



WMQRS BOARD MEETING

Date: 2nd December 2013

3.30pm - 5.30pm

Location: Annex Room, St Chad's Court, 213 Hagley Road, Edgbaston, Birmingham B16 9RG

AGENDA

Time:

1.	Apologies for absence						
2.	Notes of the teleconference held on 16 th September 2013 Enclosure 1						
3.	Actions and matters arising from the last meeting Enclosure 2						
4.	Review Programmes: Progress Report	Enclosure 3					
5.	WMQRS: 2014/17	Enclosure 4					
6.	Financial Report	Enclosure 5					
7.	Quality Director	Enclosure 6					
8.	Any other business						
9.	Date of next meeting: 28 th March 2014, 10am – 12pm						

BOARD MEETING DATES FOR 2014:

1st July 2014, 1pm – 3pm 24th September 2014, 10am – 12pm 12th December 2014, 10am – 12pm

ENCLOSURE 1 NOTES OF THE TELECONFERENCE HELD ON 16TH SEPTEMBER 2013

Present: Simon Hairsnape (Chair), Nick Flint, Beryl Nock, David Orme, Rob Courtney-Harris, Paul Martin, Roger Stedman, Richard Kirby, Salma Ali, Noreen Dowd, Jane Eminson

Apologies for absence: Sandy Brown, Jane Chapman, Steve Washbourne, Sue Doheny

In attendance: Sarah Broomhead

- Simon Hairsnape welcomed Noreen Dowd to the WMQRS Board and confirmed that the WMQRS Establishment Agreement had been changed to include a Clinical Senate and Networks representative on the Board. Noreen told the Board that she would soon be taking up the post of Acting Chief Operating Officer of Wolverhampton CCG and Anna Morton would be replacing her at the Clinical Senate and Networks.
- The notes of the meeting on 16th July were agreed as a correct record.
- 3 Simon queried whether any action needed to be taken to replace the patient members on the Board who had resigned. Jane Eminson confirmed that the Board still had three patient members covering two places on the Board and suggested that no action was required at this stage. The Board agreed not to take any action at this stage.
- 4 All actions from the last meeting had been completed or were to be considered elsewhere on the agenda.

WMQRS Principles and Approach

The Board discussed the handling of any immediate risks identified during commissioned reviews. The Board agreed that, as part of the agreement for commissioned reviews, the organisation concerned should accept responsibility for dealing with any immediate risks which arise and inform WMQRS of action taken. Only in exceptional circumstances, such as serious issues where the organisation concerned was not planning appropriate action, should the LAT be informed.

Action: Jane to draft revised section and circulate to Board members for sign-off by email.

The Board discussed payment of travel expenses and honoraria to NHS staff members of the Generic Steering Group. The Board decided that recruitment without payment should be tried initially.

Review Programmes Progress Report

The Board noted the contents of the Progress Report and suggested that updates and Bulletins should include information about the slow progress with agreeing 2013/14 review topics.

Care of People with Long-Term Conditions - Draft Health Economy Checklist

The Board supported the production of the checklist, possibly with another name, and subject to any comments from the LTC Steering Group. Board members were asked to send any comments on the checklist to Jane as soon as possible. (jane.eminson@nhs.net)

WMQRS 2014/15

9 Simon reported that the funding proposal for 2014/15 and beyond had been considered by those CCGs present at a meeting in August. He would now send a letter to all CCG Accountable Officers formally requesting support, with the hope that this could be confirmed at the CCG Forum meeting in November 2013.

Action: Simon to write to CCGs

Jane to circulate funding proposal to Board members

Evaluation Reports

The Board approved the response to the Evaluation Reports' recommendations. Jane reported that WMQRS now had a Twitter account and publication of the Adult Haemoglobin Disorders Overview Report had been 'tweeted'.

Financial Report

The Board noted the contents of the Financial Report. The Board agreed that a response from Rob White should be chased. Simon asked that he be told of any delays in payments by CCGs. Carry forward of the unallocated income to 2014/15 was supported in principle. A mechanism for ensuring access to carried forward funding will be needed. If funding is secured for the WMQRS main proposal, the carry forward will be used to retain the Quality Manager and part-time Administrative Assistant.

