

<b>TRUST BOARD IN PUBLIC</b>		<b>Date: 25<sup>th</sup> August 2016</b>	
		<b>Agenda Item: 2.3</b>	
<b>REPORT TITLE:</b>		Safety & Quality Committee Update	
<b>NON-EXECUTIVE SPONSOR:</b>		Richard Shaw Chair Safety & Quality Committee	
<b>REPORT AUTHOR (s):</b>		Richard Shaw Chair Safety & Quality Committee	
<b>REPORT DISCUSSED PREVIOUSLY:</b> (name of sub-committee/group & date)		n/a	
<b>Action Required:</b>			
<b>Approval ( )</b>	<b>Discussion ( )</b>	<b>Assurance (✓)</b>	
<b>Purpose of Report:</b>			
To provide an update of the activities of the safety and quality committee.			
<b>Summary of key issues</b>			
The report provides a summary of the key agenda items which were discussed at the Safety and Quality Committee in July 2016. In addition to standing items, these included quarterly assurance reports on Children and Adult Safeguarding, Complaints and PALS, and Incidents.			
<b>Recommendation:</b>			
N/A			
<b>Relationship to Trust Strategic Objectives &amp; Assurance Framework:</b>			
<b>SO1:</b> Safe – Deliver safe high quality and improving services which pursue perfection and be in the top 20% against our peers <b>SO2:</b> Effective – As a teaching hospital deliver effective, improving and sustainable clinical services within the local health economy <b>SO3:</b> Caring – Working in partnership with staff, families and carers			
<b>Corporate Impact Assessment:</b>			
<b>Legal and regulatory impact</b>	Compliance with CQC, MHRA and Audit Commission		
<b>Financial impact</b>	Serious incidents often become claims		
<b>Patient Experience/Engagement</b>	n/a		
<b>Risk &amp; Performance Management</b>	Reporting, investigation and learning from serious incidents informs risk management		
<b>NHS Constitution/Equality &amp; Diversity/Communication</b>	N/A		

Attachment: None

## Trust Board Report – 25<sup>th</sup> August 2016 Safety and Quality Committee Chair's Report

The Safety and Quality Committee met on 4<sup>th</sup> August 2016. The Committee considered its standing items and sought assurance on a number of issues discussed at July meetings of the Executive Committee for Quality and Risk and CQRM. These included:

- Trauma Peer Review: The Committee asked for further information about the recent Peer Review, which found incomplete TARN data. It was assured that clinical care was found to be robust, and that actions are being taken to address data accuracy and will be considered at Clinical Effectiveness Committee. SQC will receive a report on progress in December.
- CQC: The Committee sought information about changes being considered in the CQC regime for assessment of Trusts, notably the potential inclusion of local information from sources such as local media and Healthwatch. The Chief Executive was asked to report on this to the Trust Board when it was clear what changes would be made.
- CQRM: Discussion had focused on first quarter activity growth in ED, with increase in patients brought by ambulance. Although not all patients were admitted some escalation areas had been opened with a consequential impact on elective surgery. There was some discussion about steps being taken to improve the effectiveness of CQRM as a multi-agency forum.

We took good assurance from the handling of these issues.

### Quality Report

Discussion of the Quality Report focused on three topics:

- A very recent MRSA bloodstream infection: a report will be made to the Committee at its next meeting on the methodology employed to manage, limit and investigate an MRSA outbreak.
- Top 20% Safety: The Trust has an objective to be within the top 20% of Trusts national for patient safety. The committee requested a report setting out how this should be measured and what metrics were available.
- Timeliness of Data: Safety and Quality data is presented monthly to SQC in the Quality Report but is about 4-5 weeks old by the time it reached the committee. It was agreed that it was not practical for the SQC to receive this data sooner but that: SQC's focus would be on identifying and seeking assurance on longer term challenges; SQC would nevertheless ask for a verbal update at each meeting on any significant more recent developments; the Trust Board would continue to refer matters to SQC where it wanted further assurance.

### Complaints and PALS

SQC received two quarterly reports – one on Complaints and the other on Compliments, Comments and PALS. The number of complaints received in the quarter was broadly similar to the same quarter last year but PALS contacts were 34% higher. The Committee was well assured about the process for handling complaints which involves early contact with the complainant and has led to a reduction in re-opened complaints.

The main themes in both PALS contacts and complaints were the same: appointments, poor communication and staff attitude. SQC was assured by the commitment to actions at a local level, and recognized that the number of complaints is small in relation to the volume of activity in the Trust. Nevertheless a small number of complaints may be indicative of a wider problem. We noted the actions being taken to address the handling of appointments and asked for further assurance about the effect of actions taken at divisional level.

### **Incidents**

In the quarterly report on Incidents at the Trust, SQC probed an increase in Maternity incidents and received good assurance that this was a means of ensuring investigation. Falls continue to be by far the largest reason for incidents declared and the committee's next meeting will discuss a report on a new approach to the management of falls. A new role of Deputy Chief Nurse will be an important component in this.

### **Children and Adults Safeguarding**

SQC received quarterly reports on both Children's and Adults' Safeguarding which provided good assurance. In both cases one of the biggest challenges is to ensure staff training requirements are met. Extra provision is being made and key staff are being targeted.

Priority areas in Children's Safeguarding are FGM, domestic abuse, child sexual exploitation and Prevent training for staff; and in Adults' FGM, domestic abuse, honour based violence and modern slavery. Because of the overlap of some of these issues, and the fact that they are often family-based, there is increasingly close joint working between the two services.

The Committee has struggled to obtain assurance about the effectiveness of multi-agency working and how concerns raised by the Trust about the community are dealt with. There are practical difficulties about this but the next quarter's reports will include an explanation of internal and external governance arrangements.

### **Next Meeting**

The next SQC meeting is at 2pm on 1<sup>st</sup> September.

**Richard Shaw**  
**Non-Executive Director**  
**Chair of Safety & Quality Committee**  
**August 2016**