



TRUST BOARD

Title: KEY ISSUES AND ESCALATION POINTS
Name of Committee: QUALITY IMPROVEMENT AND SAFETY COMMITTEE
Committee Chair: DR ANNE MCCONVILLE
Meeting Date: 8th December 2021

Summary of key messages:

The Quality Improvement and Safety Committee (QISCom) met under the interim governance arrangements put in place during the Covid19 pandemic.

Substantial assurance can be taken from the information presented to the Committee from a number of annual reports and updates. The Committee commented positively on the quality of the reports received and the level of detail described within them.

Annual reports:

- **Information Governance (IG):** The report highlighted a slight increase of IG confidentiality issues, with 4 cases being referred to the ICO, with no further action required. There were fewer Freedom of Information requests in 20/21 than in the previous year (172 versus 249), however a review of the process will be undertaken to ensure the team manage any new requests in a timely manner. It was noted that the Data Quality Group had recommenced and will report into the audit committee for governance. However, there will be a line of sight to QISCom especially for any issues pertinent to quality or patient safety data. The key priorities for the next 12 months were noted. **Assurance: substantial.**
- **Professional Education:** Services had struggled to recruit to the Health Education England funded courses this year due to staff capacity. This links to Board discussion around workforce. Discussion around Advanced Practice and the early conversations around next steps in relation to this pathway were noted. **Assurance: substantial.**

Thematic Reviews:

- **Serious Incidents and Incidents:** Update provided on the patient safety framework and the outcome from the 2021 Freedom to Speak Up national results. The data showed an increase in incident reporting (mostly low and no harm incidents). Examples of Duty of Candor were identified (as requested at a previous meeting) and a further action for an exploration of insight into the patient experience and complaint data in relation to inequalities and protected characteristics was asked for at the next review. **Assurance: substantial.**
- **Medicines Management:** Not expected at this meeting, update provided in the sub-group section.
- **Patient Experience (April-September 21):** The Friends and Family Test score was noted at 97.44%. The increase in complaint activity was highlighted, this is in line with the national picture. There will be some changes to the Complaints/ PALs team in the New Year in relation to staff turnover – all posts have been advertised following a staffing review. **Assurance: substantial.**
- **Infection Prevention and Control (IPAC) (April-September 21):** Annual report provided at the last meeting, update on IPAC activity delivered via the sub-group paper.

Reports from Committee Sub-groups:

- **Learning from Deaths** - the summary report is on the Board agenda under a separate item. It was noted that even with the pressure staff are under, place of death for patients remains a priority. Additionally, the approach to training and learning lessons was identified as good practice.
- **Safeguarding** – feedback was received at the meeting that the Mental Capacity Training for Mass Vaccination staff was very good. Update provided on the Liberty Protection Safeguard implementation and Trust response. The safeguarding risks are reviewed on a regular basis with no change to risk 3227. The Prevent policy was approved by the Committee.
- **Medicine Safety and Governance Group** – several PGDs have been approved within this meeting. Incidents are reviewed and themes identified, the group has oversight of the syringe driver upgrade programme.
- **Infection Prevention & Control (IPAC)** – update provided on the flu vaccination campaign and on the requirement for staff to be doubly vaccinated against Covid by the end of March 2022; a discussion around the Trusts approach to this requirement was well received. The report highlighted recent IPAC safety incidents which are mostly needlesticks. These are being individually discussed with the service lead and any actions monitored via the IPAC Committee or Clinical Advisory Group for Mass Vaccination.
- **Information Governance Steering Group** – update provided within the annual report.
- **Emergency Planning, Resilience and Response Report** – It was noted that the report was out of sequence, this will be altered for 2022. The NHS is still operating at a national incident level of 3, and all on-call procedures remain in place (with an additional Rota for Mass Vaccination). The Incident Management Team Meeting continues to be held weekly. A new risk has been added to the register which is aligned to the expected winter surge.
- **Health and Safety Committee** – it was noted that this was a new report for QISCom, and that the last meeting was not quorate. Mitigations are in place in relation to any identified health and safety risks. The Committee also received assurance around the fire safety procedures at Nash House. This Committee will still retain a link to the Infrastructure Committee as well as QISCom.

- **Risk Review** – Risk reviewed as part of the Safeguarding sub-group update.

Escalation Points:

- The two annual reports received by the Committee provided substantial assurance.
- Safeguarding risk 3227 continues to be reviewed regularly, the risk score remains at 16.
- The Committee approved the updated Prevent policy.
- The Committee noted and welcomed the trust’s approach to the mandated vaccine requirement.

Emerging Risks/Issues:

None.

Examples of Outstanding Practice or Innovation:

- The Learning from Deaths training and learning process is to be commended.
- A good assessment of the Liberty Protection Safeguard implementation has been undertaken – which has highlighted some extra training requirements for CCS staff.

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