Action: Jane to chase Rob White for a response

- 12 There were no other items of business.
- 13 The date of the next meeting will be 2^{nd} Dec, 3.30pm 5.30pm

ENCLOSURE 2 ACTIONS & MATTERS ARISING FROM LAST MEETING

Min.	Action / Matter Arising	Who	Progress
5	Draft revised section of WMQRS Principles and Approach document and circulate to Board members for sign-off by email.	JE	Revised sectioned circulated and agreed. Revised document published.
9	Write to CCGs formally requesting support for 2014/15 proposal	SH	Letter sent 20th September with responses requested by 31st October.
	Circulate funding proposal to Board members	JE	Circulated
11	Chase Rob White for a response regarding 2013/14 carry forward	JE	Chased 3.10 and 29.10

ENCLOSURE 3 REVIEW PROGRAMMES: PROGRESS REPORT

Purpose of Report:

This report updates the Board on progress with the WMQRS review programmes. Board comments and guidance are invited.

Key Points:

- Good progress is being made with some health economy reviews but several are still a long way behind schedule and some have not yet agreed the areas on which they would like WMQRS to work in 2013/14.
- The first Isle of Man review visit will take place on 26th November 2013.

Implications:	
Financial, Human Resources and Legal	No specific issues are identified.
Equality impact	WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.

Recommendations:

The Board is recommended to note the contents of this report.

REVIEW PROGRAMMES: PROGRESS REPORT

2012 /13 West Midlands Review Programme:

Care of Adults with Long-Term Conditions (LTC) and Children and Young People with Diabetes

The '20 Questions for Health Economies' discussed at the last Board meeting has now been circulated to health economies.

2013/14 West Midlands Review Programme:

- Progress with the 2013/14 review programme has continued to be slow in some parts of the region. Table 1 summarises the position and more detail is available for Board members on request. The following progress since the last Board meeting may be of interest:
 - a. Three review visits have taken place (Walsall: critically ill children, urgent care and critical care;
 HEFT: critically ill children; Birmingham: Speech and language therapy services for children and young people)
 - b. Two more critically ill children visits (George Eliot Hospital and UHCW) and a review of care of people with acquired brain injury will take place in December. Quality Standards for the care of people with acquired brain injury have been circulated for comment.
 - c. Visit dates for January to March are beginning to be finalised.
 - d. Quality Standards for imaging, theatres and anaesthetics and critical care (V3) have been finalised.
 - e. A workshop on 'Pressure Ulcers Beyond the Basics' is being held on 29th November.
 - f. Formative review visits looking at care of frail older people in several health economies are being planned for March 2014.
 - g. A workshop looking at best practice for the discharge pathway and involving several health economies is being held on 11th December.
 - h. Interest in reviews of CAMHS services is growing.

Commissioned Reviews

3 Guernsey Renal Services: This report has now been finalised.

4 Isle of Man

The first Isle of Man review visit will take place on 26th November, looking at the Emergency Department, theatres and anaesthetics, and critical care. The first meeting of the Isle of Man Programme Board took place in October and the overall programme of reviews is now under discussion. The list of services identified is now longer than can be accommodated within a three year programme and the Programme Board will need to consider whether the review programme should be extended or the level of detail of the reviews reduced.

The contract with the Isle of Man has not yet been agreed and is awaiting a response from Sandwell and West Birmingham Hospitals NHS Trust legal advisers and clarification of some details by WMQRS.

5 Haemoglobin Disorders

WMQRS will be represented at a presentation to the All Party Parliamentary Group on Haemoglobin Disorders on 25th November. Discussions are now taking place with the UK Forum on Haemoglobin Disorders about a joint adult and children's review programme over a two to three year period. [This was supported by the WMQRS Board in July 2013]

WMQRS Standards

6 Table 2 gives the latest compliance with WMQRS Quality Standards.

Table 1: 2013/14 WMQRS West Midlands Reviews – Position as at 21st November

Key:	
Х	Review topic suggested by CCG or Trust but not yet discussed
X	Planning meeting or review visit organised
Х	Awaiting health economy confirmation or response on some issue
*/**	* Have requested review be deferred till 2014 or ** 2014/2015

