Trust Board meeting: Wednesday 8 May 2013

<table>
<thead>
<tr>
<th>Title</th>
<th>Quality Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>A paper highlighting key areas of discussion at the Quality Committee meeting held on 10 April 2013</td>
</tr>
<tr>
<td>History</td>
<td>This is a regular report to the Board</td>
</tr>
<tr>
<td>Board Lead(s)</td>
<td>Mr Geoff Salt, Committee Chairman</td>
</tr>
<tr>
<td>Key purpose</td>
<td>Strategy</td>
</tr>
</tbody>
</table>
Summary

<table>
<thead>
<tr>
<th></th>
<th>The Quality Committee met on 10 April 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>This paper sets out the key decisions, actions, risks and matters for future consideration as raised by the Committee.</td>
</tr>
</tbody>
</table>
| 3 | **Recommendation:**  
The Board is asked to note the contents of this paper. |
1. Introduction

The Quality Committee met on 8 April 2013. The main issues raised and discussed at the meeting are set out below.

2. Significant issues of interest to the Board

The following issues of interest have been highlighted for the Board:

- The Committee received a written summary of a patient story recounting the experiences of a patient with severe learning disabilities who does not have capacity, and his father who has a Lasting Power of Attorney to manage his affairs. Although the overall experience of receiving care was good, serious concerns were raised about communication with the patient’s father and a lack of coordination with the patient’s other carers. The Committee was told of steps being taken to address these shortcomings and will be kept updated.

- The Committee received an update on the work being done to overhaul the systems for booking and managing outpatient appointments and clinics to reduce delays, improve the experience of patients using the system and enhance joint working with primary care. The work is to be done in 3 phases across all divisions with each workstream lasting 10 months from start to finish. The Committee will be kept updated on progress.

- The Committee received assurance that in respect of HSMR for 2012/13, no disparity had been found between mortality figures for patients admitted on weekdays and at weekends.

- The report from the Clinical Governance Committee meetings highlighted the continued prominence of the Francis Report. The Committee was notified of quality concerns that had been raised by clinical staff both internally and externally, and it was agreed that this was an expected and welcome response to the findings and recommendations from the Inquiry.

3. Key Risks Discussed

The following potential risks were discussed:

- The lack of awareness among clinical staff of the provisions of the Mental Capacity Act and the rights of persons with Lasting Powers of Attorney.

- Concern that poor communication and coordination between the Trust and primary care in relation to outpatient care could adversely affect clinical outcomes and patient safety.

- The impact on the Trust of exceeding the upper limit of Clostridium Difficile cases.
4. Key decisions taken

The following key decision was made:

- The Committee approved its objectives for 2013/14.
- The Committee agreed the draft of a response to be sent to Mr Bennett Low following his observation of the Committee’s meeting in December 2012 and this was signed off by the Committee Vice-Chairman

5. Agreed Actions

- A follow up report on the implementation of the actions arising from this patient story is to be presented to the October meeting.
- More detailed updates are to be provided within the Patient Experience Report on Red graded complaints
- The Trust’s approach to capturing patient experience is to be turned into a strategy, a draft of which is to be presented to the June meeting of this Committee for their input. A process is to be set up to ensure that patients’ concerns are accurately identified, action is taken to address them, and that any learning is shared widely. Mr Salt is to discuss this with Mrs Strachan-Hall
- An update on progress in the Outpatient Clinic Re-profiling project is to be provided to each meeting of the Quality Committee via the Patient Experience Report, and a more detailed update is to be provided every 4 months starting with the August meeting
- A further update is to be provided to the Committee confirming that the number of Learning Disability Champions in the EMTA division had been increased, and confirming what was being done about communicating with people with Lasting Powers of Attorney
- A discussion is to be held by Mr Salt, Professor Baker and Ms Walsh to finalise the quality priorities for 2013/14
- A summary of the quality concerns that had been raised by staff both with the CQC and senior management is to be presented at the next meeting of the Committee

Geoff Salt, Quality Committee Chairman
April 2013