

Red	Amber	Green
No Assurance	Limited Assurance	Significant Assurance

<b>Name of Meeting:</b>	Quality & Safety Committee
<b>Date of Meeting:</b>	30 September 2020
<b>Prepared by:</b>	Dr Andy Withers, Chair of Committee/Non-Executive Director

Key Highlights from the meeting		
	Highlight	RAG Rating
1.	QSC approved the Quality & Safety Strategy, noting the relationships to other subcommittee strategies that form a suite of documents describing the Trust Strategy.	G
2.	The QSC received the Annual Quality Report and supported its publication.	G
3.	Following the presentation of the Maternity Quality & Safety report in June, the Committee received an update as requested. It noted the outputs from the first of 2 workshops in defining the priorities for the service. These were supported along with the recognition that delivery of these would also address cultural and team dynamic issues.	A

Assurances gained at the meeting		
	Assurance	RAG Rating
1.	EPMA. QSC were updated around the work done by an external agency to identify options to mitigate the risks and develop options to address the identified issues. It is expected this report will be completed within the next month and quality and safety issues of the report will be considered at the next QSC.	A
2.	Liberty Protection Safeguards. QSC was informed that the proposed new legislation due to be implemented in October has now been postponed until 2022. No guidelines have been received and are not expected until late 2021 or 2022	G
3.	The national SSNAP data which was expected for the end of September had not been released at the time the Committee met. It has, therefore, not been possible to gain assurance that the anticipated improvement has been achieved. QSC were advised that there is no reason that the expected improvement should not materialise.	A
4.	As part of planning for the continuing COVID pandemic, quality triggers will be developed for each potential action/consequence.	A
5.	QSC received the 7 Day Service 6 monthly update. It was assured that there is significant work taking place to ensure compliance with Clinical Standard 2 which wasn't being met at the time of the last audit in Nov 2019.	A

Issues or emerging risks		
	Issues or emerging risks	RAG Rating
1.	The continuing actions being taken to address the Ligature risk within the Trust estate were noted. The capital investment for the Mental Health Room has been delayed until March 2021 but this does not impact upon the risk rating around ligatures in the Trust. The QSC will continue to receive a monthly update on progress to address this risk.	A
2.	The impact of "Continuity of Care" in maternity care needs to be considered as part of the second workshop planned. Both quality and people impacts need to be assessed as part of this.	A
3.	QSC received the NCEPOD Inspiring Change Action Plan - NIV. It noted that the report was based on an audit from 2017 and considerable changes in working practices and guidance had happened since then. It received assurance from the Medical Director that this was a safe service and requested an update for the next meeting that identified any gaps in compliance with the recommendations so that any outstanding risks (if any) could be assessed.	A
4.	As part of the Coronavirus update QSC noted that local system discussions were taking place about the provision of testing (including antibody testing) and how this may need to be reprioritised if capacity is limited or quality standards start to deteriorate.	A

Any other comments	
<ul style="list-style-type: none"> <li>QSC agreed that maximising flu uptake amongst our staff and population is a key priority.</li> </ul>	

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<b>Name of Meeting:</b>	Quality & Safety Committee
<b>Date of Meeting:</b>	28th October 2020
<b>Prepared by:</b>	Dr Andy Withers, Chair of Committee/Non-Executive Director

Key Highlights from the meeting		
#	Highlight	RAG Rating
1.	QSC received an update on the COVID-19 response in the organisation and the measures being taken to ensure safe high quality care continued to be delivered in the Trust.	G
2.	It congratulated the Theatre team on achieving the WHO checklist target and noted plans to celebrate this both internally & external to the organisation and share good practice within the organisation.	G
3.	QSC received a verbal update on progress since the NCEPOD Inspiring Change Action Plan – NIV was considered last month. Eligibility criteria had been tightened and a workforce model has been agreed and an accredited Training programme is in place. Outcomes (admission to Critical Care, need to use mechanical ventilation and successful discharge) had improved. The audit would be repeated once there was capacity to do so – reflecting 2017 standards where still applicable, and any updated guidance. It was assured that the service was safe and of high quality.	G

Assurances gained at the meeting		
#	Assurance	RAG Rating
1.	QSC noted the suspension of some elective activity for 2 weeks. It was assured that there are adequate processes in place to ensure activity performed reflected clinical need and that Options were considered to maintain and hopefully increase elective activity over the forthcoming period.	A
2.	Current seasonal influenza vaccination rates for clinically facing staff is 53% which is almost 10% higher than the same time last year on an increased denominator. There is cautious optimism that the target of 90% by the end of December and 99% by 31/1/21 with a continued focus on delivering this.	A
3.	The national SSNAP data for the single Airedale/Bradford stroke service has improved from a “D” to a “C” for the last reporting period, in line with our expectations from the real time dashboard employed across the trusts. It was agreed that using the dashboard in future to inform further discussions on performance and how the service might improve outcomes might be helpful once the data can be validated over a longer time period.	A
4.	QSC received the annual Serious Incident (SI) report. Themes were noted around communications, risks from a mixed paper/digital record and capacity to respond in a timely manner. Learning had been identified and consideration is being given to how this can be best implemented. QSC noted the work of Internal Audit around an integrated approach to Complaints, Issues and Serious Incidents. An update would be received next month to consider the output from this and how capacity to	G

	complete SI reports in the target time can be achieved. Further work to crystallise the specific communication issues will be undertaken over the next few months.	
5.	QSC noted the progress towards meeting the outstanding issues from the CQC inspection. agreed to consider a deep dive report on each of the 5 remaining areas over the next few months.	A

Issues or emerging risks		
	Issues or emerging risks	RAG Rating
1.	The continuing actions being taken to address the Ligature risk within the Trust estate were noted. The capital works for the Mental Health Room has now been agreed for Q3 approval for funding to minimise access to at risk areas will be submitted for 2021/22. It is not anticipated that the overall risk will reduce even when all the mitigating actions have been completed due to the likelihood (frequency) and impact of ligature injury. The QSC will continue to receive a monthly update on progress.	A
2.	The independent report on EPMA has not been received yet (due early October) and therefore the exact level of risk and suggested mitigations cannot be fully evaluated. There is no suggestion that the risk has increased.	A
3.	As part of the Coronavirus update QSC noted that local system discussions were taking place about TIER 3. It noted that visiting will be restricted if this is agreed to a limited cohort of patients (LD, End of Life, Maternity & Children) in line with WYAAT and other Tier 3 areas, this will impact on patient experience.	A
4.	QSC was informed of 3 outbreaks of COVID in staff in the organisation. Ward 13, Ward 6 and microbiology department. Testing and tracing was ongoing and the importance of staff responsibility to following best practice guidance has been stressed. Appropriate actions will be taken once the source of the outbreaks has been ascertained if relevant.	A

Any other comments	
	<ul style="list-style-type: none"> <li>QSC noted that COVID was not a new strategic risk but did increase both the likelihood and potentially of consequence of not achieving the strategic objectives the QSC has responsibility for.</li> </ul>