commissioning Group Governing Body is requested to note the contents of the report.</p>	
<p><b>Committees which have previously discussed/agreed the report:</b> The Clinical Quality Committee has approved the full minutes of these meetings.</p>	
<p><b>Financial Implications:</b> Only any detailed within the meeting summaries.</p>	
<p><b>Implications for CCG Governing Body:</b> N/A</p>	
<p><b>How has the Patient voice been considered in development of this paper:</b> N/A</p>	
<p><b>Other Implications:</b> N/A</p>	
<p><b>Equality Analysis:</b> N/A</p>	
<p><b>Information Privacy Issues:</b> N/A</p>	
<p><b>Communication Plan:</b> None</p>	



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## Clinical Quality Committee Meeting - 05.07.17

<b>Members Present:</b>	
Clare Gummatt (CG) (Chair)	Governing Body Lead for Patient & Public Engagement
Julie Hall (JHa)	Governing Body, Nurse Member
Julie Hesketh (JHe)	Director of Quality & Governance
Dr Tim Hodgson (TH)	Clinical Locality Lead (West Merton)
Matthew Videan (MV)	Contracts Manager (on behalf of John Atherton)

1.	<p><u>Quality and Performance Report</u></p> <p>Areas of Good Performance:</p> <ul style="list-style-type: none"> <li>- Ambulance Waits: Merton patients 86.7%, against target 75%</li> <li>- Diagnosis rate for dementia: Merton patients 86.6%, against target 67%</li> </ul> <p>Delayed transfers of care: Merton patients 3.2% per 100,000 per population, better than London average</p> <p>Areas of Challenged Performance:</p> <ul style="list-style-type: none"> <li>- Patients admitted, transferred or discharge from A&amp;E within 24 hours: Merton patients 87.8%, against target 95%</li> <li>- 5 out of 10 cancer indicators did not meet target</li> <li>- IAPT Recovery Rate: Merton patients 46.9%, below target</li> </ul> <p>Questions and comments raised by the Committee</p> <ul style="list-style-type: none"> <li>- Possible involvement of independent sector to alleviate cancer waits</li> <li>- Concern at low level of people with Learning Disabilities receiving annual health checks from GP</li> <li>- Percentage of patients seen by CLCH within 20 days of receipt of referral - Merton patients 69.7%, against target 90%. Performance note had been issued with agreed deadline for clearing back log of end of July.</li> <li>- The issue of the absence of CCG clinical representation at CQRG meetings.</li> </ul> <p>The Committee agreed the following actions:</p> <ul style="list-style-type: none"> <li>- That the Committee should have sight of, at least, summaries of all CQRG meetings</li> <li>- That a CQRG for Primary Care should be established</li> <li>- That the CCG has clinical representation on all CQRG meetings</li> </ul>
2.	<p><u>Section 11</u></p> <p>The Merton Safeguarding Children Board had requested partner agencies to submit a Section 11 self-assessment against 8 key standards. The completed audit will be the subject of a Challenge Panel and then submitted. The Committee noted the audit as robust and covering all relevant areas of responsibility.</p>
3.	<p><u>Quality Directorate Update</u></p> <p>The update covered the following areas:</p> <ul style="list-style-type: none"> <li>- Quality Accounts</li> <li>- That LBS had placed a suspension on the Cheam Cottage Nursing Home</li> </ul>

	<ul style="list-style-type: none"> <li>- Merton Expert Patients' Programme The Committee requested regular reports on the EPP's progress</li> <li>- NHSi Patient Safety: The review report had been published providing valuable feedback</li> </ul>
4.	<u>CHC Update</u> <ul style="list-style-type: none"> <li>- The original deadline for clearing the backlog had slipped from September to December 2017</li> <li>- Better Care Fund discussions had agreed that a dedicated social worker be seconded to the CHC Team</li> <li>- All PUPOC assessments completed by deadline of March 2017</li> </ul>
5.	<u>IAPT Progress Report</u> <ul style="list-style-type: none"> <li>- Recovery rate declined in Q4 to 50%</li> <li>- In April-May ye number of patients entering treatment significantly lower than Q4 in 2016/17</li> <li>- Patient approval of actual service was 96%</li> </ul>
6.	<u>Ravensbury Park GP Practice – Delivery against CQC Action Plan</u> NHSE met with the Practice in June to review progress. Most policies had been updated and the Practice appears to be making satisfactory progress.



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**Clinical Quality Committee  
Meeting - 08.08.17**

<b>Members Present:</b>	
Clare Gummett (CG) (Chair)	Governing Body Lead for Patient & Public Engagement
Julie Hall (JHa)	Governing Body, Nurse Member
Julie Hesketh (JH)	Director of Quality
Dr Tim Hodgson (TH)	Clinical Locality Lead (West Merton)
Dr K Worthington (KW)	Clinical Locality Lead (East Merton)

1.	<p><u>Quality and Performance Report Month 2</u></p> <p>Areas of Good Performance:</p> <ul style="list-style-type: none"> <li>- Ambulance Waits: Merton patients 82.1%, against target 75%</li> <li>- Delayed transfers of care: Merton patients 3.2% per 100,000 per population, better than London average</li> </ul> <p>Areas of Challenged Performance:</p> <ul style="list-style-type: none"> <li>- Patients admitted, transferred or discharge from A&amp;E within 24 hours: Merton patients 88.3%, against target 95%</li> <li>- 5 out of 10 cancer indicators did not meet target</li> <li>- IAPT Recovery Rate: Merton patients 49.3%, below target</li> </ul> <p>Questions and comments raised by the Committee</p> <ul style="list-style-type: none"> <li>- At recent Members' AGM doubts raised about validity of cancer waits for 2016/17</li> <li>- The Committee reiterated its concerns regarding IAPT targets not being met. CCG monitoring of this issue had been increased</li> <li>- Increase in suicide rates reported by MH Trust was noted</li> </ul> <p>The Committee agreed the following actions:</p> <ul style="list-style-type: none"> <li>- LL to review cancer waits data</li> <li>- JHe to make enquiries regarding MH Trust suicides</li> </ul>
2.	<p><u>Risk Register – Quality</u></p> <p>The highest scoring risks were reviewed. CE would be reviewing the register with the risk owners for any necessary updates.</p>
3.	<p><u>Quality Directorate Update</u></p> <p>The update covered the following areas:</p> <ul style="list-style-type: none"> <li>- Serious Incidents: 3 incidents had been raised involving Chelsea &amp; Westminster Trust; SWL &amp; St George's MH Trust; Rowans GP Surgery.</li> <li>- Activity: SWL Integrated Urgent Care CQRG feedback to be included in Quality and performance Report; review of referral to treatment at Queen Mary's Hospital identified issue similar to main St George's site.</li> </ul>
4.	<p><u>Children's Community Services Update</u></p> <ul style="list-style-type: none"> <li>- The Committee requested a focussed discussion on Children's Services for its September meeting with CLCH to attend.</li> </ul>

5.	<p data-bbox="304 194 624 226"><u>Primary Care Q1 Report</u></p> <ul data-bbox="352 230 1362 421" style="list-style-type: none"><li data-bbox="352 230 1222 262">- Extended Access Local Incentive Scheme went live on 1<sup>st</sup> April</li><li data-bbox="352 266 1362 327">- Hub provision current average utilisation rate 60-70%, patient feedback is very positive</li><li data-bbox="352 331 1350 421">- PMS review for Merton approved by the Primary Care Commissioning Committee in July. To be followed to discussions with Practices and sign off by 1<sup>st</sup> October.</li></ul>
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