Health Economy	No. topics	Acquired brain injury	CAMHS	Chronic pain	Community Orthopaedics	Community services / hospitals	Critically III children	Day case theatres	Dementia	Discharge pathway	District nursing	Frail elderly (various aspects)	Long Term Conditions	Maternity (various aspects)	Mental health services	Ophthalmology	Paediatric Community or LTC	Paediatric surgery	Pre- and post-surgery pathways	Primary care	Speech & Language	Trauma	Urgent care
North Staffordshire	6		Х							Х		Х											
South Staffordshire (West)	6											Х											
South East Staffordshire & Seisdon Peninsula	3											х											
East Staffordshire	3						Χ	Х				Х										Х	
Shropshire and Telford & Wrekin	9			Х	**	Х	*					Х					**						X*
North Warwickshire	3						Χ							Χ		Х							
Coventry and Rugby	6						Χ					Х		Х	х	Х							
South Warwickshire	3						Χ							Х		Х							
Worcestershire	12						Χ			Х							Х						
Herefordshire	3	Х	Х	Х																			
Dudley	6						Χ					Х		Χ									
Wolverhampton	3		X				Х				Х				Х								
Walsall	3						Χ																Х
Sandwell and West Birmingham	6		X			X	Χ							X	X								
South and Central Birmingham	3						Χ											Χ			Х		
North & East Birmingham	9						Χ		X	Х													
Solihull	3						Х		Χ	Χ					Χ					Χ			

Table 2: Compliance with WMQRS Standards

Visit	Visit date	IR letter issued within 5 working days	IR response received	IR response received within 5 working days (10 days post-visit)	IR response addresses issue raised	All IR actions completed within 15 working days or less	Draft report to reviewers within 10 working days	Draft report to HE within 20 working days	Report considered by Steering (or QA) Group within 35 working days of receiving HE comments	Final report issued within 85 working days	Notes
Wolverhampton (CIC) Pilot	11 Jun 13	Υ	Υ	N	Y	N	Υ	Υ	Υ	Υ	IR response from Trust was received 17 days late. IR letter was sent sixteen days late to LAT.
Guernsey (Renal)	23 Aug 13	N/A	N/A	N/A	N/A	N/A	N	Υ	Υ	Υ	Report was one day late to reviewers
Walsall Healthcare NHS Trust (CIC, UC)	2 Oct 13	N/A	N/A	NA/	N/A	N/A	Y	Υ	N/A	N/A	
Heart of England NHS Foundation Trust (CIC)	3-4 Oct 13	N/A	N/A	N/A	N/A	N/A	Y	N	N/A	N/A	Report was one day late to health economy
Birmingham Community Healthcare NHS Trust (S<)	8 Oct 13	N/A	N/A	N/A	N/A	N/A	Y	Υ	N/A	N/A	
	No. Yes	1	1	0	1	0	4	4	2	2	
	No. No	0	0	1	0	1	1	1	0	0	
Tot	tal Yes + No	1	1	1	1	1	5	5	2	2	
	% YES	100	100	0	100	0	80	80	100	100	

ENCLOSURE 4 WMQRS 2014/17

Purpose of Report:

This report summarises the position on discussions with CCGs about support for WMQRS core costs for 2014/17.

Key Points:

- The proposal for three year (reduced level) core funding for WMQRS has been circulated to CCGs with a request for a response by 31st October. Table 1 summarises the responses received by 21st November.
- A meeting of the West Midlands CCG Forum in late November will discuss the issue of future funding of WMQRS. A verbal update on the position will be given at the Board meeting.
- The level of positive responses is sufficient for WMQRS to continue but not yet sufficient to maintain WMQRS current staffing. The level of negative responses could, however, be accommodated at least for 2014/15 (see Agenda Item 6: Financial Report).
- Based on the responses received so far, it is reasonable to consider how WMQRS could work for the next three years. Particular points which will need to be addressed are as follows:
 - a. Better ways of liaising with health economies over their review programme are needed. WMQRS already has 'key contacts' in each CCG and Trust but these responsibilities need to be clarified and the importance of agreeing a programme as early as possible and by the end of June 2014 must be stressed.
 - b. The potential for WMQRS to work with (and possibly obtain funding from) NHS England commissioners of primary care and specialised services and the West Midlands Clinical Senate and Networks should be explored.
 - c. A review of WMQRS staffing will be needed (depending on the final funding position).
 - d. Confirmation of hosting arrangements will be needed. The current arrangement with Sandwell and West Birmingham Hospitals NHS Trust costs £70,400 and the WMQRS accommodation is very poor and the Trust is not taking advantage of the mutual benefits expected from hosting the service. WMQRS does not yet have a formal hosting agreement. An alternative host organisation is not, however, obvious and moving host could involve significant disruption. Being hosted by an NHS organisation, and probably by a provider organisation, is crucial to the collaborative, NHS-based basis for WMQRS's work.
 - e. Sandwell and West Birmingham Hospitals NHS Trust is holding £208,000 against the redundancy liabilities for WMQRS staff. It is not realistic to expect the Trust to continue to carry forward this funding for a further three years. It may be feasible to negotiate that the Trust takes over redundancy liability in exchange for the current level of funding.
 - f. The 'trading agency' model now being pursued is dependent on the ability to carry forward funding from one financial year to the next. If Sandwell and West Birmingham Hospitals NHS Trust is unable to guarantee this, an alternative mechanism or approach will be required.
 - g. The WMQRS *Principles and Approach* may need to be revised if all West Midlands health economies are not taking supporting the service.
- WMQRS has been approached by Sue Hill, Chief Scientific Officer, NHS England about the possibility of including a physiological measurement review programme (covering audiology, cardiac physiology, gastro-intestinal physiology and neuro-physiology within the WMQRS offer to health economies for 2014/15. This programme would use national Standards which have already been developed but would offer peer review visits to support implementation of these Standards and sharing of good practice. Scoping reports for this proposal will be available at the Board meeting. The Board's views on this are sought.

