

Trust Board meeting (Part 1)		Date:	25 January 2017
Agenda item		Non-Executive Director lead and presenter	Report author
BD/16/221	Report of the Quality and Standards Committee Chair	Ruth Brunt	Ruth Brunt
This report is for:			
Decision			
Discussion			
To Note		X	
History			
Quality and Standards Meeting 17 January 2017			
The following impacts have been identified and assessed within this report			
Equality	X		
Quality	X		
Privacy			
Executive summary of key issues			
<p>The Board is asked to note this report from the last Q&S Committee meeting. The committee received a presentation from the South Gloucestershire Locality. In addition to the standard performance reports, the meeting considered:</p> <ul style="list-style-type: none"> the quality achievements, challenges and workforce issues for South Gloucestershire the model for Exec/Non Exec walkabouts Safer Staffing and Clinical Data Quality internal audit reports Results from the Annual Community Mental Health Survey 2016 Implications of the CQC <i>Learning and Accountability Report. December 2016</i> The need for committee understanding of the 2017/18 workforce plan 			
We will deliver the best care		X	
We will support and develop our staff		X	
We will continually improve what we do		X	
We will use our resources wisely		X	
We will be future focussed		X	

1 Business Undertaken

1.1 South Gloucestershire Locality presentation

- Focus on work of the involvement coordinator, highlighting service user engagement in planning rehabilitation activities and work with local authority on well being events.
- Quality Priorities – Gate keeping, IAPT services, the model of PCLS provision, Delayed Transfer of Care, and Learning from Incidents/complaints
- Key Challenges – DTOC, interface with Bristol for inpatient services, staff morale in current climate, move from Blackberry hill site to Kingswood civic centre.
- Several examples of good practice highlighted
- Workforce – Turnover lower than Trust average (9%). No significant recruitment problems apart from Band 5 nurses. Discussion about how to maintain the profile of quality during financial pressures.
- Committee recognised high performance in a number of areas and the commitment of the leadership team.

1.2 Measurement

The committee received assurance on the following:

- Safer Staffing – Processes for reviewing variance from agreed safer staffing levels.
- Improvement in drug administration recording
- Improvement in physical observations relating to rapid tranquillisation
- The work of the Strategic Workforce Group in relation to workforce priorities
- Good infection control practice in relation to recent outbreaks, where spread was prevented.
- Process for providing assurance on compliance with Mental Health legislation

- Progress with CQUINS
- Actions being taken as a result of recent CQC concerns at Callington Road
- Progress with the CQC enforcement and compliance actions
- Operational Performance maintained despite pressures in many areas
- Improvement in Community Mental Health Survey results, recognising that there are still areas for further focus

The committee required further assurance relating to:

- CAMHS – ongoing safety and quality of the service.
- Workforce plan with associated trajectories for 2017/18
- Move to 50:50 skill mix and expected improvements in agency use
- A clear approach to identifying top quality risks
- Executive oversight of actions arising from internal audit reports

1.3 Capability and Culture

- Discussion about the need to engage effectively with front line staff in relation to the fundamental link between financial sustainability and service quality.
- Concerns that appraisal and supervision levels are deteriorating.
- Schedule of Board walkabouts to be reinstated over the coming week. It was agreed that these should still focus on quality and safety issues as well as being a vehicle for engaging more generally with staff. These will be re-launched with new communication about their purpose.

1.4 Process and Structure

The committee received assurance regarding:

- The systems and processes in place to ensure the issues identified in the CQC “Learning, Candour and Accountability” report are addressed.

2 Key Decisions

2.1

- Relaunch of Board walkabouts with appropriate communication to front line staff.
- Themes from 15 step walkabouts to be reported to this committee quarterly.
- Policy updates to be a permanent agenda item for executive reporting

- Workforce plan with associated trajectories by March

3 Exceptions and Challenges

3.1

- Sustainable workforce
- Maintaining focus on quality agenda
- Meaningful staff engagement

4 Impact of Risks to Achievement of Strategic Objectives

4.1

- CQC non-compliance
- Quality impact of financial recovery plan
- CAMHS inability to meet commissioner requirements whilst ensuring a safe service

5 Governance and Other Business

5.1

All papers for this committee to be approved by the Clinical Executives for inclusion on the agenda

6 Future Business

6.1

- Nominated Service User representative to attend February meeting.
- Annual Safeguarding report deferred to February meeting
- Specific focus on suicide prevention at February meeting.
- Acute care pathway review