

SECAMB Board

QPS Escalation report to the Board

Date of meeting	23 January 2018
Overview of issues/areas covered at the meeting:	<p>This meeting considered a number of Management Responses (<i>response to previous items scrutinised by the committee</i>), including:</p> <p>Patient Care Records (partial assurance) The committee explored the steps being taken to improve the reconciliation of patient care records with the CAD and is assured that management is doing all it can to resolve this difficult issue and have a future plan to address the issue. The committee is confident based on the work undertaken, that while we still have a large number of unreconciled records there are no significant losses. To further assure itself the committee has asked for a further management response to confirm the number of records that cannot be found when needed, for example through requests to the legal team; complaints; or as part of a SI investigation. These metrics will also be linked to the improvement plan to ensure ongoing monitoring.</p> <p>Reliability of Training Data (partial assurance) The committee explored the disparity between locally held and central training records, arising from concern that some training is not reported centrally due to 'system' difficulties in uploading data. The committee now has better clarity of the issue and the improvements being made, and is assured training is happening. However, there remains some concern that current data reported, including to the Board, is unlikely to be completely accurate with it showing lower compliance than is likely to be the case.</p> <p>Quality Impact Assessments (assured) The committee received some more numerical analysis and is assured that the process works well prior to and during a CIP scheme. Next, the committee will scrutinising QIAs for non-CIP schemes.</p> <p>Medical Equipment (partial assurance) The committee is assured that there is a good process for ensuring all equipment is serviced by the Trust. However, depending on how you interpret the evidence provided, there is either almost full compliance, or a number of items overdue for servicing. The committee has asked management to clarify this for the meeting in February. In addition, it has asked for the outcomes of the Quality Assurance Visits to be presented to provide additional information and assurance.</p> <p>Hear and Treat / Pathways Audits (partial assurance) This management response arises from a scrutiny item about the safety of hear and treat, and the issue relating to low number of pathways audits. The committee is assured that there is a clear plan to ensure compliance by June 2018. It will monitor this to ensure the trajectory is met. In the meantime, management will confirm the steps it is taking to ensure the quality and safety of hear and treat, for example, the clinical navigator role.</p> <p>Infection Prevention & Control (not assured) There was a detailed discussion about where we are with infection prevention and control, which the committee agreed is a fundamental measure of safety. The committee is assured that despite there being some areas of low levels of compliance, this is well within sights of management and various measures in place to change behaviours of staff. The committee will continue to monitor progress in this area until it is fully assured.</p>

	<p>The meeting also considered a number of Scrutiny Items (where the committee scrutinises that the design and effectiveness of the Trust’s system of internal control for different areas), including;</p> <p>Medicines Governance (assured) The committee agreed that medicines governance has been transformed over the past 6 months and the committee has never had this level of assurance before. There is clarity on the work still to be done and areas of issue, for example breakages and steps being considered to minimise these. It considered the new medicines optimisation enabling strategy, which is now published.</p> <p>The external Chief Pharmacist appointed to support the Trust’s improvement is due provide her final report in March. The committee will be inviting her to its meeting in early April to feedback her views of our medicines governance, which will give the committee an additional level of external assurance.</p> <p>Reflective Practice (not assured) The committee looked in to this area following the patient story at the Board meeting on 11 January 2018, where the crew being criticised had reflective practice as one of learning points. The paper confirmed that we are not supporting staff with reflective practice and listed a number of management actions. There was a wide-ranging discussion about this and the link to clinical supervision, resulting in the committee referring this to the workforce and wellbeing committee.</p> <p>The committee also received two reports;</p> <ol style="list-style-type: none"> 1. Q3 update on the Quality Account The committee noted the progress against the three quality objectives and asked that in the final report next quarter management include examples of how the learning has changed practice. 2. Q3 review of the clinical audit plan The committee welcomed this report, which demonstrated that we would for the first year in many, complete the full audit plan. It asked management to describe in the final report the changes made as a result which positively affects patient care. The committee also explored the steps management is taking for 2018/19 to ensure the audits improve in quality.
<p>Reports not received as per the annual work plan and action required</p>	<p>The Q3 Quality & Safety Report is slightly delayed due to data readiness and so the committee will be holding an exceptional meeting in early February to consider this report.</p>
<p>Changes to significant risk profile of the trust identified and actions required</p>	<p>Pathways Audits & Infection Prevention and Control – the committee will continue to review the management of these issues.</p>
<p>Weaknesses in the design or</p>	<p>Pathways Audits & Infection Prevention and Control, as set out above.</p>

effectiveness of the system of internal control identified and action required	
Any other matters the Committee wishes to escalate to the Board	Although there are few areas of full assurance, the committee agreed that this meeting was really focussed, supported by improved quality in papers. It felt to members of the committee that we are moving to a different (higher) level of discussion, which is really positive.