

QAC – 25<sup>th</sup> October 2022 9:00 – 11:30am - 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

Agenda Item:	Assurance level:	Committee escalation:	ORR Risk Reference:
Director of Nursing, AHPs & Quality Escalations including a System Update - verbal	NA	Noted system risk share processes with the Clinical Executive Forum reviewing risks. It was reported that ambulance handovers remain a challenge. The Quality Safety Risk Summit for Urgent and Emergency Care has now taken place with a focus on parity of esteem. A Quality & Safety Review is planned following the recent BBC Panorama documentary. An impact review was carried out on the Phoenix Unit in October and initial positive feedback has been received. The Quality Dashboard developments will be incorporated into the new format Performance Report which will have an initial focus on quality metrics. A group role of Head of Surveillance has been discussed with NHFT and is in development.	
CQC Action Plan Assurance Report – Paper C	HIGH	Following the recent Mental Health Act inspection on Cedar Ward at The Willows, an action plan is being developed to address the areas of concern which included gaps in reading rights; collaborative care planning and some patients not knowing their named nurse. The Directorate of Mental Health (DMH) are starting a daily huddle for Quality & Safety and this will address the issues that were raised at the inspection. Since this report there has been an inspection on the Belvoir Ward and initial feedback has been positive. A new tool has been developed to assess against the 'you said' work to ensure that we are CQC ready.	61
Safeguarding Committee Highlight Report 10 <sup>th</sup> August 2022 – Paper D	MEDIUM	It was confirmed that the committee have the medium assurance matters in hand. The Single Sex Accommodation Policy is being updated. The Estates Plan noted the lack of rooms for outpatient clinics as a live issue in FYPCLD. NHS Digital have withdrawn Control of Patient Information Access which is affecting access to patient records by the Safeguarding Team and impacting capacity. QAC received medium assurance from the paper due to the out-of-date policy and other issues arising in the report.	78
Quality Forum Highlight Report 8 <sup>th</sup> September 2022 – Paper E	MEDIUM	The Serious Incident (SI) item has split assurance but QAC are to note the improvement in the narrative for this issue. It was noted that the SI low assurance on performance is not reflected in the ORR but it was due to specific deep dives into incidents by the Quality Forum and whilst there is an increased number of	59, 84

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		incidents in DMH there is also grip. The next deep dive planned will consider why there are incidents in the first place. QAC requested a report back around the detail on a request on the Quality Forum highlight report for a task and finish group to be set up. QAC received medium assurance from the paper until evidence of the deep dive work is received.	
Performance Report - Quality and Workforce Measures – Paper F	MEDIUM	The vacancy rate remains a concern but there is work to support this and a plan in place. Covid infections are starting to impact on absence rates. Recording of clinical supervision is reduced and there is a focus on this matter at executive level. The increase in level 2 pressure ulcers was noted and it was confirmed that they were at trajectory until August when there was a spike which may have been linked to the high temperatures – a deep dive into this is being carried out. An update on the trajectory will come to the QAC December meeting. It was agreed medium assurance was received due to the number of red rated areas within the report.	61, 84
Medical Director Escalations Verbal	NA	The continuing workforce challenges were noted with national difficulties in recruitment and retention of doctors. Locally work is ongoing to address this including looking at caseloads and hotspot areas. A registrars meeting is taking place in November offering a chance to speak to newly qualified staff and determine what flexibility can be offered, as the job market has changed with many staff operating in other sectors alongside the NHS. An interim Deputy Medical Director will start in November and 3 International Fellows have been recruited.	
Mental Health Act (MHA) Governance Delivery Group Highlight Report 21 <sup>st</sup> September 2022 – Paper G	MEDIUM	The paper noted major changes within the group. The MHA reporting has been benchmarked and there are two areas of reporting – on statutory requirements and on code of practice requirements which are desirable but not required in law. Moving forward the statutory requirements will be reported on (which have always been compliant) and the code of practice will continue to be reported on at a service level, where there will be attention to Section 132, Section 17 and capacity to consent. A robust programme of quality improvement is to be delivered on the wards and QAC will be updated further at the next meeting on its progress.	61
SUTG Delivery plan – Paper H	HIGH	The paper detailed the work ongoing in Community Mental Health Teams (CMHT) to reduce caseload sizes, address long waits and improve responsiveness of services. LPT have embarked on an NHS England (NHSE) programme around retaining the more mature medical workforce and LPT will focus on the whole workforce with plans in place to speak to every consultant and report back to NHSE to support retention. Consultants’ meetings have been positive with good engagement. In order to review progress QAC requested that this item is brought back to the February 2023 meeting.	86

