

3As Highlight Report

Meeting Name: Quality and Safety Committee

Date: 19th December 2024

Quorate: Yes Policies & expiry date: None noted								
ALERT:								
Alert to m	natters that need t	he Board's atten	tion or action, e.g., an area of non-compliance, safety, or a threat to the Trust's strategy					
8	Mental Health Act Delivery Group	Dr Bhanu Chadalavada	A verbal update was given. This means the Committee has not received a written update since June 2023. Dr Bhanu Chadalavada agreed that written reports for the months when there had been a verbal update will be provided for the February 2024 meeting.					
19	Safe Staffing monthly report (not appended as the Board will receive this report in full in January)	Anne Scott	The Committee received the Safe Staffing report for October 2023. The Committee remains concerned that despite the Trusts targets for recruitment appearing to be on track the vacancy rate for RN remains at an average of 26.4% and HCSW remain at an average of 26.2%. The chair of the People and Culture Committee (PCC) was asked to discuss at the following PCC meeting how the targets in the Workforce and Recruitment Plan were derived (see PCC 3As highlight report). It was noted that the Trust commenced its second establishment review process in October 2023, to be completed in the new year.	86,94				
ADVISE:	January)							
	e Board of areas s	ubject to on-goin	g monitoring or development or where there is negative assurance					
6	Quality Forum (QF)	Anne Scott	Reports for October and November were received, the significant breadth of the remit of the QF was once again noted. Whilst there remained challenges the following improvements were noted: • Patient Safety Incident Response Framework (PSIRF) • Improvements in the timeliness of Directorate investigations and action plans However, there were a number of risk based deep dives identified to be scheduled into the Committee forward planner: • Transferring care safely					

			a find of life case limited in a province of the customer of the customer limited		
			End of life care – including a review of the outcome of the national audit		
	- 6		Suicide prevention		
7	Safeguarding	Anne Scott	The Trust has continued to support the attendance at the Safeguarding Strategy		
	Committee		meetings as prescribed by Working Together to Safeguard Children (WTSC) (2018) for		
			those cases of children aged 11+ who are no longer served by a school nursing service		
			in Leicestershire and Rutland. Whilst a long-term solution is found Public Health, the		
			ICB and Local Authorities (County and Rutland) the Trust has agreed to continue to		
			provide this service until the end of March 2024.		
13	Accountabilit	Jean Knight	It was agreed that the Accountability Framework (AF) meeting will now report to the	75,91,92	
	y Framework		Quality and Safety committee. The implementation of the AF will mean that the Access		
	meeting -		Group will escalate to the AF meetings any issues with the oversight and scrutiny of		
	proposal		LPT's waiting list management processes		
14	Harm waits	James	Progress was given on the Reducing harm whilst waiting work. After a workshop in	75,91,92	
	update	Mullins	October three key areas of improvement were identified:		
			Strengthen Governance		
			Psychological Safety for staff		
			Policy review		
			There is a further workshop planned for January 2024		
ASSURE:					
Inform the	Board where pos	sitive assurance l	nas been received		
5	Organisation	Kate Dyer	Whilst there was no movement reported this month, and risks 86 & 94 relating to	86, 94	
	al Risk		workforce remain high at 16 respectively, the committee were assured that the risk		
	Register		management process was robust.		
16	Ligature	Anne Scott	The Committee was assured that in the light of the recruitment of the Self-Harm		
	report Q2		Reduction and Suicide Prevention Lead A new group has been developed (Trust wide		
	2023-24		Suicide Prevention and Self-harm group) to review and develop a workplan to address		
			non fixed ligatures.		
CELEBRATI	ING OUTSTANDIN	lG:			
Share any	practice, innovati	on, or action tha	t the Committee considers to be outstanding		
9	Health and	Jean Knight	The fire inspection work at St Lukes has been completed and has been audited as		
	Safety		broadly compliant – which is best practice.		
	00.007		, ,		

Report Author – Josie Spencer Non-Executive Chair Quality and Safety Committee