

### Quality Assurance Committee Update

<b>Trust Board</b>	<b>Item: 12.2</b>
<b>26<sup>th</sup> March 2014</b>	<b>Enclosure: R</b>
<b>Purpose of the Report:</b>	
To report on the main areas of discussion at the Quality Assurance Committee meeting held on the 5 <sup>th</sup> March 2014	
<b>For</b>	
Information <input checked="" type="checkbox"/> Assurance <input checked="" type="checkbox"/> Discussion/decision <input type="checkbox"/> Performance <input type="checkbox"/> For Approval <input type="checkbox"/>	
<b>Sponsor (Executive Lead):</b>	Candace Imison, NED, Chair of Quality Assurance Committee
<b>Author:</b>	Jacky Bush Head of Quality & Risk Assurance
<b>Author Contact Details:</b>	020 8934 3846 <a href="mailto:jacky.bush@kingstonhospital.nhs.uk">jacky.bush@kingstonhospital.nhs.uk</a>
<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	Links to Strategic Objective 1 in the Board Assurance Framework
<b>Legal / Regulatory / Reputation Implications:</b>	N/A
<b>Link to relevant Corporate Objective</b>	Strategic Objective 1: to deliver quality, patient centred healthcare services with and an excellent reputation.
<b>Document Previously Considered By:</b>	n/a
<b>Recommendations:</b>	
<b>The Audit Committee is asked to:</b>	
<ol style="list-style-type: none"> <li>1. Note the main areas of discussion at the March 2014 Quality Assurance Committee Meeting and the assurances gained</li> <li>2. Note that the next meeting of the Quality Assurance Committee is due to take place on 7<sup>th</sup> May 2014</li> </ol>	

## Update to Trust Board

**March 2014**

<b>QUALITY ASSURANCE COMMITTEE (QAC)</b>	
<b>HEADLINES</b>	
<p>This report provides the Trust Board with an overview of the key risk issues discussed and assurances given at the Quality Assurance Committee (QAC) meeting held in March 2014.</p> <p>The QAC noted that the key quality risks have significant managerial attention and focus.</p> <p>The Committee did not identify any new areas of significant risk, however highlighted the first two items to the Audit Committee.</p>	
<b>Risk Issues Discussed</b>	<b>Actions / Update / Comments</b>
Clinical Audit report	The Committee suggested that a future internal audit on the robustness of Root Cause Analysis action plans is undertaken in order to gains assurance that there are SMART objectives with robust monitoring of implementation.
Feedback from C.Ciff Peer Review	The Committee noted that the report identified some lack of consistency with regard to checklists across the wards, and noted that the Trust is working towards standardisation and a more systematic use of ward documentation.
Clinical Quality and Safety	<p>The overview of clinical quality, risks and assurances report covered current pressures in the hospital, the Clinical Quality Report, Quality Risks on the Corporate Risk Register, Board Assurance Framework (BAF), Nursing scorecard, Complaints, CQC compliance and update on the CQC post July visit action plan, update from recent external visits and a productivity programme update.</p> <p>The key areas of concerns and challenge were highlighted as being Pressure Ulcers, Hospital Acquired Infections, falls and the inpatient Friends and Family Test score which has remained static. With regard to falls it was noted that the falls bundle had been simplified and was due to be piloted. It was also noted that there had been 1 case of C.Diff in January 2014, but none in December 2013 or February 2014. It was noted that the perinatal mortality rate per 1000 births KPI had increased, however this included a number of Termination of Pregnancy's for medical reasons, and the increase did not indicate an increase in risk.</p> <p>The Nursing scorecard and other observations and feedback identified concerns around Blyth, Derwent and Alex. Actions are in place to address the concerns. The Committee will continue to review wards of concern to identify any trends.</p> <p>The Committee agreed the current risk score for the three principal BAF risks it is the lead for.</p>

C.Diff Peer Review feedback	The Committee reviewed the C.Diff Peer Review report and associated action plan. The issue of 'clutter' on the wards was noted, and the Committee requested that a discussion on the ward environment is held at a future QAC meeting.
Quarter 3 2013/14 Clinical Audit Report	The Committee noted that 49 clinical audits had been completed in Q3, many of which were associated with the CNST assessment. Of the 49 audits, 3 had been RAG rated as red; clinical documentation, oxygen prescribing and dietetic, in particular the provision of drinks and fluid intake documentation. It was agreed that Nutrition would be the subject of a future deep dive.
Quality Account progress	The Committee noted that there had been a huge response to the consultation on the key priorities. The Quality Account is currently being drafted.
Presentation on current quality improvement projects	<p>The Medical Director gave a presentation on the current Quality Improvement Projects, noting how they had been identified (through external and internal data) and explaining the new process for registering and undertaking a Quality Improvement Project. Projects discussed included: Sepsis, Oxygen prescribing and long lines.</p> <p>It was noted that there was also a Hospital at night / Out of hours care project. The Committee asked for further details on this project at a future meeting.</p>
Complaints Committee	The QAC received a verbal report from the February 2014 Complaints Committee, noting that the committee had received a presentation from the Maternity Service Line on their complaints management process and learning/improvements made following recent complaints