

TRUST BOARD IN PUBLIC		Date: 26th June 2014	
		Agenda Item: 2.6	
REPORT TITLE:		Safety and Quality Committee Chair Update	
NON EXECUTIVE SPONSOR:		Richard Shaw Chair – Safety and Quality Committee	
REPORT AUTHOR:		Kim Rayment Patient Safety & Risk Lead	
REPORT DISCUSSED PREVIOUSLY: (name of sub-committee/group & date)		Safety and Quality Committee 5 th June 2014	
Action Required:			
Approval ()	Discussion (√)	Assurance (√)	
Summary of Key Issues			
The report provides a summary of the key agenda items which were discussed at the Safety and Quality Committee in June 2014.			
Relationship to Trust Strategic Objectives & Assurance Framework:			
SO1: Safe -Deliver safe services and be in the top 20% against our peers			
Corporate Impact Assessment:			
Legal and regulatory implications	Relates to CQC compliance		
Financial implications	CQUIN delivers 2.5% of Trust income		
Patient Experience/Engagement	Improving patient experience is fundamental to the work of this committee		
Risk & Performance Management	Assurance given		
NHS Constitution/Equality & Diversity/Communication	Relevant to the work of the committee		
Attachments:			

TRUST BOARD REPORT – 26th June 2014

Safety & Quality Committee Chair Update

1. Introduction

The Safety and Quality Committee met on 5 June. It considered its standing agenda items, namely a report from the two May meetings of ECQR, the Quality and Risk Oversight Report and the SQC Dashboard. There had been no Clinical Quality Review Meeting with partners the previous month because of the CQC inspection, but no items had been escalated.

Availability of clinical notes

The Committee discussed the implications of a recent SI, which had drawn attention to the importance of having access to clinical notes outside office hours. Working groups are looking at ways of implementing 24/7 availability, and also at how the culture of making full use of electronic systems such as the Cerner Millennium applications can be improved. The Committee has asked for a progress report at its next meeting.

SI Investigations and Action Plans

The Committee noted the discussion in ECQR about the time taken to close SI investigations and action plans. This has been a recurrent concern for some time, and although assurance was given about organisational learning from SIs, there continue to be delays in closure, due to both internal and partner processes. The Committee asked for a report on the actions being taken to improve the position to be submitted at the next meeting.

Deep Dive Integrated Improvement Plan

All clinical services have now undergone a Deep Dive review, and the Committee received a report on plans to follow up the programme. It is planned to link Deep Dives to the Trust's performance management process through monthly divisional reviews of performance and delivery of business plans. There will also be an annual deep dive prior to the business planning process, starting at specialty level. The Committee expressed its approval of the recent programme and was assured by plans for the future.

Dementia Strategy

The Committee received a report on progress in developing a strategy for dealing with dementia. The Committee was encouraged by the senior support that is being given to the issue and by the approach to training of staff. The strategy is expected to be discussed by ECQR later in June. The Committee raised the wider question of patients who straddle individual clinical services and of the importance of patient-facing strategies and culture. The Trust Consultant Nurse Specialist for dementia described how the strategy was going to be implemented across the Trust.

Maternity Survey

The Committee discussed a report on the response to the last national maternity Survey, where the Trust's results gave rise to concern. The data had been collected in the autumn of 2012, when the service was under some pressure from building refurbishment and reduced staff numbers. However, the Committee took assurance from more recent improvements in midwifery staffing numbers, the completion of refurbishment, the introduction of the new birthing unit and feedback from the recent CQC inspection. Survey data through 2013/14, taken from Your Care Matters and user groups shows a significant

improvement in patient responses. A listening event is planned for the autumn to build on this improvement.

Clinical Audit

The clinical audit programme for 2014/15 has been agreed by Divisional Chiefs. The Committee sought and received assurance of their commitment to complete the planned programme, including actions plans where needed. It also asked for a narrative to indicate the principal areas of learning to come out of the programme.

2. Recommendation

The Trust Board is asked to note this paper for discussion and assurance.

Richard Shaw
SQC Chair
June 2014

Dr. Des Holden
Medical Director