

Agenda item 04.i

Report to:	Board of Directors Part 1	Date: 6th November 2025
Report from:	Chair of the Quality & Risk Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the Quality & Risk Committee for months of September and October 2025	
Board Assurance Framework Entries	675	
Regulatory Requirement	Well Led/Code of Governance:	
Equality Considerations	To have clear and effective processes for assurance of Committee risks	
Key Risks	None believed to apply	
For:	Insufficient information or understanding to provide assurance to the Board	

Part 1 Summary report from meetings in September and October

1. Significant issues of interest to the Board.

- QRMG report – No formal escalations from the Quality and Risk Management Group (QRMG) for September 2025 and October 2025, though an increase in complaints was recognised. Of note benchmarking with other system organisations showed a similar rise.
- In September 2025 we heard from staff regarding a Hospital Acquired Pneumonia Improvement Project. An ongoing area for improvement is compliance with antibiotic prescribing post operatively. Assurance good.
- In October 2025 we received a Patient Safety Incident Investigation (PSII) report on the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) process and the improvements that have been put in place as a result. Sharing outputs and improvements was questions and the Committee were provided with good assurance on this. Assurance good.
- Fire safety improvement plan was presented at both meetings. It was recognised that progress is being made however further clarity around timeframes for completion of actions e.g. fire evacuations need to be clearer. Risk remains extreme around fire safety. Assurance moderate
- Progress in respect to improvements in Surgical Site Infection (SSI) rates remains limited. In October 2025 the Committee received a deep dive report into aspects of improvement initiatives. Whilst new initiatives and treatments are continually being thought about and introduced there remains a continued concern in respect to essentials of infection control practice, culture and ownership. The Committee strongly recommended a Part 2 Board

discussion on the topic. In the meantime, the Executives were asked to provide clarity and consensus of opinion in respect to diagnosis and suggested course of action. This may require an extraordinary Quality and Risk Committee meeting/discussion. Assurance limited.

- The Committee received the annual Health and Safety report for 2024/25. The report author, Terri-Louise Smith was commended for an excellent and comprehensive report. The Committee recommends the Health and Safety Annual report to Board for approval. Assurance good.

3. Policies approved or ratified.

- The Committee ratified 2 policies:
DN575 Decontamination of Reusable Medical Devices Policy
DN553 Clinical Audit Policy

4. Recommendation

The Trust Board is asked to note the contents of this report and recommends the 2025/26 Health and Safety Annual report 2024/25 for approval to Board.