

# **Quality and Safety Committee Summary**

# The Board are asked to receive and note the Quality and Safety Committee Chair's report of the key points from the meeting that it wishes to escalate to the Board

## Key points from the meeting held on 20/11/2019

### **Board Assurance Framework**

The Committee reviewed the Board Assurance Framework for Assurance on the following risks: If we do not work successfully in partnership with the local health system to establish effective patient flow through well-staffed beds, then our current traditional service models will be insufficient to meet escalating demand (BAF 1134)

There was encouraging evidence of system working with respect to stroke pathways which develop community rehabilitation capacity and the identification of step down beds. There remain, however, real system challenges with respect to unscheduled care and the need to redesign 'end to end" pathways for some services (for example urology). This will require the active participation and leadership of SATH clinicians.

## Assurance: Moderate

We need to implement all of the 'integrated improvement plan' which responds to CQC concerns so that we can evidence provision of outstanding care to our patients (BAF 1533)

The programme was not formally reviewed at November's meeting although the committee are assured that good progress is being made with many elements complete or ahead of schedule

### Assurance: Moderate

Our maternity services need to evidence learning and improvement to enable the public to be confident that the service is safe (BAF 1204)

Committee members visited the Maternity unit prior to the formal meeting. We found that staff were determined to provide assurance with respect to the safe, high quality care that they are delivering. They have great concerns that the current media publicity will cause anxiety for people who are currently pregnant or considering pregnancy as well as affect staff morale. Over recent years there have been significant changes to the service with improvements in staffing numbers, proactive approaches to ensuring that foetal heart rate monitoring is delivered according to best practice as well as proactive approaches to supporting women to identify and act on reduced foetal movements and to help reduce the numbers of pregnant smokers. Staff acknowledge that there may have been historic issues with the service and that there will be lessons learned from this. There is a very strong desire, however, to demonstrate the quality of their service. Examples of this are the recent CNST review which placed the service in the lowest risk category for NHS Resolution and the award of Diamond status to wards within the maternity unit.

# Assurance: High

#### Meeting with Support Services Care Group

The Q&S Members were delighted to hear of the imminent opening of the CT scanner on the PRH site, a matter that has been tenaciously pursued by the committee. Members were also delighted to here that there is now a multidisciplinary nutrition team in place, closing another previously escalated issue by Q&S to the Board.

It is striking that a number of risks identified by the care group relate to the requirement to introduce or upgrade information technology to deliver safer care and better surveillance of clinical activities

The care group reported impressively on staff engagement, training, recruitment activities, external accreditation and quality improvement

Assurance: High

Completed by:	Dr David Lee Chair of Quality and Safety Committee
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