



IPSWICH & EAST SUFFOLK CCG Governing Body
ACTION LOG: 22 January 2019 (updated)

MINUTE	DETAILS	ACTION	BY WHOM	TIMESCALE/UPDATE
Meeting of 25 September 2018				
18/088	Ipswich and East Suffolk Alliance Transformation Fund	The Governing Body approved the bids as recommended by the Transformation Fund Panel and set out within paragraph 2.4 of the report and welcomed the receipt of a further updates in six months.	Richard Watson	08/03/19 - a briefing will come to the May GB with proposal for 2019-20
Meeting of 27 November 2018				
18/109	Integrated Performance Report	<p>The Chief Officer and Chief Operating Officer agreed to review communications to practices.</p> <p>The End of Life Programme Board had been advised that there had been 10% less deaths within Ipswich Hospital compared to the previous year. The Secondary Care Doctor queried any effect on the hospital's mortality rate and the Chief Nursing Officer agreed to investigate and report back outside of the meeting.</p>	<p>Ed Garratt/Maddie Baker-Woods</p> <p>Lisa Nobes</p>	<p>12/03/19 - links to Governing Body papers are made in the Weekly Inbox to practices. Specific updates are provided on services and issues, as required. An overall report to practices on system performance is made at each AGM.</p> <p>18/03/19 - The medical director presented the Learning from Deaths, Mortality and HSMR report at the last ESNEFT QCPM. MD responded that the crude mortality rates for the hospital are still significantly higher than national and 10% reduction in hospital deaths had not had an impact on the Trust's mortality rate. There are 11 active CUSUM alerts on the dashboard, 3 of which have triggered externally. A clinical review is being undertaken for patients in the group 'acute bronchitis' following an external alert from Imperial College. Coding reviews have been undertaken on both sites, with small adjustments being made to admitting diagnosis and co-morbidities, including trying to pick up 'palliative care' being coded as a co-morbidity. More work needs to be done around identification of end of life/last year of life and DNACPR forms. The aim is to support patients with effective symptom control so that the patient can stay at home albeit (extreme</p>

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				breathlessness is difficult to manage). Inpatient death from metastatic disease is also a statistical outlier (at Colchester site).
Meeting of 22 January 2019				
19/006	Chair/Chief Officer Action – 01/2018 – Winter Food	The Governing Body endorsed the Chair and Chief Officer Action 01/2018 and requested that it be presented with evaluation feedback to its July 2019 meeting.	Maddie Baker-Woods	July 2019
19/008	Felixstowe Minor Injury Unit (Miu) Re-Provision and Frailty Offer	The Governing Body subsequently approved; <ul style="list-style-type: none"> 1) the proposal, as set out within the report, ONLY insofar as it related to the reduction of hours of the MIU and the frailty offer. 2) that the Task and Finish Group meet to carry out further work in respect of access which should include working with practices in relation to development of an 'on the day' access hub. 3) that the issue of access be discussed further with NHS England. 4) that a further report be presented to the March 2019 meeting. 	Richard Watson	See agenda
19/012	Integrated Performance Report	In light of concern at ESNEFT's overall performance, it was queried whether the CCG's Governing Board Assurance Framework (GBAF) might require review. The Chief Corporate Services Officer agreed to investigate.	Amanda Lyes	15-03-19 - ESNEFT GBAF risk included in COT paper w/c 4/2/19. The risk has been added to the GBAF. Complete.