

Sandwell and West Birmingham NHS Trust

Board Committee Chair's Report

Meeting:	Quality and Safety Committee
Chair:	Professor Kate Thomas
Date:	23 rd February 2022
Present:	<u>Members:</u> Lesley Writtle, David Carruthers, Kam Dhama, Liam Kennedy <u>In attendance:</u> Dave Baker, Helen Hurst, Chizo Agwu, Mike Hallissey, Sarah Carr Cave (for Mel Roberts), Sir David Nicholson, 2 people from RSM observing <u>Apologies:</u> Mel Roberts

Key points of discussion	
1.	<p>Gold update on COVID-19 position, including vaccinations Number of Covid positive patients decreasing, plans to switch red wards to amber and restore surgical bed base. 62 day cancer and 2 week waits improving but pathways delayed by lack of specialist histopathologists in BCP with slow turnaround of reporting on specimens.</p> <p>Chair's opinion: Assured on services returning to normal. Staff sickness rates and vaccination a concern.</p>
	
2.	<p>Maternity Dashboard and Neonatal Data Report Caesarean section rate 31%, there is no longer a national target for CS rate; elective CS rate only 10.1%. Staffing concerns in Neonatal and Community Midwifery, recruitment to the latter extremely difficult. Post the Ockenden review Trusts were asked to provide assurance against 7 actions, SWBH scored 90%, the highest in the LMNS.</p> <p>Chair's opinion: 9 red risks identified: 5 in maternity all involve community; 4 in neonates</p>
	
3.	<p>Board Level Metrics and IQPR exceptions Short term absence has doubled in the last 12 months. Public View national benchmarking reviewed. Multiple deprivation and ethnicity now included in more Board Level Indicators.</p> <p>Chair's opinion: SHMI, RTT incomplete pathways, Friends and Family test and sickness absence all performing poorly.</p>
	

4.	Monthly Mortality Dashboard HMSR shows improving trend but absolute value still high.	Chair's opinion: Thorough review of 90% of deaths showed none were preventable Evidence of learning from deaths presented	
6.	IT Outage Update Findings from the Dudley Group NHS Foundation Trust external review presented. 6 Key findings and their mitigations outlined, of which 2 are complete, 1 will complete on 28/02/22, 1 at end of March, 1 in June and 1 in July.	Chair's opinion: Structure and number of roles in infrastructure team is sub-optimal. Review of all Gold systems to ensure are backed up and can be recovered not complete until June.	
7.	Patient Experience Position Update Work of the Patient Involvement and Insight Lead since start in January 2022 noted.	Chair's opinion: Too soon to assess assurance	N/A
Positive highlights of note			
<ul style="list-style-type: none"> Post the Ockenden review Trusts were asked to provide assurance against 7 actions, SWBH scored 90%, the highest in the LMNS. 			
Matters of concern or key risks to escalate to the Board			
<ul style="list-style-type: none"> Concern regarding IT outage only partially assured 			
Matters presented for information or noting:			
<ul style="list-style-type: none"> Work of the Patient Involvement and Insight Lead since start in January 2022 noted 			
Decisions made:			
None			
Actions agreed:			
None			

Assurance classification

	<p>Management cannot clearly articulate the matter or issue; something has arisen at Committee for which there is little or no awareness and no action being taken to address the matter; there are a significant number of risks associated where it is not clear what is being done to control, manage or mitigate them; and the level of risk is increasing.</p>
	<p>There is partial clarity on the matter to be addressed; some progress has been made but there remain a number of outstanding actions or progress against any plans so will not be delivered within agreed timescales; independent or external assurance shows areas of concern; there are increasing risks that are only partially controlled, mitigated or managed.</p>
	<p>There is evidence of a good understanding of the matter or issue to be addressed; there are plans in place and these are being delivered against agreed timescales; those that are not yet delivered are well understood and it is clear what actions are being taken to control, manage or mitigate any risks; where required there is evidence of independent or external assurance.</p>
	<p>There is evidence of a clear understanding of the matter or issue to be addressed; there is evidence of independent or external assurance; there are plans in place and these are being actively delivered and there is triangulation from other sources (e.g. patient or staff feedback)</p>