

**Minutes of the Quality Committee – Part A**  
**Tuesday 13 April 2021 at 9.30am**  
**Via Zoom**

**Present:** Professor John Baker, Non-executive Director (Chair of the Committee)  
Mrs Joanna Forster Adams, Chief Operating Officer  
Miss Helen Grantham, Non-executive Director  
Dr Chris Hosker, Medical Director  
Mrs Cathy Woffendin, Director of Nursing, Quality and Professions

**In attendance:** Mrs Cath Hill, Associate Director for Corporate Governance  
Miss Kerry McMann, Acting Head of Corporate Governance  
Mr Waseem Munir, Head of Clinical Governance: Quality Assurance and Compliance  
Mr Andrew McNichol, Workforce Information Manager  
Mrs Cath Wardle, Head of Clinical Governance: Patient Safety

		<b>Action</b>
	<p><b>Welcome and Introduction</b></p> <p>Professor (Prof) Baker welcomed everyone to the meeting.</p>	
<b>21/068</b>	<p><b>Apologies for absence</b> (agenda item 1)</p> <p>Apologies were received from Mrs Claire Holmes, Director of Organisational Development and Workforce. It was noted that Mr McNichol would be deputising.</p> <p>Apologies were also received from Mrs Nikki Cooper, Head of Performance and Informatics, who is an attendee of the Committee.</p> <p style="background-color: #cccccc;">The Committee was quorate.</p>	
<b>21/069</b>	<p><b>Declaration of any conflict of interest in respect of agenda items</b> (agenda item 2)</p> <p style="background-color: #cccccc;">No one present declared a conflict of interest in respect of agenda items.</p>	
<b>21/070</b>	<p><b>Approval of the minutes of the Quality Committee meeting held on the 9 March 2021</b> (agenda item 3)</p> <p>Mrs Forster Adams drew attention to minute number 21/056 which inaccurately reported that staffing levels were being enhanced until the end of April 2021. She clarified that it was the management and surveillance arrangements that had been enhanced to ensure that there were adequate staffing levels over the Easter period and until the end of April 2021. Miss McMann agreed to amend the minute.</p>	<b>KM</b>

The minutes of the Quality Committee meeting held on the 9 March 2021 were **agreed** as a true record, subject to one amendment.

**21/071 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 9 March 2021 were suitable to be uploaded to the Trust's external website.

**21/072 Matters Arising** (agenda item 4)

The Committee **noted** that there were no matters arising that were not either on the agenda or on the action log.

**21/073 Cumulative Action Log** (agenda item 5)

The Committee agreed to close the actions on the cumulative action log that had been completed. It reviewed the hibernated actions and questioned whether they remained relevant or whether any should be closed. It first reviewed action 19/167a for Ms Bergin to consider whether the Older Peoples Service should be involved with the Acute Care Excellence (ACE) work. Mrs Forster Adams informed the Committee that conversations had taken place and it had been decided that the wards would not be included in the ACE work at this time. The Committee agreed to close this action.

The Committee next reviewed action 19/132 for the Committee to receive a focused update on the de-prescribing of medicines. Dr Hosker agreed to discuss this with Ms Jane Riley, Chief Pharmacist, to see if any progress was made before the Covid-19 pandemic. The Committee agreed to close the action. The Committee next reviewed action 20/043a for the quality dashboard to be reviewed following the implementation of CareDirector. It agreed that this was still required and should remain hibernated until appropriate.

The Committee went on to review action 20/036a regarding the 12 month update on the Positive and Safe Action Plan. The Committee recalled that it had received a report around restrictive practice and restraints in July 2020 and acknowledged that verbal updates on restrictive practices had been provided at a number of meetings. It agreed that it was assured on the Trusts approach to restrictive practices and that the action could be closed.

The Committee reviewed action 20/041 regarding changes made to services including changes to estates or staffing and how those changes could affect quality and safety from a service user perspective. Mrs Forster Adams informed the Committee that the Executive Team had been discussing reset and recovery planning following the Covid-19 pandemic. She explained that as part of this work, the Committee would need to review the changes

**CHos**

required to Trust estates as a result of the pandemic. The Committee agreed to close the action and agreed it should be picked up as part of the reset and recovery work. Miss Grantham informed the Committee that she had recently met with Mr Myles Callaway, Deputy Director of Estates, and Mr Steve Norris, Interim Health & Safety Manager and had received assurance on the health and safety processes in place throughout the Covid-19 pandemic.

