

<b>TRUST BOARD IN PUBLIC</b>		<b>Date: 30<sup>th</sup> November 2017</b>	
		<b>Agenda Item: 2.2</b>	
<b>REPORT TITLE:</b>		Safety & Quality Committee Chair Update	
<b>NON-EXECUTIVE SPONSOR:</b>		Richard Shaw Chair Safety & Quality Committee	
<b>REPORT AUTHOR (s):</b>		Caroline Warner NED Member, 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 discussed at the Safety and Quality Committee in November 2017.			
<b>Recommendation:</b>			
The Board is asked to note the report.			
<b>Relationship to Trust Strategic Objectives &amp; Assurance Framework:</b>			
<b>SO1:</b> Safe – Deliver safe, high quality care <i>and improving</i> services which pursue perfection and be in the top 25% of our peers <b>SO2:</b> Effective – As a teaching hospital, deliver effective and improving sustainable clinical services within the local health economy <b>SO3:</b> Caring – <i>Work with compassion</i> in partnership with patients, staff, families, carers <i>and community partners</i>			
<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>	Included in the report		
<b>Risk &amp; Performance Management</b>	Reporting, investigation and learning from serious incidents informs risk management		
<b>NHS Constitution/Equality &amp; Diversity/Communication</b>	Included in the report		
<b>Attachment:</b>			

**TRUST BOARD REPORT IN PUBLIC – 30<sup>th</sup> November 2017  
SAFETY & QUALITY COMMITTEE CHAIR UPDATE**

The Safety and Quality Committee met on 9<sup>th</sup> November 2017.

**ECQR and PQRM**

The Committee took assurance from the fact that a review of hypoxia deaths in maternity has been completed and learnings integrated into work plans.

Some concern was expressed about the progress of Audit Programmes. SQC understood that these are somewhat disrupted annually by the change over of Junior Doctors who leave and arrive in October, while the Audit cycle is in line with the Financial Year. SCQ received assurance that significant progress is expected during the next two months.

**CQUIN**

The SQC received a detailed status update on the years CQUIN delivery.

SQC received assurance that sepsis screening compliance in ED continues to perform well and the work to embed the tools within inpatient areas demonstrates an improving picture. It is hoped that with the sepsis champions in place on the wards performance will increase. Additionally, SASH involvement in the ARK study will also help to improve performance against the reduction in antibiotic consumption CQUIN.

**Quality Report**

SQC requested updates and further information behind HSMR fracture neck of femur data, incidents regarding medication error and care implementation, less positive cancer access standards data and increasing staff turnover %. The committee received assurance that each of these areas has good action plans in place and is being monitored by the Executive Team.

**Assurance Reports**

The committee received and discussed Assurance Reports on Falls, Complaints, Patient Experience, Incidents, Adult Safeguarding, Children's Safeguarding, Mortality and infection control (IPCAS). The committee accepted all reports as assurances that there is good governance in all these areas.

**Next Meeting**

The next SQC meeting is at 12.00 noon on Thursday December 7<sup>th</sup>, when it will receive presentations regarding Therapies' Strategy, Care Home Forum, IPCAS mid-year report and a Pulmonary Hypertension Peer Review update.

**Caroline Warner**  
**Non-Executive Director**  
**Member, Safety & Quality Committee**  
**November 2017**