

Cover report to the Trust Board meeting to be held on 7 July 2022

	Trust Board paper H
Report Title:	Quality Committee – Committee Chair’s Report
Author:	Ms A Moss – Corporate and Committee Services Officer

Reporting Committee:	Quality Committee (QC)
Chaired by:	Ms V Bailey – Non-Executive Director
Lead Executive Director(s):	Mr A Furlong – Medical Director Ms J Hogg – Chief Nurse Mr J Melbourne – Chief Operating Officer
Date of meeting:	30 June 2022

Summary of key public matters considered by the Committee:

This report provides a summary of the key issues considered at the Quality Committee meeting on 29 June 2022 (involving Ms V Bailey, Quality Committee Non-Executive Director Chair; Mr J Worrall, Associate Non-Executive Director; Dr A Haynes, Non-Executive Director, Mr A Furlong, Medical Director; Ms J Hogg, Chief Nurse; Mr J Melbourne, Chief Operating Officer, Dr G Sharma, Associate Non-Executive Director and Ms H Hutchinson, Leicester City CCG. Ms C Rudkin, Head of Patient Safety, Ms S Nancarrow Director for Cancer, and Mr M Clayton and Ms J Nichols, Consultant, attended to present their respective items).

- **Pertinent Safety Issues**
 The Medical Director briefed the Committee on the following pertinent safety issues:
Monkeypox – noting that the number of cases was increasing in the country but not significantly in the East Midlands. The Trust was providing a vaccination centre although the number of vaccinations was small. There was a virtual monitoring process in place.
Covid-19 – noting that the number of cases had increased, although this was not impacting on critical care or respiratory support services. The infection prevention controls had been revised to reintroduce the wearing of masks in clinical areas.
CQC Inspection – noting an inspection of surgery at the Glenfield Hospital had taken place that week. High level feedback had been provided and no immediate patient safety concerns identified. The ‘Well-led’ Inspection was expected on 1 and 2 September 2022.
Community beds – noting that the Finance and Investment Committee recommended the Trust Board approve the plans to provide community beds. The plans would support timely patient discharge.
- **Cost Improvement Programme Quality Impact Assessments Q4 21/22 and End of Year**
 The Committee received assurance regarding the impact of cost improvement schemes on quality of care. The report reflected the outcome of the quality impact assessments. Two external reviews of the process had been undertaken. In addition to the assessment of individual schemes, there would be an assessment of the cumulative impact of all schemes.
- **Patient Safety Report**
 The Committee considered the monthly Patient Safety Report noting that nine Serious Incidents had been escalated in May 2022 and that investigations had been concluded for nine Serious Incidents. Learning and recommendations for three Never Events was set out in the report. It was noted that the number of Never Events was increasing nationally, and the increase seen at UHL was similar to that of peer trusts. It was agreed that the Medical Director would provide a verbal report to the Trust Board when it considered the Integrated Performance Report.
- **Complaints Q4 2021/22**
 The Committee received the report on complaints for Quarter 4 2021/22. There had been an increase on the previous quarter. The highest number of complaints related to the Emergency Department with General Surgery seeing the highest increase. The themes related to medical care; communication; staff attitudes; and waiting times. Consideration would be given to extending the deadline to support and manage complainants’ expectations.

- **Care Quality Commission (CQC) update**

The Committee noted that the Trust had responded to the CQC following its inspection of Urgent and Emergency Care and Medicine in April 2022. Representations had been made regarding factual accuracy and the action plan would be submitted mid-July 2022.

- **Cancer Harms Quarterly Report**

The Committee received a quarterly report on potential harm to patients waiting for cancer treatment. It was noted that no harm was identified in the last quarter of 2021/22. It was acknowledged that it would be obvious, if by waiting, a patient's condition became inoperable, that harm had occurred. What was harder to assess was whether, for those patients who received treatment, how the outcome may have been different, or the degree of psychological harm caused by waiting. It was noted that the monitoring was in accordance with the national requirements.

- **Fractured Neck of Femur Care**

The Committee received a further report regarding the Trust's performance against the national standard for operating on Fractured Neck of Femur within 36 hours of presentation in the Emergency Department. It was noted that the major constraints to improvement related to theatre capacity and bed availability. The Committee noted the work undertaken to improve performance including theatre productivity and the good performance for related metrics. However, it was noted that the issues were multifaceted and proving difficult to address. Further work was planned with the Clinical Management Groups. The Committee requested a further report to include mortality data for patients operated on, within and after, 36 hours of presenting.

- **Pathway for Abandoned Children in the Emergency Department**

The Committee received a report summarising the work undertaken to support children who had been abandoned in the Emergency Department by either their care home or family. There had been a collaborative approach across health partners and significant progress to design an escalation process and pathway for this group of patients. The Committee was assured and noted that the issue would be overseen by the Safeguarding Assurance Committee.

- **Any Other Business** - none.

The following reports were noted: -

- Integrated Performance Report Month 2 2022/23
- Transfusion Committee Update
- Health and Safety Report

Public matters requiring Trust Board consideration and/or approval:

Recommendations for approval: None

Items highlighted to the Trust Board for information: The Medical Director to provide a verbal report on Never Events under consideration of the Integrated Performance Report Month 2 2022/23.

Matters deferred or referred to other Committees:

- None

Date of next QC meeting:

Thursday 28 July 2022

Ms V Bailey – Non-Executive Director and Quality Committee Chair