

Agenda item 3.ii

Report to:	Board of Directors	Date: 2 July 2020
Report from:	Chair of the Quality & Risk Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the Quality risk meeting dated 25 June 2020.	
Board Assurance Framework Entries	675, 684, 730, 742, 1787, 1929, 2249	
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

1.1 **M.Abscessus.** We're aware of four newly reported cases, all dating from before we introduced point-of-use filters and other mediation to the water supply last year. There have been no reports of new cases arising since those measures were put in place, which offers some assurance, though this will be somewhat limited while we try to clarify if the cause was the same in all cases. One of the new cases is the subject of a formal complaint.

1.2 **Staff.** OM reported that we are, remarkably, not far from going green on various measures of staffing, turnover, short-term sickness etc. This might be short lived if there's another increase in establishment, but it is a notable achievement at a hard-pressed time.

1.3 **Staff Risk Assessments.** These continue, especially mindful of the enhanced risk for staff from a BAME background. However, assessment walks a fine line between staff who are nervous that it might affect their ability to work at the Trust and so are reluctant to have one, and RPH's desire to act as a responsible employer concerned for staff safety. Developing risk management and mitigation tailored as far as possible to each individual is likely to be a long process. If there are cases where redeployment outside RPH becomes necessary, we expect there to be opportunities within the region.

1.3 **VTE.** The difficulty of adding a mandatory field to Lorenzo for VTE assessment remains. AR continues to lobby for change among Lorenzo users whose agreement we will need. All concerned now appreciate that this solution might not be forthcoming - and so we're focused on keeping up awareness. **Limited assurance**, as a few lapses in VTE assessment are likely to continue.

1.4 Internal Audit.

i) Risk management. RSM has revised its initial conclusions to offer **reasonable assurance** that our controls at divisional level are suitably designed, consistently applied and effective. There is a small number of recommendations and remedial actions.

ii) Patient experience. RSM reports **substantial assurance** that patient experience is well managed and monitored, praises work by PALS, handling of complaints and feedback generally.

1.5 Dr Foster/mortality. An alert that we have higher than average mortality rates for patients with a diagnosis of aortic, peripheral and visceral aneurysms (17 deaths) appears to have made no distinction between the more serious and risky thoracic aortic aneurysms (which we treat), and less serious peripheral and visceral aneurysms (which we do not treat). More detailed analysis suggests we achieve good outcomes given the levels of risk and Euroscores. We agreed that Q&R should in future receive an annual summary of disaggregated mortality data to provide further assurance that our overall mortality does not conceal any worrying specialist variations. We are satisfied that good controls are in place. The Learning from Deaths annual report provided additional evidence that we have a good system of mortality review. **Substantial assurance.**

2. Key decisions or actions taken by the Quality & Risk Committee

2.1 We discussed and ratified the terms of reference for the Covid Clinical Ethics Committee and established that it will in time report to Q and R.

2.2 We also ratified the nutrition policy, and the policy for Independent non-medical prescribing (NMP)

3. Matters referred to other committees or individual Executives

3.1 None.

4. Recommendation

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