

CHAIR'S KEY ISSUES

ISSUES FOR REFERRING / ESCALATING TO BOARD / COMMITTEE / TASK & FINISH GROUP

PART A:

ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP:		Quality & Patient Safety Committee	DATE OF MEETING ISSUE RAISED:	22 January 2019	
CHAIR:		Helen Taylor, Non-Executive Director	LEAD EXECUTIVE DIRECTOR:	Catherine Morgan, Chief Nurse and Barbara Buckley, Chief Medical Officer	
Agenda Item No.	DETAILS OF ISSUE:	FOR APPROVAL / ESCALATION / ALERT/ ASSURANCE / INFORMATION?	RISK REGISTER / BAF REFERENCE	PAPER ATTACHED √	
04/19	<p>End of Life Care Update The Committee received an update on End of Life Care noting staffing challenges within the Palliative Care Team at Ipswich Hospital, which was impacting on the completion of service improvement plans such as SPICT, optimisation of end of life care plan usage and a 7 day service. The nursing component of this would be mitigated by recent confirmation of MacMillan funding for 3 nursing posts for Ipswich for 2 years, which would go to advert shortly, but with recognition that the full benefits of this will take a number of months to be seen.</p> <p>The Colchester Chaplaincy team now has 24/7 on-call service however due to staffing issues in Ipswich, the service has been reduced to 8am-4pm Monday to Friday on a temporary basis.</p>	Information		No	
05/19	<p>Patient Experience Committee CKI The Friends and Family Test system Envoy (provided by HealthcareComms) has been commissioned as an ESNEFT solution but current IT difficulties with firewall issues could delay the go live date for the delivery of a whole trust system solution. It was also noted that the current contract at Ipswich with Meridian was due to end in February therefore; IT is working actively with the company to secure a solution a.s.a.p.</p>	Information		No	

05/19	<p>Clinical Audit & Effectiveness Group The Committee noted 1 Never Event reported earlier this month relating to the Interventional Radiology service. The category for the incident being a wrong site biopsy; initial review indicates incomplete checks for WHO brief and ID. The Committee was satisfied that learnings from this investigation will be cascaded to the relevant divisions and would be included in the wider improvement work taking place as a result of learning from previous NE's.</p> <p>Consultant time to review requires improvement on both sites. Next steps were noted to be 7 day services NHSE Board Assurance Framework issued with implementation to commence in March 2019.</p>	Information		No
07/19	<p>Integrated Patient Safety and Experience Report The Committee were informed that there were 10 overdue serious incident investigation reports (a 50% reduction compared to November) reported in December with an aim to complete these by the end of January.</p> <p>Sepsis and Deteriorating patient – audit data was now available for the Ipswich ED on sepsis 6 compliance, which identifies in more detail where to target improvement work. There is a plan to support data capture over the next few months taking lessons learnt from QI work at the Colchester site. A deep dive into Sepsis had been added to the Committee Forward Planner.</p>	Assurance		No
08/19	<p>Infection Prevention & Control Report One case of MRSA bacteraemia has been reported in December; initial learning relates to IV device management, a full RCA is in progress. The number of C Diff cases remains higher at the Colchester site; a key focus will be on improving antimicrobial stewardship and management of UTI's (urinary tract infections).</p>			
09/19	<p>Quality Account – Draft Quality Priorities 2019/20 The Committee received and reviewed the proposed draft Quality Priorities for 2019/20 within the domains of patient safety, clinical effectiveness and patient experience. It was discussed that we would aim to have wider engagement for next year on quality priorities and these would be informed by the Quality strategy that will need to be developed. It was also noted that further work was required to consider a priority for Community Services would be of value (although falls prevention would be key for all sectors).</p>	Information		No
15/19	<p>Premises Assurance Model (PAM) – Annual Update The Committee was informed that a PAM assessment had been completed on both sites and progress on actions compiled from the prompt questions which scored 'inadequate' was noted. The committee was pleased to be able to see the level of detail in the report and felt that this was</p>	Assurance		No

	a positive step forward.			
16/19	<p>NEESPS Progress Update A progress update on NEESPS was received by the Committee who noted the legacy position from TPP; Regulatory scrutiny and Accreditation; NEESPS main programmes of work; and Clinical Leadership and Executive support going forward. A full report would be submitted to the January Trust Board Meeting. The committee agreed to receive an update on progress in April.</p>	Assurance		No
DATE COMPLETED AND FORWARDED TO SEC OF RECEIVING BOARD / COMMITTEE / TASK & FINISH GROUP:				

PART B:

RECEIVING BOARD / COMMITTEE / TASK & FINISH GROUP:			DATE OF MEETING ISSUE CONSIDERED:	
CHAIR:			LEAD EXECUTIVE DIRECTOR:	
Agenda Item No.	RECORD OF CONSIDERATION GIVEN / APPROVAL / RESPONSE / ACTION:			
DATE COMPLETED AND FORWARDED TO CLERK OF ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP:				