Quality & Safety Assurance Committee Key Issues Report

Report Date: February 25th 2021		**Report of:** Quality & Safety Assurance Committee
Date of last meeting: 24th February 2021		Membership- The meeting was quorate as defined by its Terms of Reference
1	**Agenda**	The Committee considered an agenda which included the following: • Board Assurance Framework • CQC/ Section 29a Update • Quality Strategy • Safeguarding Key Summary Report • Infection Control Key Summary Report • Maternity Dashboard and maternity services • Nursing Workforce Report • PALS Complaints and Patient Experience • Getting to Good Highlights Report • Quality Indicators Integrated Performance Report The Committee considered reports from the following • Quality Operational Committee Report • Emergency Department Quality Operational Committee • Maternity Quality Operational Committee • NIQAM and RALIG joint report • Maternity Quality Operational Committee

2a	**Alert**	The Committee wish to alert members of the Board that:
		
		• The Quality Operational Committee has highlighted significant risks with respect to:
		   ○ Sustaining services linked to the diagnosis and treatment of cancer linked to the demands of the pandemic response
		   ○ Restoring elective surgery
		   ○ Critical Care Staffing
		
		• There is a reported increase in Mortality (RAMI) for November 2020 which is probably associated with a rise in COVID-19 cases – this is currently being investigated.
		• There has been an increase in falls this winter although not in reported falls with harm – this is also likely to do with COVID-19 and linked to increased acuity and possibly the necessity to exclude visitors.
		• QSAC was concerned to hear that the implementation of Badgernet (due end of March 2021) has been delayed due to the requirements of staff training on the system
		• QSAC believes that the Trust Board need assurance that the Trust have the capacity and capability to deliver technology implementation projects effectively. As patient safety. Quality of care and clinician experience should be enhanced through technology implementation this is of direct concern to QSAC. Assurances should include clear evidence that systems are

		interoperable and can produce the quality of data required to evidence high quality, safe care
		• Ensuring that clinicians are trained to level 3 Safeguarding remains a challenge, particularly in the current pandemic situation. This must be a focus of activity as pressures reduce. There are mitigations in place at present, but these do not represent a sustainable medium-term position
		• SATH has had its first case of MRSA Bacteraemia reported for 19 months. This is under investigation
2b	**Assurance**	The Committee wish to assure members of the Board that:
		• The evolution of RALIG and NIQAM and the high-quality report provided by these committees is very encouraging and improves assurance considerably
		• The initial tranche of overseas nurses is making an impact with evidence of high-quality nurses being recruited. Over 90% of the nurses successfully passed their OSCE assessment first time. There is now a second recruitment initiative being implemented and SATH are supporting the wider system in recruitment and OSCE assessment preparation
		• The maternity dashboard is developing impressively with evidence of successfully addressing adverse trends. This was demonstrated by a substantial improvement in the rate of post-partum haemorrhage following a planned response to a measurement indicating that the Trust was an outlier
		• The Trust intends to seek the removal of a number (11) of CQC's section 31 notices through a process of evidence submission demonstrating that issues have been addressed through appropriate and sustainable actions. This approach is supported by the CCGs
		• There are concerns about CT scanning capacity at least in the short term as the old scanner on the PRH site is decommissioned and there is a temporary reduction in mobile scanning capacity
2c	**Advise**	The Committee wish to advise members of the Board that:
		• The functioning of the Quality Operational Group needs review and the Medical Director and Director of Nursing are actively considering this and have the confidence of QSAC in ensuring that the committee is effective and "meshes" well with QSAC to provide assurance
		• Led by the Maternity Safety Champion, a subset of QSAC will undertake a review of the evidence available to support SATH's CNST submission
		• The new Divisions have been asked to put robust plans in place to address incident review backlogs that have developed. The backlog of DATIX reports had been eliminated but has re-accumulated.
		• Board members should note that the 12 hour wait figure in Accident and Emergency from 1.4.2021 onwards will be measured from the patient's arrival rather than from the "decision to treat". This provides a better reflection on patient experience but may lead to some increase in breaches during times of pressure
2d	**Review of Risks**	

For Quality & Safety Assurance Committee the strategic risks are:
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BAF Risk. The BAF framework presented shows an revised but evolving framework. The committee felt that the work presented showed a great improvement with respect to the description of risks and the detail available	**Assurance Level**
BAF 1 - There is a risk of prolonged and/or substantial failure to	Moderate

deliver standards of nursing care.		
BAF 2 - There is a risk of not meeting constitutional and National performance targets.	Low	
BAF 4 - There is a risk of the ability to recruit and retain staff	Moderate	
BAF 8 - There is a risk of not adequately meeting CQC Health & Social Care regulations	Moderate	
BAF 9 - There is a risk that the impact of COVID-19 continues to affect the Trust's quality outcomes and targets	Low	

a) In considering these risks, the Committee can confirm:

Check box to confirm

1	**The BAF risks are up-to-date**	☐
2	**The direction of travel stated is current and correct**	☒
3	**The current risk rating is correct**	☒
4	**There is no additional/updated content (controls/assurances) or new risk(s) that needs to be added?**	☒

If there are changes to content or new risks identified the Committee recommends to the Board
Recommendation: **The committee suggest that:**   • **BAF 2 should also include reference to CQC regulatory requirements**   • **There should be a separate BAF risk that refers to the delivery and assurance of high quality maternity services which includes the delivery of the maternity transformation plan and the recommendations from the independent review of services**   • **The BAF should re-instate a system risk that relates to the potential pressures on the Trust should partner organisations fail to engage effectively to prevent admissions where possible and to enable discharges to support patient flow**   • **The BAF should also reflect a previous workforce risk around engagement**

3	**Actions to be considered by the Board**	• Board to take assurance from the report		
4	**Report compiled by**	*Dr David Lee*	**Minutes available from**	*Melanie Eccles* *PA to Medical Director*