Trust Board Meeting: Wednesday 22 January 2014
TB2014.20

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<td>Status</td>
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<th>Board Lead(s)</th>
<th>Mr Geoffrey Salt, Committee Chairman</th>
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1. Introduction

The Quality Committee met on 11 December 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 Trust Board:

2.1. The Committee received a patient story about a patient’s experience of day surgery, highlighting key issues relating to the attitude and communication of staff. It was reported that improvements were being seen in candidates progressing through the Clinical Support Workers [“CSW”] Academy, following the adoption of value based interviewing to inform selection.

2.2. The Committee received the Quality Report, noting that the Dr Foster Annual Guide had highlighted the improvements in the differential between weekday and weekend mortality rates.

2.3. The Committee received a report into a Never Event in Ophthalmology (wrong lens had been inserted into the eye of a patient). The error had been noticed at the time of the operation, and had been immediately corrected.

2.4. The Committee received a summary report of Serious Incidents Requiring Investigation [“SIRIs”] to ensure that there was appropriate reporting of information about these incidents at Board level.

2.5. The Committee received a presentation from the Director of Development and the Estate on the results of the PLACE assessment and associated action plan. It was acknowledged that further work was required to ensure that there was consistency across all four operational sites. It was further noted that the Six Facet Survey, would provide a more detailed and accurate assessment of the Trust and this would be reported during 2014.

2.6. The Committee received the final report from the NHS Litigation Authority, following successful review of the Trust’s maternity services (Level 2 assessment). An action plan had been developed to address the three areas of non-compliance identified.

3. Key Risks Discussed

The following risks were discussed:

3.1. The embedding of learning following Never Events was discussed and it was agreed that there needed to be a clear communication that repeatedly not following process would result in disciplinary action.

4. Key decisions taken

The following key decisions were made:

4.1. The Committee considered the KPI Assurance Programme, and agreed that there needed to be a range of assurances to ensure that a rounded view was taken, and this would be discussed in more detail by the Director of
Assurance, Deputy Director of Assurance and Anne Tutt, Non-executive Director, prior to the next meeting of the Quality Committee.

5. Agreed Key Actions

The Committee agreed the following actions:

5.1. Following consideration of the report on Healthcare for All, the Interim Deputy Chief Nurse was asked to review how the Trust benchmarked against other Trusts;

5.2. Following consideration of the PLACE assessment, the Director of Development and the Estate was asked to report back on progress quarterly, with a further update scheduled for February 2014;

6. Future Business

The Committee will be focusing on the following areas in the next three months:

- CQC Inspection;
- Peer review programme update;
- Monitoring of CQUIN delivery;
- Review of care pathway for patients with dementia;
- Nursing establishment, skill mix and levels in in-patient areas;
- Medical appraisal processes.

7. Recommendation

The Trust Board is asked to note the contents of this paper.

Mr Geoffrey Salt
Quality Committee Chairman
January 2014