

Agenda Item <b>20.3</b>
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## **Quality and Safety Committee**

### **Annual report**

**April 2021 to March 2022**

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## **1 Period covered by the report**

This report covers the period between April 2021 and March 2022.

The period covered by this report continues to reflect the ongoing impact of the COVID19 pandemic. National command and control structures have remained in place, with the UK experiencing a number of peaks in infection rates, requiring enhanced responses from NHS organisations. During this period the trust has continued to respond to all national guidance relating to the pandemic, both in terms of infection prevention and control and the wider delivery of NHS services.

During this period, the business of the Quality and Safety Committee has resumed, with an increasing focus on moving back towards a more 'business as usual' approach to managing quality and safety across the organisation.

At the time of writing this report, the NHS continues to manage the pandemic, with national command and control arrangements having been stood down to level 3 (regional oversight) during May 2022.

## **2 Introduction**

The Quality and Safety Committee (Committee) has been formally established by the Board of Directors as one of its sub-committees. It is authorised to seek and obtain evidence of assurance on the effectiveness of the Trust's quality and safety systems and processes, and the quality and safety of the services provided. This includes identifying and seeking assurance on the management of quality and safety related risks at an operational and strategic level. The Committee monitors and reports to the Board on the effectiveness of these systems and processes. The Committee's key objectives are to seek assurance that:

- systems and processes are effective, and wherever possible evidence-based,
- the quality of services provided is good and continuously improving, and
- the experience of people using Trust services is good and continuously improving.

The Committee also seeks to:

- monitor, review and report to the Board on all the above; highlighting assurances received and identifying any threats to assurance,
- support the range of quality and safety initiatives in place within the Trust, providing advice where appropriate,
- support and promote an organisational culture which is open, just and sensitive to risk, as part of a positive approach to investigating and learning from adverse events, and
- receive relevant strategies for information and assurance.

This report covers the work the Committee has undertaken at the formal meetings held during 2021/22.

The Committee directly aligns to the Trust Board and assures it on the work it has carried out, the assurances it has received and escalates specific concerns; demonstrating that it has operated within its Terms of Reference.

Secretariat support is provided by the Corporate Governance Team, who work with the Deputy Director of Patient Safety, Compliance and Risk in relation to agenda planning; minutes; managing cumulative action logs; and general meeting support.

### Assurance

The Committee receives assurance from the Executive Director members of the Committee, Care Group Leaders, and from the subject matter experts who attend the meetings as required, dependant on the agenda items being discussed.

Assurance is provided through written reports, both regular and bespoke, through critical exchange and challenge by Committee members who validate the information provided through wider knowledge of the Trust; specialist areas of expertise; attending Board of Directors', and Council of Governors' meetings; visiting services, talking to staff, and observing operational meetings at the Trust as required. The Committee has one Involvement Partner as a member who provides a service user perspective on the items being discussed. During this period Committee meetings continued to be held in a virtual format, through the use of Microsoft Teams, and Involvement Partners were supported to be able to access meetings using this platform.

The Committee is assured that it has the right membership to provide the right level and calibre of information and challenge.

Part of the assurance role of the Committee is to receive the Board Assurance Framework (BAF); a primary assurance document for the Board which details those key controls in place to ensure that any risks in achieving the strategic objectives are being well managed. The BAF lists those committees that are responsible for receiving assurance in respect of the effectiveness of those controls. The Quality and Committee is asked to note those where it is listed as an *assurance receiver* to ensure that it had received sufficient assurance through the reports that come to the Committee or to commission further information where there was a lack of assurance (actual or perceived). These are:

- SO1: To engage with our patients and service users, ensuring they are equal partners in care delivery
- SO3: To provide our people with the tools and coaching to support innovation, quality improvement and organisational learning (through the Care Trust Way)
- SO5: To value partnership ensuring that we collaborate to deliver maximum impact on health inequalities

The Committee reviews the BAF at each meeting prior to it being presented to the Board. The Committee also received specific updates in relation to COVID19 during this period

The Committee continues to receive a data pack containing data and intelligence in support of its agenda items. This pack contains core data aligned to the business of the Committee, including those elements of the NHS England and Improvement Standard Oversight Framework that come within the scope of the Committee. The data contained within this pack is discussed operationally and in the Compliance and Risk Group, prior to being brought to Committee as part of the escalation framework.

