

Trust Board Paper H1

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

**DATE OF TRUST BOARD MEETING:** 5 February 2015

**COMMITTEE:** Quality Assurance Committee

**CHAIR:** Dr S Dauncey, Non-Executive Director

**DATE OF MEETING:** 29 January 2015

This report is provided for the Trust Board's information in the absence of the formal Minutes, which will be submitted to the Trust Board on 5 March 2015.

**SPECIFIC RECOMMENDATIONS FOR THE TRUST BOARD:**

- None

**SPECIFIC DECISIONS:**

- None

**DISCUSSION AND ASSURANCE:**

- **EPMA Update** - the QAC supported the ePMA Board's preferred option of stopping rollout and focussing resources on ensuring that ePMA was used effectively within the current 'live' areas. The EQB on 3 February 2015 would make a decision in respect of the options put forward by the EPMA Board and would focus on actions that needed to be taken to mitigate any risks. An update on learning lessons from post investment reviews (i.e. ePMA) would need to be presented to IFPIC, as appropriate;
- **Update on Renal Transplant Unit** – endorsed the recommendations following the external review and EQB to report to QAC if there were any issues;
- **Patient Safety Report** – particularly noted that a number of policies had surpassed the review date and needed to be reviewed. Work was underway to resolve this matter;
- **Complaints Engagement Events Update Report and Action Plan** – recommendations were supported and some minor changes to the terms of reference of the Independent Complaints Review Panel were suggested. The Review Panel was requested to attend the Trust Board in October 2015 to present a patient story in respect of a complaint that had been reviewed by the panel;
- **CQC Should Dos** – majority of actions were either 'complete' or 'on track'. Two actions had been rated 'amber' on the action plan:- (i) action was required in respect of 'improving facilities for teenagers within hospital' – the QAC provided some suggestions to take forward this action, and (ii) Having different medication systems in different hospitals made tracking patients' medications difficult at times – issues re. EPMA would negate the planned actions and therefore would need to be reassessed;
- **Claims and Inquests Report including an update on Regulation 28 Letters** – received and noted;

- **Nursing Report** – a brief update on real time staffing, vacancies, premium pay and nursing clinical dashboard was provided. Wards 38 and 17 had triggered some concerns, however work was in-train to ensure appropriate actions were put in place and action plans were monitored;
- **Months 8 and 9 Quality and Performance Report** – particular note was made in respect of deterioration in #NOF target, pressure ulcers, and ED 4 hour performance. A brief update on the two never events was provided;
- **Statutory Duty of Candour** – a standing report on this topic would feature on QAC agendas from February/March 2015;
- **NHSLA Scorecard** – received and noted;
- **Complaints Briefing Report** – this report would now feature as a substantive item on future QAC agendas instead of an ‘item for information’. A briefing on the existing Quality Commitment had been scheduled to take place soon after the QAC meeting on 26 February 2015. Executive and Non-Executive Directors including the Deputy Chief Nurse, Director of Safety and Risk and Director of Clinical Quality would be invited to attend this session, and
- **CQC Registration Update** – UHL hosted the Alliance activity and therefore registered this with the CQC. When the initial applications were made in April 2014, Rutland Memorial Hospital applied to be able to provide surgical activity. This was now deemed to be inappropriate. An application therefore had been made to this effect to remove from the registration certificate.

**DATE OF NEXT COMMITTEE MEETING:** 26 February 2015

Dr S Dauncey – Committee Chair  
30 January 2015