

Trust Board paper M

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 5 October 2017

COMMITTEE: Quality and Outcomes Committee
CHAIR: Col (Ret'd) Ian Crowe, Non-Executive Director
DATE OF MEETING: 28 September 2017

This summary is provided for the Trust Board's information in the absence of the formal Minutes, which will be submitted to the Trust Board on 2 November 2017.

SPECIFIC RECOMMENDATIONS FOR THE PUBLIC TRUST BOARD:

- ***Aseptic Unit Capacity Plan and External Audit Results (EQB matters arising 5.9.17) (paper D)*** – the Quality and Outcomes Committee recommends that the Aseptic Unit capacity plan be approved by the Trust Board. The Trust Board are advised to consider that one risk remains in relation to external storage (as detailed in the external audit report) but that assurance was sought (and received) that works to address this risk are included in the capital plan for Q4 2017/18;
- ***Terms of Reference (paper F)*** – the Quality and Outcomes Committee approved its Terms of Reference for onward recommendation to the Trust Board for formal approval (please see attached);
- ***62 Day Breach Thematic Findings and 104 Day Cancer Patient Harm Reviews (EQB action) (paper G1)*** – the Quality and Outcomes Committee recommends that new Network Referral Policies be agreed and signed-off at Executive level, across the network;
- ***Midwifery Supervision (Paper M)*** – the Quality and Outcomes Committee recommends that the Trust Board approves a new model of supervision for midwives; namely that statutory supervision of midwives be replaced by 'Professional Midwifery Advocates' as detailed in the paper. Assurance was sought (and received) that KPIs to measure the outcomes of the proposal would be developed in due course.

SPECIFIC DECISIONS FOR THE PUBLIC TRUST BOARD:

- None.

OTHER ITEMS DISCUSSED AT THE MEETING, LISTED BELOW FOR THE INFORMATION OF THE PUBLIC TRUST BOARD:

- ***EMRAD Update Report (paper C)***
- ***RCS Invited Review of the OMFS Service Update Report (matters arising 23 of 29.6.17) (verbal)***

- **Cancelled Outpatient Appointments – quarterly report (QAC/IFPIB matters arising 5 of 29.6.17) (paper E)**
- **Quality and Outcomes Committee Terms of Reference (paper F)**
- **Month 5 Quality and Performance Report – including patient experience, clinical quality and operational performance issues (paper G)**
- **Estates and Facilities Quarterly Update (paper H)**
- **CIP Quality and Safety Impact Assessment (paper I)**
- **CQC Update Report (paper J)**
- **Reports from the Director of Safety and Risk (paper K)** - during this section the following reports were considered:
 - Patient Safety Report – August 2017;
 - Complaints Performance Report – August 2017, and
 - Freedom to Speak Up Report.
- **Nursing and Midwifery Quality and Safe Staffing Report – July 2017 (paper L)**
- **Assurance Report for EWS and Sepsis (paper N)**
- **Director of Clinical Quality (paper O)** - during this section the following reports were considered:
 - Clinical Audit Quarterly Report, and
 - Schedule of External Visits.
- **Reports for Information** – the Committee received and noted the following documents:
 - Minutes of the 5 September 2017 Executive Quality Board (paper P), and
 - Minutes of the 29 August 2017 Executive Performance Board (paper Q).
- **Proposed Meeting Dates for 2018 (paper R)**

ITEMS DEFERRED TO THE NEXT MEETING:

- None.

DATE OF NEXT COMMITTEE MEETING: 26 October 2017

Col (Ret'd) Ian Crowe – Committee Chair and Non-Executive Director

28 September 2017

Title : **Quality And Outcomes Committee**

Constitution : The Quality and Outcomes Committee (QOC) is established as a standing committee of the Trust Board and is accountable to the Trust Board. Its constitution and terms of reference shall be as set out below, subject to amendment at future Trust Board meetings.

The Committee will meet in private.

The Minutes of meetings of the Quality and Outcomes Committee shall be formally recorded by the Secretary to the Committee and submitted to the Trust Board.

The appointment of sub-committees by the Quality and Outcomes Committee shall be in accordance with the Trust's Standing Orders. The Minutes of meetings of any sub-committees appointed by the Committee shall be submitted to the next available meeting of the Committee.

Membership : The Committee shall be appointed by the Trust Board.

The voting membership of the Committee shall be four Non-Executive Directors, the Chief Executive Officer, Chief Nurse and Medical Director.

The Trust Board Chairman shall be an ex-officio member of the Committee

A Patient Partner – who shall be non-voting - will be a co-opted member of the Committee with speaking rights and shall be invited to attend each meeting of the Committee.

A representative of the Leicester, Leicestershire and Rutland Clinical Commissioning Groups – who shall be non-voting – will be a co-opted member of the Committee with speaking rights and shall be invited to attend each meeting of the Committee.

To carry on the business of the Committee, other Executive or Corporate Directors and Senior Managers may be invited to attend meetings of the Committee as necessary.

It is desirable that all members of the Committee and other postholders to whom standing invitations have been issued attend all meetings of the Committee. The Committee Chair shall keep attendance under regular review and shall be assisted in this task by the Director of Corporate and Legal Affairs. The Committee Chair shall raise any concerns about attendance at meetings with the Trust Board

Chairman and shall seek the support of the Trust Board Chairman in resolving such concerns.

Secretary : The Director of Corporate and Legal Affairs (or a member of staff delegated by him/her) shall be Secretary to the Committee and shall attend to take minutes of the meeting and provide appropriate support to the Chair and Committee members.

Chair: One of the Non-Executive Director members shall be appointed Chair of the Committee by the Trust Board.

Quorum : A quorum shall be three voting members of the Committee, of which two will be Non- Executive Directors.

Voting : In the event that members of the Committee decide to vote on any matter, the issue shall be determined by a majority of the votes of the voting Directors present and voting on the question and, in the case of any equality of votes, the person presiding shall have a second or casting vote.

Frequency : Meetings shall normally be held monthly. Additional meetings may be convened by the Committee Chair at his/her discretion.

The Committee will be supported by an agreed timetable of agenda items which will reflect the annual business cycle. All other agenda items will be subject to agreement by the Committee Chair prior to the meeting.

Authority : The Committee is authorised by the Trust Board to investigate any activity within its terms of reference. The Trust Board may itself refer items of business to the Committee for determination and/or, where appropriate, recommendation to the Trust Board. The Committee is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Trust Board to request the attendance of persons outside the Trust with relevant experience and expertise if it considers this necessary.

Duties: To enhance Trust Board oversight of quality performance, quality outcomes and risk arising from clinical care.

To scrutinise quality performance, quality outcomes and risk arising from clinical care to ensure that required standards are achieved and that action is taken where sub-standard performance is identified.

To seek assurance that the organisational systems and processes in relation to clinical quality, quality outcomes and

risks arising from clinical care are robust and well-embedded so that priority is given, at the appropriate level within the organisation, to identifying and managing risks to the quality of care.

To approve the Annual Quality Accounts before submission to the Trust Board for adoption.

Reporting:

The Committee will report to the Trust Board on its work.

Review:

The Committee shall conduct an annual review of its effectiveness and provision shall be made in the annual work programme of the Committee to enable such a review to be conducted. The results of the annual review shall be recorded in the Minutes of the Committee which shall be submitted to the Trust Board.

The terms of reference of the Committee shall be reviewed by the Trust Board annually.