At the start of 2021, Quality and Safety Committee moved from meeting every 6 weeks to a monthly meeting, with the intent of allowing more in depth discussion of the content of the broad agenda this Committee is accountable for. Whilst this has been largely positive, it is acknowledged that the breadth of the content continues to present challenges in terms of the amount of business the Committee has to cover.

### **3 Terms of Reference**

During March 2022, the Committee conducted an annual effectiveness review and updated the Terms of Reference for the Committee. These were presented to Committee and the Board of Directors in April 2022 for approval.

The review indicated that whilst there had been learning identified from members, this largely related to how the Committee conducted itself within its current Terms of Reference. As a result, it was not considered necessary to make any significant changes to the Terms of Reference.

However, during this period, the Terms of Reference (ToR) of a number of the key groups reporting into the Committee have been reviewed as part of ongoing improvements in quality oversight and the ongoing work on operational governance.

The Committee continued to receive escalation reports from the operational groups which report into it, specifically the Compliance and Risk Group, the Patient Safety and Learning Group, Clinical Board and the Safer Staffing Group.

During June 2022, the Trust established the TWICS (Together We improve, Create and Sustain) programme. This programme brings together programmes and projects supporting strategic transformation, the next steps out of COVID and sustainability and efficiency (including Cost Improvement Programmes). The programme has a wide remit and reports into two Committees – Finance, Business and Investment Committee, and the Quality and Safety committee, by way of escalation reports.

### **4 Meetings of the Committee**

The Committee was scheduled to meet every month during 2021-2022, with the exception of August where no Committee meetings are held. Committee met 11 times during this period. In addition, in order to consider the specific impact of COVID on staff sickness levels, the Committee met jointly with the finance, business and Investment

Committee and Workforce and Equality committee during December 2021. Details of the meeting dates are listed below:

21 April 2021  
25 May 2021  
17 June 2021  
26 July 2021  
14 September 2021  
21 October 2021  
23 November 2021  
16 December 2021  
16 December 2021 (joint with FBIC and WEC – this is in addition to the QSC meeting also held on this date)  
20 January 2022  
17 February 2022  
17 March 2022

The draft agenda for each meeting is presented to the Chair of the Committee (Gerry Armitage); Non-Executive Director (Carole Panteli); and the executive lead Director of Nursing, Professions and Care Standards; Chief Operating Officer; and Medical Director by the Corporate governance secretariat.

Paperwork for the Committee is circulated seven calendar days prior to the meeting taking place. Exception items may be received within seven days where this has been agreed by the Chair. All actions pertaining to the meetings of the Committee are tracked on a cumulative action log and presented to each meeting for assurance with progress made. In addition, recognising the impact of COVID on the ability to conduct 'normal' business within the agenda, a deferred items log is maintained to ensure items that are deferred due to availability or capacity within the meeting to enable discussion, are not lost to follow up. This log is reviewed at each meeting.

## **5 Membership of the committee and attendance at meetings**

Membership of the Committee has remained relatively stable for the majority this year, with changes coming during the final quarter of the year relating to shifts in the non-Executive and Executive composition of the Board. The Committee is made up of three Non-Executive Directors; the Director of Nursing, Professions and Care Standards, the Chief Operating Officer, the Medical Director, and the Director of Corporate Affairs.

During this period the Committee was chaired by a Non-Executive Director (NED), Professor Gerry Armitage, who was also the Deputy Chair for the Trust. Gerry has an established track record in patient safety research and continues to work part-time in this field. He was also a registered nurse for over 30 years. Professor Armitage completed his period as a NED for the Trust at the end of March 2021 and therefore stepped down as chair of this Committee. A new NED appointment, Alyson

McGregor, MBE, has taken over the chair of the Committee as from April 2022. At the same time, in December 2021, Cathy Elliott stepped down as chair of the Trust, moving to become chair of the West Yorkshire Health and Care Partnership. As a result, Carole Panteli was appointed interim chair and therefore handed over her responsibilities as deputy chair of the Quality and Safety Committee to Andrew Chang, who will chair the meeting should the NED chair be unavailable.

