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Quality & Safety – 28th February 2023 09.00-11.30 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 and Quality – verbal escalations	NA	LPT continues to support winter pressures in the system with increased capacity and flexibility in Community Health Services. Service visits by the Chief Nurse and Chief Medical Officer have gone well. Final figures for staff flu vaccination and Covid boosters are above the regional average. The Infection Prevention and Control team are analysing the increase in Clostridium Difficile cases for antimicrobial use and environmental factors. There have been Quality Summits on Watermead, with a robust action plan; also the Community Mental Health Team (CMHT) related to identified staffing risk; and a follow-up summit for the Beacon Unit which shows positive improvement in staffing and risk reduction. Progress on Watermead and CMHT will be reported back to Q&S Committee as per workplan.	86, 89
Joint Director of Patient Safety Update – Paper C	MEDIUM	Received an update on actions taken as a result of the Quality and Safety review, discussed at the December meeting. Clear governance of actions shown and good progress so far. Positive feedback on review methodology from NHS England. Agreed that the work on closed cultures needs to tie in with wider culture development work and there needs to be link to Quality Dashboard and new format Performance Report. Q&S will receive 6 monthly updates on the actions.	73, 88

Agenda Item:	Assurance level:	Committee escalation:	ORR Risk Reference:
Quality Forum Highlight Report 12 th January 2023 - Paper D	MEDIUM	Improvement trend on Serious Incident Completions, with each directorate own recovery plan. There has been slow progress so advocating change in process using quality improvement methodology. Work underway to establish an End of Life Care group with a patient and carer voice. Cleaning standards risk escalated to the Organisational Risk Register. The committee took high assurance on oversight demonstrated by the Quality Forum but elements discussed need to show more progress.	59, 89
Safeguarding Committee Highlight Report 25 th January 2023 – Paper E	MEDIUM	Issues of capacity in the Safeguarding Team were noted. All vacancies have been recruited to and staff will be in place by mid-April. Additional supervision sessions for safeguarding children have been provided for the Families Young People and Children (FYPC) Directorate and a new Supervision Safeguarding Strategy is being developed for staff across the trust.	61, 84
Safeguarding Quarter 3 Report – Paper F	MEDIUM	Following changes to Teen Health 11+ Services by Leicestershire and Rutland local authorities, LPT are providing 2 Health Practitioners to support children referred. There will be an evaluation of these changes at the end of year one in August. Compliance with new safeguarding training is expected to exceed 90% target by December. There is still no national guidance on introduction of Liberty Protection Standards. Quality Improvement Plan is on track but would benefit from further data to demonstrate progress.	61, 84
Trust Ligature Reduction Group Update – Paper G	HIGH	There have been only 3 incidents of fixed ligatures in last 3 months, while non-fixed ligatures remain a high reporting issue. There are more changes to the Ulysses system to assist with coding and review of incidents involving non-fixed ligatures. The groups will merge from March and continue to meet monthly.	59

Agenda Item:	Assurance level:	Committee escalation:	ORR Risk Reference:
CQC Action Plan Assurance Report – Paper H	HIGH	Assurance received on compliance with actions. 3 MHA Inspections reports have been received, actions being addressed and robust method of shared learning. Thematic analysis of themes has been done and the committee asked for report on themes to come in next report or via highlight report. Work ongoing to involve service users and carers in Accreditation visits. November system Special Educational Needs (SEND) inspection showed positive changes but some system improvements still necessary which LPT is supporting.	
Medical Director – verbal escalations	NA	Ongoing challenge of recruitment and retention of medical staff. 4 new consultants recruited on Bradgate Unit, 2 of which were LPT registrars. Junior Doctor industrial action going ahead with approximately 105 intending to be on strike for 3 days. Plans have been made to provide safe clinical cover, focussing on in-patient areas and some routine work will have to be cancelled.	
Mental Health Act Governance Delivery Group Highlight Report – Paper I	MEDIUM	Fully compliant with statutory requirements of Mental Health Act (MHA). Code of Practice compliance shows some improvements in reading of rights and consent to treatment on admission, but not consistent across all areas. Recording of Section 17 remains a challenge due to technical issues. Recording of MHA training by doctors is being addressed and compliance is over 90%.	61
Performance Report (Month 10) – Quality and Workforce Measures – Paper J	MEDIUM	Slight increase in Grade 4 Pressure Ulcers being investigated. Stage 2 incidence levels have remained constant so a benchmarking exercise is underway along with collaborative quality improvement work with NHFT. Apart from flu vaccinations all other CQUINS are expected to meet targets, including annual Learning Disability health checks. Some workforce data will be reported to the People and Culture Committee in future for a deep dive into	84

Agenda Item:	Assurance level:	Committee escalation:	ORR Risk Reference:
		sickness and absence and health and wellbeing.	
Six Month Safe and Effective Staffing Review – Paper K	MEDIUM	Vacancies for registered nurses still above national average. Slight decrease in number of planned shifts filled by temporary staff but still at a high level. No correlation between patient complaints and nurse sensitive indicators. A triangulated establishment review has been completed which will inform the workforce plan.	84
Annual Workforce and Service User Equality Reports – Papers L, Li	HIGH	These papers inform the public duty to publish but also identify learning and action plans where gaps exist. Some variances in workforce data but none significant. Workforce report will go to People and Culture Committee in future. Health Inequalities is a priority in the Quality Account and service user data collection will need to reflect this. Some over-representation of black people in restraint and seclusion data was noted and is being reviewed.	
Step Up To Great Mental Health delivery plan – Papers M, Mi	MEDIUM	This was received as a follow up action (690) as to how plan is being monitored. All actions identified are on track including those requiring further support. Robust project management methodology demonstrated. The committee requested more outcome measures of the actions when it receives the next iteration.	86
Organisational Risk Register – Paper N	MEDIUM	Noted those risks now moving to the People and Culture Committee and new risk 89 related to cleaning standards. Reiterated need for clear quality and safety lens on any risks arising from deep dives, quality summits and use these to inform the risk register going forward.	
Quality and Safety Committee revised Terms of Reference – Paper O	NA	These were approved with minor changes to group titles before submission to the Trust Board	

Agenda Item:	Assurance level:	Committee escalation:	ORR Risk Reference:
Health & Safety Committee Highlight Report 12 th January 2023 – Paper P	HIGH	Issue of Occupational Health provider non-attendance at meetings noted and will be taken up in contract discussions.	
Policy Report – Paper Q	LOW	The report received was not in the correct format and requires further clarity on governance of policies, including reporting to level 2 groups. Resource requirement to upload policies on system also needs to be addressed. Return with complete paper at next meeting.	
Research and Development Reports (Q2 & Q3) – Papers – R, Ri	HIGH	Recruitment challenge referred to People and Culture Committee. All other aspects highly positive. Frequency of reporting to this committee will be reviewed as part of next year's workplan.	
Paper/Updates not received in line with the workplan	NA	<ul style="list-style-type: none"> Revised workplan to be agreed at April meeting. Revised Corporate Governance Flow Chart to be received at April meeting. 	

Chair of Committee:	Moira Ingham, Non-Executive Director 16.03.23
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