

Date of Trust Board: 31 July 2013

Enc N

REPORT TO TRUST BOARD

NAME/TITLE OF DIRECTOR	Professor Julian Bion, Associate Non-Executive Director
AUTHOR OF REPORT	Chris Rawlings, Head of Clinical Governance & Risk Management
SUBJECT	Integrated Governance Committee

EXECUTIVE SUMMARY/KEY POINTS

This paper provides the Board with the key achievements, issues, and risks discussed at the Integrated Governance Committee on 15th July 2013.

STRATEGIC PRIORITIES (✓)

1. Deliver safe, effective, innovative and compassionate patient care	✓
2. Develop a culture that is recognised as patient centred, driven by inspiring and accountable leaders, committed to continuous improvement	✓
3. Invest and realise the full potential of our staff -recruiting, retaining, developing and rewarding.	
4. Achieve strong operational performance compliant with all national requirements	
5. Ensure the Trust is financially viable and gets the maximum value from the resources at its disposal	
6. Develop and sustain our business	

RECOMMENDATION

The Board is asked to:

- Accept the assurance provided and note the work of the Committee.

BOARD ACTION REQUIRED (✓)

	Decision		Action		Assurance
--	----------	--	--------	--	-----------

✓	Please tick box to confirm that the report takes account of the NHS Constitution
---	--

Date of Trust Board: 31 July 2013

Enc N

IMPLICATIONS

Service quality and delivery including patient safety/experience and clinical effectiveness	
Financial	N/A
Risk Board Assurance Framework risks	2474, 2475, 2476, 2514, 2477, 2479, 2480
Workforce	
Legal & Governance	
Statutory or External Assessor requirements	
Impact assessments <ul style="list-style-type: none"> Equality IA Quality IA 	

APPROVAL PROCESS

Paper approved/meeting:	Date
-------------------------	------

Date of Trust Board: 31 July 2013

Enc N

WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

REPORT TO TRUST BOARD – JULY 2013

1. Background

- 1.1 This report provides the Board with key quality issues and risks discussed at the Committee's meeting held on 12 June 2013.

2. Purpose of the Report

- 2.1 This report provides the Board with assurance on matters related to patient safety and care quality. The IGC reviews reports from its sub-committees, quality performance data, and risks to meeting strategic objectives. In this way it provides assurance in the areas outlined below and identifies risks and areas of concern for the Board's attention.

3.	Quality & Performance
3.1	<p>Infection Control</p> <p>C. difficile Update The Committee welcomed the reduction in C. difficile cases and the signs of an improving trend. The draft findings of the Health Care Associated Infection (HCAI) peer review visit in June 27th 2013 were presented: the visitors were generally positive, acknowledging the strong focus and appropriate actions being taken by the Trust, effective engagement by staff, and commitment by the cleaning teams. The visitors noted the challenge to the Trust of emergency admission pressures. The full report is awaited.</p> <p>Director of Infection Prevention and Control (DIPC) Annual report The Committee received the annual DIPC report and noted the performance, challenges and actions being to address these. The report was commended for being evidence-based, but could benefit from being made more accessible to a lay audience.</p>
3.2	<p>Never Event reporting Process Never Events are defined as 'serious largely preventable safety incidents that should not occur if the available preventative measures have been implemented by healthcare providers'. The Committee received a paper explaining the Trust's process for identifying and reporting Never Events. Further work to 'stress test' the measures designed to prevent Never events occurring is in progress and will be reported back to the Committee in September.</p>
3.3	<p>Winter Pressures The Committee will receive in the Autumn a report on the impact of the past season's winter pressures, identifying the actions required to mitigate the effect of emergency admissions. The report will consider the following aspects amongst others:</p> <ul style="list-style-type: none"> • Triangulation of data to identify risk factors and learning • Infection control arrangements • Planning for elderly patients to receive support at home or in the

Date of Trust Board: 31 July 2013

Enc N

	community to avoid an admission to an acute setting <ul style="list-style-type: none"> • Interpretation of mortality data: HSMR / SHMI
3.4	CQUIN The first report from the CQUIN Steering Group was received. The IGC commended the clarity of presenting the individual CQUIN and the assessments showing where achievement was at risk.
3.5	HSMR / SHMI The increase in HSMR and SHMI over the winter period was noted by the Committee. Multiple potential factors could be responsible for this effect including an increase in the numbers of high-risk patients, the well-recognised seasonal trend for a higher mortality, an increase in measured low-risk admissions with severe comorbidity, a reduction in coding of comorbid disease, regression to the mean, and a real increase in avoidable deaths attributable to capacity pressures. A similar effect has been observed by similar hospitals in the region. Additional actions for the winter period will be considered for the winter plan.
3.6	Board Assurance Framework (BAF) The Committee received the seven principal risks to meeting the Trust's strategic priorities (from the BAF) assigned to it for review. The reports and data received by the Committee provide information and assurance on the management of these risks. Further review will take place between committee meetings with a full review to take place at the August meeting.
3.7	Committee reports: The IGC received reports from the following committees: <ul style="list-style-type: none"> • Patient Safety Committee • Patient Experience & Carer Committee • Safeguarding Adults Committee • Clinical Audit & Effectiveness Committee • Trust Infection, Prevention and Control Committee & Director of Infection Control Annual Report • Health Records Committee • Medical Devices Committee
	Recommendation
	The Board is asked to: <ul style="list-style-type: none"> • Accept the assurance provided and note the work of the Committee.

Prof Julian Bion
Associate Non-Executive Director