

Board of Directors (in Public)

Item 6.1.3

Subject: BAF Key Issues Report – Quality committee
Date of Meeting: 9th July 2019
Prepared by: Sue Pemberton, Director of Nursing and Operations
Presented by: Sue Pemberton, Director of Nursing and Operations
Meeting Held: 30th July 2019
Purpose of Report: To Note

Agenda Item	Lead Exec	Assurance Received	New/Emerging Risks	Actions/Comments
6.1	RP	3 c difficile infections all reviewed and the learning extracted – main cause due to antibiotic usage	None	Review of cleaning processes completed and review of each individual case completed.
6.1	MPC	Increase in incidents pertaining to abuse from patients and relatives towards staff	None	To be discussed with HR/Learning and development regarding education/training for staff to review if conflict resolution training is sufficient. In addition to look at raising awareness of these incidents to support staff.
6.4	RP	Sepsis annual report received. The use of the sepsis bundles has improved and screening accuracy has improved. Assurance received that everything possible was being done to improve the process and the pathway was clear on process.	None	None

6.2	SP	Assurance received that full compliance had almost been achieved with quality impact assessments. Thirteen schemes outstanding. In addition assurance received that cip progress was an improved position compared to previous years.	None	None
8.1	MPC	Annual report Clinical Audit and effectiveness Assurance received that the terms of reference for the committee had been achieved	None	Attendance at the committee was highlighted as an areas that requires improvement