Implications:							
Financial, Human Resources and Legal	This paper has significant financial and human resources implications for WMQRS.						
Equality impact	WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.						

Recommendations:

- a. The Board is recommended to note the position on CCG funding for WMQRS core costs for 2014/17, including the verbal update and, depending on the final position, actions to be taken on points 4a to 4g above
- b. The Board is asked to decide in principle whether a physiological measurement peer review programme should be included in the 2014/15 offer to health economies.

Table 1 CCG responses on WMQRS core funding 2014/17

Accountable Officer	Agreement to Fund?	£	Main Comments
Dr Diane Reeves	Agreed	15,906	
Dr Barbara King	Declined	47,291	
Andrew Donald	Agreed	18,058	
			2 A long term workplan which is forward thinking and focusses on areas of service
			would be valuable to CCGs in the future.
Dr Steve Allen	Agreed	30,296	
			reasonably confident that all our reviews will be completed this year.
			2 Given the upheaval we have all gone through and the pressure our acute provider has
			been under, we are happy with the service.
Paul Maubach	No response	20,558	
Tony Bruce	No response	8,708	
John Wicks		11,910	Proposal still being discussed.
Dr David Hughes	Agreed	-	
Simon Hairsnape	Agreed	11,208	
Andy Williams	Agreed	34,634	
Rita Symons	Agreed	13,754	1 Concerned about delays in moving forward this year.
Paul Tulley		19,443	Proposal being discussed in November.
Dr Patrick Brooke	Uncertain	15,368	1 Need for clarity on regulatory landscape post Francis, Berwick and Keogh.
			2 Reviews not yet commissioned based on a structured prioritisation or needs process.
			3 Need for systematic links with CCG quality work.
			4 CCG management costs are under significant pressure
	No response		
	Agreed	· -	
	No response		
	_		Agreed to funding for 14/15
Salma Ali	<u> </u>	· -	
Andrea Greene	No response	11,982	
Helen Hibbs	No response	16,930	
Simon Hairsnape	Agreed	7,356	
Agreed	11	192,835	
Declined	1	47,291	
Still considering	2	31,353	
Uncertain	1	15,368	
	Dr Diane Reeves Dr Barbara King Andrew Donald Dr Steve Allen Paul Maubach Tony Bruce John Wicks Dr David Hughes Simon Hairsnape Andy Williams Rita Symons Paul Tulley Dr Patrick Brooke Gill Entwistle Simon Trickett Dr Andrew Bartlam David Evans Salma Ali Andrea Greene Helen Hibbs Simon Hairsnape Agreed Declined Still considering	Dr Diane Reeves Dr Barbara King Andrew Donald Andrew Donald Agreed Dr Steve Allen Agreed Paul Maubach Tony Bruce John Wicks Dr David Hughes Simon Hairsnape Agreed Andy Williams Rita Symons Paul Tulley Dr Patrick Brooke Uncertain Gill Entwistle Dr Andrew Bartlam David Evans Agreed Andrea Greene Helen Hibbs Simon Hairsnape Agreed Agreed Agreed Andreed Agreed	Dr Diane Reeves Dr Barbara King Declined Andrew Donald Agreed 18,058 Dr Steve Allen Agreed Dr Steve Allen Agreed Agreed Agreed Agreed Agreed Agreed Dr Steve Allen Agreed Andy Williams Agreed Agree

ENCLOSURE 5 FINANCIAL REPORT

Purpose of Report:

This report updates the Board on the WMQRS core team's financial position.

