

Trust Board Meeting: Wednesday 22 January 2014

TB2014.46

Title	Quality Committee Chairman's Report
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Status	For Information
History	This is a regular report to the Board

Board Lead(s)	Mr Geoffrey Salt, Committee Chairman			
Key purpose	Strategy	Assurance	Policy	Performance

1. Introduction

The Quality Committee met on 12 February 2014. 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 the experience of two patients with diabetes, highlighting that there was a deficit of knowledge and understanding of the treatment of Diabetes across the Trust. A Business Case has subsequently been approved by Trust Management Executive [TME] at its meeting on 27 February 2014, to support development of the diabetic service, including an increase in the number of Diabetic Nurse Specialists, emphasising that this resource must be utilised appropriately;
- 2.2. The Committee discussed how Patient Stories should be identified and considered in the future, to develop balanced patient stories which would ensure that the Trust Board was aware of key issues facing the Trust. Specific consideration was given to the appropriate role of the Non-executive Director, within the selection process;
- 2.3. The Committee noted that the Trust remained compliant with the requirements of Healthcare for All;
- 2.4. The Committee received an update on the process to recruit additional staff to acute medical wards following the recent review of the acuity and dependency of patients within the Trust;
- 2.5. The Workforce Governance update highlighted a decrease in the vacancy rates across the Trust, which was in line with the anticipated trajectory. A strategy was being developed to address the problems that persisted with recruitment and retention, which remained risk areas for the Trust;
- 2.6. An update was considered in relation to the staff and inpatient survey action plans developed for the 2012 surveys. It was noted that the Listening into Action [LiA] methodology would be used to address the findings of the next staff survey, to ensure staff engagement in development of the response.

3. Key Risks Discussed

The following risks were discussed:

- 3.1. The need to triangulate findings from Executive walk-rounds with Divisional performance reviews was discussed, to ensure that lessons were learned from incidents;
- 3.2. Nursing handover during lunchtimes was reported to be having an impact on staff's ability to attend training, and would need to be reviewed;

- 3.3. The need to improve the triangulation of quality indicators with the relevant key performance indicators [KPIs] assigned to the Cost Improvement Programmes [CIPs] was discussed;
- 3.4. The need to add to the Corporate Risk Register the issues relating to the management of diabetes (subject to discussion and agreement of TME).

4. Key decisions taken

The following key decision was made:

- 4.1. The Committee supported the suggestion that, within the Quality Report, actions described to improve patient and carer experience should be clarified and updated to be more specific;
- 4.2. The Committee supported development of the Peer Review Programme into a regular and on-going assurance process, which would look not just by division, but also at themes and pathways, which would cut across divisions.

5. Agreed Key Actions

The Committee agreed the following actions:

- 5.1. Following consideration of the process for identification of Patient Stories, the Acting Chief Nurse was asked to identify the approach taken by other trusts to determine topics for Patient Stories, to inform what approach should be taken by OUH Trust;
- 5.2. Following consideration of the Quality Report, the Director of Assurance advised that a report on Schedule 5, Regulation 28 reports issued by the Coroner would be presented to the next meeting of the Quality Committee;
- 5.3. Following receipt of an update on implementation of increased nurse staffing levels on the acute medical wards, the Chairman of the Trust suggested that the changes being made should be communicated to all staff;

6. Future Business

Areas upon which the Committee will be focusing in the next three months will include:

- CQC Inspection and Report;
- Corporate Risk Register to link with findings of Peer review programme;
- Monitoring of CQUIN delivery;
- Review of care pathway for patients with dementia;
- Medical appraisal processes.

7. Recommendation

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

Mr Geoffrey Salt
Quality Committee Chairman

March 2014