

Agenda Item: 3iii

Report to:	Board of Directors	Date: 4 July 2019
Report from:	Chief Nurse and Medical Director	
Principal Objective/ Strategy and Title:	<b>GOVERNANCE: COMBINED QUALITY REPORT Patient Safety, Effectiveness of Care, Patient Experience and DIPC</b>	
Board Assurance Framework Entries:	Unable to provide safe, high quality care BAF numbers: 742, 675, 1511 and 1878	
Regulatory Requirement:	CQC	
Equality Considerations:	None believed to apply	
Key Risks	Non-compliance resulting in poor outcomes for patients and financial penalties	
For:	Information	

**1. Purpose/Background/Summary**

The Medical Director and Chief Nurse would like to highlight the following in addition to the Papworth Integrated Performance Report (PIPR) to the Board:

**2. Quality and Risk Committee Exception report and Escalation June 2019**

Following the concerns around potential alarm fatigue work is underway with Mindray and the Heads of Nursing/Matron's team linked to the monitoring of alarms. This will look at ongoing training for staff which has been designed around learning from incidents and patient feedback. This work will follow a human factors approach. Feedback on this issue has been discussed at the Matron's meeting.

As part of the Hospital Optimisation programme the Trust has responded to feedback from CCA staff in relation to feelings of isolation. This has involved looking at the staffing and skill mix allocation because of the size and geography of the department, responding to feedback from staff after experience of working in the area. The Infection Control leads, in conjunction with clinicians, have also taken a practical approach by agreeing to the sliding doors between patient rooms to be open as a default. The Q&R Committee will continue its focus on hospital optimisation (and a new risk has been added to the BAF 2249 Hospital Optimisation).

SUI-WEB31119 – Never Event – Retained Guidewire - A number of activities occurring simultaneously distracted clinical staff. The investigation to understand the new environment and human factors in place is underway.

Patient environment Rounds - Executive led patient environment rounds were introduced to assist with the management of two Board Assurance Risks: ageing estate and infection control. Since the introduction in March 2018, 80 rounds took place in the old hospital. In the new hospital environment the Board Assurance Risks are linked to infection control and hospital optimisation / managing the new PFI contract. There have been 5 rounds in the new hospital with the following themes: cleanliness, new hospital snagging in terms of notice boards still waiting to be put up, curtain hooks, poor cable management of IT equipment and IG compliance (cards left in card readers). The rounds will continue on a weekly basis to support the continued optimisation of the patient environment.

The Trust wide Mandatory Training Policy and the Induction Policy have been reviewed to meet requirements of the Core Skills Training Framework and were ratified by the Q&R Committee.

The Q&R Committee discussed in some detail the importance of hospital optimisation post move and the importance of ensuring that safety and patient flow through the hospital are appropriately balanced. The Committee agreed that this matter was an important discussion for the Trust Board to have and it was agreed this would be escalated to the Trust Board by the Committee.

### **3. DIPC Report (BAF 675)**

There were no bed closures for IPC issues in June 2019.

### **4. CQC Core Inspection**

The CQC completed their core inspection on the 18 and 19 June 2019. They provided a feedback session to the Executive team and had passed on their thanks to all those who helped them learn more about Royal Papworth. They were very impressed with the knowledge, expertise and care which we offer to our patients.

The CQC highlighted how positive an experience their inspection of Royal Papworth had been for the entire Inspection Team and highlighted numerous examples of best practice in their feedback. They spoke extremely positively about the consistency of the care and compassion on display and identified a particular theme relating to the importance we place on multi-disciplinary team working and the clear pride we display in our work. There are a small number of relatively minor issues which they identified and actions to address these are included within our hospital optimisation project.

The CQC will undertake their Well Led inspection on the 25/26 July and following this visit we are likely to receive our final rating in the autumn.

### **5. Inquests/Investigations**

#### **Patient A**

Patient underwent trans-aortic ventricular implant and permanent pacemaker insertion at Royal Papworth Hospital. Discharged and re-admitted to the Lister Hospital 1 day post discharge and sadly died.

**Coroner's Conclusion** – Awaited.

The Trust currently has 30 Coroner's investigations/inquests pending with 6 out of area.

#### **Recommendation:**

**The Board of Directors is requested to note the contents of this report.**