Key Points:

- The WMQRS financial report is given below. CCG contributions for 2013/14 have all been received apart from two where invoices have had to be re-issued.
- The predicted end of year variance is an underspend of £102,000. This has arisen for three main reasons:
 - a. £57,400 was carried forward from 2012/13 in order to complete the 2012/13 review programme.
 - b. £39,000 will have been earned from commissioned reviews
 - c. Approximately £20,000 is expected to be credited to the WMQRS budget as a result of 2012/13 end of year errors. (NB. This is over and above the £42,600 not carried forward to 2013/14.)
 - d. Some non-pay underspend is attributable to delays in the 2013/14 review programme and a resulting underspend on travel, including for user reviewers.
- Pay costs for current WMQRS staff not included within the reduced core funding add up to £64,300. These costs and the shortfall resulting from the withdrawal of Birmingham CrossCity CCG could therefore, for the most part, be covered from the projected 2013/14 underspend if this can be carried forward to 2014/15.

Implications:	
Financial, Human Resources and Legal	This report has financial and human resources implications.
Equality impact	WMQRS review programmes improve quality of health services and reduce inequalities in access to and quality of care.

Recommendations:

The Board is recommended to note the contents of this report and to agree action to be taken in respect of the 2013/14 projected underspend.

Table 1 WMQRS Financial Position

INCOME					
Source		Annual Budget £	Income Year to Date £	Variance Year to Date £	Notes
Carry forward from 2012/13: Redundancy	Oct	208,000	0	0	
Carry forward from 2012/13: Completion of 2012/13 Programme	Oct	57,400	57,400	0	Budget is £42,600 less than carry forward initially agreed.
CCGs	Oct	381,100	351,390	29,710	Variance reduced from £206,088 in July. Contributions from South Warwickshire and North Warwickshire delayed due to re-issue of invoices to Arden CSU.
Guernsey	Oct	2,450	0	2,450	Invoice not yet raised
Isle of Man	Oct	36,597	0	36,597	Invoice not yet raised
Haemoglobin Disorders	Oct	0	0	0	
TOTAL		477,547	408,790	68,757	Redundancy funding excluded from Total

EXPENDITURE ¹							
Application		Annual Budget £	Budget Year to Date £	Spend Year to Date £	Variance Year to Date £	Notes	Projected End Year Variance £
WMQRS Pay	July	300,050	103,693	121,567	- 17,874		
	Oct	304,050	178,370	169,267	9,103	Monthly profile needs revision	0
WMQRS Non-pay	July	138,450	33,733	31,749	1,984		
	Oct ³	134,450	64,200	47,962	16,238	Not undertaken as many reviews as predicted, therefore less associated costs	43,000
TOTAL ALLOCATED		438,500	242,570	217,229	25,341		43,000
WMQRS unallocated income		39,047					39,047
							20,000 2
TOTAL		477,547					102,047

¹ Excludes Isle of Man reviewer costs which are recovered in total and therefore affect cash flow but not the WMQRS income and expenditure position

 $^{^{2}}$ Potential additional credit due end year errors 12/13 - to be clarified

³ Annual budget: 4k moved from non-pay to pay

ENCLOSURE 6 WMQRS QUALITY DIRECTOR

Purpose of Report:

The purpose of this report is to ask for the Board's views on the position of the Acting Director of WMQRS.

Key Points:

- 1 WMQRS has had an 'Acting Director' since it was formed in 2009. The WMQRS Board initially agreed that Jane Eminson, having set up the service, should be its Acting Director for a period of one year. By the time the Board came to discuss the issue again, the proposal to abolish PCTs and establish CCGs was being discussed. The WMQRS Board therefore agreed to continue the 'Acting' arrangement until the future of WMQRS was clarified because advertising for a Director without a reasonable period of assured funding would have been unlikely to attract a high calibre candidate.
- If WMQRS has sufficient funding to continue for three years (see agenda item 5) it is appropriate for the Director to be a substantive appointment. As Jane has been carrying out the responsibilities of the post since 2009, the Chair of the WMQRS Board is proposing that a competitive selection process would not be appropriate and her appointment should be made substantive.

Implications:	
Financial, Human Resources and Legal	This report has human resources implications for the post of Director of WMQRS. Any action taken as a result of decisions on this issue will be expected to be within the existing budget for the Director post, including any adjustment required to take account of the level of WMQRS funding for 2014 to 2017. There are therefore no financial implications.
Equality impact	No specific implications have been identified.

Recommendations:

The Board is recommended to agree:

- a. A competitive selection process for the post of Director of WMQRS would not be appropriate
- b. The Chair of the WMQRS Board should negotiate with Sandwell and West Birmingham Hospitals NHS Trust and Jane Eminson with the aim of agreeing a three year contract for the role of Director of WMQRS within the funding available for WMQRS.