

te:	Report of: Quality & Safety Assurance Committee (QSAC) All NED and Executive Director members, and regular Trust Officer attendees, were present. The Committee considered the following: Emergency Care Transformation Assurance Committee Key Issues Report Paediatric Transformation Assurance Committee Key Issues Report Safeguarding Assurance Committee Key Issues Report Maternity Transformation Assurance Committee Key Issues Report Maternity and Neonatal Safety Champions Key Issues Report Maternity Dashboard and Key Issues Report Infection Prevention & Control Assurance Committee Key Issues Report Nursing, Midwifery & AHP Workforce Key Issues Report Quality Operational Committee Key Issues Report Clinical Negligence Scheme for Trusts (CNST) Update Quality Indicators Integrated Performance, and Getting to Good, Reports Board Assurance Framework Q3 Richard Kennedy Report into obstetric services Serious Incidents / PSIRF Learning from Deaths and Medical Examiner / Bereavement Service Report Safeguarding Children and Young People Policy Quality Operational Committee Terms of Reference amendments
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ert tters of cerns, gaps in urance or key s to escalate to Board	 Industrial action: the Medical Director expressed concern about night cover during industrial action, particularly in medicine, and said that it was quite likely SaTH would need to apply for derogations (whereby certain staff members or groups of staff are exempted from strike action in order to provide the cover needed to care for patients at risk of harm), although the likelihood of obtaining these was uncertain. A joint communication to this effect had been sent to NHSE Midlands Region from the Medical Director, Director of Nursing, and the Acting Chief Operating Officer. The Committee heard of the increase in the number of Measles cases regionally (Birmingham and Black Country) and risk of hospital admission du to pyrexial; currently 68% of cases have resulted in admission. The Trust continued to work with ICB colleagues to ensure the Hospital Policy and Flov Chart, as per national guidance, are aligned with the ICB, including management of cases, contacts and staff.
	Carbapenamase-producing enterobacterales (CPE): the new policy, which follows revised national guidelines, was approved. A communications strategy and operational plan are in development.
surance itive urances and	 Emergency Care Transformation Assurance Committee: sustained improvements to Adult Initial Assessment following success in implementing "Perfect Week" changes. Initial assessment metrics at SaTH now sit above the regional and national averages (SaTH 63.3% / Regional 53.4%). This approach will now be extended to Paediatric Initial Assessment.
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		 The reasons for induction of cases in December, and w Care Bundle, offering IOL restriction, and with the Na deaths, and intrapartum br 	ere in line with the Saving for reduced fetal movement tional Ambition of reducin	g Babies Lives Version 3 ents and fetal growth
	Advise Areas that continue to be reported on and/or where some assurance	Following concerns raised regarding the Learning Disabilities Mortality Review (LeDeR), the Safeguarding Assurance Group have requested a deep dive into the service to understand next steps. This will take place in February 2024 and the outcomes will come to QSAC via the Quality Operational Committee.		
	has been noted/further assurance sought.	 Board Assurance Framework: The Committee agreed the proposal to increase the current total risk score of BAF risk 9 from 16 to 20, which brings it into the Trust's top risks, and to reduce the current total risk scores of BAF risks 3 and 11 from 16 to 12. QSAC also agreed that BAF risk 12 could benefit from joint executive leads, but ruled out having three executive leads. The Committee agreed the draft BAF for submission to the Audit & Risk Assurance Committee and Board of Directors. 		
		The Committee received the report by Richard Kennedy into obstetric services. This report, commissioned by the Medical Director, looked at senior medical workforce, guidelines, response to Ockenden, perinatal mortality data and the incidence of eclampsia. The report was positive and helpful and its recommendations are being acted upon. The Committee agreed that this report should come to the Board for information.		
		CNST: The Committee received reports on ATAIN (Avoiding Term Admissions into Neonatal Units) Q3 2023-24; Perinatal Mortality Review Tool (PMRT) Q3, 2023-24; and Transitional Care Audit Q3 2023-24.		
		 The Committee recommended the Safeguarding Children and Young People Policy for approval by the Board, subject to one minor amendment. 		
_	Actions Significant follow up actions	 Kennedy Report to be included in a future Public Board pack for information. Safeguarding Children and Young People Policy to be received at Board for approval. 		
3	Report compiled by	Ms Rosi Edwards Chair of Quality and Safety Assurance Committee	Minutes available from	Julie Wright Committee Support