

# **Cover Sheet**

Trust Board Meeting in Public: Wednesday 12 March 2025

TB2025.30

Title: Integrated Assurance Committee Report

**Status:** For Information

**History:** Regular Reporting

**Board Lead: Committee Chair** 

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Confidential: No

Key Purpose: Assurance

# **Integrated Assurance Committee Report**

### 1. Purpose

- 1.1. As a Committee of the Trust Board, the Integrated Assurance Committee provides a regular report to the Board on the main issues raised and discussed at its meetings.
- 1.2. Since the last report to the Board held in public, the Integrated Assurance Committee had met on 12 February 2025.
- 1.3. Under its terms of reference, the Integrated Assurance Committee is responsible for reporting to the Board items discussed, actions agreed and issues to be referred to the Board, indicating the extent to which the Committee was able to take assurance from the evidence provided and where additional information was required.

# 2. Key Areas of Discussion

### **Corporate Risk Register (CRR)**

2.1. A review of the Corporate Risk Register takes place at the start of each meeting. This allows members to seek assurance on specific risks and to provide a baseline for Committee discussion.

#### **Patient Care**

- 2.2. The Committee received an update on the Trust's Winter Plan. Emergency admissions had been well-managed, with a clear escalation process.
- 2.3. The interface between hospital and social care remained a key concern. The Trust continued to advocate for joined-up solutions across the system, with a focus on improving patient care as outlined in the annual planning guidance.
- 2.4. The Patient Experience, PALS and Complaints annual report was presented. The Committee received assurance that cross-Divisional initiatives to improve patient experience were in place.
- 2.5. The Trust had responded robustly and effectively to outlier notifications from the National Hip Fracture database and was no longer classed as an outlier. Best Practice Tariff KPIs were monitored regularly at senior level and a revised Standard Operating Procedure on the pre-operative pathway was expected to deliver further patient benefits.

### **Maternity**

2.6. The Director of Midwifery reported improvements in CO monitoring and sustained reduction in incidents of moderate harm.

- 2.7. A review of telephone triage had been undertaken, and improvements would be monitored via the Evidence Review Group.
- 2.8. The meeting discussed increased demand for both obstetric and maternity services within Oxfordshire and noted that this would be raised with the Integrated Care Board.

#### Workforce

- 2.9. The Committee reviewed a detailed analysis of workforce growth for the period 2019-2024 and the actions put in place to control headcount and to ensure triangulation between business cases, productivity, and staffing going forward.
- 2.10. As part of the discussion of the regular Guardian of Safe Working Hours report, it was agreed that a "staff perspective" focusing on the resident doctor experience should be presented to the Trust Board. The Committee would also be provided with more qualitative information about the experience of resident doctors.

# **Integrated Performance Report**

- 2.11. The Committee received this regular report on performance across operational, quality, workforce, digital and financial metrics.
- 2.12. Members were briefed on the development of improved vacancy controls and business case processes.
- 2.13. Updates on elective, emergency, and diagnostic performance to date and the expected position on 31 March 2025 were provided.
- 2.14. The Committee received an update on "The Insightful Provider Board". A self-assessment would be undertaken and metrics in the IPR would be revisited to align more closely with the Trust's 3-year plan, CQC Well-Led Framework, and Board Development Programme, with a focus on providing insight to the Trust Board.

### **Annual Planning 2025-26**

2.15. A summary of planning parameters was provided; this was supplemented by a Deep Dive following the meeting.

#### **Other Reporting**

- 2.16. The following regular reports were received by the Committee:
  - Maternity Performance Dashboard;
  - Summary of the December 2024 and January 2025 meetings of the Trust's Delivery Committee;
  - Guardian of Safe Working Hours Report for Q3 2024-25;

- Patient Safety Incident Response Framework report for the period November – December 2024; and
- Report on infection prevention and control matters.

# 3. Recommendations

3.1. The Trust Board is asked to **note** the Integrated Assurance Committee's report to the Board from its meeting held on 12 February 2025.