Royal United Hospitals Bath

**NHS Foundation Trust** 

Report to:	Public Board of Directors	Agenda item:	9		
Date of Meeting:	Wednesday 5 May 2021				
Title of Report:	Quality Governance Committee Update Report				
Status:	For Information				
Sponsor:	Nigel Stevens, Non-Executive Director				
Author:	Kathryn Kelly, Executive Assistant to Chief Nurse and				
	Director of Strategy				
Appendices:	None				

#### Purpose

To update the Board of Directors on the activity of the Quality Governance Committee meeting held on 13<sup>th</sup> April 2021.

# Background

The Quality 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**

- Proposed Quality BAF Risks
- 52 Week Waits Approach to Managing our Long Waiting Patients
- Quality Board Update
- Research and Development Update
- Work Plan Update
- Key Points for Escalation to the Board
- Proposed Structure for Joint Safeguarding Committee

# Key Risks and their impact on the Organisation

 In relation to the proposed Quality BAF Risks, the process of ascertaining the specific risks that would prevent achievement of each objective was still ongoing, and the Head of Corporate Governance asked for Committee members' contributions to this, especially in relation to ratings, as none of the putative risks had yet been rated.

#### Key Decisions

- a) 52 Week Waits Approach to Managing our Long Waiting Patients the Committee were assured that processes in place appeared to be sufficiently robust to limit the risk of serious harm to patients on the waiting lists.
- b) **Quality Board Update** the Committee noted the report.
- c) Research and Development Update The Committee noted the report and asked that a regular R&D report was brought to the Committee, focussing on the clinical/research compliance and coherence of R&D activity with Trust and NHS priorities/policy. It was requested that this report should be annual but with other reports by exception.

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d) **Proposed Structure for Joint Safeguarding Committee** – The Committee were fully supportive of the new structure outlined in the report.

# **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.

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