

CHAIR'S KEY ISSUES

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

PART A:

| ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP: | | Quality and Patient Safety Committee | DATE OF MEETING ISSUE RAISED: | 23 rd June 2022 | |
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| CHAIR: | | Hussein Khatib – Non-Executive Director | LEAD EXECUTIVE DIRECTOR: | Giles Thorpe – Chief Nurse | |
| Agenda Item No. | DETAILS OF ISSUE: | FOR APPROVAL / ESCALATION / ALERT / ASSURANCE / INFORMATION? | RISK REGISTER / BAF REFERENCE | PAPER ATTACHED √ | |
| 1.4 | CKI Feedback from the Board including Quality Account Approval The committee noted the approval of the Board of Directors in publishing the Quality Account, and also recognised the amendments made as per the recommendations of the Board of Directors, including statements from both the Trust Governors and Healthwatch Essex. The committee subsequently approved the amendments for publication of the Quality Account onto the Trust's website as per the Quality Account Guidelines. | Information | N/A | | |
| 1.5 | Issues Raised by the Chief Nurse and Chief Medical Officer The committee received an update on the current Covid-19 position and emerging management of cases of Monkeypox and was assured of the current plans in place. | Information | N/A | | |
| 1.5 | Health and Safety CKI The committee discussed the work underway to ensure the safety of patients presenting with mental health conditions and the ongoing ligature point assessment work. The | Information | BAF Risk 11 | | |

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| | committee asked for further assurance on a trajectory for when the works would be completed. | | | |
| 3.1 | <p>Integrated Patient Safety and Experience Report – Tissue viability</p> <p>The committee discussed the emerging risks related to tissue viability within the community setting (rather than hospital-based settings). It was noted that an external review was underway by an independent consultant and the findings of the review would be brought back to the committee as part of the deep-dive schedule of business.</p> | Information | BAF Risk 11 | |
| 3.1/3.2 | <p>Integrated Patient Safety and Experience Report – maternity</p> <p>Maternity Transformation Programme – including Ockenden Assurance visit</p> <p>A discussion regarding initial verbal feedback from the Ockenden Assurance visit was held with committee members, with an outline of actions already being undertaken to address any gaps. The report is expected within the next two weeks and the response will be shared with QPSC as part of the MTP update.</p> | Information | BAF Risk 13 | |
| 3.1/4/2 | <p>Integrated Patient Safety and Experience Report – harm free care</p> <p>Deep dive – Delivery of harm free care</p> <p>The committee received a detailed report regarding the improvement work underway across falls reduction, tissue viability improvements and continence care. Of concern was the substantive funding of a Continence Nurse Specialist, and given the recent publicity regarding continence management the committee supported the ongoing delivery of improvement work in this area.</p> | Information | BAF Risk 11 | |
| 4.1 | <p>Deep dive: Health inequalities</p> <p>The committee received a presentation on the excellent work underway to address health inequalities in our communities. Ongoing funding for the Making Every Contact Count (MECC) programme remained to be resolved and suggestions were offered to support the programme.</p> | Information | BAF Risk 11 | |

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| 5.1/5.2/5.3/ 5.4/5.5 | <p>Annual Reports</p> <p>The committee received the Complaints, Organ Donation/HTA, Health & Safety and Legal & Inquest annual reports for 2021/22. In addition an update on the Must Do CQC report was received evidencing further actions which were supported now being completed.</p> <p>The great progress on all these areas of governance were received and commended by the committee</p> | Information | BAF Risk 12 | |
| DATE COMPLETED AND FORWARDED TO SEC OF RECEIVING BOARD / COMMITTEE / TASK & FINISH GROUP: | | 24 th June 2022 | | |

PART B:

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| 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: | | | | |
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| DATE COMPLETED AND FORWARDED TO CLERK OF ORIGINATING BOARD / COMMITTEE / TASK & FINISH GROUP: | | | | | |