

## Board of Directors Meeting in Public - Cover Sheet

<b>Subject:</b>	Quality Committee		<b>Date: 2<sup>nd</sup> December 2021</b>	
<b>Prepared By:</b>	Patrick McCormack – Head of Regulation and Deputy Head of Clinical Governance			
<b>Approved By:</b>	Barbara Brady NED			
<b>Presented By:</b>	Barbara Brady NED			
<b>Purpose</b>				
To provide a summary of the key discussion areas and decisions taken at the Quality Committee held on the 8 <sup>th</sup> November 2021			<b>Approval</b>	
			<b>Assurance</b>	
			<b>Update</b>	X
			<b>Consider</b>	
<b>Strategic Objectives</b>				
<b>To provide outstanding care</b>	<b>To promote and support health and wellbeing</b>	<b>To maximise the potential of our workforce</b>	<b>To continuously learn and improve</b>	<b>To achieve better value</b>
X			X	
<b>Overall Level of Assurance</b>				
	<b>Significant</b>	<b>Sufficient</b>	<b>Limited</b>	<b>None</b>
		X		
<b>Risks/Issues</b>				
<b>Financial</b>				
<b>Patient Impact</b>				
<b>Staff Impact</b>				
<b>Services</b>				
<b>Reputational</b>				
<b>Committees/groups where this item has been presented before</b>				
None				
<b>Executive Summary</b>				
<p>The most recent Quality Committee was held virtually on the 8<sup>th</sup> November 2021. The meeting was quorate there were no declarations of interest made and was chaired by Barbara Brady, Non-Executive Director. At the start of the meeting the previous minutes were agreed as accurate pending minor changes. There were 5 actions closed and updates received on those actions which are on-going.</p> <p>There were a number of items on the agenda for assurance and discussion. The report provides a brief summary of the items discussed but the Committee would like the Board to note the following key items;</p> <ul style="list-style-type: none"> <li>• Advancing Quality Programme</li> <li>• COVID-19 Harm Report included in the Patient Safety Committee update</li> <li>• External accreditation and regulation report update</li> <li>• BAF update</li> <li>• ICNARC audit and Trust COVID-19 data included in the Patient Safety Committee update</li> <li>• Draft Quality strategy</li> </ul> <p>An item for assurance presented was around the <b>Hospital Standard Mortality Ratio (HSMR)</b>. The summary paper was submitted to outline Trust position over the progress of work being completed to look into potential themes which had potentially led to the Trust above expectation HSMR. The group heard that Dr Foster now utilises wider data sets used in the calculation of HSMR, this as a</p>				

result, has potentially led to the Trust operating within expected HSMR limits. Work continues through the learning from deaths process and looks into any potential mortality outliers. Overall the Committee was assured by the content and presentation of the report.

Project Management Office representatives were invited to the Committee to present **QIA Oversight for Financial Improvement Programme**. The group heard the new QIA process introduced in August which sits under the governance of the Quality Committee. The Committee heard that the increase in the number of people involved in the sign off process has delayed the process; however changes in this process have been introduced to mitigate the delay. Discussion was held around the review for some of the QIA projects, these will need to be reviewed on a case by case basis as the content of the project will influence the timeliness of the review.

An item of assurance presented was the update from the **Patient Safety Committee** meeting held for September and October highlighted the discussion and items to note for the Committee. COVID-19 harms were discussed which generated further conversations around virtual based clinical assessments and patient feedback. An action was taken to bring back to the Committee a paper based around the discussion. The Committee acknowledged the work that the Trust have made in reducing the number of Wrong Blood In Tube Incidents identified. In addition to the update the Intensive Care National Audit and Research Centre (ICNARC) presentation was circulated. The Committee were assured by the COVID-19 information contained within the presentation and audit data and the assessment of the Trust response. The report and discussion provided significant assurance to the Committee.

The Committee received a report and verbal updates from the **Nursing, Midwifery and AHP Committee**, for assurance from September and October meetings. The birth rate plus tool suspension was brought to the attention of the group, this was due to data accuracy issues and training is being delivered to resolve the process. The vacancy rate for Band 5 Nurses has significantly been reduced (via recruitment) which was received positively by the group. The Committee was assured by the report its presentation and subsequent discussion.

The **Advancing Quality Programme** meeting update was presented to the Committee. This was the second meeting of the Advancing Quality Programme since it has been re launched in the Trust. Alongside the update the Committee were asked to review and agree closure of 3 CQC 'Should Do' actions identified at the 2020 assessment. All three are preliminary agreed to be closed on virtual review of evidence provided. The Committee were assured by the process of action review moving forward and the content of the update report.

The **Maternity Assurance Committee** update was received for assurance. The report was received for updates on the September and October meetings. The group heard there is an improving position on the safe staffing report for the inpatient maternity section. The Committee also heard that the overnight birthing service has been suspended to mitigate risk associated with community midwifery service; this has previously been highlighted to Board. Progress over the Trust response to Ockenden and the Continuity of Carer action plan formed part of the update, with the Ockenden preliminary results with the Trust gap analysis being 100% agreed. Overall the Committee was assured by the report and subsequent discussion which was generated.

**Maternity Incidents Report** was presented for assurance. It demonstrated a stable position for August and September with all incidents being classed as low or no harm. The committee was assured by the report and it will be reported onto Trust Board.

The first **Annual Accreditation and Regulation Report** was received and discussed by the Committee. The report outlined the Trust engagement with CQC over the past 12 months and the 'should do' and 'must do' actions from the 2020 assessment. The report also outlined other regulation and accreditation activities which take place in the Trust. Subsequent discussion was based around oversight of these activities and associated action plans. The Committee agreed that

assurance was sought from a process of oversight, though there is limited assurance in the completion of actions in line with meeting regulation requirements. Action has been taken to provide the Committee with an update at the next meeting.

The Committee were presented with the draft version of the new trust **Quality Strategy**. The current strategy expires at the end of 2021. The Committee were presented with the four campaigns and the proposed methodology of ensuring fresh focus of the strategy. Discussion was held around health inequalities and how the strategy can fit into a system wide delivery of outstanding care. The strategy will be brought back to the Committee in January for approval at the Council of Governors in February 2022.

The **Board Assurance Framework** was discussed and included reference to the Principal Risk 1 (PR1) Significant Deterioration in standards of safety and care and Principal Risk 2 (PR2) Demand that overwhelms capacity. PR1 was discussed and the group agreed that the strategic threat as outlined in the risk is held and there is potential that it has not substantially changed. This is a dynamic risk and will be reviewed at each of the Committee meetings to reflect the position of the Trust. Some wording changes were also agreed. Discussion on PR2 looked at the proposed changes circulated; it was updated to reflect the challenges for discharge of some patients and length of stay particularly around the home care sector. It was agreed however that this did not change the risk score but should be reflected in the BAF.