

| QUALITY AND SAFETY COMMITTEE UPDATE | |
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| Date of meeting | 31 August 2018, 10.45am – 12.15pm |
| Attendees | Olwen Dutton (Chair), Richard Samuda, Rachel Barlow, Dave Baker, Paula Gardner, David Carruthers, Allison Binns and Angharad MacGregor |
| Apologies | Apologies were received from Marie Perry and Kam Dhani |
| Key points of discussion relevant to the Board | <ul style="list-style-type: none"> • <u>Maternal Death</u> : Investigation still in place. • <u>Pain Scores</u> : Briefly discussed. Chief Nurse looking to implement PAINAD. Paper being brought back to September Q&S meeting. • <u>Schwartz rounds</u>; dates to be provided to NEDS. • <u>Patient Story for September Board</u> : A gentleman with incontinent issues and who has a physical disability will be attending the Trust Board meeting to give his story on how he has been received and treated at SWBH and other hospitals. He will be giving information on how he supports the District Nursing Team by giving talks to other patients on incontinent issues. • <u>Strategic Board Assurance Framework</u> : Following the SBAF review and challenge meetings on 13 July 2018 between Executive Leads (Directors) and the Audit & Risk Committee Chair/Director of Governance, the SBAF has been refreshed throughout and will be presented in its entirety to the Trust Board in September 2018. The 4 refreshed SBAF risks owned by the Medical Director and Chief Nurse were briefly outlined. Discussion took place on the proposal for paediatric ophthalmology cover. • <u>Integrated Quality and Performance Report and Persistent Reds</u> : In July, the Trust continued to perform across many indicators with another material improvement on elective cancellations in the month. Positive delivery, improvements and focus are evident in several other areas including the 'persistent reds' action plan. We are continuing to focus to stabilise Diagnostic and VTE performance. IQPR Persistent Red indicators are progressing well as we manage to resolve some, and further deliver others, for 2 months running. We need to focus now on identifying the remaining improvement trajectories for all of the indicators. One indicator, Neutropenic sepsis is at risk of failing projected resolution date but work is being done to improve this. • <u>Quality Plan Progress Report</u> : Development of the 2 initial projects of the Quality Plan (sepsis/VTE) are taking shape. The approach outlined is to commence and then embed the QI projects in each Group. This includes the development of Gantt charts to monitor project progress. Baseline data collection for quality metrics (sepsis CQUIN targets and VTE assessment compliance) is reflected in project aims. Group leads are presenting their progress and thoughts at private board on 'Big 6' and little rocks proposed by specialties after leadership conference and recent QIHD meeting. Chair asked for an update at the September meeting to see progress, especially on mortality and sepsis. |

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| | <ul style="list-style-type: none"> • <u>Adults Safeguarding Report 2018/19 Q1</u> : A review of progress within Adult Safeguarding for quarter 1 was briefly discussed. The internal and external structure for safeguarding vulnerable adult and breakdown in activity of referrals and significance was outlined. An update was given on a couple of incidents and the work that has been done around focused care, SARs and Deprivation of Liberty. • <u>Children’s Safeguarding Report 2018/19 Q1</u> : Members were informed that the Female Genital Mutilation Information Sharing Project went live in maternity in April 2018 with midwives adding an indicator to the Summary Care Record (SCR). Wider learning from one case focused on ensuring all children within a family are considered within assessments. • <u>Infection, Prevention and Control Update</u> : An update was given on the Pseudomonas Outbreak in the Neonatal Unit. A number of meetings have taken place and actions have been completed. The source of the outbreak is yet to be found. Members were informed that Post 48 hour MRSA bacteraemia has been identified on one of the wards. An investigation is taking place. |
| Positive highlights of note | The meeting discussions were felt to be useful and constructive. |
| Matters to escalate to the Board | The Committee wished to bring the following matters to Trust Board’s attention; <ul style="list-style-type: none"> • BAF discussions • Update on IQPR • Quality Plan Progress report including Mortality |
| Matters presented for information or noting | See above. |
| Decisions made | There were no specific actions beyond those being progressed by management |
| Actions agreed | No specific additional actions beyond those being progressed by management |

Olwen Dutton,
CHAIR OF THE QUALITY AND SAFETY COMMITTEE MEETING
For the meeting of the Trust Board scheduled for 6 September 2018