Due to the nature of the position that they hold, all Executive and Non-Executive Directors as Board members can attend any Board sub-committee. Upon doing so they will assume full member rights and responsibilities.

Subject area experts are also invited to attend the meetings as appropriate, to provide expertise and knowledge on the areas that they are responsible for. On these occasions, they are attendees and do not count towards the membership of the meetings as outlined in the Terms of Reference.

The Trust also invites Governors to observe Board sub-committee meetings. This opportunity allows Governors to observe the work of the Committee, rather than to be part of its work as they are not part of the formal membership of the Committee. Governors observe Board sub-committee meetings in order to get a better understanding of the work of the Trust and to observe Non-Executive Directors appropriately challenging the Executive Directors about the operational performance of the Trust.

Experience and involvement continues to be a key focus for the Trust with identified Involvement Partners, who are supported by the Patient Experience Team. During this period, the Carer Involvement Partner for the trust stepped down from this role and so the Committee has been supported by the service user Involvement Partner, who has worked with the Committee for the past 12 months.

Meetings have routinely been held virtually, using MS Teams to ensure that members can continue to contribute whilst keeping in line with National Guidelines. Involvement Partners and Governors were proactively encouraged to attend and were provided with access to the MS Teams meeting to enable this.

The table below show attendance at the Committee for the meetings that took place during 2021/2022

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Name	21/04/21	25/05/21	17/06/21	26/07/21	14/09/21	21/10/21	23/11/21	16/12/21	16/12/21 <sup>1</sup>	20/01/22	17/02/22	17/03/22
<b>Substantive members</b>												
Prof. Gerrard Armitage, Chair	X		X	X	X	X	X	X	X	X	X	X
Carole Panteli, Deputy Chair	X	X	X	X	X		X					X <sup>2</sup>
Andrew Chang, Non-Executive Director	X	X	X		X	X	X	X	X	X	X	X
Philippa Hubbard, Director of Nursing, Professions and Clinical Standards	X	X	X	X	X		X	X	X		X	X
Dr David Sims, Medical Director	X	X	X	X	X	X	X	X	X	X	X	X
Patrick Scott, Chief Operating Officer	X		X	X	X	X	X	X	X	X	X	
Alyson McGregor, incoming chair <sup>3</sup>											X	
Tafadzwa Mugwagwa <sup>4</sup>												X
<b>Others in attendance</b>												
Paul Hogg, Associate Director of Corporate Affairs	X		X	X	X	X	X	X	X	X	X	X
Dr Beverley Fearnley, Deputy Director of Patient Safety, Compliance and Risk	X	X	X	X		X	X	X			X	X
Grainne Eloi, Deputy Director of Nursing			X			X				X	X	X
Fran Limbert, Deputy Trust Secretary <sup>5</sup>	X											
Helen Robinson, Deputy Trust Secretary				X	X				X			
Sue Grahamslaw, Corporate Governance	X	X	X	X	X	X	X	X		X	X	X
Matthew Riley, Involvement Partner	X	X	X	X	X	X	X	X		X	X	X
Anne-Marie Howard, Involvement Partner <sup>6</sup>	X	X										
Cathy Elliott, Trust Chair	X											
Zulfi Hussain, Non-Executive Director										X		
Maz Ahmed, Non-Executive Director				X					X			
Mark Rawcliffe, Non-Executive Director											X	
<b>Attending for specific items</b>												
Kelly Barker, General Manager Mental Health	X		X		X					X		X
Michelle Holgate, General Manager Adults and Children's Physical Health	X	X		X	X	X		X		X	X	
Christopher Dixon, Head of Nursing, Mental Health							X				X	
Rebecca Jowitt, Head of Nursing, Adult and Children's Physical Health				X								

