

Minutes of Safety & Quality Committee Meeting
9th April 2013 2pm-5pm
AD77, Trust Headquarters, East Surrey Hospital

Members Present:

Yvette Robbins (Chair)	Deputy Chairman
Susan Aitkenhead	Chief Nurse
Richard Durban	Non-Executive Director
Richard Shaw	Non-Executive Director
Julian Webb	ED Lead (attending on behalf of Virach Phongsathorn)
Debbie Pullen	Chief of Service, WaCH
Gillian Francis-Musanu	Director of Corporate Affairs
Des Holden	Medical Director
Colin Pink	Acting Head of Integrated Governance and Quality

In attendance

Alan McCarthy	Chairman
Lucy Burford	Executive Assistant to Chief Nurse and Medical Director- Note taker

Apologies

David Heller	Chief of Pharmacy
Virach Phongsathorn	Chief of Service-Medicine
Paul Simpson	Chief Finance Officer
Bruce Stewart	Chief of Service- CSS

1	GENERAL BUSINESS	ACTION
1.1	<p>Welcome and apologies for absence Y Robbins welcomed members of the Committee and apologies were noted.</p>	
1.2	<p>Minutes of the last meeting The minutes of the last meeting in February were approved as a true record.</p>	
1.3	<p>Actions and matters arising</p> <p>2 Action 1- Safety and Quality Strategy: Update- Strategy to be aligned with nurse and midwifery strategy and Investment and workforce strategy.</p> <p>3 Action 2- Quality Account: Update: work in progress and auditors are looking at the detail.</p>	
2	<p>Minutes from MBQR and themes arising</p> <p>The format of the MBQR meeting has been changed to allow divisions to lead. Issues will be discussed at SQC and board meetings with assurance that action plans are implemented and key themes from MBQR are identified and discussed further.</p>	

3	<p>CQC Compliance and Risk Profile</p> <p>The CQC uses a design tool called provider compliance assessments to support registered providers in self-assessing compliance. The CQC may also ask Trusts to submit some or part of the PCA when they carry out a review of compliance.</p> <p>On the table of current leads of PCAs, all outcomes must be signed off at MBQR and any red risks must be raised at board level.</p>	
4	<p>WaCH Audit Plan</p> <p>D Pullen reported that audit leads are progressing with this and S Cumin will attend next SQC meeting to present.</p>	DP/SC
5	<p>Surgery Risk Management</p> <p>From the current open escalated surgical risks, any risks with a rating of 15 or above will be regularly reviewed and those with a rating under 15 need to be looked at and addressed. C Pink will check the list of risks and see if any can be closed.</p>	CP
6	<p>Surgery Audit Compliance</p> <p>No one from surgical division present at the meeting so this item will be carried forward to the June meeting.</p>	BB
7	<p>Mortality Group</p> <p>D Holden reported that all deaths are categorised 1-4:-</p> <ol style="list-style-type: none"> 1) expected at or pre admission 2) not previously expected but inevitable at presentation 3) not expected but no obvious care issues on review 4) unexpected or significant care issue <p>Categorisation is done with help from a senior doctor and all category 3 and 4 deaths are considered at governance and/or team meetings, as are deaths from categories 1 and 2 where appropriate. For the next meeting, D Holden will provide an update of the numbers that are coded.</p>	DH
8	<p>SAB Update</p> <p>On the safety alert summary, alerts highlighted in red indicate that they have breached the Trust deadline, amber indicates that the deadline is within the next 2 weeks and information received within the last week is highlighted in blue. All alerts are reviewed by the medical devices group and summaries discussed at MBQR.</p>	
9	<p>Trust SUI position</p> <p>In total there are 23 serious incidents under investigation between the period of 13/3/13-09/4/13, 3 investigations have been closed since the last report to board and 3 new serious incidents have been declared since the last report to March</p>	

	<p>board. The Trust is reporting more falls with fractures. The governance team meet every 2 weeks to look at the SI's. The Trust is in discussion with the new CCG's as to the function of the new quality review meetings and how SI will be monitored. A serious incident report for the previous financial year is due to be presented to MBQR in May. This will highlight trends and where identified root causes and lessons learnt.</p>	
<p>10</p>	<p>Any other business</p> <p>A Flores from infection control send out an email to say HAI target has been reached. Des to compose email to thanks those involved.</p> <p>SQC Meetings have now moved to bi-monthly and the future dates are:-</p> <p>11th June 2-5 AD77 13th August 2-5 AD77 8th October 2-5 AD77 10th December 2-5 AD77.</p>	<p>DH</p>