

**Agenda item 3.i**

<b>Report to:</b>	<b>Board of Directors</b>	<b>Date: 1 December 2022</b>
<b>Report from:</b>	<b>Chair of the Quality &amp; Risk Committee</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>GOVERNANCE: To update the Board on discussions at the Quality &amp; Risk Committee</b>	
<b>Board Assurance Framework Entries</b>	675, 730, 742, 1929, 2532, 3040	
<b>Regulatory Requirement</b>	Well Led/Code of Governance:	
<b>Equality Considerations</b>	To have clear and effective processes for assurance of Committee risks	
<b>Key Risks</b>	None believed to apply	
<b>For:</b>	Insufficient information or understanding to provide assurance to the Board	

**1. Significant issues of interest to the Board**

**1.1 Workforce**

The Committee noted and welcomed the newly revised Appraisal Procedure which applies to all Agenda for Change staff at Royal Papworth. We noted it had been developed in conjunction with the Joint Staff Council. The challenges of delivering a meaningful annual appraisal, which necessarily covers a significant number of themes, was discussed, noting the below plan performance to date. The ability for staff to be released both to be appraised and appraise others is compromised by clinical demands, sickness and vacancy rates. Nonetheless, the importance of a well-conducted appraisal was fully acknowledged and strongly supported. The on-going challenges of nurse recruitment were discussed, and the Committee noted recent successful campaigns particularly with unregistered nurse posts.

We also received positively a detailed spotlight on staffing with a new integrated perspective on providing assurance with respect to safe staffing. This included Royal Papworth’s data set in a national and peer group context as well as data on current fill rates, care hours per patient day, mitigation activities with respect to vacancies and also links to patient level impact and staff triggered red flags. This new report was strongly supported as helping to provide a clearer assurance narrative for the Committee. It was suggested that a specific item on this report would be of value for all NEDs.

We noted and supported the plan for risk entries on the BAF relating to workforce to be reviewed at the newly established Workforce Committee and in particular the levels at which our target levels are set.

**1.2 Quality and Safety**

The Quarter 2 Quality and Risk report provided evidence of generally stable outcomes for this quarter. Additional scrutiny is being applied to specific areas of concern including VTE prevention and engagement with the WHO checklist. We were reassured to hear of positive

signals with respect to the impact of the VTE consultant champions roles in one of the early adopter divisions. We also gained reassurance from the on-going close scrutiny of near miss events.

The Committee endorsed plans for developing more granular data at clinical level with respect to key quality and safety metrics. This will help provide a greater level of visibility on where concerns may be developing and also provide very useful and relevant feedback to colleagues engaged in delivery of care.

Surgical site infection rates remain a concern with an increase since the last update related to superficial site infections and note the on-going focus in this area. We were reassured to note that our reporting and audit methodology is fully compliant with national recommendations and best practice.

### **1.3 Governance and Compliance**

We noted the significant on-going work to ensure that the Trust is as up to date as possible in both its risk assessments and register entries as well as maintaining its key documents current. The focus on the extreme and high-risk themes was noted and supported.

### **1.4 The Royal Papworth School**

An update on the draft strategy for the School was positively received. Progress on financial aspects was noted. The strategy will be submitted for final approval to Q & R at its December meeting. A proposal for a 6-month interim update on progress against the strategy and its delivery was welcomed.

## **2. Policies etc, approved or ratified:**

The Committee ratified the latest iteration of DN708 Digital Acceptable Use Policy.

## **3. Matters referred to other committees or individual Executives**

No matters identified.

## **4. Recommendation**

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