

Board of Directors
Item 6.2.1.1

BAF Key Issues

Quality Committee

Date/s of meetings held since last BoD: 26th July 2016

BAF Ref – Principal risk	Assurance Received	New / Emerging Risks	Impact on BAF Risk Rating	Actions / Comment
1.1, 1.2	<p>WHO Safety Checklist Cath Labs updated in relation to the implementation of the WHO checklist</p> <p>At a previous meeting the Committee had discussed and commented on a number of issues and requested that further measures and actions were put in place. The Committee acknowledged that work continued to improve compliance.</p> <p>Surgery update received in relation to the implementation of the WHO checklist.</p> <p>The recommended changes had been implemented and surgery had achieved 100% compliance in June</p> <p>The Quality Committee noted that improvements had been made and would continue with both Cath Labs and Surgery working towards common goals to ensure compliance was consistently achieved.</p> <p>The Committee requested that a detailed assurance report be provided for the next Quality Committee meeting.</p>		None	<ul style="list-style-type: none"> - Check list compliance data to be included on the dashboard - Check list completion comparison for both surgery and cath labs had also been requested - Going forward a uniformed approach would be adopted across the Trust to ensure that all fields identified on the WHO checklist had been completed correctly for both Cath labs and surgery
1.1, 1.2	<p>Clinical Audit and Effectiveness</p> <p>The Committee received feedback on the Trusts self-assessment against the updated Healthcare Quality Improvement Partnership.</p> <p>Areas for development and</p>		None	<p>Quality Improvements to be shared with Divisions to undertake further audits.</p> <p>The chair requested the Clinical Audit and Effectiveness Manager</p>

	<p>improvement had been identified and an action plan put in place. Departmental development had been included on the Clinical Quality Forward Plan.</p> <p>The Committee received assurance that clinical engagement had improved since the new divisional structures and combined governance meetings had been introduced.</p>			<p>be invited to attend COG Quality meeting to provide an overview of the planned improvements and developments.</p>
1.1, 1.2	<p>The Director of Nursing and Quality presented the results of the National Inpatient Survey Results.</p> <p>The Committee commented on the outstanding achievements that had been reported and the excellent feedback from patients with the Trust coming top in the country for eight out of the last ten years.</p> <p>The Committee went on to discuss the results of the survey and the work that would be undertaken to address any shortfalls particularly in relation to patient flow and discharges</p>			<p>The Head of Nursing and Quality for Corporate Services would undertake a scoping exercise to look at patient flow etc.</p> <p>The work would include looking at discharge bundles in conjunction with therapies, pharmacies and the 'model ward'.</p>
1.1, 1.2	<p>Quality Committee TOR</p> <p>A discussion was held regarding the frequency of the meetings and it was agreed, pending Board approval, to change the meetings to take place on a Quarterly basis.</p> <p>Recommendation – to seek approval from the Board of Directors for the Quality Committee meetings to take place quarterly commencing October 2016.</p>			<p>Going forward the meetings would dovetail with the Divisional Governance meetings.</p>