
Public Board Meeting, Thursday 25th March 2010

Briefing: Clinical Quality Committee: 21 January 2010

Presented by: Colin Johnston, Director of Patient Safety

The Terms of Reference for the Committee were agreed, subject to the inclusion of the Nursing and Midwifery Strategy Group as a sub-committee. Membership was extended to all Divisional and Clinical Directors.

Pressure ulcer prevalence: a report was received but the figures were challenged. The Tissue Viability Nurse will provide an update at the next meeting detailing the number of pressure ulcers (i) patient admitted and (ii) patient acquired; action in train to address reporting issues and details of actions agreed to reduce prevalence.

Complaints responses had improved and the Trust anticipates that 80% of complaints will meet the deadline by the end of December. Balanced Scorecards had been developed for each division. A report is being presented to the Board in March.

Standards for Better Health: An update against action plans was reviewed. All non-compliant standards are scheduled to be compliant by 31 March 2010. An issue was raised about further delays in achieving compliance with bedside wristbands because of delays in rolling out training and the CEO asked that this be addressed with IT as a matter of urgency.

The Committee reviewed a report about delays in **approving incident** reports posted on the DATIX WEB system resulting in delays in releasing them to the National Reporting and Learning System (NRLS). Divisions will produce a report of their divisional processes for (i) reporting incidents, (2) approval of incident reports (3) Learning, disseminating and implementing recommendations, which will be reviewed at BISE.

Divisional Boards have a key role in **driving the quality agenda** and the Director of Delivery noted that all Divisions had balanced scorecards that incorporated quality metrics. It was agreed that the divisional Quality metrics should be presented at future Divisional Integrated Standards Executive meetings.

An update on the development of the **Trust's Quality Accounts** was received, noting this is a requirement from 2010 and reflects the importance Trusts should be giving to quality issues. Divisions were being consulted on what should be included.

The Committee received a briefing on the **new system of registration** with the Care Quality Commission, within which each Trust would have a Quality and Risk Profile (QRP) based on information from a number of sources such as the NPSA and the national patient surveys. The Committee agreed that the Patient Experience Group should report to CQuaC given the emphasis on patient outcomes and experience in

the new registration system. The CEO noted that a work stream had been initiated to address issues revealed in the Outpatients' Survey.

Dr Colin Johnston
Director of Patient Safety, Medical Director
Thursday 18th March 2010