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Sexual Safety Annual Report – Paper I	HIGH	The report offers assurance that there are processes in place and describes measures to secure safety. LPT is part of the National Sexual Safety Collaborative which has developed standards and guidance to support improvements in this area. A new quality improvement programme has commenced and the incident data contained within the report confirms that numbers of incidents have reduced over the last 4 years.	
Quality and Safety Review Terms Of Reference Report – Paper J	NA	The paper detailed the response to Claire Murdoch’s letter, the approach to be taken by LPT and the work planned. A Quality and Safety review will be led by the new Interim Director of Patient Safety across NHFT & LPT and an outcome report will be reported back to QAC & Trust Board in due course.	
Director of HR Verbal Escalations including Strategic Workforce Recruitment & Agency Plan Update - verbal	NA	Workforce remains the trust’s biggest risk and as such remains a key focus. Annual establishment reviews are underway. A dataset has been created against the milestones and ambitions set out in the Strategic Workforce Plan and this is being reported on monthly. There is a focus on vacancies in 4 main areas and the Executive Management Board continue to provide scrutiny. The dataset will be discussed at QAC in December. QAC was asked to note concerns around capacity in the recruitment team and impact on services. This will be reviewed in the Organisation Risk Register (ORR).	
Strategic Workforce Committee Highlight Report 20 <sup>th</sup> September 2022 – Paper K	HIGH	The committee had identified the items raised in the above verbal update. An executive development session is planned for 15 <sup>th</sup> November which will be OD focussed and have the theme of reducing the burden to support this work. A review is planned for February to assess if the milestones in the workforce plan will be achieved.	84
ORR – Paper L	HIGH	There are currently 8 risks on the ORR for which QAC have oversight, 2 of which are high – vacancy rates and capacity in CMHT. QAC was asked to support the closure of risk 80, as mitigating actions are in place. Assurance will be sought around delivery of the flu plan and monitoring of the CQUIN measures. A directorate level risk around the uptake was agreed as a useful way forward. QAC approved the closure of risk 80 and escalation to the Trust Board for a discussion on future oversight.	84, 86
Committee Mid-Year Review – Paper M	HIGH	The report confirmed that the committee have been effective and quorate in the first 6 months of the year. Recommendations for ongoing improvement and a change in governance are detailed within the report. The Terms Of Reference and workplan are to be reviewed following the discussions held at the recent Trust Board development workshop and this will be brought back to the December QAC meeting.	
Policy Committee Highlight Report 24 <sup>th</sup> August 2022 – Paper N	MEDIUM	The amber and red items on the report refer to out-of-date policies or policies that are due for renewal. The process of governance is being reviewed for more robust oversight by the relevant level 2 committees reporting to QAC. There will be a	

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		paper detailing this further presented to QAC in December. QAC received medium assurance from the paper due to the 28 out-of-date policies but were assured by the plans in place to manage this.	
Health and Safety Highlight Report 1 <sup>st</sup> September 2022 – Paper O	HIGH	2 key ambers in the report were discussed and confirmed as being resolved. High referral rates to Occupational Health due to stress were noted and QAC will receive details in the next highlight report.	74
Papers/updates not received in line with the work plan	NA	<ul style="list-style-type: none"> <li>• Learning Disability Improvement Standards Annual Report – moved to December</li> <li>• Accessibility Standards Annual Report – moved to December</li> <li>• Freedom To Speak Up 6 Monthly Report – moved to December</li> </ul>	

<b>Chair of Committee:</b>	Moira Ingham
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