

## Trust Board 26<sup>th</sup> October 2021

### Quality Assurance Committee Annual Review 2020/21

#### Purpose

To provide an annual review of the effectiveness of the Quality Assurance Committee for 2020/21.

#### Analysis of the issue

The Quality Assurance Committee (QAC) is a Non-executive Director led Committee of the Trust Board. Since September 2021 QAC has met on a bi-monthly basis. Its membership has five key Executive Directors and three Non-Executive Directors including a Non-Executive from the Finance and Performance Committee which ensures triangulation between the work of two committees.

The Committee seeks to provide assurance around quality, safety and workforce. Its principal purpose is the provision of assurance to the Trust Board of effective quality governance arrangements, with a focus on areas related to the Trust's Step Up To Great Strategy and will work to a plan built around assurance that the Trust delivers services that are safe, effective, caring, responsive and well led (the Care Quality Commission five domains for quality) and compliant with regulations.

During this year the Director of Corporate Governance and Risk and Deputy Director of Corporate Governance and Risk have been working with the Chairs of both QAC and FPC to agree increased rigor around the functioning of the committees and corporate governance support to the Committee Chairs

A mid-year review was presented to QAC in November 2020 which evaluated the first 8 months of 2020/21. A full year review is provided in Appendix 1. This confirms that the Quality Assurance Committee has operated effectively during the 2020/21 year.

#### Proposal

Mid-year review of effectiveness to be undertaken in November 2021

#### Decision required

For Information.

## Governance table

<b>For Board and Board Committees:</b>	Trust Board 26 <sup>th</sup> October 2021	
<b>Paper sponsored by:</b>	Chris Oakes, Director of Governance and Risk	
<b>Paper authored by:</b>	Kate Dyer, Deputy Director of Governance and Risk	
<b>Date submitted:</b>	18 <sup>th</sup> October 2021	
<b>State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):</b>	QAC 27 July 2021 Audit and Assurance Committee 3 Sept 2021	
<b>If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:</b>	Assured.	
<b>State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning</b>	Annual.	
<b>STEP up to GREAT strategic alignment*:</b>	High Standards	
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	Yes
	Single Patient Record	
	Equality, Leadership, Culture	
	Access to Services	
	Trust Wide Quality Improvement	
<b>Organisational Risk Register considerations:</b>	List risk number and title of risk	
<b>Is the decision required consistent with LPT's risk appetite:</b>	Yes	
<b>False and misleading information (FOMI) considerations:</b>	None	
<b>Positive confirmation that the content does not risk the safety of patients or the public</b>	Confirmed	
<b>Equality considerations:</b>	None	

## Appendix 1

### QAC Committee Review 2020/21

#### 1. Fulfilling the Terms of Reference

##### 1.1 COVID-19

In March 2020 we proposed interim arrangements for the Trust governance structure in response to the first wave of Covid 19. Whilst these were rescinded in October 2020, they were reinstated in December 2020 in response to the second wave.

Trust meetings were categorised to determine an appropriate governance approach for the interim period during the first wave. The QAC was categorised as 'Critical', meaning that meetings continued as per the meeting schedule but focussed on essential business.

This was defined as the following six priority areas;

- Quality and Safety
- Finance and impacts on performance
- Risk
- Covid 19
- The Health and Wellbeing of staff
- Statutory requirements

All agenda items delayed or suspended due to Covid have been listed as not received on agendas and included in the forward work planning.

QAC usually receives regular highlight reports, and an annual committee review from the level 2 committees which are direct reports. However, during the pandemic some of these Level 2 committees have run a reduced agenda or have stood down for a period. None of the Level 2 committees are required to produce an annual committee review for the 2020 – 2021 period. QAC is parent committee to the following Committees:

- Trust Policy Committee (stood down in January & March 2021)
- Health and Safety Committee (reduced agenda meetings)
- Strategic Workforce Committee (stood down until June 2021)
- Safeguarding Committee (reduced agenda meetings)
- Legislative Committee (reduced agenda meetings)
- Quality Forum (reduced agenda meetings)

##### 1.2 Terms of Reference and Work Plan

The duties of the ToR were covered through the work plan and agendas during the year.

