

Minutes of the Quality Committee – Part A
Tuesday 12 January 2021 at 9.30am
Via Zoom

Present: Professor John Baker, Non-executive Director (Chair of the Committee)
Miss Helen Grantham, Non-executive Director
Mrs Claire Holmes, Director of Organisational Development and Workforce
Mrs Cathy Woffendin, Director of Nursing, Quality and Professions
Mrs Joanna Forster Adams, Chief Operating Officer

In attendance: Ms Lyndsey Charles, Clinical Director for LD and Older Peoples Services (for item 8)
Mrs Cath Hill, Associate Director for Corporate Governance
Ms Rebecca Le-Hair, Head of Quality and Clinical Governance
Ms Jennifer McIntosh, Professional Lead for AHPs – LD and Children and YP Services (for item 8)
Miss Kerry McMann, Corporate Governance Team Leader
Mr Waseem Munir, Head of Clinical Governance: Quality Assurance and Compliance
Ms Linda Rose, Head of Nursing and Patient Experience (for items 6 and 7)
Ms Cath Wardle, Head of Clinical Governance: Patient Safety
Ms Louisa Weeks, Patient Experience and Involvement Lead

		Action
	<p>Welcome and Introduction</p> <p>Professor (Prof) Baker welcomed everyone to the meeting.</p> <p>The Committee welcomed Mr Munir and Ms Wardle to their first meeting. It was agreed that the next Quality Committee meeting would be reduced to one hour.</p>	KM
21/001	<p>Apologies for absence (agenda item 1)</p> <p>Apologies were received from Dr Chris Hosker, Medical Director, who is a member of the Committee.</p> <p>Apologies were also received from Mrs Nikki Cooper, Head of Informatics, who is an attendee of the Committee.</p> <p>The Committee was quorate.</p>	
21/002	<p>Declaration of any conflict of interest in respect of agenda items (agenda item 2)</p> <p>No one present declared a conflict of interest in respect of agenda items.</p>	

21/003 Approval of the minutes of the Quality Committee meeting held on the 8 December 2020 (agenda item 3)

The minutes of the Quality Committee meeting held on the 8 December 2020 were **agreed** as a true record.

21/004 Approval for the minutes above to be uploaded to the Trust's external website (agenda item 3.1)

The Committee **agreed** that the minutes of the Quality Committee meeting held on the 8 December 2020 were suitable to be uploaded to the Trust's external website.

21/005 Matters Arising (agenda item 4)

Miss Grantham **directed** the Committee's attention to minute 20/201 which reflected the Committees discussion around the accessibility of physical health care. The Committee **recognised** the Trust's efforts, via social media, of promoting how members of the public could access NHS healthcare.

21/006 Cumulative Action Log (agenda item 5)

The Committee agreed to close the actions on the cumulative action log that had been completed and acknowledged those actions that remained hibernated.

The Committee was **assured** with the progress made on the actions within the cumulative log and **agreed** on which actions should be closed.

21/007 Safer Staffing six monthly update (agenda item 6)

Ms Rose introduced the Safer Staffing Six Monthly Update Report. She explained that the areas of focus and analysis in the previous six month review had prioritised the Adult Acute Service and the Older People's Inpatient Services as these were the areas where the Trust was commissioned through the CCG and had an overall significant cost pressure. She went on to explain that while this update report included a summary update of the actions and recommendations that were taken forward from the review for those services, the specialist Forensic Services would be the main feature in the report.

The Committee noted the content of the report and acknowledged the progress made in relation to key work streams. It reviewed the Forensic Service recommendations and agreed that it supported the recommendations. It went on to discuss sickness absence and acknowledged that this would be

monitored by the Workforce Committee. It next discussed rapid tranquilisation. It agreed that it would discuss rapid tranquilisation in more detail when the next update on the Positive and Save Action Plan was presented.

The Committee thanked Ms Rose for the report. It agreed that it was assured that arrangements were in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

The Committee **noted** the content of the Safer Staffing Six Monthly Update Report and **acknowledged** the progress made in relation to key work streams. It **reviewed** the Forensic Service recommendations and **agreed** that it was **assured** that arrangements were in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

Ms Weeks joined the meeting.

21/008

Patient Experience and Involvement Progress Report (agenda item 7)

The Committee received the Patient Experience and Involvement Progress Report which provided an overview of the work completed over the past 12 months to involve and engage with service users and carers. Ms Woffendin explained that although the three working groups had been stepped down during the pandemic, progress in key areas had continued. Ms Weeks presented the report and highlighted a number of achievements including the virtual launch of the Patient and Carer Experience and Involvement Strategy and the development of an involvement directory which provided information on involvement opportunities within the Trust and with third sector partners. Ms Weeks also informed the Committee that the Patient Experience Team would be running training sessions for teams to encourage them to use co-production when planning any service changes.

