



TRUST BOARD

Title: KEY ISSUES AND ESCALATION POINTS
Name of Committee: Quality Improvement and Safety COMMITTEE
Committee Chair: Anne McConville
Meeting Date: 28th August 2019

Summary of key messages:

A number of **annual reports** were received relating to the following areas:

- Clinical Audit – Next Year's report to include comparison from previous years for those audits that have been repeated. Updates are reported to the Clinical Operational Boards as per cycle of business (to include improvements made as part of audit process and rolling performance going forward)
- Safeguarding – this report gave *reasonable assurance* against the NHSE Safeguarding Assurance Framework (2015) that we have appropriate safeguarding leadership, expertise and commitment at all levels of the organisation and are fully engaged with and supportive of, local accountability and assurance structures. This level of assurance is supported by external challenge and scrutiny from local Safeguarding Adult and Children Board partners and from our regulator as part of the Care Quality Commission annual inspection regime.
- Information Governance – this report gave assurance that we complied with the requirements of the Data Security & Protection Toolkit and noted that data quality is overseen by the Information governance Steering Group – this section could be enhanced next year with more specific updates re data quality performance and development of standards.
- Research – a comprehensive annual report against our strategy was presented- key highlights being: the increase in number of clinicians awarded a variety of research fellowships; additional funding from Clinical Research Network Eastern to reflect our increasing research portfolio; recognition as the most improved trust in the eastern region with an 80% increase in recruits to studies; Increased research capability funding to help develop research grant proposals and the research Team's role in leading the development of Patient Outcome Measures with our services. The Committee noted that sharing outcomes from and benefits of participating in research studies could be enhanced.
- The Infection Prevention & Control Annual report previously presented to the committee was approved following two small amendments.

Reports from sub- groups included :

- Medicines Safety and Governance Committee – although *reasonable assurance* was given by the group that we handle, manage and govern medicines safely and effectively, the Quality Improvement and Safety Committee judged the information to provide *substantial assurance*.
- Strategic Safeguarding Group – Reasonable assurance given to the committee which included information from external assessments (ie CQC) and internal performance. Training requirements under the revised Safeguarding Adults and Children legislation are currently being considered.
- Infection prevention & Control – Reasonable assurance given by the IP&C committee
- Information Governance Committee – assurance given re compliance with the Data Security and Protection Toolkit
- Learning from Deaths – this is reported in full under separate cover to the public Board in September. Of note is the Trust's commitment to assist with CCG led reviews of deaths under

the Learning Disabilities Mortality Review process (Leder)

- Clinical & Professional Committee – *substantial assurance* given that our Clinical Leaders are actively engaging with the Quality & Clinical Strategy and contributing to our Trust Objective to 'Deliver outstanding care'

Updates on the implementation plans for the Quality and Workforce Strategies were given. These are also presented to the Board in September as part of the biannual strategy update.

The Emergency Preparedness Resilience and Response core standards self assessment for the Trust was approved with 8 out of 10 standards declared compliant and 2 partially compliant. These involve training and exercising and Business Continuity Plans.

Policies approved:

Safeguarding Children

Escalation Points:

Nothing to escalate – risks being appropriately managed.

Overall the annual reports and sub group reports to the committee are maturing to focus on assurance that can be taken from the information.

The Committee is asking Clinical Operational Board to focus on delivery of clinical audit plans through their cycle of business.

Emerging Risks/Issues:

Nil

Examples of Outstanding Practice or Innovation:

The highlights from the research annual report :

- The exceptional increase in clinicians who have successfully applied for and been awarded Research Internships (Clinical Research Network (CRN)/Health Education East (HEE) and Fellowships (National Institute for Health Research and Collaborations for Leadership in Applied Health Research)
- The Clinical Research Network Eastern (CRN E) has continued to recognise the Trust's increasing research portfolio activity by providing additional funding.
- The Research Team has been supporting the Trust wide Patient Outcome Measures work stream.

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Date: 4th September 2019