

**AGENDA ITEM 11 – REPORT OF THE QUALITY & SAFETY COMMITTEE
BOARD OF DIRECTORS 4 APRIL 2019**

Report title	Report of the quality & safety committee
Report from	Ros Given-Wilson, chair of the quality & safety committee
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Link to strategic objectives	<p>We will pioneer patient-centred care with exceptional clinical outcomes and excellent patient experience</p> <p>We will be at the leading edge of research making new discoveries with our partners and patients</p> <p>We will innovate by sharing our knowledge and developing tomorrow's experts</p> <p>We will have an infrastructure and culture that supports innovation</p>

Brief summary of report			
Attached is a brief summary of the quality & safety committee meeting that took place on 12 March 2019.			
Action Required/Recommendation.			
The board is asked to note the report of the quality and safety committee and gain assurance from it.			
For Assurance	✓	For decision	For discussion
			To note ✓



QUALITY AND SAFETY COMMITTEE SUMMARY REPORT

Tuesday 12th March 2019

Committee Governance	<ul style="list-style-type: none"> • Quorate – Yes • Attendance (membership) - 75% • Action completion status - 93% • Agenda completed – Yes
Current activity	<ul style="list-style-type: none"> • There was a review of the committee's actions which were all completed or in progress. • WHO audit reports for January and February 2019 had been circulated and continued consistently good performance was noted. • Three committee summary reports were received (Information Governance Committee, Clinical Governance Committee, and Joint Research Governance Committee). • The committee received a combined divisional presentation about learning from incidents. • An update about fire safety was presented to the committee. • The committee received an interim update about pathology. • A presentation about writing letters directly to patients was provided. • The committee received its regular Quality and Safety update. • The draft Quality Account, including the quality priorities for the coming year, was presented for comment and the priorities were approved. • The latest SI tracker was presented and it was noted all SIs were on track. • One SI report (City Road incorrect procedure on the correct muscle) was presented. • The committee has commenced an annual review of its terms of reference.
Key concerns	<ul style="list-style-type: none"> • Fire safety issues are highlighted through the monthly fire-warden reporting process, and also through a programme of estates walkabouts. Non-compliance with some aspects of the fire-warden process would be followed up with the Director of Estates, Capital and Major Projects. • Actions from the estates walkabouts are not always regularly followed up. • There is an increase in the number of incidents reported at City Road because cancelled surgical appointments are now reported as incidents. • There continues to be an increase in the number of incidents reported at Bedford. These are resulting from the outputs of a full glaucoma appointments review. This is being managed by the division through a robust process.
Key learning	<ul style="list-style-type: none"> • Training in the use of evacuation chairs is being rolled out across the organisation; 45 nurses have so far been trained. • The Director of Estates, Capital and Major Projects is now chair of the Fire Safety Committee – this reports to the Risk and Safety Committee. • The current priority of the information governance committee is completing the Data Security Protection toolkit by 31 March 2019 and also continues to be cyber security. • Health records governance is now provided through the health records project board. • The clinical governance committee reported that whilst there are some NICE guidance alerts outstanding, these should be completed very shortly. The trust is compliant with the NICE drugs review process. • A high level of clarity and assurance was provided that learning from incidents is triangulated within divisions and that trust-wide learning taking place. The divisional governance structure has a significant role in achieving this (the

	<p>committee received examples of this).</p> <ul style="list-style-type: none"> • Incidents are collated into themes enabling issues and trends to be identified. • A pathology ('life sciences') service is being established. • Future plans around tissue management are being considered and a decision about this will be made in due course. • Ophthalmic-related activities can be prone to the use of jargon, and there is a trust-wide initiative underway to reduce this. • The writing letters directly to patients presentation will be provided at the patient and carer forum. • The trust has received its CQC report and the very positive outcomes were noted. A summary will be presented to the committee at its next meeting.
Escalations	<ul style="list-style-type: none"> • None
Items for discussion outside of committee	<ul style="list-style-type: none"> • This summary to be distributed to the Board and Membership Council.
Date of next meeting	<ul style="list-style-type: none"> • 14 May 2019