

## Escalation and Assurance Report

**Report from the: Quality and Safety Committee (QSC)**

**Date the meeting took place: 21<sup>st</sup> October 2021**

**Report to the: Board/Council of Governors**

**Key discussion points and matters to be escalated from the discussion at the meeting:**

### **Alert:**

We were reminded of the very considerable staffing pressures associated with staff sickness, vacancy, and turnover rates. We received the Safer Staffing Report which consolidated the need for continuous, critical scrutiny. Community Nursing Services, specialist palliative care services, and the 0-19 service are areas of particular risk; alongside availability of healthcare support workers and Bank/Agency staff across the Trust. Following our previous AAA report, we received a more in-depth report on Children's Services, mindful of the context of Bradford's increased child protection requirements and a substantial vaccination schedule.

QSC, Board and all subcommittees are acutely aware of these pressures and have various interventions in place to mitigate risk and work towards continuous improvement. Nevertheless, the situation is a threat to the integrity of our services, and some national factors (e.g. greying of work force and reduced numbers of potential staff in the training pipeline such as Public Health Nurses) are not within our immediate control. As such we are keen to amplify the collective sense of concern, fast track effective interventions (e.g. recruiting nationally), offer our support to all those who are working towards improvement, and support the staff who have borne the brunt of a sustained high workload. The grounded optimism of Michelle Holgate as General Manager is much appreciated.

### **Advise:**

We received an informative and significant report on staff experience which examined various key issues previously brought to the attention of both Board and QSC. The Committee thanks Thabani Songo for his excellent leadership here. This work must be repeated, and Committee agreed that a *constant comparative method* of analysis may be helpful to monitor progress with interventions. Points of note include: a more co-ordinated approach to recruiting and placing Agency staff; the impact on service users of our teams' gender balance; the need to further improve the utility of SystemOne Care Planning modules; and how some staff perceive our corporate response to Regulator concerns.

### **And how we Assure:**

- We approved a strong and coherent Winter Plan - we are clearly better prepared due to our increased experience of (potential) crisis planning from the pandemic. We did however caution that some matters are not within our immediate control. Thank you to all those involved.

- Progress is being made in integrating a *Trauma Informed Care* model to underpin our service planning and delivery. We strongly support this approach. Thank you to Anita Brewin and all those involved.
- We continue to optimise our analysis of serious incidents and welcome the clear shift to a systematic strategy of organisational learning

**Risks discussed:**

- 2533; 2535; 2534; 2544 (Children's Services); 2370 (Impact of Covid pandemic on service delivery)

**New risks identified:**

**Report completed by:** Gerry Armitage, Chair & Non-Executive Director  
**Date:** November 1<sup>st</sup> 2021