





Sandwell and West Birmingham NHS Trust Board Committee Chair's Report

Meeting:	Quality Committee					
Chair:						
Dates:						
Present:		31st January 2024	28th February 2024			
	Mike Hallissey, Assoc Non-Executive Director (Chair)	Attended	Apologies			
	Lesley Writtle, Non-Executive Director (Member)	Attended	Attended			
	Lorraine Harper, Non-Executive Director (Member)	Attended	Attended			
	Jo Newens, Chief Operating Officer (Member)	Apologies	Apologies			
	Mark Anderson, Chief Medical Officer (Member)	Attended	Attended			
	Mel Roberts, Chief Nursing Officer (Member)	Attended	Attended			
	Dave Baker, Chief Strategy Officer (Member)	Apologies	Apologies			
	Daren Fradgley, Chief Integration Officer (Member)	Apologies	Attended			
	Helen Hurst, Director of Midwifery	Attended	Attended			
	Liam Kennedy, MMUH Delivery Director	Attended	Attended			
	Dan Conway, Assoc Director of Corporate Governance	Attended	Attended			
	Megan Jarvis, Associate Chief Strategy Director	Attended	Attended			
	Sarah Carr-Cave, Deputy Chief Nursing Officer	Apologies	Attended			

31st	January 2024			
1.	Quality & Safety (Fundamentals of Care) metrics			
	 Chairs opinion: Metrics around acute care and ED performance remain a concern. There has been a significant increase in number of beds open to mitigate some risk but a critical issue appears to be an increase in Los in medical specialties. There are process issues over RTT and 'pop up' patients and there is a need to deliver a more robust harm review process. 	Partial Assurance		
2.	Maternity Dashboard			
	 Chairs opinion: There is an IUD where process failures are a factor. There is a rising rate of Csections which is impacting on bed and workforce requirements. Staffing still an issue with a 12% vacancy rate, this is improved but at present no long-term solution is in place. It was agreed to receive an audit of outcomes following a number of significant changes in practice to evaluate changes in outcome. Neonatal review report shows progress. The whole LMNS review is on-going and will impact on the solution to unit issues. Continued mentorship is in place 	Partial Assurance		
3.	Learning From Deaths and Mortality report			
	 The backlog of SJRs is being managed and improving. There has been a rise in SHMNI which is in part but not whole accounted for by changes in reporting SDEC activity. Despite an improvement in Sepsis timeliness, mortality remains an issue and may reflect a wider issue in managing the deteriorating patient. 	Reasonable Assurance		
4.	Clinical Effectiveness Quarterly report			
	 Chairs opinion: Progress is being made though a number of national audits remain unsupported 	Reasonable Assurance		
5.	Safeguarding Quarterly report			
	 Chairs opinion: There has been development of the team and the first steps are in place. System wide relationships require further development and there remain risks of inconsistent practice 	Reasonable Assurance		
6.	QIA MMUH Pharmacy			
	 Chairs opinion: QIA supports the immediate recruitment and approval for this should be sought through F&P 	Noted		
7.	MMUH Update Report			
	 Chairs opinion: There remain significant risks in a number of areas with fit being very high on the list. There remain a number of red rated risks without obvious mitigation. 	Partial Assurance		
	MMUH bed fit and rightsizing for Winter 2025			

Positive highlights of note Matters of concern or key risks to escalate to the Board		Matters presented for information or noting	Actions agreed	
 Positive exit report on the Neonatal Team Review 	 ED performance raises real concerns over the potential for harm Bed fit for MMUH has no confirmed mitigations 	 Progress is being made on Clinical Effectiveness and supporting national audits 	 Receive a paper on mitigation to deliver safe care on the acute pathway. Receive a paper on jumper risk at MMUH once solution approved by MMUHOC 	

28th	February 2024				
9.	Quality & Safety (Fundamentals of Care) metrics Chairs opinion:				
	• Metrics around acute care and ED performance remain a concern. There has been a significant increase in number of beds open to mitigate some risk but a critical	Assurance			
	issue appears to be an increase in Los in medical specialties. Outflow from ED remains a concern,				
	• impacting on wait times. There has been an improvement in readmissions for patients over 65 attributed to changes in frailty care and discharge.				
10.	0. Maternity Dashboard				
	Chairs opinion:	Partial			
	• There has been improvement in perinatal in month mortality with only 1 still birth this month although SMR remains higher than peers. Progress continues on	Assurance			
	compliance with the <27 week pathway and a review of maternal services has been commissioned. Concern remains around in work vacancy due to training				
	requirements of IMG midwives. Progress continues with the neonatal action plan.				
11.	EDs/Winter Ambition/EAS Updates including ED Dashboard				
	• EAS and prolonged LoS remain concerns with no signs of improvement. A number of metrics on the EAS performance trajectory have deteriorated. An action plan is in	Partial			
	place but is limited by staffing vacancies. Particular concern around space issues impacting on quality of care	Assurance			
12.	Complaints, Compliments and PALs				
	Chairs opinion:	Partial			
	Metrics around complaints remain a concern. A review of process and responses is in progress	Assurance			
	Fundamentals for care				

13.	 Chairs opinion: Progressing with reasonable assurance 	Reasonable Assurance			
14.	Learning from Deaths including Mortality				
	 Chairs opinion: SHMI remains elevated although better this month. Concerns remain around end of life care with minimal progress on key metrics. Multiple sources of information which need to be brought together for learning to improve quality 	Partial Assurance			
15.	Patient Experience update report				
	 Chairs opinion: Progress is being made with a clear framework for engagement and delivery 	Reasonable Assurance			
16.	Summerfield				
	 Chair's opinion: Practice acquisition will help strategic priorities of the Trust, particularly supporting place 	Reasonable Assurance			
17.	MMUH Staffing Assurance				
	 <u>Chairs opinion:</u> Significant progress on staffing with reasonable assurance around safe staffing for nursing therapies and medics, including for 7 day working 	Reasonable Assurance			
18.	18 Bed Fit plan inclusive of the 24/25 Winter Plan				
	 <u>Chairs opinion:</u> Right sizing for winter 2024/25 and MMUH remains a concern, mitigation plans have been presented for expansion of beds at Rowley Regis 	Partial Assurance			
19.	Ready Set Go Assurance (Risk, CSFs, Ops readiness and Clinical Hazards)				
	 Chairs opinion: Overall bed usage and right sizing transformation schemes remain a concern with limited assurance on pathways to resolution 				
20.	Assurance on Milestones, CSFs and risk including interim solution options				
	Chairs opinion: • The UTC remains a concern which will have considerable potential impact on ED attendances Partial Assurance				
Pos	itive highlights of note Matters of concern or key risks to escalate to the Board Actions agreed				

•	The turnaround team for Great Barr	•	ED performance raises real concerns	Progress on patient experience	•	Community metrics to be
	GP practice should be commended		over the potential for harm			presented in March
	for their efforts in turning quality and	•	LoS raises significant risk for the		•	Receive paper on improvement
	governance processes around		rightsizing of MMUH			plan for complaints April
					•	Receive paper on joining up
						learning from all sources to
						improve quality of care in May