The TOR was revised in July 2020 following the Board Architecture work to determine the delegated duties for the QAC. There have been no further amendments since this date. The work plan has been reviewed and all areas within the ToR are covered.

### 1.3 Membership

Membership attendance has been satisfactory and each meeting was quorate and each meeting has included clinical representation.

The Committee is comprised of three independent non-executive Directors; quoracy is two non-executive directors.

A total of 9 meetings were held during the year with the following attendance;

Committee Member	No of Meetings attended
Liz Rowbotham – NED (Chair)	8/9
Ruth Marchington - NED	9/9
Kevin Harris - NED	8/9
Anne Scott - Director of Nursing, AHP & Quality (Exec Lead)	7/9
Sue Elcock (to 31.5.20) – Medical Director	2/2
Avinash Hiremath (from 1.6.20) – Medical Director	7/7
Sarah Willis - Director of Human Resources & OD	8/9
Chris Oakes – Director of Governance and Risk	9/9
Rachel Bilsborough (to 1.3.21) – Service Director	6/8

### 1.4 External Assurance

#### NHFT peer review

The QAC was observed by the Chief Nurse from our Buddy Trust Northamptonshire Healthcare NHS Trust in June 2020. The key elements of feedback are detailed below with an LPT response in italics;

1. Some papers were coming from Board rather than feeding up to Board.  
*There are some anomalies in our current information architecture. A review of Trust Board work plan and information flow is currently underway. This will feed a review of level 1 committee information flow and work plans to ensure an appropriate architecture.*
2. The Quality Forum does not have minutes.  
*The Trust has approved the usage of highlight reports for level 2 committees. Feedback from our internal auditors has also expressed a concern over a lack of minutes. The Governance Team will review this during Q4 2020.*
3. There were one or two papers where the authors presented and introduced new recommendations that were not detailed within the paper.  
*We have introduced a new report format to help authors provide clarity over recommendations and approvals.*
4. Some papers did not capture the recent relevant issues /concerns i.e. they focused on the usual format and usual data but did not introduce new discussions to sight on emerging concerns.  
*See point 2, the new report format will support focus.*

We have also had an independent review of the Agnes Unit undertaken by staff from NHFT to support on-going learning and improvement within LPT.

The Chair of QAC and the Chair of the Quality and Governance Committee at NHFT will observe each other's committees during the remainder of 2020/21 and share learning from observations.

The committee can also receive external assurance from a number of sources including;

- Internal Audit reports. This includes regular progress reports on delivery of the internal audit programme, and presentation of pertinent limited assurance reports.
- External review by patient groups and key stakeholder groups such as Healthwatch e.g. "Enter and View" visits, although we note that no assurance has been received by the QAC during 2020/21

### 1.5 Internal Audit

Due to covid, 360 Assurance experienced significant delays in starting work in Q1 of 2020/21. In order to balance remaining available resource, with work required for a well-founded Head of Internal Audit Opinion, the 360 Assurance Management Board made a recommendation to deliver 75% of the audit plan. In June 2020 this was approved by the Trust and the audit plan was reduced by 25% (retaining core audit requirements and assessing the risk of non-core audits). The audits with QAC oversight during the 2020/21 year included;

- Duty of Candour. January 2021 (ref 04) Limited Assurance. This was presented to QAC on 30 March 2021.
- The Deteriorating Patient. May 2021 (ref 12). Limited Assurance. This will be presented to QAC in July 2021.
- Quality Improvement. August 2020 (19/20 ref 27). No opinion - advisory.

## 2. Committee Effectiveness

2.1 Overall, the meetings have been considered as well-run. Papers are issued five working days ahead of the meeting and are of good quality. The minutes of the meetings reflect thorough and informed debate for items with a rigour for matters not proceeding as expected and support for positive progress as assured. Deep dive topics continue to have the longest agenda time to facilitate the quality of discussions. After every meeting the Committee provides Highlight Reports for assurance levels received for agenda topics to the Trust Board.

### 2.2 Committee Priorities 2019/20

In the 2019/20 annual review, the following priorities were determined for QAC during 2020/21;

- Patient and staff viewpoint
- High standards
- Staff wellbeing
- Infection control
- Equality and diversity
- Leadership and Culture

- Quality improvement
- Oversight of the assurance related to COVID-19 recovery and restoration

These priorities are being met in a number of ways. They fall into the remit of QAC, and align to the COVID committee agenda priorities. In addition to scheduled work plan items, there have been deep dives and a joint QAC/FPC workshop aligned to these areas.

