

Board of Directors' Meeting Report – 25 May 2016

Agenda item 53/16

Title	Quality Assurance Committee (QAC) Report
Sponsoring Director	Fred Heddell, NED – Chair of QAC
Author(s)	Tim Young, NED – Vice Chair of QAC
Purpose	To provide assurance concerning the QAC's fulfilment of its Terms of Reference duties and objectives as an assurance sub-committee of the Board of Directors.
Previously considered at	N/A
Executive Summary	<p>Assurance was offered and provided on</p> <ul style="list-style-type: none"> - The revised clinical governance structure/arrangements - SI report - CQC action plan - Benchmarking on falls and pressure ulcers - Research & Development - Medical Education - Whistleblowing - Statutory/mandatory training - Equality & Diversity - Clinical Effectiveness - Draft Annual Quality Report - Complaints, claims & litigation - Corporate Clinical Risk Register - Board Assurance Framework
Date Reviewed by Execs	N/A
Related Trust Objective	Excellent Patient Outcomes Excellent Patient Experience Engaged and Valued Staff
Related Risk	Risk 1 – Failure to provide adequate patient safety and quality of care Risk 2 – Poor patient experience Risk 5 – Inability to recruit and retain staff Risk 6 – Unable to maintain estates and facilities to an adequate standard
Legal implications / regulatory requirements	Assurance of our standards for regulatory bodies as set out in the QAC Terms of Reference.
Quality impact assessment	Careful consideration of the quality issues was requested in the revision of the governance structure.
Equality impact assessment	Equality and diversity is a specific focus throughout the QAC agenda and the aim is to have a positive impact for the nine protected characteristics under the Equality Act 2010.

Recommendations:

The Board is asked to note and receive assurance therefrom.

Report from Quality Assurance Committee held on 11 May 2016

Tim Young, Non-Executive Director (Vice-Chair of QAC)

I stood in for Fred Heddell, at his request, to chair the QAC meeting. It was heartening to note that most of the reports were for assurance and only a couple were for noting and discussion. The meeting was well-attended and reports were well-written and appropriately introduced by their sponsors/authors.

We received the Annual Report for Medical Education which was presented by Dr Henna Jaleel. The report included a number of figures which were interrogated by the committee and satisfactorily answered by Dr Jaleel and the Medical Director. There was questioning around benchmarking comparisons with other Trusts and the involvement of Junior Doctors in the programme going forward. The Committee gained assurance from the item.

The Committee was updated on the progress of the review of clinical governance arrangements by the Chief Nurse and the Assistant Director, Clinical Governance. We took assurance from the comprehensive scope of the review (based on Frimley Park and Barts' experiences) and the input from the Corporate Management Team. We noted the terms of reference for the new, key groups: Clinical Governance Committee; Corporate Governance Group; Corporate Management Team; and Quality Committee and offered a few suggestions. We understood the changes to be made and were assured that the new arrangements would improve clinical governance in the Trust.

We received a presentation from Professor Bhaskar Dasgupta and Dr Craig Mackerness on the Research & Development Annual Report. They explained the structure and the focus of R&D at the Trust and summarised the work over the last year (2015/16). Assurance was gained from the report but it is clear that there are issues that the R&D team need to work through with CMT which may lead to reports to the Board for decision in the future.

The Committee had been given the opportunity to comment on the Quality Report and an updated version was provided at the meeting with track changes reflecting input from the Non-Executive Directors. This was the first in a series of governance meetings that this report will go through before it forms an important part of the Trust's Annual Report & Accounts.

The Committee took some time considering and updating the Board Assurance Framework risks allocated to it by the Board. There were four in number and due consideration was given to each. Discussions were held and information/advice was sought from the Chief Nurse, Medical Director and Interim Company Secretary. Debate was held around the scoring of the risks and the balance between likelihood and consequence. It was agreed that further work was required but the overall direction of the report was good and nearing what is required.

Other reports were received on: the Clinical Risk Register; Complaints & Litigation; Compliance against NICE guidance and Clinical Effectiveness Strategic Objectives; Equality, Diversity & Inclusion activities; Statutory Mandatory Training; Whistleblowing; Serious Incidents; Update on actions following the CQC inspection; and a decision to sign up to the agreement for GIRFT (Getting it right first time) and the Department of Health's Clinically Led Quality & Efficiency Programme to use the NHSLA surgical claims data and the resulting analysis including claim scorecards for surgical specialties that is considered confidential to the Trust.

I was grateful for the support of the members of the Committee and all those who attended, including the Trust Chair, as I was only asked to chair the meeting the day before. It was, in my opinion, a good and productive meeting despite the fairly heavy agenda and I would reiterate that the Committee drew comfort from the fact that the vast majority of reports were for assurance.

Tim Young
Vice Chair, QAC.
14 May 2016.