

**Cover report to the Trust Board meeting to be held on 9 January 2020**

**Trust Board paper J**

<b>Report Title:</b>	<b>Quality and Outcomes Committee – Committee Chair’s Report</b> (formal Minutes will be presented to the next Trust Board meeting)
<b>Author:</b>	Gill Belton – Corporate and Committee Services Officer

<b>Reporting Committee:</b>	<b>Quality and Outcomes Committee (QOC)</b>
<b>Chaired by:</b>	Col (Ret’d) Ian Crowe – Non-Executive Director
<b>Lead Executive Director(s):</b>	Andrew Furlong – Medical Director Carolyn Fox – Chief Nurse Darryn Kerr – Director of Estates and Facilities
<b>Date of meeting:</b>	19 December 2019

**Summary of key public matters considered by the Committee and any related decisions made:**

This report provides a summary of the key issues considered at the Quality and Outcomes Committee on 19 December 2019:

- **PPI Strategy Update and Update from Patient Partners**  
 The Head of Patient and Community Engagement attended to provide a progress update on the implementation of the Trust’s Patient and Public Involvement Strategy. It reviewed the activity undertaken to-date, assessed the current position and outlined the steps to be taken in the coming months. A dashboard summarising the status of each of the Quality Strategy priority areas in relation to patient and public involvement was provided. The report concluded that the Patient and Community Engagement Team and Patient Partners were ready to support PPI across the Quality Strategy priority areas. Although Patient Partners were yet to be integrated into specific Quality Strategy priority areas, they remained involved in a wide range of activity across the Trust. It was anticipated that as the Trust recruited to project support roles, work on PPI in the Quality Strategy priorities would pick up pace. The contents of the report presented were received and noted. Specific discussion took place regarding the timing of Patient Partner involvement in Quality Strategy projects, as a result of which it was agreed helpful to determine a suitable timeframe by which various steps in the process were to be completed and the Chief Executive undertook to progress this accordingly. Discussion also took place regarding (i) the process to be utilised for ensuring Patient Partner involvement in the reconfiguration programme and the likely training required by Patient Partners to equip them with the required background knowledge. It was suggested by QOC that quarterly briefing meetings between relevant Patient Partners and the UHL Reconfiguration Team would be helpful and the Head of Patient and Community Engagement was requested to make arrangements for such (ii) the benefit in making arrangements for the Trust Chairman and Chief Executive to have the opportunity to hear feedback directly from the Trust’s Patient Partners on a regular basis (e.g. bi-annually) – again, the Head of Patient and Community Engagement was requested to make arrangements for such (iii) recently agreed tenure arrangements for Patient Partners (iv) the timing of the process to recruit additional Patient Partners – it was agreed to consider this further at the Quality Strategy Group meetings and (v) the need to close the loop by giving feedback to groups who have engaged with the Trust. In conclusion, it was agreed that a further report on this subject would be submitted to the next meeting of QOC in January 2020, rather than to the January 2020 Trust Board, which would provide a progress update on the actions agreed as outlined above (re the timetable, recruitment plans etc.), at which time consideration could be given as to determining where future reports on this matter were scheduled (whether to QOC or directly to the Trust Board).
- **Performance Dashboard – position statement for Estates and Facilities**  
 The Estates and Facilities’ Head of Business, Finance and Performance attended to provide Estates and Facilities performance data covering the period December 2017 until November 2019. The updated report had been developed to demonstrate some of the key service lines performed by Estates and Facilities, of which the aim was to provide a trajectory of data to demonstrate and ensure services met the rigours of current external demands within the economy. A new electronic system, FM First, had been introduced into UHL cleaning audits, allowing greater scope for audit reporting and trend analysis. Since introduction, there had been a significant increase in audits achieved which provided the Trust with confidence in its service delivery. Not all services had been included within the report presented, but were under review and would be included in future reporting. Both financial (revenue and capital) and operational pressures continued to impact on both the maintenance of

standards and the pace of service development required to progress improvement. In presenting this report, it was noted that information from this report would be extracted and feature in future iterations of the Trust's overall Quality and Performance report. Note was also made of the intention to develop a report for future consideration on a bi-annual basis relating to energy usage and sustainability. Members received and noted the contents of this report and specific discussion took place regarding the following (i) the good results for the Trust in terms of its catering provision which was required to meet diverse religious and dietary needs, and also regarding the positive data in terms of portering, albeit members noted they would wish to see a metric relating to emergency portering should this become possible in future (this was not currently possible as there was no way of interrogating the current electronic system to pull the data required) (ii) in response to a query raised, confirmation was provided of the system in place in terms of fire risk assessments / inspections and (iii) an acknowledgement was made of the deterioration in cleaning provision in low risk areas (e.g. offices), as described by the Director of Safety and Risk, due to the need to concentrate resource on the high risk and patient areas. The Committee welcomed this report and noted that the Director of Estates and Facilities, along with the Executive Team, would determine the relevant forum for the future receipt and consideration of this data.