<sup>1</sup> Joint meeting with FBIC and WEC to discuss staff sickness levels

<sup>2</sup> Observing in role as Interim Chair of the Board of Directors

<sup>3</sup> Chair as of April 2022, attending to observe in advance of taking on appointment

<sup>4</sup> Incoming interim COO – to replace Patrick Scott who left in March 2022

<sup>5</sup> Left the trust in May 2022, replaced by Helen Robinson

<sup>6</sup> Left role in August 2021



James Cook, Assistant General Manager Adult Physical Health								X						
Thabani Songo, Service Manager, Inpatients Mental Health						X								
Dr John Hiley, Head of Research			X					X						
Dr Gregor Russell								X						
Rachel Howitt, Head of Patient Safety, Compliance and Risk				X	X			X			X			
Jaspreet Singh, Chief Pharmacist								X						
Prabhdeep Sidhu, Deputy Chief Pharmacist								X						
Dr Sarojit Ganguly	X													
Joanna Shinnars, Clinical Audit Lead								X						
Jackie Knott, Tissue Viability Nurse				X										
Dr Anita Brewin, Head of Psychological Therapies							X							
Claire Reed, KPO Manager				X										
Isla Skinner, Head of Patient and Carer Experience and Involvement														X
Naomi Holdsworth, Operational Service Manager, IAPT											X			
Nicola Wilson, Workforce Performance and Planning Manager											X			
Naomi Edwards, NHS England and Improvement											X			
<b>Attending from FBIC and WEC for joint meeting</b>														
Simon Lewis (chair, WEC)											X			
Maz Ahmed (chair, FBIC)											X			
Sandra Knight, Director of HR and OD											X			
Mike Woodhead, Director of Finance, Contracting and Estates											X			
Fiona Sherburn, Deputy director of HR and OD											X			
<b>Attending as an observer</b>														
Rebecca Wixey, Freedom to Speak Up Guardian (observer)													X	X
Joanne Gott, Head of Strategy Deployment (observer)				X	X	X								
Sughra Nazir (Governor)			X		X									
Anne Scarborough (Governor)					X									
Gemma Berry (Relationship Manager, CQC)				X										

## 6 Report made to the Board of Directors

The Chair of the Quality and Safety Committee makes an Alert, Assurance, Advice (AAA) report regarding the most recent meeting of the Committee to the next available Board of Directors' meeting. This report seeks to assure the Board on the main items discussed by the Committee and, should it be necessary, to escalate to the Board any matters of concern or urgent business which the Committee is unable to conclude. The Board may then decide to give direction to the Committee as to how the matter should be taken forward or it may agree that the Board deals with the

matter itself. Where items are considered to be of significance and a certain urgency, the Chair of the Committee may make use of Exceptional Escalation Reports to the Trust Chair and Chief Executive, and where appropriate the Trust Board.

Where the Board wants greater assurance on any matters that are within the remit of the Terms of Reference of the Committee the Board may ask for these to be looked at in greater detail by the Committee.

The below table outlines the date that the assurance and escalation report was presented by the Chair of the Committee to the Public Board of Directors meeting.

<b>Date of meeting</b>	<b>Assurance and escalation report to Board by Chair</b>
21 April 2021	13 May 2021
25 May 2021	8 July 2021
17 June 2021	8 July 2021
26 July 2021	9 September 2021
14 September 2021	11 November 2021
21 October 2021	11 November 2021
23 November 2021	13 January 2022
16 December 2021	13 January 2022
16 December 2021 <sup>7</sup>	13 January 2022
20 January 2022	10 February 2022 <sup>8</sup>
17 February 2022	10 March 2022
17 March 2022	12 May 2022

## **7 The work of Quality and Safety Committee during the year between April 2021 and March 2022**

The Chair of the Committee can confirm that the Committee has carried out its role in accordance with its Terms of Reference. Further details of all these areas of work can be found in the minutes and papers of the Committee. Given the ongoing impact of COVID during this year, as well as continuing to receive reports from the Care Groups, and receiving assurance and reports from other diverse sources, the Committee has had a significant focus on how the Trust is operating during the pandemic. This focus has included: how the quality and safety of services are maintained; how the Trust is

<sup>7</sup> Joint meeting with FBIC and WEC. Joint escalation report made to Board.

