

Report to:	Public Board of Directors	Agenda item:	9
Date of Meeting:	1 September 2021		

Title of Report:	Quality Governance Committee Update Report
Status:	For Information
Sponsor:	Ian Orpen, 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 3rd August 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

- Board Assurance Framework new format well received but offline discussion between NEDs and Head of Corporate Governance to assure them of how all the controls are received by the committee
- COVID-19 Response Update
- Pressures in the Emergency Department new staff recruited and starting in August and September, but pressures remain intense even though much better support from the rest of the hospital
- Q1 Quarterly Incident Report
- Antimicrobial Stewardship systems and processes for embedding this as everyone's business across the hospital were highlighted
- HSMR Benchmarking Review a detailed paper explaining an improving position in this highly complex area. Further detailed discussion to follow in QGC seminar to allow fuller understanding.
- Maternity Update regarding Ockenden report and associated actions.
- Quality Board Update
- Complaints Annual Report
- Quarterly Litigation Report
- Overview of Divisional Governance
- End of Life Care Annual Report
- Annual Safeguarding Report Adults
- Annual Safeguarding Report Children

Key Risks and their impact on the Organisation

- Ongoing funding was still being sought for the seven day palliative care team, and this was on the risk register.
- Liberty Protection Standards would be added to the risk register if required.
- Level 3 training for Children's Safeguarding remained on the risk register.

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Key Decisions

- A meeting would be arranged with the Non-Executives on the Committee for further discussions on the management of BAF risks.
- The Medical Director agreed to provide a summary relating to HSMR for Trust Board.
- The Head of Corporate Governance agreed to arrange a Board seminar to focus on Safeguarding.

Exceptions and Challenges

None identified.

Governance and Other Business

The meeting was convened according to the revised Terms of Reference of the Committee.

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.