

## Quality Assurance Committee Update

<b>Trust Board</b>	<b>Item: 18</b>
<b>Date: Wednesday 11<sup>th</sup> April 2018</b>	<b>Enclosure: N</b>
<b>Purpose of the Report:</b> To report on the main areas of discussion at the Quality Assurance Committee meeting held on the 1 <sup>st</sup> March 2018.	
<b>For: Information</b> <input checked="" type="checkbox"/> <b>Assurance</b> <input checked="" type="checkbox"/> <b>Discussion and input</b> <input type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	
<b>Legal / Regulatory / Reputation Implications:</b>	Regulatory and compliance implications
<b>Link to Relevant CQC Domain:</b> 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"/>	
<b>Link to Relevant Corporate Objective:</b>	All Objectives
<b>Document Previously Considered By:</b>	

## Summary:

The Quality Assurance Committee met on 1<sup>st</sup> March 2018

The Chair received assurance that the noted increase in pressure damage was due to a seasonal unusually high volume increase in patients. Full discussion was undertaken and noted actions were development of a business case for investment into resources.

The Chair noted that one of the issues identified after the PU Deep Dive was the establishment of a link with tissue viability colleagues across the community and QAC is looking for assurance that steps are being taken to progress this. Community contact has been made with progress dependant on engagement. It is too early to report on the impact of this collaboration.

## CQC

The Provider Information Request (PIR) was submitted. The Trust believes that the Staff Engagement event went very well. The Patient Engagement event is taking place on 26 March. The Trust and it is waiting for the CQC to book the Well Led Assessment.

Confirmation was received on assurance on all of the 'Must Dos' to the QAC.

## Quality and Safety assurance

The divisional and integrated quality and operational performance reports were reviewed. Of note;

There have been some challenges delivering the elective programme due to pressure in Emergency services. Some elective patient care has been cancelled. At all times maintaining safe patient care was prioritised.

A&E performance: It was noted that 4 hour performance remained in the high 80s, despite huge and sustained patient activity surges throughout the Emergency Department. Despite performance being well under 95% the Trust was still performing in the top 5 across London. Implementation of the Surge Plan has gone well with everybody getting on board and managing very safely. This helped enormously..

RTT performance remains good although exceptionally challenging for Gynaecology where there is a recovery plan.

There has been an increase in falls and it was noted that there is seasonal variation. Assurance was received by the Chair that action / intervention is being taken to reduce falls within the Trust.

Staffing: Additional temporary staff was put in place to ensure safe patient care could be delivered and to ensure that Trust staff were able to take their allocated breaks. Where medical patients have been placed on the surgical wards, the Trust has over-established the staffing template to adequately meet specific patient care needs. The Chair took assurance on this course of action.

The unadjusted mortality rate has risen, as it does each winter, however the Standardised Mortality Indices remain low The Trust's Mortality Review process is now fully embedded. A number of doctors have been trained in undertaking the Structured Judgement Review (SJR). The results of the National Audit of neonatal care demonstrated very good outcomes and performance. The Chair commended the Trust on this strong achievement.

**It was noted** there is some concern about meeting the 2 week wait breast cancer target for patients and the new 28 day target from referral to treatment which comes into effect in April 2018.

**Workforce:** the vacancy rate has reduced and there are more joiners than leavers. Turnover has therefore reduced again. Sickness has gone up slightly. Mandatory training has increased.

### Deep dive reviews

#### **Complaints Procedure**

Clare Parker, Head of Complaints and Litigation presented a deep dive into the complaints process. The comprehensive presentation gave the committee assurance of the process and management of complaints. It was noted that the Trust has very few complaints referred to the Ombudsman and that these are very rarely upheld. Overall the number of complaints has slightly reduced. Examples were given as to how the Trust learns from complaints.

QAC will have a presentation once a year to receive assurance on complaints.

#### **Antibiotics Stewardship**

Nicola Robinson, Antibiotic Pharmacist gave an excellent presentation of antibiotic usage and stewardship in the Trust. This gave the committee good understanding of the Trust policies and procedures around antibiotic usage and assurance that good practice in prescribing and control was in place.

The Chair stated that the Committee had received great assurance from the presentation.

#### **Clinical Audit**

Agreed to review the content and format of clinical audit reports to QAC to provide greater assurance on the implementation of improvements as a consequence.

#### **Recommendation**

The Board is asked to note the content of this report.