

Quality & Safety Assurance Committee Key Issues Report		
Report Date: 26 January 2023		Report of: Quality & Safety Assurance Committee
Date of last meeting: 25 January 2023		Membership- The meeting was quorate as defined by its Terms of Reference
1	Agenda	<p>The Committee considered an agenda which included the following:</p> <ul style="list-style-type: none"> • Safeguarding Assurance Committee Summary Report • Maternity Transformation Summary Report • Maternal and Neonatal Safety Champion Report • Maternity Dashboard and Key Summary report • Infection Prevention and Control Assurance Committee Key Issues Summary Report • Nursing, Midwifery and AHP Workforce Key Issues Summary Report • Getting to Good Committee Key Issues Summary Report • Delayed Reporting of Plain Films • Quality Operational Committee Summary Report • Quality Indicators Integrated Performance Report • CQC Update Report • Serious Incident Overview • PALS, Complaints & Patient Experience Quarterly Report • Health & Safety Management Policy • Legal Report
2a	Alert	<ul style="list-style-type: none"> • Mixed sex accommodation breaches - These continued to rise in November, due to unavoidable use of the assessment area at PRU for overnight stays due to capacity pressures. • Oliver McGowan Training - This mandatory training will have a significant impact on the Trust due to the timescales to complete training. • Smoking rate at delivery in December was 10.8%, despite the work carried out at booking. Achieving the target of 6% will require smoking cessation work with partners of pregnant women but this is currently an un-commissioned service.
2b	Assurance	<ul style="list-style-type: none"> • NPSA Oxygen alert received. Recommendations were supported in an emergency gases meeting and acted upon with completion of all actions during January. • National Maternity Survey 2022 Results - 121 Trusts have conducted the survey. SaTH has been noted to have statistically performed at a higher standard than other Trusts in various domains

		<ul style="list-style-type: none"> • Getting to Good: Corporate Governance - The key actions for the Board Assurance Framework (BAF) project have now been delivered. The project closure form and supporting evidence will be presented at ODG during January 2023, in order to complete and close the project. • CO monitoring at booking was 89.8% which is above the required figure for CNST compliance and is showing an improvement month on month.
2c	Advise	<ul style="list-style-type: none"> • BAF: QSAC agreed that BAF1 and BAF2 should be merged and agreed the reduction in risk level of BAF13 and will review whether it should be closed at the next quarter. Director of Nursing, Executive Medical Director and Interim Governance Consultant to meet and come back to QSAC with proposals, including whether there should be a separate Maternity Risk and if so in what form. • Plain Films: Delayed Reporting - The Radiology PACS system automatically sent reports to be outsourced after a specified period, but due to capacity issues in the outsourcing company reports built up in the holding area, and approximately 600 stayed there, invisible to the in-house team. All imaging for reporting has been reviewed within both the PACS and CRIS systems, from these two cases require follow up, a further third case being a serious incident due to a delay in diagnosis. All cases have been notified to the referrers for action. Mitigation to the risk of this occurring again has been put in place, by removing any invisible lists and enabling checks within the Radiology Systems Team, together with a process for escalating problems. • Ophthalmology - SI due to delay in treatment caused by flaws in paper-based appointments system which has resulted in a thorough review of the system to incorporate a safety net in a hybrid paper/electronic system. It was established that this was the only case. Learning has been shared widely with other teams.
3	Actions to be considered by the Board	<ul style="list-style-type: none"> • Mixed sex breaches - Work taking place across the Trust to improve the flow of patients through the organisation, as well as the timeliness of discharges from the organisation. This will free up beds earlier in the day for patients to be moved to. The acute medical floor has now opened, and this is starting to make a difference in improving acute medical pathways. The decision to use the assessment area overnight for patients is made with discussion from the Executive on call. • Oliver McGowan Training: Work is ongoing with Corporate Education and will be added to the Corporate Risk Register and an operational implementation plan will be shared with the Mental Health & LD Operational Group and Safeguarding Assurance Committee in February 2023.

		<ul style="list-style-type: none"> Smoking cessation: this issue is raised regularly with system partners and commissioners, given the correlation between smoking and low birthweight. 		
4	Report compiled by	<i>Rosi Edwards</i> <i>Associate NED QSAC</i>	Minutes available from	<i>Julie Wright</i>