- **Cleaning Metrics Update**

The Interim Head of Facilities attended to present a report detailing progress in terms of the diagnostic review that had been undertaken on the domestic and associated housekeeping activity across the Trust. The data presented outlined the activity and scope of the current services with outline recommendations to ensure the service met the needs of the changing healthcare landscape. Historic and current pressures had had a significant impact on the Trust's domestic service. Previous analysis and the preliminary results of the current diagnostic concurred that the service was in a position where it could not sustainably provide the required level of services due to lack of sufficient resources. Options to minimise the impact now needed to be considered including combining the domestic and housekeeping services thereby removing duplication and combining elements of the roles. In considering this report, members acknowledged the difficulties faced by the service in terms of retention of staff and also the difficulties faced due to a lack of industrial standard equipment as described by the Director of Estates and Facilities. Caution was expressed by QOC members of the need to remain vigilant to any unintended consequence when changing processes. In concluding discussion on this item, the QOC Chairman and the Chief Executive acknowledged the fantastic job undertaken by Estates and Facilities staff often in challenging circumstances (e.g. the response to the recent flood on ward 9, actions taken around the implementation of the ambulance handover pod etc.) and requested that the Director of Estates and Facilities passed their thanks back to Estates and Facilities staff.

- **CQC Update**

The Chief Nurse reported verbally to confirm that the Trust awaited the draft report documenting the results of its CQC Inspection.

- **Safe Staffing and Nursing Workforce Update**

The report for October 2019 noted that Registered Nurse (RN) vacancies were 549wte (a slight reduction compared to Q1/Q2 but a 14.15% vacancy rate against a 10% vacancy rate nationally). The Chief Nurse reported verbally that an additional data cleansing exercise was currently being undertaken in respect of Healthcare Assistant data to ensure no double counting. Overall fill rates for RNs and HSCWs had improved slightly for October 2019, despite the number of vacancies being reported, demonstrating that staff were being moved and deployed appropriately across CMGs / the Trust to cover shortfall areas. Members received and noted the contents of this report and note was made of a report relating to a recruitment campaign that would be submitted to a future meeting of the People, Process and Performance Committee. The Committee welcomed the recent announcement relating to nursing bursaries being made available. Note was made of the need for the Trust to continue to support its Registered Nurses who worked in a training capacity and whose role in this respect was vital. Particular discussion took place regarding the high turnover of HCAs given the demands of the role, and of the initiative being introduced that would see all Medical Students spend time working as HCAs.

- **Report from the Director of Safety and Risk**

The Director of Safety and Risk presented her monthly report, which specifically focussed this month on early emerging themes from the Leadership Walkabout Programme and the proposed audit plan for the five steps to safe surgery. In presenting this report, the Director of Safety and Risk made note of the recent number of complaints referencing medical care and of the consequent request made by the Medical Director that a deep dive was undertaken into these – this would take place in February 2020. In discussing the Leadership Walkabouts, note was made of the need for participants to return their completed forms as soon as possible after completing the walkabout. Discussion also took place regarding an examination of relevant data which provided assurance that, despite record numbers of attendances and admissions to the Trust, there was no evidence to-date that these increased numbers were impacting negatively on safety issues. The contents of this report were received and noted.

<ul style="list-style-type: none"> <li> <b>2019-20 CQUIN Scheme Quarter 2 Performance and NICE Guidance Compliance</b>            The Deputy Director of Quality Assurance presented two reports; the first provided a Quarter 2 update against the financial risk affiliated to the CQUINS for 2019/20 and the second provided an update against the reporting and monitoring of UHL's compliance against NICE guidance as part of the Quality Schedule. With regard to the latter report, it was noted that there were currently too many references to items still for confirmation (i.e.' TBCs') in response to which the Medical Director confirmed that he had requested action on this at the EQB meeting held on 17 December 2019. Specific discussion took place regarding the CQUIN relating to flu vaccines and of further action planned within the Trust to continue to promote this. Also noted was the need to ensure capture of data from staff who had received their flu vaccine elsewhere, such as from their GP. Members received and noted the contents of this report and the Deputy Director of Quality Assurance was requested to liaise with the Head of Financial Planning and Analysis to ensure that the latest CQUIN data had been triangulated with the latest financial forecast.         </li> </ul> <p><b>Items for noting:</b></p> <ul style="list-style-type: none"> <li> <b>Executive Quality Board Minutes 12.11.19</b> </li> </ul>	
<b>Public matters requiring Trust Board consideration and/or approval:</b>	
<b>Recommendations for approval:-</b> <ul style="list-style-type: none"> <li>None</li> </ul>	
<b>Public items highlighted to the Trust Board from this meeting:-</b> <ul style="list-style-type: none"> <li>None</li> </ul>	
<b>Matters referred to other Committees:</b> <ul style="list-style-type: none"> <li>A report relating to a nursing recruitment campaign is to be submitted to a future meeting of the People, Process and Performance Committee.</li> </ul>	
<b>Date of next meeting:</b>	30 January 2020

Col (Ret'd) I Crowe – Non-Executive Director and QOC Chair