

THE SHREWSBURY AND TELFORD HOSPITAL NHS TRUST

Outcome Summary of Quality & Safety Committee Meeting

Wednesday 23rd November 2011, 14.00

MINUTES

Present:	Peter Vernon (Chair)	Non Executive Director
	Vicky Morris	Director of Quality and Safety/Chief Nurse
	Ashley Fraser	Medical Director
	Martin Beardwell	Non Executive Director
	Simon Walford	Non Executive Director
	John Davies	Trust Chairman
 In attendance:	 Sarah Bloomfield	 Deputy Chief Nurse
Secretary	Bergitte McGovern	Executive Assistant to Director of Quality and Safety

Quality & Safety

Pressure sores

The Director of Quality and Safety/Chief Nurse reported that one of her main focus areas continues to be pressure ulcers and she had had discussions with the Chief Executive regarding how to escalate the management of these RCAs. There had been 1 grade 4 pressure ulcer in September, 1 grade 3 and 1 grade 4 pressure ulcer in October and a further grade 3 and grade 4 pressure ulcer in November 2011.

The Director of Quality and Safety/Chief Nurse had called for a formal Executive Review of Pressure Sores meeting and asked all the Ward Managers and Matrons from the wards involved to attend. They were requested to bring with photographic evidence of the cases, along with documentation. As an outcome from the meeting the Ward Managers involved were requested to revise their RCAs and resubmit them.

The Director of Quality and Safety/Chief Nurse informed the committee that the wards have all been supplied with an 'Episode of care' tool which highlighted any lasting harm done to a patient, what treatment they should have received and what treatment they did receive. The Director of Quality and Safety/Chief Nurse also stated that if a pressure ulcer was sustained on any of the wards focused on at the meeting and the same staff were involved a performance review would be undertaken.

Falls

There were a total of 134 falls in October 2011, which is equal to the total falls recorded in September 2011. There is no longer a significant downward trend in the number of falls and the Director of Quality and Safety/Chief Nurse therefore plans to increase the performance scrutiny on patient falls. The lead for the falls group will now be the responsibility of the Patient Safety and Health and Safety Team Managers and the Director of Quality and Safety/Chief Nurse will be requesting a project plan from them to outline how they will be taking things forwards.

VTE

The draft rate of reported VTE assessments across the Trust for October 2011 was 91.8%. The Medical Director reported that the actual rate had been confirmed as 91.4%. VTE figures were improving and the amount of variation was decreasing.

Patient Safety - Coroners Court

The Director of Quality and Safety/Chief Nurse was recently called to attend Coroners Court. A Rule 43 was not issued, however, a number of cases are still due and it is crucial that the Trust can evidence that it has followed through with actions recommended as a result of RCAs. The Director of Quality and Safety/Chief Nurse informed the committee that she would make sure all outstanding Rule 43 actions had had their RCAs followed through with and that there were no outstanding actions. The background checks would be done in the next 2 weeks and the Director of Quality and Safety/Chief Nurse proposed presenting her findings at the Quality and Safety Committee meeting in January 2012.

Quality Improvement Strategy

The Director of Quality and Safety/Chief Nurse informed the committee that the timetable had been revised and condensed.

The first Quality Improvement Strategy workshop had been held earlier on the morning of the 23rd November with the Patient Experience and Involvement Panel and some matrons. The feedback had been positive. A separate workshop was planned with Ward Managers and Matrons on the 29th November and a further workshop was planned with Trust Board members and external stakeholders for the 1st December. By January clear trends and themes would be evident which would be included in the draft Quality Improvement Strategy.

Patient Safety

Infection Control Report – Quarter 2

The Infection Control Report was provided to the committee for information. The Chair requested the Director of Quality and Safety/Chief Nurse thank Dr Patricia O'Neil for the quality of the report.

Risk and Assurance

CQC Draft Reports (for information)

The Director of Quality and Safety/Chief Nurse informed the committee that the CQC draft reports had been provided for information and that the CQC had received feedback on the report from the Director of Quality and Safety/Chief Nurse. The feedback was being considered and the reports were being updated accordingly and would be available on the CQC website.

Routine Matters

Committee Workplan

The Chair feedback that he thought the workplan provided a useful format and should be implemented for 2012/13.

Date and time of next meeting:

The next meeting was scheduled for the 19th January 2012 at 14.00 in Syndicate Room 5, SECC.