The Committee went on to review action 20/043 for the Service Annual Quality and Safety Report template to contain a section on access and ethnicity. Mrs Forster Adams confirmed that the next report would be going to the Trustwide Clinical Governance Group (TWCGG) in June 2021 and that this would be included. The Committee agreed to close this action.

The Committee was **assured** with the progress made on the actions within the cumulative log and **agreed** on which actions should be closed. The Committee **discussed** those actions that were listed as hibernated and **agreed** which remained relevant and which could be closed.

**21/074 Out of area placements (OAPS) quality dashboard (agenda item 6)**

Mrs Forster Adams provided an update on the development of the OAPS quality dashboard. She outlined the progress that had been made and explained that the Trust was meeting with the independent providers at the end of April 2021. Mrs Forster Adams confirmed that the dashboard would be presented to the May 2021 Quality Committee meeting.

The Committee **received** an update on the development of the OAPS Quality Dashboard. It **noted** that the dashboard would be presented in May 2021.

**21/075 Update on Covid-19 cases across the Trust (agenda item 7)**

Mrs Woffendin outlined that as of the 13 April 2021 there were no outbreaks across the Trust and no service users that had tested positive for Covid-19. She informed the Committee that five members of staff were covid positive. The Committee was pleased to hear that the number of positive cases across the Trust had reduced and noted the update provided.

Mrs Woffendin **provided an update** on Covid-19 cases across the Trust. The Committee **noted** the update provided.

**21/076 Combined Quality and Workforce Performance Report (agenda item 8)**

Mrs Woffendin presented the Combined Quality and Workforce Performance Report. She outlined that the number of violent or aggressive incidents and the number of restraints had decreased in February 2021 and pointed out that this might be due to a number of wards being closed at the time. Mrs Woffendin went on to draw the Committees attention to the number of Covid-19 related absences to staff, either through sickness or self-isolation, in February 2021. She went on to highlight the reduction in the number of nursing vacancies. The Committee discussed the data presented in the report.

Mr McNichol informed the Committee that a number of the staff who had been shielding had returned to work in April 2021 and assured the Committee that mechanisms had been put into place to support those staff members. He went on to provide an update on redeployment. The Committee questioned whether any staff members were absent from work due to long covid. Mr McNichol provided an update on this and confirmed that those staff members who were absent from work due to long covid would be supported on a case by case basis until further guidance was released.

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

**21/077 Consideration of future areas for internal audit (agenda item 9)**

The Committee **proposed** that the following areas should be considered for an internal audit:

- An audit to provide assurance on how effectively CareDirector was being used for risk assessments.
- An audit to provide assurance around physical health monitoring across the Trust.

**21/078 Non-executive Director Service Visits Quarterly Report (agenda item 10)**

Mrs Hill presented the Non-executive Director Service Visits Quarterly Report. The Committee reviewed the details of the virtual service visits undertaken by non-executive directors between January and March 2021. It noted that two service visits had been cancelled and asked Mrs Hill to look into rescheduling the visits to the Older People's Services at The Mount and the Complex Rehabilitation Team on Ward 5 at the Newsam Centre.

**C Hill**

The Committee discussed art therapy. It questioned how many art therapists there were across the organisation and where they worked in the organisation. Mrs Woffendin agreed to provide this data outside of the meeting.

**CW**

The Committee **reviewed** the Non-executive Director Service Visits Quarterly Report and **noted** the information provided.

**21/079 Quality Committee Hibernation Plan** (agenda item 11)

The Committee reviewed its hibernation plan. It agreed that the 12 month update on the Positive and Safe Action Plan could be removed as a report around restrictive practice and restraints was presented in July 2020 and a number of verbal updates had been provided. The Committee agreed that it was assured on the Trusts approach to restrictive practices.

The Committee acknowledged that the development of clinical supervision was being overseen by the Workforce Committee and agreed that this item could be removed from the hibernation plan. The Committee went on to agree that the Cost Improvement Programmes (CIP) Quality Impact Assessment item could be removed from the hibernation plan due to there being no CIPS for 2020/21.

