

Quality and Safety Committee Key Issues Report

Report Date: 21 st March 2020	Report of: Quality and Safety Committee
Date of last meeting: 18 th March Note that this was a virtual meeting	Membership Numbers: 8 The meeting was quorate in line with its Terms of Reference
1	Agenda The Committee considered an agenda which included the following: <ul style="list-style-type: none"> • Board Assurance Framework Risks • Covid-19 response update • A report on community service developments • CQC well led update • CQC section 31 update • Maternity CNST year 3 • Learning from Deaths Quarterly Update • Investigations into Falls in Hospital • Adult Safeguarding Action plan • Quality, Patient Safety and Governance Report The Committee considered reports from <ul style="list-style-type: none"> • Clinical Governance Executive • Infection Prevention Control • Operational Risk Group
2a	Alert The Committee wish to alert members of the Board that: <ul style="list-style-type: none"> • Following reports of excess mortality figures linked to patients who sustained a fracture neck of femur, the Committee will monitor the Trust's response to this. A clear action plan is required • The development of community service to reduce hospital demand and to manage more patients appropriately within the community is proceeding slowly and has not yet reached a point where it is likely to have any significant impact on hospital services or assist patient flow
2b	Assurance The Committee wish to assure members of the Board that: <ul style="list-style-type: none"> • With respect to COVID-19 the Trust has taken appropriate actions in line with national guidance. Routine elective surgery has been cancelled and access to the hospital sites restricted through reducing visiting times and reducing access points. There has been an effective community response in facilitating discharges to ensure bed availability is improved. Reports to the centre are in place and a "command centre" has been established. Work is ongoing to develop contingencies to expand the staffing and ICU capacity. • The Quality, Safety and Governance report has been evolving over recent months. The Committee considered this month's report to be of an excellent standard with a helpful summary and well displayed date
2c	Advise The Committee wish to advise members of the Board that: <ul style="list-style-type: none"> • The Committee wish to strongly endorse proposals to expand the number of staff within the clinical governance support function. • There is a risk to adult safeguarding training created by the response to COVID-19 that needs to be recognised, tracked and recovered.

		<ul style="list-style-type: none"> The Maternity CNST year 3 criteria and the Trust's current self assessment against them show areas of compliance and confidence but other areas where work is required to demonstrate compliance 										
2d	Review of Risks											
<p>a) The Committee reviewed the Board Assurance Framework for Assurance on the following risks:</p> <ul style="list-style-type: none"> BAF 1204 - IF our maternity services do not evidence learning and improvement THEN the public will not be confident that the service is safe. <i>Level of assurance provided: Moderate</i> BAF 1134 - IF we do not work successfully in partnership, THEN our current traditional service models for both unscheduled and scheduled care will be insufficient to meet escalating demand. <i>Level of assurance provided: Low</i> BAF 1533 We need to implement all of the integrated improvement plan which responds to CQC concerns so that we can evidence to provision of outstanding care to our patients <i>Level of assurance provided: Low</i> <p>BAF 1746 If we do not have effective systems in place to consistently identify and escalate and manage patients with sepsis or other deteriorating conditions. THEN patients will not have the best outcomes possible <i>Level of assurance provided: Low</i></p> <p>b) In considering these risks, the Committee can confirm:</p> <p style="text-align: right;"><i>Check box to confirm</i></p> <table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">1 The BAF risks are up-to-date</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>2 The direction of travel stated is current and correct</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>3 The current risk rating is correct</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>4 There is no additional/updated content (controls/assurances) or new risk(s) that needs to be added?</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>					1 The BAF risks are up-to-date	<input checked="" type="checkbox"/>	2 The direction of travel stated is current and correct	<input checked="" type="checkbox"/>	3 The current risk rating is correct	<input checked="" type="checkbox"/>	4 There is no additional/updated content (controls/assurances) or new risk(s) that needs to be added?	<input type="checkbox"/>
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If there are changes to content or new risks identified the Committee recommends to the Board												
<p>BAF 1533 - IF we do not implement all of the 'integrated improvement plan' which responds to CQC concerns THEN we cannot evidence provision of improving care to our patients.</p> <p>Recommendation: With the new CQC report including the "well led" inspection it would be opportune to revisit this risk, reword it and ensure that appropriate action plans and assurance are in place</p>												
3	Actions to be considered by the Board	<ul style="list-style-type: none"> Report to be noted Support for the enhanced clinical safety /governance function Recognise the excellent Quality Safety and Governance Report Highlight the requirement for more /faster working at a system level 										
4	Report compiled by	<i>Name</i> <i>Chair of Committee</i> <i>Dr David Lee</i>	Minutes available from	<i>Name</i> <i>Committee Support</i> <i>Louise Allmark</i>								