



Committee/Group 'Triple A' Chair's Report

Name of Committee/Group	QUALITY COMMITTEE	Reporting to:	TRUST BOARD
Date of the meeting:	17 July 2019	Parent Committee:	TRUST BOARD
Chair:	Mark Baker, Non-Executive Director	Quorate (Y/N)	Y

Agenda Item:	RAG	Key Points	Actions Required	Action Lead	Expected Date for Completion
H-O data being captured for antibiotics, VTE, sepsis and 14 hour review		Data flow between H-O and RLBUHT has resulted in the need for data to be manually recorded.	The manual system in place requires H-O to undertake a monthly manual extraction of data from the PENS system from RLUHT. This will be included in the H-O programme reporting. A Task & Finish Group is to be established, with a ToR to be created to clearly identify expected outcomes, to address the issues experienced, and an action plan to be developed. Progress on this work to be developed and progresses through Directorate Q&S meetings and performance meetings.	HG/SBa /LF	To be agreed at Directorate level
C.Difficile		There have been three attributable cases against an annual target of four, or fewer.	Strict processes continue to be adhered to and education for staff is ongoing. It has been identified that, for two of the cases, there has been no lapse in patient care and dialogue with Commissioners is continuing in relation to case where a lapse in care occurred.	KK	Ongoing
Haemato-Oncology		The RLBUHT worsening infrastructure continues to impact on Haemato-Oncology, and patient safety and comfort is being compromised, and infection control is at risk.	The situation has been escalated to Infection Control and Estates Department. However the gaps in controls are beyond the Directorate's control and these challenges will continue until H-O moves to CCC-Liverpool. Trust wide activity is underway to review the timing of the Directorate's move.	LF	Ongoing

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Haemato-Oncology		The sustainability of the Southport HO Service and the potential impact to CCC is ongoing.	A temporary locum has been recruited to cover the service, but this is not sustainable long term. A meeting is scheduled Commissioners and key stakeholders on 23 July 2019 to review the future of HO services, with a wider piece of work to be undertaken across the region as a whole.	JSp	July 2019
Workforce & Organisational Development		The Trust is breaching the timescales in relation to the Employee Relations target.	Work is being undertaken to identify why the breaches are occurring, to review investigation resources and capacity, and the possible recruitment of additional senior managers to the investigation resource pool.	CW	August 2019
Workforce & Organisational Development		Staff Survey – the staff Friends and Family Staff Engagement indicator is showing a downward trend.	Work is being undertaken to understand the decline of the score and to consider how this can be addressed.	JG	September 2019
Adult In-Patient Survey 2018		The Trust has received the report, which provides the initial findings of the survey. CCC has performed well when benchmarked against its peers and has placed in the top quartile.	There are lessons to be learned and service improvement to be recognised in the feedback from patients and an improvement plan will be developed to take the learning forward. The survey findings and action plan will be managed through the new Patient Experience and Inclusion Group, which will report progress to IGC.	KK	October 2019
Draft Clinical Quality Strategy		The 2019-21 strategy supports the Trust's strategic priorities, vision and values, and builds on the overarching transformation of the cancer care programme, helping all staff to understand the key quality aims and their role in delivering high quality care for patients and service users over the next 3 years.	Following feedback provided by a number of Committees, the strategy will be updated and the final version will be provided to the September 2019 Committee meeting, prior to submission to Trust Board for approval.	KG	September 2019
Staff Sickness Absence		There is a downward trend of the reporting figure, to 3.46% for June 2019, from 3.72% in May 2019. However, this remains above the Trust's target.	The position will continue to be monitored.	JG	Ongoing

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Non-Medical Prescribing		A review of NMPs was undertaken to maximise the use of NMPs at CCC.	A Task and Finish Group has been created to develop a strategy/implementation plan to identify and support future training needs. Going forward, it will be a priority for NMPs to support patient discharge at CCC.	HPC	September 2019
Pharmacy - Brexit implications for medicines		With regard specifically to radioisotopes, Brexit preparations are back on schedule.	The Department of Health continues to work with pharmaceutical companies to ensure that the supply of medicines will continue in the event of a no-deal. In the event that CCC requires a rapid decision group e.g. for a drug substitution, the existing executive meeting will be utilised to ensure that patient treatment is optimised.	HPC	Ongoing
Nitrous gases		A number of Nitrous gas canisters have been stole from a local Trust.	CCC has undertaken a risk assessment and has gained assurance in relation to the storage of its own Nitrous supplies.	HPC	Complete
National Research Activity League Table		The National Institute for Health Research (NIHR) Clinical Research Network has published the league table, which details research activity across all NHS trusts in England.	The table provides a picture of how much clinical research is happening, where, in what types of Trusts, and involving how many patients, and CCC has been placed in the top ten of all NHS Trusts in England.	JH	Complete
Pharmacy Recruitment		Pharmacy held an open recruitment event on 8 July 2019, in Liverpool, which was promoted on local radio and print media.	Pharmacy has now recruited staff for all open vacancies.	HPC	Complete
Gosport Review		Following the Gosport Memorial Enquiry, CCC undertook a review against best practice for Opiate and Sedative prescriptions.	The review was undertaken and provides significant assurance on the Trust's practices and an action plan was developed on the lessons learned. All actions are now complete and a formal update has been provided to Quality Committee.	HPC	Complete
Safer Staffing Monthly Report		Following concerns raised in relation to safe staffing levels, assurance is provided through the report that staffing levels on wards are safe.	DDoN is working with Matrons around the education of staff, to ensure everyone is aware on how the levels are calculated and processes in place to ensure Safe Staffing on Wards.	KK	2 Sept 2019

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HSE Visit to Cyclotron		Following the HSE Inspection, five minor recommendations were received.	All five recommendations have been completed; HSE confirmed they will not provide formal written feedback but are content with actions taken.	JM	Complete
Risk Management Annual Report 2018/19		The Committee received the report, which details the annual review of incidents, serious incidents, externally reported incidents, claims, risk register, inquests and safety alerts.	The Committee will recommend that the Trust Board approves the annual report, for inclusion within the Clinical Governance Annual Report.	KG	Complete
Workforce Equality Diversity & Inclusion Monitoring Report 2018		The Committee reviewed the report, which demonstrates the Trust's commitment and compliance with the Equality Act 2010 general duty across all directorates' and summarises the Equality Diversity & Inclusion employment monitoring data for the workforce employed by the Trust for the period 1st April 2018 to 31st March 2019.	Quality Committee signed-off and approved the report, which will be published on the CCC website	JSh	Complete

KEY

	ALERT the Committee on areas of non-compliance or matters that need addressing urgently
	ADVISE the Committee on any on-going monitoring where an update has been provided to the sub-committee and any new developments that will need to be communicated or included in operational delivery
	ASSURE the Committee on any areas of assurance that the Committee/Group has received