

AAAD: Effective Oversight: Escalation and Assurance

Report to:	Board of Directors (Public)	Meeting date:	23/03/2025
Report from:	Quality & Safety Committee	Meeting date:	12/03/2025
Quorate?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Members present	Alyson McGregor MBE (NED/Chair), Bob Champion, Kelly Barker, Sally Napper (NED), Phillipa Hubbard.		
In attendance	Christopher Dixon, Grainne Eloï, Jess Greenwood-Owens, Matthew Riley, Prabhdeep Sidhu, Rachel Howitt, Anita Brewin, Rachel Trawally, Catherine Schofield, Claire Webb, Jackie Knotts, Paula Reilly, Abigail Larvin, Lisa Wright,		
Observers	Trevor Ramsay (Governor)		
Apologies	David Sims, Fran Stead, Rebecca Le-Hair, Thabani Songo, David Sims, Rebecca Jowett		
Best Quality Services	Theme 1 – Access and Flow		BQS:T1
	Theme 2 – Learning for improvement		BQS:T2
	Theme 3 – Improving the experience of people using our services		BQS:T3
Agenda items	<ul style="list-style-type: none"> Action Log Learning from your experience: Pressure Ulcer deep dive report Feedback from Involvement Partners Strategic Assurance Report .1 Integrated Performance Report and .2 Strategic Narrative Quarterly CQC update Equality Impact Assessment update Quarterly Patient Safety, Incidents, and Experience and feedback PCREF update Alert, Advise, Assure and Decision Reports .1 AAAD report: System Quality Committee/ .2 AAAD report: Clinical Board/ .3 AAAD report: Patient Safety & Learning Group/ .4 AAAD report: Safer Staffing Group/ .5 AAAD report: Senior Leadership Team Quality, Safety, Governance/ .6 AAAD report: Allied Health Professionals/ .7 AAAD Report: Quarterly combined report: Patient and Carer Involvement and Volunteering Strategic Risk Summary Committee annual effectiveness review update Notification of future meeting dates Draft Workplan 2025/26 Confirmation of Escalation Reporting including: 1 Confirming strategic priority assurance levels (decision based on outcome of entire meeting, details of level in item 8), 2 Confirming top 3 strategic risk to include in AAA report (decision based on outcome of entire meeting), 3 Confirmation of Alert; Advise; Assure and Decision Reporting 		

	<ul style="list-style-type: none"> • Meeting Evaluation
Alert items agreed by Committee	<ul style="list-style-type: none"> • Significant demand for acute inpatient services over late February and early March 2025. Work was ongoing to address this. • The Trust had formally received the Regulation 28, which had been previously discussed.
Advise items agreed by Committee	<ul style="list-style-type: none"> • Pressure Ulcer Report – training within care homes was discussed (availability of staff, turn over and impact on training etc.), this would be followed up via the Local Authority/Safeguarding and System route. • The Involvement Partners process - The Committee recognised the important role and the further work that was being undertaken within this area was discussed. • First Response Line – feedback from Involvement Partners was discussed. This would be taken forward. • Challenges continued within acute inpatient service, driven by the ability for people to access services at the right time/level/by the right people. Work was ongoing to address this. • NHSE – 50% job losses announced. • The Patient Safety Strategy review was underway. • A small number of Care Homes had received CQC – ‘requires improvement’. • PCREF - Data on the use of restraint, formal detention and inpatients was provided for ethnicities, along with the work streams within this area. The report highlighted differences in experience which need to be addressed by the Trust.
Assure items agreed by Committee	<ul style="list-style-type: none"> • Pressure Ulcers within the Trust were lower when benchmarked to other Trusts, there was stability of numbers, despite a rising number of service users with complex needs. The Team’s dedication and innovative approach was noted. The high numbers occurring in people in care homes was highlighted as a concern. • Waiting list improvements and temporary staffing were noted, this should impact assurance levels in due course. Inpatient Services were currently fully recruited to. • Care Trust Way had been utilised to align value streams linked to sustainability and quality within operations. • A key focus had been on whether service users were socially/emotionally ready for discharge. • CQC – there were 5 enquiries in quarter three, a decrease from quarter two and lower than other Trusts when benchmarked. The Trust continued to work transparently with the CQC to highlight enquiries/incidents. • The Trust anticipated a Well Led inspection – preparation was underway, an auditor was being appointed to undertake an internal audit. • Complaints process continued to be improved; this was reflected in positive/reduced figures.
Decisions made by Committee	<ul style="list-style-type: none"> • Approved - PCREF update • Approved - Strategic Risk Summary

New risks identified by Committee	<ul style="list-style-type: none"> An increase in Pressure Ulcers were noted for care homes - this risk has been escalated to LA as contract leads and training from the tissue viability team supported clinical teams in care homes 		
Items to be considered by other Committees/Groups	No items were raised.		
Feedback following discussion at 'parent' meeting	No items were raised		
Report completed by	Jess Greenwood-Owens Corporate Governance Officer	Date	13 March 2025
On Behalf of Chair	Alyson McGregor MBE (NED/Chair)		