The Committee noted the information provided in the report. It acknowledged that the Service User Network (SUN) meetings had continued virtually throughout the pandemic. It was pleased to hear that new members had joined since the meetings started being held virtually but acknowledged that virtual meetings were not accessible to all. Ms Weeks informed the Committee of the SUN newsletter, which was co-produced with service users, and explained that the newsletter ensured that information was shared to those individuals who could not access virtual meetings. The Committee suggested that the Recovery College could develop a training course around digital technology.

The Committee supported the proposal for a service user or carer representative to attend future Committee meetings alongside Ms Weeks to present reports. It received an update on the progress that had been made with the Triangle of Care. Ms Weeks confirmed that although the Triangle of Care Steering Group had initially been stood down at the beginning of the pandemic, it was stepped back up at the request of clinicians. She confirmed that progress had been made.

The Committee **received** the Patient Experience and Involvement Progress Report and **discussed** the content. It **acknowledged** the work that had been carried out in this area.

Ms Rose left the meeting.

21/009 Update on Covid-19 cases across the Trust (agenda item 9)

Mrs Woffendin explained that since the last meeting there had been three outbreaks across the Trust. She confirmed that the outbreaks had been contained and managed appropriately in line with the Trust's Outbreak Procedure. She provided an update on lateral flow testing. Mrs Woffendin went on to confirm that ten staff members had been reported as testing positive for Covid-19 and confirmed that 49 staff members were shielding in line with government advice.

Mrs Woffendin next provided an update on vaccinations. She confirmed that staff had been accessing vaccinations at the Thackray Medical Museum and so far 359 staff members had been vaccinated. She also confirmed that the Trust's vaccination hub was operational and that the Trust had received a 400 dose shipment of the Oxford/AstraZeneca vaccine. The Committee praised the work carried out to support the roll out of the Trust's vaccination hub. It discussed the supply of personal protective equipment (PPE). Mrs Woffendin confirmed that the PPE supply was suitable and confirmed that mutual aid arrangements were in place with other organisations. The Committee agreed that it was assured by the update provided.

The Committee discussed service prioritisation and agreed that this should be revisited by the Board of Directors. It agreed to escalate this to the next Board of Directors meeting.

The Committee **noted** the information provided. It was pleased to hear about the roll out of the Trust's vaccination hub and **agreed** that it was assured by the updates provided.

21/010 Combined Quality and Workforce Performance Report (agenda item 10)

Mrs Woffendin and Mrs Holmes presented the Combined Quality and Workforce Performance Report. The Committee discussed sickness absence rates. It agreed that the narrative summaries within the report had improved.

The Committee **reviewed** and **discussed** the data provided in the Combined Quality and Workforce Performance Report.

21/011

Proposal for restarting service reporting to the Quality Committee
(agenda item 11)

The Committee reviewed a proposal for the presentation of the Services Annual Quality and Safety Reports to be restarted from June 2021. It noted that the first report would be from the CONNECT Service. The Committee agreed to restart service reporting from June 2021 but acknowledged the pressure that the Trust's services were facing. It agreed that it would take direction from the clinical directors as to whether the reporting would be achievable.

The Committee discussed the template for the Annual Quality and Safety Reports and agreed that it should be linked to the IHI framework. It was agreed that Mrs Forster Adams and Dr Hosker would pick this up outside of the meeting.

**JFA /
CHos**

The Committee **reviewed** the proposal for the presentation of the Services Annual Quality and Safety Reports to be restarted from June 2021. It **agreed** with the proposal and **noted** that the first report would be from the CONNECT service.

21/012

Non-executive Director Service Visits Quarterly Report (agenda item 12)

Mrs Hill presented a report which provided details of the service visits undertaken by non-executive directors between January and December 2020. She added that the report also provided information on what service visits were due to take place between January and June 2021. The Committee reviewed the report and agreed it was useful to receive this information. Prof Baker pointed out that one feedback form, from a visit to Mill Lodge, had not been included in the report. Mrs Hill agreed to look into this and circulate the feedback form outside of the meeting. The Committee noted that a number of service visits had been cancelled due to the capacity within the Trust services.

CHill

The Committee **received** a report which provided details of the service visits undertaken by non-executive directors between January and December 2020. The Committee **reviewed** the report and **agreed** it was useful to receive this information.

21/013

Quality Committee Hibernation Plan (agenda item 13)

The Committee **reviewed** the Hibernation Plan and **noted** the proposed new dates for the reports that had been missed.

21/014 Assurance and escalation reporting from the Trust's incident command arrangements (agenda item 14.1)

The Committee acknowledged that the Trust had a well-established incident response team. Mrs Forster Adams confirmed that no changes had been made to the incident comment arrangements since the last meeting. She confirmed that the EU Exit arrangements and the vaccination programme arrangements were being managed by the same incident response team to ensure everything was well connected.

The Committee **noted** the update provided.

21/015 Assurance and escalation reporting from the Ethics Advisory Group (agenda item 14.2)

The Committee **received** the chairs report from the Ethics Advisory Group meeting that took place on the 10 December 2020. It **noted** the updates provided.

