

Trust Board Report	Item: Quality Assurance Committee Report
Date: July 2021	Enclosure: J
Purpose of the Report:	
This report has been produced for the Trust Board Meeting to provide an update on discussions held at the Quality Assurance Committee in June 2021.	
FOR: Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input type="checkbox"/>	
Sponsor (Executive Lead):	Dame Cathy Warwick – Non-Executive Director
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	Corporate quality and safety risks are recorded on the risk register
Legal / Regulatory / Reputation Implications:	CQC registration NHS Resolution CNST
Link to Relevant CQC Domain: All	
Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input type="checkbox"/> Well Led <input type="checkbox"/>	
Link to Relevant Corporate Objective:	Strategic Objective 1: to deliver quality, patient centred healthcare services with and an excellent reputation.
Document Previously Considered By:	None
Recommendations:	
1. Discuss any concerns with regards to trends highlighted in the report.	

Quality Assurance Committee 30th June 2021

Report for Trust Board July 2021

Summary:

Assurance was provided on clinical quality through a variety of data sources and discussion. The committee were joined by Ruth Harkness who has taken on the role of Patient Safety Partner on the Committee. Ruth is currently the lead quality manager at SWL CGC.

Regular reports received and discussed for 'Quality Assurance and Control' were:

- Integrated Performance report May 2021
- Serious Incident report May 2021
- BAF Risk Register
- Q 4 reports on national and local clinical audit activity and NICE Guidelines
- Quality Priorities for 2021/22

The committee also received updates on:

- The Frailty Strategy
- The Dementia Strategy
- Antibiotic ward rounds

All of these are progressing well with increasing focus on how collaborative working with community partners can drive improvement.

The Committee noted:

- The Risk Register

Issues to note

- A programme of work continues in relation to outpatient transformation. This is a challenging piece of transformational work relating to one of our strategic quality priorities. Three key streams of work relate to changes to clinical models, administrative and clerical staff and IT. Consideration is being given to key milestones and to measurement of success. Learning from changes implemented during the COVID pandemic is incorporated in this work.
- The committee also received verbal updates on the elective recovery programme and the emergency care pathway. The former is a SWL collaboration and is progressing well with waiting times for treatment all moving in the right direction. The key challenge is in diagnostics with action plans in place to ensure recovery in audiology and echocardiography. The emergency care pathway is under some pressure. Although overall attendances remain 10% below pre pandemic levels, the pattern of attendees has changed and on some days attendances are well above normal numbers. The committee noted that there is pressure on staffing in A&E and that it is in this area where FFT results are lower than is normal at Kingston. The

changing picture of attendances locally is replicated across SWL and action plans are in place to try to ensure quality is maintained including the potential opening of community hubs where less critical patients can be seen.

- The maternity service continues to gather evidence relating to the Trusts compliance with both the Ockenden Report and CNST Incentive Scheme standards. On the CNST standards evidence is still required to show that the Trust is compliant with Birthrate Plus recommended staffing levels. At the moment funding of additional midwifery posts is linked to the outcome of a bid to the 85million National Maternity Investment pot. This issue is on the radar of both Finance and Investment Committee and the Board.
- The committee noted the excellent performance of the Trust in relation to national and local clinical audits and in relation to cancer standards.
- Finally the committee payed tribute to the work of Joselin Miles as Head of Clinical Audit. Jos will be much missed. Her contribution at Kingston has been outstanding.