

# Quality Governance Assurance Committee Chair's Report April 2018



Agenda Item No: 12.3

**CHAIRMAN'S SUMMARY REPORT**

*This summary sheet is for completion by the Chair of any committee/group to accompany the minutes required by a trust level committee.*

<b>Name of Committee/Group:</b>	Quality Governance Assurance Committee	
<b>Report From:</b>	Rosi Edwards - Chairperson	
<b>Date:</b>	April 2018	
<b>Action Required by receiving committee/group:</b>	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Decision <input type="checkbox"/> Other	
<b>Aims of Committee:</b> Bullet point aims of the reporting committee (from Terms of Reference)	To review and oversee the management of risk across the Trust.	
<b>Drivers:</b> Are there any links with Care Quality Commission/Health & Safety/NHSLA/Trust Policy/Patient Experience etc.	To receive reports, reviewing and ensuring compliance with national, regional and local standards to ensure high quality service provision and to ensure compliance with regulatory authorities.	
<b>Main Discussion/Action Points:</b> Bullet point the main areas of discussion held at the committee/group meeting which need to be highlighted	<p><b>Advise</b></p> <p><b>Issue: new structure for groups reporting to QGAC</b> - Reports and minutes from the first cycle of the new meetings which are intended to replace PSIG and QSAG have been received. The minutes show issues referred from Compliance Oversight Group to Quality and Safety Intelligence Group, and the ensuing discussion of these issues at QSIG. Evaluation by QSIG was:</p> <ul style="list-style-type: none"> <li>- information pack helpful - due credit was given to the author</li> <li>- Divisional exception reports - very helpful in giving an overview.</li> </ul> <p>QGAC discussed the way reports from COG and QSIG would be presented to QGAC in future, and how the effectiveness of the new groups would be evaluated. It was agreed that the key issue was the ability of QGAC to gain assurance from the reports and minutes of the groups, and the effectiveness of the groups in identifying issues of concern and demonstrating effective action. QSIG members commented on the much more focused discussions at the first meeting, and QGAC observed in the minutes a greater level of analysis and reflection than in PSIG.</p> <p>QSIG and COG papers will be available to QGAC on Boardpad. QGAC expected that issues requiring a detailed discussion at QGAC would be identified and put forward by QSIG; or that QGAC would request a report based on issues and reports discussed at QSIG or COG.</p>	

QGAC will review the effectiveness of the new system at its July meeting. It will also carry out a self-assessment of its own effectiveness using a questionnaire based on the one used by F&P, which was adapted from the one used by Audit.

### **Assurance**

#### **Issue: divisional reports to QSIG**

Division 1 provided assurance around late observations, internal Quality Review Visits and review of risk registers.

Division 1 described actions following 3 incidents regarding wound packings not being removed, which QSIG considered gave assurance.

#### **Issue: Falls Prevention Group (Bi-Annual) Report**

Good feedback on the falls collaborative work was reported to COG. There has been a reduction in falls across the Trust overall. All areas are to provide assurance on actions to mitigate against falls between 05:00 – 08:00 hours, 13:00 – 14:00 hours, 21:00 – 22:00 hours. Action is also required to address poor compliance of completion of medical assessment documentation, which may be helped with the use of the new AMU admissions proforma.

#### **Issue: Clinical Product Evaluation Group**

The Lead Nurse provided good assurance to COG around the evaluation of new products introduced to the Trust, and included a summary of the recurrent savings which have been made concurrently (£21K annually).

### **Partial assurance**

**Issue: National Safety Standards for Invasive Procedures (NatSSIPs) Audits** - QSIG received presentations on these from ophthalmology, ED, cardiology, haematology and oncology. It was noted that some directorates had undertaken a lot of work on developing local guidance and subsequent audits. It was agreed that oncology would return in 3 months' time with re-audit results.

**Issue: Divisional Reports to QSIG** - Divisions 1 and 2 continue to monitor open actions on SUIs with Directorates

**Issue: IQ&P Report - Cancer waiting times - Cancer Recovery Plan:** RWT has weekly teleconference calls with NHSI/NHSE/CCG and the cancer alliance to review performance. The Trust will enhance its assurance proves to the CCG and external bodies with regard to any harm for patients who wait over 104days. The Trust has also invited the Intensive support team in to aid in the review of cancer site pathways. No adverse comments or suggestions for improvement had been made.

	<p><b>No assurance</b></p> <p><b>Issue: Divisional Reports</b> - QSIG was concerned about patient experience in the Emergency Department due to long waiting times and also triaging of patients. QSIG have requested assurance about future action.</p> <p><b>Issues for Audit Committee</b></p> <p>There were none.</p>
<p><b>Risks Identified:</b></p> <p><b>Include (categorisation number)</b></p> <p><b>Risk</b></p> <p><b>Grade matrix/Datix</b></p>	