

Quality Assurance Committee

Trust Board	Item: 16
3rd October 2018	Enclosure: L
Purpose of the Report: To report on the main areas of discussion at the Quality Assurance Committee meeting held on the 6 th September 2018.	
For: Information <input checked="" type="checkbox"/> Assurance <input checked="" type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input type="checkbox"/>	
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	
Legal / Regulatory / Reputation Implications:	Regulatory and compliance implications
Link to Relevant CQC Domain: Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well Led <input checked="" type="checkbox"/>	
Link to Relevant Corporate Objective:	All Objectives
Document Previously Considered By:	

Report for Trust Board and COG

It is noted that silver command was in operation so two agenda items were not presented (Frailty and Update on Trust Major Transformational Projects).

- The committee noted the achievement of the 'Outstanding' Trust rating following the CQC report.
- Integrated Performance Report was scrutinised. The committee noted an improvement in avoidable pressure ulcers and requested a more detailed report for continued assurance that improvement actions in place are effective. A slight increase in falls was noted in July; the Traffic light system pilot will be rolled out throughout the hospital, along with a re-launch of Intentional Rounding. The committee received confirmation of the plans to expand the Critical Care Unit. The committee noted challenges in capacity for diagnostics; it was reported that Day 38 reporting went live in July and performance data is expected from August. Limited availability of beds continues and the trend requires continuous monitoring.
- A number of actions were taken following the publication of the CQC report relating to areas such as recruitment and retention, training etc. It was noted that recruitment of nurses has had some results with new staff starting, lack of middle grade doctors continues to be of concern and there will be a review of the rota to ensure efficiency.
- The committee received a detailed update on clinical audits and it was confirmed these are linked with the Trust improvement programme. Improvement was noted in the number of completed or in progress audits in Q1 compared to the same period last year. The committee will receive a further update on the national diabetes audits as low numbers were identified for this and the need to raise the profile of this category. It was noted that we are working on increasing the level of NICE quality standards compliance and with the aim to have action plans in place.
- The Clinical Audit Policy is currently being reviewed and updated, with key changes around identifying 'must-do' audits and priorities, and completing risk assessments.
- The committee received assurance on controlled drugs occurrences. It was noted that e-prescribing is now in place for both inpatients and outpatients. It was noted that particular attention is required to system alerts, especially in case of several prescriptions as these alerts can be overridden.
- The committee discussed Maternity KPIs and noted some challenges around analysing the relevant data, however assurances were given that these KPIs are being monitored outside of this meeting.
- The committee wishes to escalate for attention of the Trust Board that quality indicators require continued monitoring for assurance.
- The committee continues the review of its workplan, which is soon to be finalised.