Agenda item 17.4

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Committee Chair's Assurance Report

Report to:	Board of Directors (in Public)
Date of meeting:	1 December 2020
Title of Report:	Assurance Report from the Quality Committee
Recommendation:	For assurance
Chair:	Dr Ian Mack, Non-Executive Director
Purpose:	The report summarises the assurances received, approvals, recommendations and decisions made at the Trust's Quality Committee meeting on 24 November 2020.
Background:	The Committee meets monthly and provides assurance on Clinical and Quality performance indicators and standards. The meeting lasted for two hours and was held virtually under the current restrictions on Board Committees due to the COVID pandemic.
Item for Escalation:	**Cultural review of maternity and obstetrics and gynaecology service** The Committee received a detailed presentation from an external review of the culture in maternity, obstetrics and gynaecology. There has been a period of intense change in the team, and there is a need to embed and sustain some of the positive changes, and to build on the trust wide culture work. The divisional leadership team presented their detailed plans in response to this. The plan is extensive with a challenging timeline but it is vitally important to get right for the care of our pregnant women. The Committee noted plans for close monitoring of the action plan through the Evidence Assurance Group and Quality Forum, and would like to escalate to the Board its plans to provide an appropriate level of oversight over the coming months.
Item for Escalation:	**Review the Caring Domain Indicators (IPR)** The Committee cannot give full assurance on the Trust response to complaints. Significant work has been done over the last 12 months to improve this, but divisional teams still struggle to always investigate complaints, and to compose appropriate responses answering all of the questions that complainants have raised. Both the quality or timeliness of these responses appears to have slipped during this period of increased operational pressures. There is also a trend to increased complaints about communication during COVID, made more difficult due to restrictions to hospital visiting. The Committee conclude that we may need to think differently about who is working on complaints and how we support our teams and would like to escalate this to the Board for further discussion.

Item for Assurance:	**Review the Safe Domain Indicators (IPR)** The Committee is assured and would like to celebrate the continued achievement of VTE assessments. The Committee is also assured with regard to cleanliness of key areas, and by plans by the new Associate Director of Estates and Facilities to review the work of our domestic services team.
Item for Assurance:	**Safe Care Report monthly report – Nursing Metrics** The Committee is assured that the increase in falls is being addressed but this will take time to take effect. October has been particularly challenging in terms of multiple moves of staff and patients due to IPAC issues relating to COVID. The Committee is not assured that we always have good effective communication with families and relatives when loved ones are in hospital during the pandemic. A nuanced approach is required to ensure that outward calling is meaningful and to triangulate patient experience metrics and complaints.
Item for Assurance:	**Infection Prevention and Control Quarterly Monitoring** The Committee is assured by the excellent news from NHSI/E multi-agency assessment moving the Trust to a green Infection Prevention and Control rating.
Item for Assurance:	**Quarterly Patient Safety Report** The Committee is assured by a sea change in patient safety processes put in place over the last 12 months. There is positive assurance of an improved safety culture as evidenced by increased reporting of near misses, but no increased harms. Confirm and challenge process in the review of serious incidents is now well embedded with good clinical engagement. There is partial assurance that lessons are being learnt and that learning is always being shared but there is ongoing work to ensure that investigations and action completions are timely and that the sharing of learning embeds.
Item for Assurance:	**Weekend Mortality – Outcome of External Review** This provides positive assurance that the increased weekend HSMR is due to a difference in the patient population admitted at weekends and due to coding issues around palliative care and that this is not due to poor clinical care. This emphasises the need to complete ongoing work to redesign and enhance palliative and end of life care pathways to address patient care needs flagged by the review. The review also provides opportunities to improve ongoing care in other areas, and the NHSI learning from deaths team have confirmed their support for the Trust to deliver on this very important piece of work over the next 12 months.
Item for Assurance:	**Integrated Quality Improvement Plan (IQIP) and Section Notices Updates** There is positive assurance around the progress made to date despite high operational demands.

Risks to refer to risk register:	None
Other items of business:	The following reports were also received by the Committee. As the meeting was shortened due to operational pressures of COVID the Committee members will raise specific questions with the Committee Chair, with responses being provided by the relevant Executive Director(s) • Safeguarding Quarterly Report • Cancer Harm Reviews Quarterly Report • Review of the Effective Domain Indicators (Integrated Performance Report) • Patient Experience Quarterly Monitoring (deferred to December Committee meeting) • Significant risk and Board Assurance Framework • Clinical Governance Executive Group Assurance Report and Annual Report • IQIP Review Group Assurance Report • Quality Committee forward plan

Attendance	
Attendees:	Dr I Mack – Non-Executive Director and Committee Chair Dr C Fernandez – Non-Executive Director D Dickinson – Non-Executive Director Dr F Swords – Medical Director Dr A Brown – Chief Nurse C O'Brien – Director of Patient Safety C Shaw – CEO L Notley – Associate Director of Quality Improvement
Invitees:	D McPartlin – Divisional Director, Women & Children (item 6) C Gibbens – Head of Nursing, Women & Children (item 6) A Price-Davey – Interim Head of Midwifery, Women & Children (item 6) D Graham – Consultant Midwife, D.A.G. Consultancy Ltd (item 6)
Observers:	Governors - A Compton, E Corner