

**QUALITY ASSURANCE COMMITTEE – 30<sup>th</sup> March 2021**

**HIGHLIGHT REPORT**

Strength of Assurance	Colour to use in 'Strength of Assurance' column below
Low	Red - there are significant gaps in assurance and/or not properly assured as to the adequacy of action plans/controls
Medium	Amber - there is reasonable level of assurance but some issues identified to be addressed.
High	Green – there are no gaps in assurance and there are adequate action plans/controls

Report	Assurance level*	Committee escalation	ORR Risk Reference
Matters Arising	NA	No additional matters arising.	NA
Action Log (Paper B)	NA	The action log was agreed by the committee.	NA
DON Report (Paper C)	Medium	The response to the pandemic continues planning the second approach to recovery. The QI approach continues within IPC and nosocomial infection data is now included in the performance report. The flu campaign is now concluded for 20/21 – 60.2% all staff and 59.8% frontline staff. Work is underway around next year's plan including vaccine confidence work. There will be additional scrutiny around nosocomial infections as community levels lower and in addition to this LPT's February covid occupancy data was higher than average which may draw extra scrutiny. A nosocomial review and an aggregated review of patient safety for all outbreaks are due.	1, 2, 3, 5, 9, 52
Medical Director Update (Paper D)	High	The Clinical Strategy has not progressed due to the pandemic but there has been work around it to understand what we need as a system in the new strategic environment. That there will be a committee in common as part of the group structure. It is expected that there will be increased working with the university moving forward.	1
Performance Report for Quality and Workforce Measures	Medium	Care Programme Approach – 7 day and 12 month follow up – the performance has taken a dip. QAC will look at this in more focus next meeting. There have been some data challenges and all data challenges have concluded over the	1, 2, 3,

Report	Assurance level*	Committee escalation	ORR Risk Reference
(Paper Ei)		last week and migration checks have been very positive. Clinical supervision data below expected performance, supervision is taking place but it is the recording of it that is the issue and was impacted on by COVID . This matter is raised as an action to increase the recording of supervision. It was agreed that action plans were in place but that we have not seen the impact of these yet for assurance.	
End of Life 6 Monthly Report (Paper F)	High	There are two levels of work – locally and at a system level. Generalist work – community nurses and ward nurses looking after End of Life patients with no specialist needs and the integrated community specialist palliative care offer. Palliative End of Life care is in a very good place other than 2 hour waiting times which need improvement and staff are being recruited to address this.	1
Beacon Unit Improvement Plan & Section 47 Update (Paper G)	H M	<p>The highlights included 5 key areas. The People Plan – there has been an increase in senior leadership on the ward. Staffing – the number of senior nurses on the ward has doubled. There is a plan to over recruit to cater for the varying staff levels required on the ward. Development – pathway leads have recently been recruited and professional development days focused on leadership are planned for band 6s. Lessons learnt – the level of incidents has reduced this year and there is a focus to continue this. Safeguarding – there is a secondment from the safeguarding team to help bring a focus on this. They are looking at creating safeguarding champions.</p> <p>In relation to the section 47 investigation – 3 concerns were raised 2 by the child and 1 by a staff member. This has now all been investigated and concluded. The staff member involved has support in place and social care and LADO are satisfied.</p> <p>Split assurance as significant and robust plans in place but some areas yet to have evidenced and sustained improvements.</p>	1, 2, 3
2019/20 Service User Equality Monitoring Reports (Paper H)	High	The committee approved the data for publication.	24
Safer Staffing Monthly Review	High	No issues to escalate from this report.	4, 26

Report	Assurance level*		Committee escalation	ORR Risk Reference
(Paper I)				
Suicide Prevention Quarterly Report (Paper J)	Medium		There has been a recent spike in suicides and this is now being reviewed to see if it is statistically relevant. Next steps include improving staff training; a consistent approach across the estate and a more informed learning approach.	1, 2
Freedom to speak Up Guardian Update (Paper K)	High		No issues to escalate from this report.	All
People Plan Update (Paper L)	High		No issues to escalate from this report. The committee approved the paper for presentation to SEB on 9th April and agreed that high assurance was received from the report.	All
Organisational Risk Register (Paper M)	High		No changes to the QAC risks since it was last reported to Trust Board. Risk 1 and 2 to undergo a review with the leads.	All
CQC Regulatory Compliance (Paper N)	H	M	The self-assessment and peer review are now complete. Two areas had a lower rating whilst the other ratings had improved. All actions will be on the AMAT tool. The Foundations For Great Patient Care meetings are now resuming and this group will look at progress against the improvement plan. The CQC have confirmed that there are no concerning issues requiring them to perform a risk based at this time. However, from April 2021 inspections will resume.  Split assurance as significant progress made and plans in place but some areas require evidence of progress.	5
Research and Development Report Updates (Paper O)	High		No issues to escalate.	na
Governance Architecture (Paper P)	High		The committee agreed the approach and proposals in the paper and the committee agreed that high assurance was offered by these new structure and processes.	20
Adult Eating Disorders Lead Provider Governance Arrangements (Paper Q)	High		No issues to escalate paper for information only.	20
Duty of Candour 360 Audit Update (Paper R)	High		A Limited assurance opinion was received with 12 medium risk recommendations. Quick action was taken and 9 of these are now completed.	1

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R)		360 Assurance will complete an interim follow up and this update will be brought to QAC once received.	
Health and Safety Highlight Report 4 <sup>th</sup> March 2021 (Paper S)	Medium	The OH report was received but was not informative enough so UHL have been requested to provide a fuller report. Action 656 to remain outstanding until received. Further action required to progress work re ligatures , anti-barricade and fire safety actions	1
Legislative Committee Highlight Report 10 <sup>th</sup> February (Paper T)	Medium	This was their second meeting following the disaggregation from safeguarding. This disaggregation is a positive step as the committee now has a focused agenda . There is work to be done – evident in the level of amber in the report but the committee are confident that this can now be achieved.	2, 3
Safeguarding Committee Highlight Report 10 <sup>th</sup> February 2021 (Paper U)	Medium	Issues discussed: the training report – bank training compliance around safeguarding – this has been escalated. Section 42s – the Local Authority have the lead in these concerns raised around the community section 42s – a central point has now been put in place within the safeguarding team so that all incidents are logged. Updates given re 2 incidents in LD and actions being taken .	2
Quality Forum Highlight Report 11 <sup>th</sup> February 2021 & 11 <sup>th</sup> March 2021 (Paper Vi & Vii)	M L	There had been no significant change in the progress of the closure of Serious Incident (SI) action plans. Each directorate has now set up an improvement plan. The external visits process for notification needs strengthening and as does the work around effectiveness of policies. The split assurance opinion is related to the medium assurance on some areas of the report and red related to SI performance of closure of action plans. Further work to map assurance re learning in the directorates to be undertaken in the quality forum	1
Any Other Urgent Business Ligature Updates	NA	A verbal update was given confirm that work was ongoing around ligature risks and the capital plan. The clinical group to work with H&S to ensure priorities were identified.	NA

Chair	Liz Rowbotham
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