

Agenda item 3.i

Report to:	Board of Directors	Date: 02 November 2023
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	
Board Assurance Framework Entries	675, 742, 2532, 3040, 3261	
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	

1. Significant issues of interest to the Board

The Committee considered whether the agenda and papers for the Committee reflected the current concerns and issues at the Trust and whether there were other matters at the forefront of colleagues' minds. The discussion concluded that the agenda priorities were appropriate but also that there was a constant concern as to the burden on staff in continuing to produce excellent, high-quality outcomes. The need to remain fully sighted on the experiences of patients waiting long periods to be seen and treated at Royal Papworth was again a key point of discussion. The Committee welcomed additional work being done in this regard to assess the impact of long waits on these patients.

The surgical site infection (SSI) rates remain stable and at lower levels than earlier in the year but still much higher than in previous years and compared to national data. The need to ensure that we are fully compliant with all planned interventions remains critical. In this regard we noted a comprehensive plan to respond to all recommendations from the recent NHS England review of SSIs and asked that there should be clear timelines for completion of these actions.

We received good assurance on the response to the CQC IRMER findings in 2022 and noted that this matter has now been agreed for formal closure and welcomed the additional processes in place to reduce the risk of recurrence.

A great example of our staff's attentiveness to patient needs, despite all the demands on staff, and combining this attentiveness with the use of technology, was described in a very positive patient story from the pulmonary hypertension team. The reduced need for patient journeys, reduced in-patient bed needs and patients' greater involvement in self-management were some of the significant benefits about which we heard.

The consideration of PIPR suggested an essentially unchanging situation. Of particular concern, however, was the still very limited amount of supervisory time available for senior

nursing staff to step back and support their teams as clinical leaders. This will now be an area of renewed focus.

2. Policies and procedures ratified by the Committee

DN818 M.Abscessus Infection Control Document
DN810 Care of patients with Learning Disabilities or Autism
TOR030 Clinical Ethics Committee
DN054 Missing Patient Procedure
DN057 Security Policy
DN794 Trustwide Prisoner Policy
DN108 Information Governance Policy
DN789 Management of used and infected linen
DN860 Nursing Establishment Setting Policy
DN322 Fire Policy

3. Matters referred to other committees or individual Executives

None

4. Recommendation

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