

## Board of Directors (in Public)

### Item 6.1.3.1

#### Quality Committee

Date of meetings held since last BoD: 24<sup>th</sup> July 2018

#### BAF Key Issues

BAF Ref Principal risk	Assurance Received	New / Emerging Risks	Impact on BAF Risk Rating	Actions / Comment
1.1	CQUINs Advice and guidance to GPs still under review; 80% target not being met.	None	None	MD to transfer responsibility to consultants; embed within the cardiology division.
1.1	Mortality HSMR data had reduced.	None	None	The 80% target of mortality reviews completed within 30 days was achieved.
1.1	Infection Prevention & Emergency Re-Admissions	None	None	1C Diff in Critical Care; hospital acquired but no lapses in care identified. 1CPE hospital acquired; source identified as a line tip on routine culture of the line with no cross infection identified.
1.1	Primary PCI The primary PCI (120 mins) internal target call to balloon was reported red at 76.3% in the month, 75% YTD. The national 150 minute target was also red YTD at 86.7%.	None	None	Commissioners had requested a review to be reported to the November 2018 meeting. It was noted that the main cause was ambulance delays which in the main are beyond our control; however, the Trust would continue to engage with the service. MD to provide an update to the next Commissioning meeting
1.1	Sepsis Training in ward areas, changes in the EPR system and the continuation of the education programme have resulted in an improvement in sepsis prevention and management.	None	None	The improvement work is on-going. Sepsis bundle and screening programme; further improvements expected in the coming months.
1.1	Quality Priorities: Delirium, Complex Mental Health, Frailty	None	None	Information still being compiled; progress would be reported to the October 2018 meeting.

3.1	Quality Impact Assessments Update	None	None	41 CIP schemes identified requiring a quality impact assessment (QIA), 36 of which had been approved. 5 QIAs were outstanding and 2 of these had QIAs prepared and were awaiting approval from the next meeting of the Business Transformational Steering Group. A further 3 schemes were expected to be completed over the coming months.
1.1	National Early Warning System (NEWS) Internal audit had identified patients who would not have triggered alerts using the NEWS,	None	None	A decision was made by the Critical Care Delivery Group to retain the system as being more appropriate for our patient groups, communicated to NHS England who indicated that to retain funding for the CQUIN the Trust should continue to use NEWS alongside its own internal system. Further discussion with the Commissioners is required.
1.2	Diabetes Steering Group Annual Report via the key issues QPFEC report.	None	None	The inappropriate omission of insulin and taking responsibility of the point of care testing fobs remained as issues in the service but were being addressed by the specialist nurses.
1.1, 1.4	Mortality Review Annual Report	None	None	Discussions were being held on the necessity to reset the mortality reduction target. This has arisen because increasing baseline mortality, due principally to the policy of accepting patients with out of hospital cardiac arrest for primary PCI. The Mortality Review Group will consider the issue and make a recommendation.
4.1	Anaesthetists Recruitment Programme	None	None	The shortage of anaesthetists continued to be a concern. The Trust continued to explore all recruitment options; it was noted that this was also a national issue.
1.1	Histopathology Service:	None	None	Improvements the Liverpool Central Laboratory histopathology service were planned following their loss of accreditation, due in part to prolonged turnaround times which had implications on the scheduling of urgent care.