

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:	23rd July 2019	
CHAIR:		Hussein Khatib, Non-Executive Director	LEAD EXECUTIVE DIRECTOR:	Catherine Morgan, Chief Nurse Angela Tillett, Chief Medical Officer	
Agenda Item No.	DETAILS OF ISSUE:	FOR APPROVAL / ESCALATION / ALERT/ ASSURANCE / INFORMATION?		RISK REGISTER / BAF REFERENCE	PAPER ATTACHED √
1.7	<p>Infection Control Committee CKI The Committee received a verbal update from the Chief Nurse, which included the following subjects;</p> <ul style="list-style-type: none"> Trust wide establishment of a Sharps Group to in particular address concerns and incidents relating to sharps injuries The queries arising from the CQC visit (verbal and initial letter) have been noted, actions to mitigate are in place. A Business Case for repatriation of flu testing to on site is being progressed Planning for a ward decant and refurbishment of the stroke ward is in progress in response to the MRSA outbreak and environmental factors identified. 	Assurance			

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1.7	<p>Patient Experience Group CKI</p> <p>Dermatology update</p> <ul style="list-style-type: none"> The Chief Nurse assured the members that the Dermatology Hotline is now live and the previous issue raised with high call volumes to PALS is gradually improving and PALS can quickly signpost to a point of contact. 	Assurance		
1.7	<p>Patient Safety Group CKI</p> <p>The Chief Nurse updated the members on the Quality Strategy, which was presented at Trust Executive meeting on the 22nd July; some minor updates are required and these were discussed. The final version will be circulated to QPS members.</p> <p>The Associate Director of Clinical Governance updated the members on the Divisional compliance for SI/Incidents and Duty of Candour. Action 19/113 was discussed it has been actioned and closed.</p>	Information		
1.7	<p>Clinical Audit & Effectiveness Group CKI</p> <p>The Associate Director of Clinical Governance updated the members on the Cardiology GIRFT update. The CDG is currently reviewing the report and will update the group with actions in future reports, GIRFT is a standing item on Divisional exception reports.</p> <p>The ANNB report on national screening has been received for Women & Children; areas for action were identified and an action plan has been developed with actions due for completion by end December 2019. Oversight will be through a new Screening Board, which is due to be established in September.</p>	Information		

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3.1	<p>Seminar Deep Dive Presentation</p> <p>Medicines Optimisation</p> <p>The Chief Pharmacist, Deputy Chief Pharmacist and Medicines Safety Officer presented a comprehensive overview of key areas that are included in the medicines optimisation agenda and related risk. Topics discussed included;</p> <ul style="list-style-type: none"> • Safe and Secure Storage of Medicines • Antimicrobial Stewardship • Medication Safety • Controlled Drug Management • Pharmacy Staffing and Capacity - Risks • System-wide working <p>Key areas on the pharmacy risk register were also discussed which relate to pharmacy Staffing and capacity and mitigations in place. Updates on effectiveness of controls and actions will be reported to QPS via the medicines optimisation committee</p> <p>(i) Pharmacy workforce capacity (621) – risk score 16 capacity and sustainability of core pharmacy services especially:</p> <ul style="list-style-type: none"> - Chemotherapy service - Technical services - Clinical services <p>(ii) Ageing manufacturing unit facility (1204)- risk score 12</p> <p>(iii) Non-compliance with the falsified medicines directive (525)-risk score 10</p>	Assurance		