<sup>8</sup> Submitted to the Private Board meeting

meeting the ongoing challenges of the ongoing situation; and how the Trust is planning to move beyond the immediate COVID response, reflecting on the local and national impacts on communities, services and our staff wellbeing.

The work of the Committee continues to be underpinned by the work of the Compliance and Risk Group and the Patient Safety and Learning Group. These groups have continued to evolve and adapt to the changing circumstances of the Trust, and along with the Care Group Quality and Operational Groups, support the Committee in continued oversight of the quality of services. Furthermore, it has been reassuring for the Committee to receive ongoing updates on continued quality improvement activity across all spheres of the Trust's activity.

A high-level presentation of areas of work on which the Committee has received assurance on during 2021/22 are as follows:

**Assurance on:**

- Quality and safety of services during COVID
- Feedback from Involvement Partners
- Discussions taken place at Safer Staffing Group; Compliance and Risk Group; Patient Safety and Learning Group; Clinical Board and the TWICS Programme Board
- Items escalated from the Mental Health Care Group and Adult and Children's Care Group
- Psychological therapies action plan
- School Nurse Transformation Plan
- Implementation of Trauma Informed Care approaches
- Care Quality Commission action plan updates, preparedness for inspection, post inspection follow up
- Management of SI:2020 14014 (Fern Ward)
- Board Assurance Framework
- Organisational High Risk Register
- Equality and Quality Impact Assessments
- Risk management and incident management
- Serious Incident management
- Internal Audit Reports.
- Preparedness for Winter

**Reports on:**

- Patient experience
- Incident management
- Serious incidents
- Biannual learning report
- Guardian of Safe working Hours
- Infection Prevention and Control
- Risk Management
- Research, Development and Library Services

- Clinical Audit
- Safeguarding
- Suicide Prevention
- Learning from Deaths
- Medicines Management and Optimisation
- Ligature Risk Assessment

**Presentation of:**

- Internal audits – CQC response
- Quality Account
- Quality Summit outcomes
- Rapid Process Improvement Week (Care planning)
- Go See Visit trends and themes
- Pressure Ulcer Strategy
- Patient Safety Strategy proposal
- Compliance and Risk Group Terms of Reference
- Quality Assurance Framework
- Staff sickness (in joint meeting with WEC and FBIC)

## **8 Conclusion**

The Chair of the Committee would like to assure the Board that the Committee worked hard to fulfil its Terms of Reference during 2021/22, despite the ongoing pressures relating to the management of the COVID pandemic. The Board is asked to recognise how the Committee supports the ongoing continuous improvement journey both at the Trust and on its own effectiveness.

The Committee adds value by maintaining an open and professional relationship with officers of the Trust, having carried out its work diligently; discussed issues openly and robustly; and kept the Board of Directors apprised of actual and potential issues, risks, or learning. Organisational learning drives this Committee and is one of its core values; further improvements will be made to advance this critical aspect of quality and safety.

Members of the Committee would like to thank all those who have responded to its requests during the year and who have supported it in carrying out its duties. The Committee would like to specifically recognise the hard work and continued dedication of all of the Trust's staff in delivering high quality, safe care which has resulted, during this period, in the Trust receiving a 'Good' rating from CQC following a reinspection in September 2021 .

**The Chair sincerely thanks all Committee members, especially involvement partners, for their integrity, concentration, rigorous analysis and creative solutions.**

In addition the Committee would like to thank Professor Armitage for his leadership, compassion and support during his tenure as a Non-Executive Director, and specifically during his term as chair of the Quality and Safety Committee. We wish him all the best as he moves on from his role within the Trust.

May 2022

**Alyson McGregor, MBE**

Chair of the Quality and Safety Committee

**Philippa Hubbard**

Director of Nursing, Professions and Clinical Standards, lead Executive for the Committee

**Dr Beverley Fearnley**

Deputy Director of Patient Safety, Compliance and Risk