



TRUST BOARD

Title:	KEY ISSUES AND ESCALATION POINTS
Name of Committee:	Quality Improvement and Safety COMMITTEE
Committee Chair:	Anne McConville
Meeting Date:	29th June 2020

Summary of key messages:

The Quality Improvement and Safety Committee met under the interim governance arrangements put in place during the COVID 19 pandemic.

Substantial assurance can be taken from the information presented to the Committee from the following sources which were noted to be of improved quality and assurance that was able to be taken from them:

1. A number of annual reports:

- **Incidents (including Serious Incidents SIs)**

The summary of learning from Serious Incidents and incidents clearly identified actions taken to improve practice. The four SIs reported during 2019/20 related to safeguarding children, clinical assessment and treatment in our Bedfordshire Eye service and care of a deteriorating patient in our Luton adult service. Summary slides of relevant learning are shared with services to include in their governance sessions/team meetings.

- **Patient Experience**

The report highlighted numerous examples across our services where feedback has been used to improve practice. This includes feedback from patient stories, PALS enquiries and learning from complaints.

- **Medicines**

This report highlighted the extensive work undertaken during 2019/20 to consolidate medicines practice and governance alongside learning from audits and incidents. The Medicines Management Team had been pivotal in supporting the procurement of our new trust wide pharmacy provider.

2. Reports from sub- groups included :

- **Learning from Deaths** – the summary report is on the Board agenda under a separate item.
- **Information Governance** – A number of elements of IG practice were highlighted including incident trends, updates to a number of our systems and processes i.e. archiving records, Information Sharing Agreements and Privacy Impact Assessments (including those for the different video consulting programs that we are currently using)
- **A trust wide Clinical Ethics Consideration Group** has been established during the pandemic to consider any issues that have been raised. Areas considered include the appropriate PPE for resuscitation situations and the use of masks when working with children or people with certain disabilities. This group reports into the trust wide Incident management team

3. Policies approved:

- Research
- CCTV Policy

4. Quality Account

The 2019/20 draft Quality report was presented to the committee. Members were asked to review and send comments to JC by 17th July prior to external circulation to mandated stakeholders for their comments. The final version will be brought to the September Board.

5. STP Quality Non Executive Leads meeting (attended by Anne McConville and Anna Gill)

Non-Executive Director Quality leads across the Cambridge and Peterborough STP met virtually to share experience/ risk / issues affecting patient safety/ quality during the Covid 19 pandemic, consider how we might incorporate system considerations into our organisational committee roles and how as a group/system we might ensure ongoing system assurance. The focus going forward during the next phase of restoring service provision needs to focus on the currently unknown impact of the COVID-19 pandemic on patients and service users who have not been able to access our services for a number of reasons.

The importance of patient pathways across organisational boundaries was acknowledged particularly as we move to the next phases of restoring and restarting some elements of our service provision.

This group will continue to meet to share information and new/ good practice; challenge organisational rather than system approaches; take system quality and safety concerns into our own committees and agenda and to develop an understanding of quality and safety across the system.

Escalation Points:

Nothing to escalate – risks being appropriately managed.

Emerging Risks/Issues:

None

Examples of Outstanding Practice or Innovation:

The Annual reports contained a number of examples of good practice including:

- Children’s Community Nursing Teams working 7 days a week during the pandemic which has supported children to receive IV antibiotics in their homes rather than having to attend an acute setting
- The use of ‘just in case’ drugs in Luton adult services to ensure timely pain relief for patients with palliative care needs
- The use of audio visual consultations where appropriate in a number of services. Face to face contacts are also offered if this is not appropriate.

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