

SQC Report to the Board

Trust Board – in public

Date: January 28th 2021

Agenda item:

Non-Executive sponsor	Caroline Warner Non-Executive Director
Report author(s)	Caroline Warner Non-Executive Director
Report discussed previously: (name of sub-committee/group and date)	n/a

Action required:		
Approval ()	Discussion ()	Assurance (✓)

Purpose of report:
To provide an update of the activities of the Safety and Quality Committee.

Summary of key issues
In addition to regular items the Committee received: <ul style="list-style-type: none"> GIRFT quarterly update Cumberledge Report – Response & Action plan

Recommendation:
The Board is asked to note the report.

Relationship to Trust strategic objectives and assurance framework:

SO1: Safe – Deliver safe, high quality care and *improving* services which pursue perfection and be in the top 25% of our peers

SO2: Effective – As a teaching hospital, deliver effective and improving sustainable clinical services within the local health economy

SO3: Caring – Work *with compassion* in partnership with patients, staff, families, carers *and community partners*

Corporate impact assessment

Legal and regulatory impact	Compliance with best practice, CQC and Audit Commission
Financial impact	Appropriate use of resources
Patient experience/engagement	Committee role in scrutiny and review of safety, patient experience and engagement to gain assurance
Risk and performance management	Committee role in scrutiny and review of risk and performance management to gain assurance
NHS Constitution/equality and diversity/communication	Committee role in monitoring assurance

Attachments

N/A

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The Safety and Quality Committee met on Thursday 3rd December 2020.

Covid 19 Update

- At this time the number of Covid 19 positive in patients had been declining (although subsequently they rose again rapidly). Nonetheless, the pressure on ITU beds as a result of Covid 19 infections during the busy winter period was discussed and potential action plans noted.
- Mutual aid is now activated as patients are transferred between Trusts locally as appropriate.
- The Committee was pleased to hear that a plan of action is in place to ensure the safe return of volunteers to the Macmillan Centre.
- Staff testing will now be rolled out to all those in patient-facing roles. Each of these staff members will test at home twice a week and report their results on a portal. Negative tests = business as usual, positive test = full PCR test.
- SaSH will be part of a new scheme to test all patients as they enter ED with a 10 minute turn around result.
- The National vaccine programme is about to begin. There will be ready to go plan for Trust staff as soon as our allocation of vaccines and the order of priority is confirmed by NHSE.
- For Cancer and Diagnostics the picture remains the same insofar as it is in the diagnostics phase that the backlogs are occurring. Nonetheless, the waits are continuing to improve across the board, including in the most difficult areas such as endoscopy, and SaSH has some of the best numbers nationally.

Notes of Interest

- **Diagnostic Hubs:** There is work ongoing with ICS/ICP partners to design rapid access diagnostic centres around the geography. The Committee welcomed this idea and agreed that our SaSH + expertise may be of use to this programme of work.
- **Neck of Femur:** Some of the metrics related to Neck of Femur patients are looking unfavourable. The Trust is working hard to improve the admission to ward within 4 hours and especially the timeframe in which patients are taken to theatre. It is the latter that can have particular impact on mortality rates. Executives noted that more patients who have come to hospital following a fall in recent months have been sicker than average and that some also have contracted Covid 19. Both of these factors have a negative impact on mortality rates for this group.
- **Pressure Damage:** Metrics are also an area of concern for pressure damage. There has been more reported pressure damage overall and more moderate harm as a result. The Trust are seeing higher levels of frailty on admission sometimes arising from malnourishment and dehydration. The Committee asked for a full report to be scheduled for February.

GIFRT quarterly update

- The Committee was pleased to receive the quarterly GIFRT update. National programmes have restarted although not in person visits. Divisional performance meetings again include discussions of GIFRT and Model Hospital data.

- Additionally, the ICS are now considering how to assess system wide data which is a new element to Model hospital.

Cumberledge Report

- The Committee was pleased to receive a report detailing the Trust's response and action plan in respect of The Cumberledge Report ('First Do No Harm'): The Report of the Independent Medicines and Medical Devices Safety Review.
- The report included an impressively detailed assessment of our current performance and gap analysis vs the long list of recommendations. The Committee recommended sharing this assessment tool with partners in order to save time and promote consistency of approach.
- This will remain a live document and updates will come back to SQC via ECQR quarterly.
- One of the recommendations is to designate a non-executive lead to oversee complaint handling processes and outcomes. Since the meeting the Committee are delighted that the Chair of the Board has asked Dr Yasmin Khan to take on this role.

The next meeting of SQC is planned for Thursday 7th January 2021.

Caroline Warner

Non-Executive Director
Chair of Safety and Quality Committee
December 2021