

Board of Directors Item 7.1.1a

Quality Committee
Date of Meetings Held Since Last BoD:-
10th March 2015

**BAF key
issues**

BAF Ref – Principal risk	Assurance Received	New / Emerging Risks	Impact on BAF Risk Rating	Actions / Comment
1,2	The Committee received a sepsis report and audit report. It was discussed that there has been problems with poor compliance and documentation that has been exacerbated by EPR with the version of the sepsis bundle being difficult to use.	Some areas for improvement identified on report which the committee felt needed to be escalated to the Board. A re-audit will be performed in July 2015	None	Sepsis will be discussed within the quality and PFEC committee. Sepsis will be monitored by the Infection Prevention Committee and by the Sepsis Group.
1,2	SHO - Good assurance that both day and night cover in the Trust is safe and the Medical Director has personally attended handover with teams.	<p>Feedback from SHOs and junior staff that they do not always feel supported by medical staff. This has been addressed by the Medical Director with the Consultant Surgeons.</p> <p>Some unrest amongst middle grades who feel they are having to complete tasks which are not at their level</p> <p>The Medical Director reported that work had been done to address issues of behaviour and</p>	Remain amber risk	Concern regarding the recruitment of future trainees if these issues are not resolved.

		<p>attitude within the medical teams and this will continue to be monitored.</p> <p>The Chair of the Committee felt that this matter needed to be alerted to the Board</p>		
1,2	VTE Prophylaxis remains below target		None	For escalation to the Board.
1,2	Mortality Review compliance has fallen this month / needing attention		None	This is being addressed
1,2	The number of reported patient safety incidents has fallen.		None	Confirmation that work is underway to address this
1,2	Patient and Family Experience performance is excellent.	Further assurance was requested in relation to the improvement work in relation to discharge.	None	The Director of Research and Informatics is reviewing additional data available to monitor discharges and will report back at the next Quality Committee
1,2	The Committee received background information on all major projects currently underway that are part of the PMO. A Quality Impact Assessment was received in relation to the cardiac monitors being replaced.	Some concern was expressed over cardio / surgical consultants input into the assessment – Medical Director to address.	None	<p>The Director of Strategy and OD to address.</p> <p>Further Quality Impact Assessments to be reviewed in May, with Quality Committee members having sight of any CIP schemes initiated in April before the next committee meeting</p>
1,2	Report received on Clinical Audit and Effectiveness Strategy and audits being undertaken. The	A few incidents identified where there were delays in input of information by clinicians	None	

	committee were assured these were being completed as required.			
1,2	An update on staff engagement activities that had taken place in 2014 was provided.	The Trust does not have an engagement strategy with a set of deliverables or measure of effectiveness	None	The People and OD Strategy is to be presented to the Quality Committee in May 2015.
1,2	Further information was received by the Committee on staffing levels in Cath Labs and Theatre and these were considered acceptable.		None	