

<b>Report to:</b>	<b>Public Board of Directors</b>	<b>Agenda item:</b>	<b>11.0</b>
<b>Date of Meeting:</b>	<b>31<sup>st</sup> March 2020</b>		

<b>Title of Report:</b>	<b>Clinical Governance Committee Update Report</b>
<b>Status:</b>	<b>For Information</b>
<b>Sponsor:</b>	<b>Nigel Stevens, Non-Executive Director</b>
<b>Author:</b>	<b>Kathryn Kelly, Executive Assistant to Director of Nursing &amp; Midwifery and Director of Strategy</b>
<b>Appendices:</b>	<b>None</b>

### **Purpose**

To update the Board of Directors on the activity of the Clinical Governance Committee meeting held on 12<sup>th</sup> January 2021 and 9<sup>th</sup> March 2021.

### **Background**

The Clinical Governance Committee is one of five assurance Committees supporting the Board of Directors in fulfilling its objectives. The Committee is responsible for testing the robustness and effectiveness of the clinical systems and processes operating within the Trust to provide assurance to the Board of Directors.

### **Business Undertaken**

#### **January 2021:**

- Phase 3 COVID-19 Response update
- Infection Control BAF; Update on COVID-19 Outbreaks
- Immediate Essential Actions from the Ockenden Review of Maternity Services
- Serious Incidents Update
- Q2 Claims and Inquests Report
- Quality Board Update
- Overview of Divisional Governance Committee Meetings
- Audit Tracker
- Work Plan Update

#### **March 2021:**

- Phase 3 COVID-19 Response update
- Emergency Department Quality Update
- Q3 Patient Experience Report
- Ockenden Review of Maternity Services
- Quality Board Update Report
- Quarterly Incident Report
- Q3 Claims and Inquests Report
- Quality Account Update
- CQC Update
- Audit Tracker
- Work Plan Update
- Terms of Reference Update

### **Key Risks and their impact on the Organisation**

As part of the creation and approval of the 2021/22 Board Assurance Framework (BAF), the Chief Executive and Head of Corporate Governance will work together t

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ensure that the risks are described succinctly and clearly. A future Board seminar is to be devoted to the BAF and agreeing the Board's risk appetite.

## Key Decisions

### January:

- a) **Immediate Essential Actions from the Ockenden Review of Maternity Services** – the Committee were assured that all was in hand and noted that the Senior Maternity Matron had undertaken to collate a report for the January Board meeting.
- b) **Q2 Claims and Inquests Report** – The Committee noted the report but acknowledged that there were a number of subject areas which they would like to have sight of in future meetings.
- c) **Quality Board Update** – The Committee noted the verbal update and the improved robustness of the work plan.
- d) **Overview of Divisional Governance Committee Meetings** – The Committee noted the update reports.
- e) **Work Plan** – It was agreed that the Head of Corporate Governance, Director of Nursing and Midwifery and Medical Director would meet two weeks before every meeting to finalise the agenda.

### March:

- f) **Phase 3 COVID-19 Response Update** – the Committee were assured that the COVID-19 response remained on track, with the focus moving towards lessons learned and staff welfare.
- g) **Emergency Department Quality Update** - the Committee were significantly assured that work was heading in the right direction with a focus on the quality of clinical care and patient experience.
- h) **Q3 Patient Experience Report** – the Committee noted that the report was useful but was concerned that the approach appeared reactive. The Committee encouraged a focus on the needs of patients drives the development the clinical strategy.
- i) **Ockenden Review of Maternity Services** – the Committee were assured that the Trust was in a good position and that none of the 'red' items were of significant concern.
- j) **Quality Board Update Report** – the Committee were assured that the Board was focusing on the right things. The Chair of this Committee is to attend future Quality Board and Serious Incident Panel meetings.

k) **Quarterly Incident Report/Claims and Inquests Report** – the Committee agreed that all the ‘learning from’ reports should be added to the agenda for a future meeting.

l) **Work Plan Update** – the Committee requested that the plan should be adjusted to reflect the new focus of the committee.

**Exceptions and Challenges**

None identified.

**Governance and Other Business**

The meeting was convened under its revised Terms of Reference.

**Future Business**

The Quality Governance Committee will continue to follow the work programme as driven from the Board Assurance Framework (BAF) but with a more holistic assessment of overall clinical risks, e.g. currently post-Covid 19 recovery.

**Recommendations**

It is recommended that the Board of Directors note this report.