The Committee discussed the Progress Against Outcome Measures Annual Report. Dr Hosker confirmed that an update on outcome measures would be provided to the Council of Governors on the 2 November 2021. It was agreed that this update should be presented to the Trustwide Clinical Governance Group and the Quality Committee in October 2021.

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The Committee **reviewed** the hibernation plan and **agreed** which items remained relevant and which could be closed.

**21/080 Assurance and escalation reporting from the Trust's incident command arrangements** (agenda item 12.1)

Mrs Forster Adams informed the Committee that on the 25 March 2021 NHS England moved the incident level from four to three. She confirmed that a proposal would be going to the Trust's Gold Command Group on the 14 April 2021 which, if agreed, would lead to the Trust's Silver Command Group meeting twice per week and the Trust's Gold Command Group meeting every other week. She assured the Committee that the incident response meeting arrangements could be increased again if needed.

The Committee **noted** the updates provided

**21/081 Assurance and escalation reporting from the Ethics Advisory Group**  
(agenda item 12.2)

The Committee received the chairs report from the Ethics Advisory Group meeting that took place on the 8 April 2021. He confirmed that the Group had recently refreshed its terms of reference. The Committee discussed where the Ethics Advisory Group should sit within the Trust's governance structure. Dr Hosker agreed to share the updated terms of reference for the Ethical Advisory Group with Mrs Hill. The Committee was informed that a discussion had taken place regarding the staff covid vaccination policy, particularly in relation to staff members who remained unvaccinated.

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The Committee **noted** the update provided.

**21/082 Assurance and escalation reporting from the Trustwide Clinical Governance Group (TWCGG)** (agenda item 12.3)

Dr Hosker provided an update on the work of the TWCGG since the 9 March 2021. He confirmed that there had been nothing to escalate from the meeting. The Committee discussed information governance breaches. Dr Hosker informed the Committee of a proposal to develop a peer support worker forum.

The Committee **noted** the updates provided

**21/083 Assurance and escalation reporting from the Physical Health Work Stream** (agenda item 12.4)

Mrs Woffendin provided an update on the work that had been carried out by the Physical Health Work Stream since the 9 March 2021. She confirmed that the focus for the Workstream had been outbreak management, swabbing and testing. She informed the Committee that a venous thromboembolism training package and assessment had been completed. The Committee discussed physical health checks.

The Committee **noted** the updates provided.

**21/084 Assurance and escalation reporting from any other groups** (agenda item 12.5)

No further updates were provided.

**21/085 Cumulative escalations log – for information only** (agenda item 12.6)

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

21/086

**Any other business - CQC Inspection Report – Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust - Acute wards for adults of working age and psychiatric intensive care units** (agenda item 13.1)

**See confidential annex for more information.**

21/087

**Key messages and/or any matters to be escalated to the Board of Directors** (agenda item 14)

The Committee **agreed** that the following areas of discussion should be shared with the Board of Directors.

**Issues to which the Board needs to be alerted:**

- No issues to which the Board needs to be alerted.

**Issues for advice from the Board**

- No issues for advice from the Board.

**Things on which the Board is to be assured**

- The Committee received an update on the development of an out of area placements quality dashboard and noted that the dashboard would be presented to the May 2021 Quality Committee meeting.
- The Committee was pleased to hear that as of the 13 April 2021 there were no outbreaks across the Trust and no service users that had tested positive for Covid-19.
- The Committee reviewed the Non-executive Director Service Visits Quarterly Report which provided details on the virtual service visits undertaken by non-executive directors between January and March 2021. It noted that two service visits had been cancelled and asked for the visits to the Older People's Services at The Mount and the Complex Rehabilitation Team at Ward 5, Newsam Centre to be rescheduled.
- The Committee received an update on the work of: the Trust's Gold and Silver Command Groups; the Ethics Advisory Group; the Trustwide Clinical Governance Group; and the Physical Health Work stream.
- The Committee reviewed the Combined Quality and Workforce Performance Report. It discussed the support in place for those staff members who were returning to work after shielding and for those staff members who were absent from work due to long covid.

