

QUALITY ASSURANCE COMMITTEE – 25th May 2021 <u>HIGHLIGHT REPORT</u>

The key headlines/issues and levels of assurance are set out below, and are graded as follows:

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	Committee escalation	ORR Risk
	level*		Reference
Director of Nursing, AHPs & Quality Report - Paper C	High	No new IPC outbreaks since April 2021and no new inpatients with a positive covid result. The CRO outbreak closed on 12.5.21. The quality & safety review work on Beaumont ward continues including a review of safety data and various listening events. The Friends and Family texting service is now fully rolled out in the Trust. The People's Council is progressing well. QAC agreed high assurance from the report.	1, 2, 3, 5, 9, 52
Medical Director Update – Verbal	NA	NHSI colleagues are working with LPT on waiting lists and harm to share good practices.	NA
Director of HR Update - Paper D	High	Focus on the health and well-being of the workforce continues. The Big Conversations have completed now and they are now agreeing the priorities. Work is starting around recruitment and attraction looking at resourcing structures.	26, 27, 56
Performance Report for Quality and Workforce Measures - Paper E	Medium	There has been an increase in pressure ulcers (stage 2) and data has been triangulated to the patient safety report seen at Board. The increase in numbers is a direct impact of covid and lockdown. A QI approach has been adopted and there will be a paper on this to the next QAC meeting. The new metrics for this year will be added when available. Further discussion to be had in FPC re the cause of poor performance in CPA metrics	1, 2, 3, 35

Report	Assur level*	rance	Committee escalation	ORR Risk Reference
Provider Collaborative Update – Verbal	NA		Update to be given at FPC.	NA
Safeguarding Quarter 4 Report - Paper F	High		Activity within the safeguarding team continues and they are contributing to partnership safeguarding Boards and working more closely with the patient safety team. Teams continue to work with local authority partners on system learning from reviews and there is an event around safeguarding reviews in rapid time planned – to learn as a system and to escalate concerns together. Further work underway to improve coordination of the response to community Section 42 requests.	2
Quality Account Report – Paper G	High		QAC received high assurance from the report and recommend that the Trust Board approved the report on 9 th June 2021.	All QAC risks
Agnes Unit QI Update - Paper H	Mediu	im	A comprehensive update on all of the work in the unit was given. QAC received medium assurance from the report confirming that there is a comprehensive plan in place, but still some areas needed work to ensure embeddedness	1, 2, 3
Beacon Unit Update – Paper I	Н	M	A comprehensive update on all of the work in the unit was given. QAC received split high medium assurance for the report. There is improvement in figures and impact of actions through the work done, but it is an improvement journey and the acuity of the patients has an impact on risks.	1, 2, 3, 5
Clinical Governance Review - Paper J	High		There is a clear plan for finances and the HR process leading to more consistent job descriptions across the directorates. Functions of the clinical governance teams have now been mapped. Weekly escalation reports around areas of improvement are presented to executives and the directorates so that all have clear oversight.	1, 2, 3
CQC Update – Paper K	High		Two actions have been re-opened both around medical devices they are being addressed currently and should be closed shortly. The Quality Surveillance Tracker now captures all new issues in a robust process with executive oversight. All actions have an executive lead. The Teams Library is also available holding all key documents and describing our inspection readiness.	5
Formal Closure of the Buddy Up Targeted Work – Paper L	High		The formal closure of the Buddy Up Targeted Work was agreed by QAC.	N/A

Report	Assurance level*	Committee escalation	ORR Risk Reference
Ligature Update – Verbal	Medium	A verbal update was given confirming that H&S had reviewed this matter and a major review had been required. A working group was set up consisting of clinical staff, H&S staff, Estates Staff and executive directors enabling the Ligature Group are working closely with the Health and Safety Team on this matter. The top priority had been identified as en-suite doors and this has been actioned.	10, 11
Positive and Safe QI Update Q1 - Paper M	Medium	One of the key issues over the next year is the joint collaborative work across the system. A self-assessment benchmarking exercise to highlight strengths and areas for improvement is being completed. As part of this baseline assessment we will be able to share practices with other Trusts to help us move forward in our less strong areas. Safe ward implementation on the wards is showing improvements and the QI programme has started around the formal measuring of this improvement. The Trust annual seclusion audit is underway now. Seclusion rates have been variable during covid.	1, 3
Leadership Engagement Report – Paper N	High	Leadership matters events detailed in the paper including a week long leadership festival for all staff and reinstating the quarterly extended senior leadership forum.	25
Leadership Plan – Paper O	High	Bitesize training, leadership programmes and coaching for leaders have been added to our current offer and will be starting shortly. A new nursing programme for high standards and compassionate care is also starting. A Listening to our Leaders event on 17 th June is planned – targeted for middle managers. Together Against Racism and Talent Management are key priorities for year ahead. QAC received high assurance from the report and approved its progression.	25
Organisational Risk Register - Paper P	High	QAC risks have all been all reviewed by the risk owners and there are no changes to report. QAC requested that the narrative around Risk 26 was refreshed. In addition consideration to be given to how the assurance ratings can be reviewed and improved	All QAC risks
QI Approach Update – LPT & Group Model – Paper Q	High	There is a 26% improvement in projects currently so impacts are evident. Carers / patients involvement has increased to a 39% involvement now. Work is to be undertaken with NHFT as part of the group QI work	1, 3

Report	Assurance level*	Committee escalation	ORR Risk Reference
Research and Development Annual Report - Paper R	High	The report showed that despite a difficult year much had been achieved, the East Midlands as a whole have worked together well over last year and it's been very positive. Financial performance has been reasonable and recruitment performance has been good.	N/A
Health and Safety Highlight Report 6 th May 2021 - Paper S	Medium	The weekly team meeting established for ligatures is now picking up the fire safety work including the backlog work; suppliers are engaged and clear process of the survey of the work is done in order to address the risks. There is a 3 week survey cycle which is a robust plan. Work is due to start at the beginning of June. QAC received medium assurance from the report confirming that progress is being made and there is greater grip evident, but also work still to do.	5
Legislative Committee Highlight Report – 14 th April 2021 Paper T	Medium	There has been an increase in MH Act activity in the community leading to higher numbers - this is possibly due to late presenting to services. Further work is required to improve the performance of MHA census data. The group is now becoming more established in its assurance role with further work planned.	2, 3
Safeguarding Committee Highlight Report 14 th April 2021 – Paper U	High	Most areas progressing well with good assurance. With regards to Bank staff training compliance, Workforce are picking this up and feedback on this will be given at the next meeting.	2
Quality Forum Highlight Reports 8 th April 2021 & 13 th May 2021 - Paper Vi & Vii	High	Issues related to medical devices have been addressed, there is an action plan now in place and this is progressing at pace. The SI action plan is progressing with improvements related to the backlog QI plan. In addition there is an improvement in the quality of investigation reports and action plans.	1

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