21/016 Assurance and escalation reporting from the Trustwide Clinical Governance Group (TWCGG) (agenda item 14.3)

Ms Le-Hair **confirmed** that there had been nothing of concern to escalate from the Trustwide Clinical Governance Group meeting.

21/017 Assurance and escalation reporting from the Physical Health Work Stream (agenda item 14.4)

Mrs Woffendin provided an update on the work that had been carried out by the Physical Health Work Stream since the last meeting. She explained that the Trust's visiting and leave arrangements had been reviewed since the third national lockdown had been announced. She provided an update on the flu campaign and confirmed that the compliance rate was at 77.9%. She went on to update the Committee on the outbreak management that had taken place since the last meeting and added that the work stream had reviewed the Covid-19 vaccination leaflets.

The Committee **noted** the updates provided.

21/018 Assurance and escalation reporting from the Trustwide Safeguarding Group (agenda item 14.5)

Mrs Woffendin **confirmed** that there was nothing of concern to escalate.

21/019 Assurance and escalation reporting from any other groups (agenda item 14.6)

No further updates were provided.

21/020 Cumulative escalations log – for information only (agenda item 14.7)

The Committee **reviewed** the cumulative escalations log.

21/021 Proposal for NHS Leeds colleagues to join Quality Committee meetings (agenda item 15.1)

Ms Le-Hair informed the Committee that a request had come from the Clinical Commissioning Group (CCG) for a representative to join future Quality Committee meetings. The Committee discussed the request. It agreed that it required further clarity on the rationale for this and further details on the representatives role in the meeting. It also asked for confirmation on whether the CCG had asked to send a representative to other Board sub-committee meetings. It agreed that it would raise this at the next private Board of Directors meeting for the Board to consider.

RL-H

The Committee **discussed** a request for a CCG representative to join Quality Committee meetings. It **agreed** that the Board of Directors should consider this request at its next meeting.

21/022 Transforming perinatal safety (agenda item 15.2)

Prof Baker presented a report that had been sent to all Trusts to improve the safety of maternity services in England. He added that within the report there was a suggestion for each Trust's to nominate a Board-level Perinatal Safety Champion. The Committee reviewed the information provided and it agreed that it felt assured that the issues raised in the report were already being scrutinised by the Board without the champion role. The Committee agreed that it would be useful for the docs to be shared with the Trust's Perinatal Service. Mrs Woffendin agreed to share the documents and ask the Perinatal Service to complete the assurance tool within the report.

CW

The Committee **reviewed** a report that had been sent to all Trusts to improve the safety of maternity services in England. It **discussed** the suggestion for Trust's to nominate a Board-level Perinatal Safety Champion and **agreed** that it felt assured that the issues raised in the report were already being scrutinised by the Board without the champion role.

Ms Le-Hair and Ms Weeks left the meeting. Ms McIntosh and Ms Charles joined the meeting.

21/023 Review of Enteral Feeding and CHC Funded Equipment (agenda item 8)

The Committee received a report which summarised two papers from the Learning Disability (LD) Service that had recently been presented to the LD Commissioners recommending changes to the specialist LD dietetic enteral feeding pathway and the specialist Occupational Therapist Continuing Healthcare Funded Equipment pathway. Ms Charles presented the report. The Committee discussed how this could be escalated. Mrs Forster Adams suggested that this could be taken through the contracting route. She agreed to pick this up with Ms Charles outside of the meeting.

The Committee **reviewed** a report which summarised two papers from the Learning Disability Service that had recently been presented to the Learning Disability Commissioners recommending changes to the specialist LD dietetic enteral feeding pathway and the specialist Occupational Therapist Continuing Healthcare Funded Equipment pathway. It **noted** the content of the report and **suggested** a way forward.

21/024 Key messages and/or any matters to be escalated to the Board of Directors (agenda item 16)

The Committee **agreed** on the following:

Issues to which the Board needs to be alerted:

- The Committee received a detailed update on the Trust's management of Covid-19. It discussed service prioritisation and the need for the Board of Directors to revisit this.

Issues for advice from the Board:

- No issues for advice.

Things on which the Board is to be assured:

- The Committee reviewed a report that had been sent to all Trusts to improve the safety of maternity services in England. It discussed the suggestion for Trust's to nominate a Board-level Perinatal Safety Champion and agreed that it felt assured that the issues raised in the report were already being scrutinised by the Board without the champion role.
- The Committee agreed that its next meeting would be reduced to one hour.
- The Committee received the Safer Staffing Six Monthly Update Report. It agreed that it was assured that arrangements were in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety. It discussed and supported a recommendation to increase headroom in the Forensic Services to 24% (minimum).

- The Committee received the Patient Experience and Involvement Progress Report. It was pleased to hear of the achievements made over the last 12 months and was assured on the work that had been carried out.