

Red	Amber	Green
No Assurance	Limited Assurance	Significant Assurance

<b>Name of Meeting:</b>	<b>Quality &amp; Safety Committee</b>
<b>Date of Meeting:</b>	<b>29 July 2020</b>
<b>Prepared by:</b>	<b>Dr Andy Withers, Chair of Committee/Non-Executive Director</b>

Key Highlights from the meeting		
	Highlight	RAG Rating
1.	QSC received an update on the phase 2 response to COVID-19 and the plans to address the 32,000 patients on the waiting list.	A
2.	The QSC considered the Personalised Care strategy. It noted its scope, stated that it needed to align with the overall Quality & Safety strategy and requested that consideration was given to the different needs of patients and carers. An update was requested in 3-4 months to assure the Committee this had been completed.	A
3.	The Committee received the annual report for Research & Development. It was impressed by the volume and quality of the work done and commended the team for their work, especially regarding research related to COVID-19.	G

Assurances gained at the meeting		
	Assurance	RAG Rating
1.	The QSC noted that there are constructive meetings between the Head of Pharmacy and the GP prescribing lead in East Lancs regarding prescribing of medication initiated by ANHST consultants. There are currently no outstanding cases of patients not receiving recommended medication and it is expected that should not be an issue in the future.	G
2.	The Medical Director provided a verbal report around the reported drop in Cognitive Screening assessments carried out in May. An audit was performed and showed that the level of screening was in line with previous months once patients with known dementia were excluded. Work is ongoing with IT to understand why these patients were included in the denominator cohort. Performance is now back to expected levels.	G
3.	The Deputy Medical Director gave an update on the single stroke service due to the decline in SSNAP performance. Recruitment to the SALT and specialist stroke nurse posts has been completed and he presented a trajectory for improvement over the next 3-6 months and ultimately should achieve a "B" rating. Progress has been slower since the service moved to "business as usual" due to the loss of transformational support. QSC requested an exception report should these trajectories not be achieved.	A
4.	IR(ME)R – the Board was assured all the 8 actions previously identified were complete. QSC requested a further update at the end of the year to gain assurance that all the changes were fully embedded.	A / <span style="background-color: green; color: white;">G</span>
5.	BAF 02/20: QSC agreed that a combined report considering complaints, PALS processes and SI should mitigate some of the control gaps. It will take this quarterly.	A

Issues or emerging risks
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	Issues or emerging risks	RAG Rating
1.	The actions being taken to address the Ligature risk within the Trust estate were noted. Completion of these is expected to be complete in the autumn. The QSC requested a monthly update on progress to address this risk and believes the risk remains substantially unchanged at present.	R
2.	The approach to managing follow ups was supported. It was noted that this needed to be balanced against the capacity to deal with new referrals to ensure equitable outcomes. QSC requested assurance that there are easily accessible processes for complaints and clinician concerns to monitor any adverse impact of this as well as the usual AEF reporting.	A
3.	The response to the Paterson Enquiry was considered. The actions were noted and there were 2 recommendations the Board should be aware of:- 1. That patients should receive an appropriately worded letter following any episode of care. (Rec 1b) 2. That the Board should issue an early apology for any systemic issues when things go wrong. (Rec 10b)	A
4.	BAF: 01/20. QSC agreed that both the control gaps and assurance gaps need addressing and that a support and development offer should be considered for the divisions and departments. It noted that the lack of IT health record resulted in manual and less timely data.	A

#### Any other comments

- The Board and QSC may need to consider how we address the quality and safety issues of a single service across 2 providers in the APC.