

Quality Chair's Highlight Report to the Trust Board of Directors

Subject:	Quality Committee	Date	Monday 24th March 2025
Prepared By:	Barbara Brady, Non-Executive Director/Chair		
Approved By:	Barbara Brady, Non-Executive Director/Chair		
Presented By:	Barbara Brady, Non-Executive Director/Chair		
Purpose:	Assurance report to the Trust Board of Directors following the Quality Committee Meeting		

Matters of Concern or Key Risks Escalated for Noting / Action		Major Actions Commissioned / Work Underway	
<ul style="list-style-type: none"> - Issue noted regarding the development of the Quality Dashboard and availability of relevant data. Lack of Capacity in the Data Analysts Team has been recognised. 		<ul style="list-style-type: none"> - The Improvement Faculty is to move under the Chief Medical Officer Portfolio and consideration of the overall structure is underway. - The Quality Strategy Priorities will be included in the Quality Account, which will be circulated to Committee members for Virtual Approval. 	
Positive Assurances to Provide		Decisions Made (include BAF review outcomes)	
<ul style="list-style-type: none"> - Positive Assurance taken from the IPR updated for Timely and Quality Care. - Positive Assurance taken from the updates to the Clinical Services Strategy. - Positive update provided against the progress of the Electronic Patient Record. The Committee agreed to bi-annual updates going forward. - Positive Assurance taken from the reports provided for the Patient Experience Committee, PSIRF Oversight Group, NMAHP Committee and Perinatal Assurance Committee. - Positive Assurance provided against actions underway following the Mortuary Deep Dive. - Positive assurance from the 360 Staffing paper provided in the reading room and the audit opinion of 'Significant Assurance'. 		<ul style="list-style-type: none"> - Approval of the BAF Principal Risks; 1, 2 and 5. With 'Gaps in Control' for PR1 amended to include narration around the frequency of the meetings for QC. Further discussion to also take place re PR5 due to pending recruitment requirements. - Approval of the Quality Committee Terms of Reference pending further discussion regarding the inclusion of Clinical Effectiveness portfolio i.e. clinical audits and GIRFT. - Approval of Annual Workplan pending minor amendments agreed to frequency of EPR reporting and Improvement Updates. - Approval of the Draft Quality Strategy pending introduction and acknowledgement of the current challenges being worked in and financial constraints, in addition to the 'triple shift' and Health Inequalities. A further draft will be shared for Virtual Approval in the coming weeks. - Approval of the IPC BAF. - Approved- Minutes of the QC Meeting from 21st January 2025 	

Comments on effectiveness of the meeting

Positive level of assurance taken from items discussed today, with a high standard of papers provided, prompting a good level of discussion and challenge. Comments from observing parties agreed noting the meeting was very efficient and would allow a good level of feedback to services.

Items recommended for consideration by other Committees

Following a Quality Committee action the 'Maintaining Focus and Oversight on Quality of Care and Experience in Pressurised Services' is provided as Appendix A to the BOD for information.

Progress with Actions

Number of actions considered at the meeting -3

Number of actions closed at the meeting – 3

Number of actions carried forward - 2

Any concerns with progress of actions – No

If Yes, please describe –