

BOARD SUBCOMMITTEE ASSURANCE REPORT

Presented for:	Information/Escalation
Committee Name:	Quality Assurance Committee
Presented by:	Dr Mark Sanderson Non-Executive Director and Committee Chair
Date of Committee Meeting:	25 May 2021

Items received by the committee for assurance:

	Agenda Item	Level of Assurance	Board Action Required? <small>(double click to select)</small>
2.1	Quality Report (April 2021) (for information and discussion)	Reasonable	<input checked="" type="checkbox"/>
2.2	Staffing Report (April 2021) (for information and discussion)	Reasonable	<input type="checkbox"/>
2.3	DIPC Report (April 2021) including Thematic Analysis of nosocomial Covid-19 cases (April - May 2021) (for information and discussion)	Reasonable	<input type="checkbox"/>
2.4	Maternity Report (April 2021) (for information and discussion)	Reasonable	<input type="checkbox"/>
2.5	Risk register monthly summary and report for high and significant risks aligned to QAC (May 2021) (for information and discussion)	Reasonable	<input type="checkbox"/>
2.6	Board Assurance Framework (May 2021) (for information and discussion)	Reasonable	<input type="checkbox"/>
2.13	Patient Experience Q4 Report (2020/21) (for information)	Reasonable	<input type="checkbox"/>
2.14	CLAEPP Q4 Report (2020/21) (for information)	Reasonable	<input type="checkbox"/>
2.15	Clinical Audit Plan (2021/22) (for information)	Reasonable	<input type="checkbox"/>
2.16	Structured Judgement Review Outcomes of LD and MH Patients (for information)	Reasonable	<input type="checkbox"/>
2.17	CREWS Tracker (for information)	Reasonable	<input type="checkbox"/>
2.18	Trust Quality Improvement Plan Q4 (for information)	Reasonable	<input type="checkbox"/>
2.20	Quality Account with Stakeholder Comments (for Approval)	Substantial	<input type="checkbox"/>

<p>POINTS OF ESCALATION</p>	<ul style="list-style-type: none"> • HSMR was discussed in the Quality Report. The Trust wide HSMR is currently 112.8 having risen from 110.2 last month and remains statistically significantly high. For PCH the HSMR has increased from 116.5. to 118.4. For Hinchingbrooke Hospital the HSMR has increased from 99.4 to 104.2. QAC has asked for this subject to be discussed at full Board.
<p>KEY ISSUES</p>	<ul style="list-style-type: none"> • The number of safeguarding adult concerns raised by the Trust has been increasing since the end of 2020 and is flagging as a high special cause concern on the dashboard. QAC discussed the many causes of this, including the increasing number of patients presenting to ED and the socioeconomic effects of the pandemic. • QAC saw for the first-time monthly data on the completion of business continuity plans across directorates. Only maternity had 100% of plans in date. QAC were assured that other directorates were working on those plans that had time expired. • QAC reviewed the DIPC report. The committee were informed that new cleaning standards for the NHS were published in April 2021. This has resulted in increase from four to six categories of cleaning standard, although all six do not have to be implemented. A new five-star rating for wards will also be displayed because of the new standards, similar to that shown at restaurants. QAC discussed the importance of all staff, patients and visitors fully understanding what the star rating means.
<p>BOARD ASSURANCE FRAMEWORK & RISKS</p>	<ul style="list-style-type: none"> • QAC received the risk register and sought assurance over two risks with inadequate controls: <i>Potential clinical harm will occur due to delay in diagnostic examinations in Endoscopy and Delayed or failed Cardio-respiratory out-patient follow ups at HH will compromise patient care.</i> • QAC reviewed the year-end position on the 2020/21 Board Assurance Framework, plus the draft Board Assurance Framework for the new financial year. QAC were assured that year-end position on the 2020/21 was accurate. QAC recommended that <i>4d Sale of surplus land at Stamford and Rutland Hospital to enable future site development</i> should be carried forward to 2021/22.
<p>CELEBRATING OUTSTANDING PRACTICE & INNOVATION</p>	<ul style="list-style-type: none"> • A final draft of the Quality Account for 2020/21 was re-reviewed and approved. QAC were pleased to see the positive feedback from stakeholders. • QAC received the Chaplaincy Annual Report (2020/21). This was an excellent report and highlighted the important work of the Chaplaincy team, particularly during the pandemic. • QAC also received the Patient and Public Voice Partner Presentation and Patient Experience Q4 Report (2020/21). Both demonstrated the hard work that is done to optimise and learn from the experience of our patients. One example was the production of a 'dos and don'ts' for when staff interact with patients that are either blind or visually impaired.

LEVELS OF ASSURANCE

Level	Description of Level of Assurance
Substantial Assurance	The report highlighted a sound system of control, designed to address the relevant risks with controls being consistently applied. Highly unlikely to impair the achievement of both system and strategic objectives.
Reasonable Assurance	The report did not highlight any material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.
Partial Assurance	The report highlighted some material weaknesses in the system of internal control that would present material risks to the achievement of system objectives. May also impair achievement of strategic objectives.
Limited Assurance	The report highlighted significant material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.