

**Minutes of Safety & Quality Committee Meeting
26th June 2pm-5pm
Room 6 PGEC, Maple House, East Surrey Hospital**

Present:

Yvette Robbins (Chair)	Deputy Chairman
Norma Christison	Non-executive Director
Richard Durban	Non-executive Director
Bernie Bluhm	Chief Operating Officer
Jo Thomas	Chief Nurse
Bruce Stewart	Chief of Service-CSS
Barbara Bray	Chief of Service-Surgery
Debbie Pullen	Chief of Service- WaCH
Des Holden	Chief Medical Director
Colin Pink	Acting Head of Integrated Governance and Quality
Paul Simpson	Chief Financial Officer
Ben Emly	Head of Performance
Lucy Wallace	Note Taker

In attendance

(For presentations)





Julian Webb	Lead, ED
Jackie Thompson	Matron, ED
Csaba Dioszeghy	Deputy Lead, ED
Natalie Powell	Consultant in Acute and Stroke Medicine
Helen Lawrence	Matron, Medicine
Lynda Filby	Matron, Gynaecology
Branita Mills	Matron, Surgery
Elaine Hextall	Matron,


Apologies

John Gooderham	LINKs
Lisa Bangs	Chair, Patients Council
Virach Phongsathorn	Chief of Service-Medicine

1	GENERAL BUSINESS	ACTION
	<p>1.1 Welcome and apologies for absence</p> <p>Y Robbins welcomed members of the Committee and apologies were noted as above.</p>	
	<p>1.2 Minutes of the last meeting</p> <p>The minutes of the last meeting were approved as a true record.</p> <p>Outstanding enquire re return of Quality Account regarding number of patient experiences in clinical research studies.</p>	

	1.3	<p>Actions and matters arising</p> <p>4.1 Action 4: J Thomas to discuss additional resource with M Wilson/P Simpson to expedite the approval process.</p> <p>H Astle is negotiating with agencies for a project manager to lead on a 3 month project. J Thomas will liaise with H Astle.</p> <p>2.1 Quality Account Timeline- updated version</p> <p>D Holden, J Thomas and Y Robbins met after board meeting and quality account was finalised and figures completed.</p> <p>4.1 Medical Division Audit Program</p> <p>D Holden to liaise with J Parr for requirements of a Specialty Clinical Audit Lead and to prepare training session for September Meeting.</p> <p>6 CSS Comparison significant risk register and SUI 2011/12</p> <p>B Stewart raised the issue of the need for more porters for diagnostic clinics and B Bluhm discussed with Execs at Execs meeting. B Bluhm will liaise with S Abbott as it may either require more funding or a revisit in delegated resources.</p>	<p>J Thomas</p> <p>D Holden/ J Parr</p> <p>B Bluhm</p>
2	Format of Meeting		
	2.1	<p>Y Robbins reported that this meeting would be more patient focused and is a first attempt to see if it is workable with different patient groups. Proposal is to have alternate monthly meetings focused on a different patient group each time.</p>	
3	<p>Patient Journey</p> <p>-Surgical -Medical (A+E)</p>		
	3.1	<p>J Thomas presented to the group 2 examples of patient care in the hospital and their journey taken through different departments. The group discussed the patient's experiences and the ways they could be improved with the following suggestions:-</p> <ul style="list-style-type: none"> ➤ Better Communication with patients and their families re treatment. ➤ Nursing and Medical Teams need to get together for MDT Meetings ➤ Joint ownership of the pathway and having a clear pathway ➤ Medical Leadership ➤ Review rationale for patient moves and documentation of management plan in patient case notes ➤ Consultants need to be more visible <p><u>ACTION 1</u> D Holden will look into these cases further and discuss with Chiefs of Service. An action plan will be drawn up and discussed at next meeting.</p> <p><u>ACTION 2</u> N Christison suggested a co-production at divisional level for patients to</p>	<p>B Bray L Wallace</p> <p>D Holden</p> <p>N Christison</p>

		talk about their experiences and will send a set strategy to B Stewart to arrange.	
4	New Performance Dashboard		
	4.1	<p><u>ACTION 3</u> B Emly shared scorecards for each division with the group for which the final measures will need to be signed off and 2-3 workshops arranged.</p> <p>Final version of scorecard for S&QC to be agreed with Yvette Des and Jo</p>	<p>B Emly</p> <p>YR/DH/JT</p>
5	Emergency Department Review		
	5.1	<p>J Webb, J Thompson and C Dioszeghy presented to the group a presentation about caring for older patients (75+) in the Emergency Department.</p> <p>Issues identified-low take of RTM, ability of 75+ to use RTM.</p>	 Caring For Older Patients (75+) In The
6	AMU Review		
	6.1	<p>N Powell and H Lawrence presented to the group a presentation about caring for older patients (75+) in the AMU Department.</p> <p>The group discussed the use of having an internal clock for patients who are not on a pathway to reduce waiting times for patients using the AMU chairs and also the suggestion of more suitable and comfortable chairs for patients who are waiting to be seen.</p> <p><u>ACTION 4</u> B Bluhm will liaise with AMU Department</p>	 Presentation SQC AMU BM version.ppt B Bluhm
7	SAU Review		
	7.1	<p>B Mills presented to the group a presentation about caring for older patients (75+) in the SAU Department.</p> <p>In the presentation, one of the questions asked to patients was if they would recommend Sash and this only scored 50%. The group discussed whether the wording of this question was correct.</p> <p><u>ACTION 5</u> J Thomas will discuss this wording in Friday clinical meeting.</p>	 Presentation SQC draft SAU - form Rad J Thomas
8	Care of Elderly Wards		
	8.1	<p>The meeting over ran so this presentation will be given at the next meeting in July.</p>	 All areas wards draft(4).ppt E Hextall
9	Brockham and Surgery		

	9.1	The meeting over ran so this presentation will be given at the next meeting in July.	 Presentation Brockham SQC .ppt L Filby
10	Any other Business		
	10.1	Y Robbins asked for feedback from the group about the way the meeting went. The group felt it was good to focus on particular patient groups. However, content of presentation needs to be clearer to provide evidence of assurance around safety, patient experience and clinical quality in order for the committee to be able to assess whether or not it is assured.	
11	Date of next meeting 24th July 2pm-5pm AD77		