Patient and Staff viewpoint. In September 2020 the Committee discussed the format and key lessons learnt. It was agreed to defer the agenda item to allow more focus on the two main items a review would be undertaken by the Chairs of FPC & QAC with the Governance team with recommendations for discussion and approval at FPC and QAC.

The Committee has adopted a more open, learning and triangulated approach to its business through;-

- The introduction of bi monthly pre meetings to jointly review agendas and priorities with FPC and the Trust Governance Team.
- The QAC Chair attended FPC between April and August 2020, followed by a shared NED (RM) now attending FPC from September 2020.
- The communication of its remit and priorities to all colleagues across the Trust through the staff internal web sessions for Step up to Great
- The welcoming of external observers.

### 2.3 Key in-year changes

There have been a number of significant changes impacting on QAC during 2020/21, these include;

- Committee scheduling. The meeting has been moved to later in the month to support the flow of information. The meeting has moved to bi-monthly (from September 2020, this was delayed from the original planned date of January 2020 due to covid) and following a lessons learnt review with FPC of the impact of bi monthly on the work schedule the meeting has been extended to three hours in duration from November 2020 (half an hour longer than the former two and a half hour meeting).
- A revised report format has been introduced into the Trust to support more focussed presentation and clarity over what is being asked of committees.
- Board Architecture. This project has involved a full review of what an NHS Trust Board must and should receive based its constitutional, statutory and mandatory requirements , including items according to the scheme of delegation and best practice items recommended for Board oversight. The architecture determines which items are not being delegated by the Board, which items are being delegated to the level 1 committees or the executive team and details the assurance route. We revised the work plan for QAC based on this architecture which commenced from 1 April 2021.

- The ORR is now shared with the level 2 committees to support the flow of assurance from the level 2 committees into the level 1's. This has been rolled out since October 2020.
- From December 2020 there were two newly formed level 2 committees (replacing the former single level 3 committee); these are;
  - Safeguarding Committee
  - Legislative Committee which encompasses MHA/MCA
- The establishment of an LLR ICS and the East Midlands Provider Collaborative for Adult Eating Disorders.

#### 2.4 Achievements, successes

Feedback on achievements from Committee members primarily falls within the following themes;

- Remaining focussed on workforce and health and wellbeing of staff during the pandemic.
- Shorter sharper meetings & Bi monthly meetings.
- A well-attended and run committee in the context of a COVID pandemic
- Development of more sophisticated quality metrics including covid related metrics.
- Assurance and appropriate positive or negative assurance well described and challenged.
- Focus on quality and safety throughout Covid and papers focused on impact of covid to highlight any risks well.
- Improved oversight of quality issues through developed Quality Forum and re-design of LEG/Safeguarding committees.
- DON report and Individual deep dive papers well developed
- Good oversight of risk

#### 2.6 Challenges

Feedback on challenges from Committee members primarily related to the pressure on resource availability due to COVID. The challenge of the pandemic presented barriers however verbal reporting was often agreed and found to be helpful. Impact of COVID meant Level 3 committees have not been running and therefore some new risks emerged as a consequence e.g. medical devices, water safety. Business of agenda means limited time for questions/discussion at times.

### 3. Future Plans

The future plans and priorities identified for the QAC will ensure that the Committee is focusing on the right agenda during 2021/22, these include;

- Workforce health and wellbeing; workforce road to recovery following the pandemic. To Progress the people plan.
- Ensuring a whole trust approach to the quality agenda. Continued work on quality metrics and supporting Level 2 committees' development of this.
- More focus on health inequalities starting with patient level data. Business intelligence and Data Quality remain priorities.

3.1 The Committee will continue its oversight and scrutiny of priorities relating to COVID-19, the Step up to Great Strategy, deep dives, and areas of strategic risk.

The overarching thematic priorities of the QAC for 21/22 include;

- Impact of Integrated Care System and Provider collaborative
- Induction of new NED
- Establish and embed the process for reporting on third party assurance to the Committee
- Ongoing implementation of the revised governance.