

Key Matters and Escalation Report to the Group Trust Board

Name of Committee: Quality Committee

Chair: Graham Nice

Meeting Date: Thursday, 05 June 2025

Key matters:

Cambridgeshire Community Services NHS Trust (CCS)

- *Quality and People Strategy (Year 2, Quarter 4)*

Five actions are outstanding from year 2 of the Quality Strategy, these are all on trajectory to be completed in year 3. Some of these actions are linked to digital safety and clinical practices which will need to be reviewed with the new Chief Information Officer.
- *Harm Review*

An overview of the Implementation Plan was provided, Dental and Emotional Health and Wellbeing teams were the first to go live with the process and SystemOne template, with services where there are waiting lists being targeted next.

Dentistry have completed 15 Harm Reviews; all of these were reported as no harm. There was 1 low harm incident recorded in Dietetics and 2 Harm Reviews which showed moderate harm in Audiology. Both these incidents were taken through the Safety Huddle and After-Action Reviews undertaken.
- *Quality Improvement Group (QIG)*

All the papers received provided the Group with substantial assurance, except for the Medicine Safety and Governance Group (MSGG), the reason for the reasonable assurance was due to capacity and staffing challenges. It was noted that there is a plan in place to improve capacity within this team. Core items noted from this group include:

 - The growth of the research and audit planning across the organisation.
 - The key themes from incident management are Pressure Ulcers and safeguarding management – there are established processes in place to understand and manage these incidents.
 - Both Trusts are working together to ensure the Duty of Candour approach is consistent and meets the national requirement.
- *Learning from Deaths*

The majority of deaths reported by CCS are expected and occur within the Luton Adults teams, the team continues to work on ensuring patients can be at their Preferred Place of Death. A co-production piece of work is underway in relation to the barriers our populations experience, who are from diverse backgrounds, and which stop them from access palliative or end of life care.

Norfolk Community Health and Care Trust (NCH&C)

- *Current Quality Status*

The following points were highlighted:

- Unallocated visits – it was noted that the number of unallocated visits remain high. However, in some areas the use of Urgent Community Response and Peripatetic teams to mitigate risk have made an impact.
- Staffing challenges – registered nursing vacancies are low, however the clinical support worker vacancies are higher and are being impacted upon by sickness and immigration rules. The Trust can fill the establishment but are reliant on Bank colleagues for day to day cover.
- Patient B deep dive (complaint) – this is completed by a Non-Executive Director once a quarter, where they review a closed complaint, and take a view on whether the complaint was handled appropriately. The outcome of the review was that the complaint process was undertaken as expected and the patient was happy with the responses they received.

- *Integrated Quality Report:*

The following items were highlighted:

- Deteriorating patient – Harm Reviews are being conducted on those returning to the acutes following admission to the community provision.
- Catheter pathway – work is underway to improve the pathway, which includes staff training and collaboration with the acute hospitals.
- Safeguarding Adult Review – a recent Safeguarding Adult Review 'Irene' has highlighted a need to focus colleagues on their awareness of domestic violence, how they identify domestic abuse and work with those who are being abused.
- NHS England scrutiny visit (training and education) – positive feedback was received regarding the experience of trainee Nurses and Allied Healthcare Professionals (AHPs), within the Trust.
- Regulation 28 – the action plan is ongoing; the Coroner has acknowledged our initial response.
- The external and Internal factors report: an in-depth review has been undertaken in relation to fridge temperatures and air flow mattress maintenance – learning has been identified from this process.
- Safer Staffing Report – the challenges in Clinical Support Worker roles were identified (as stated previously) the Committee noted that flexible working requests can be reviewed at any time, to support the needs of the service. The Committee welcomed the addition of the AHP Safer Staffing Report.
- Business Intelligence – the report provided an overview of the improvements in patient flow, wheelchair services and workforce metrics.
- Policies – all the policies presented to the Committee were ratified.

Discussion in Common

- The workplan was introduced to the Committee for 2025/ 26. This was agreed, with some minor additions and amendments.
- Quality Accounts – both Quality Accounts were approved, following internal scrutiny and feedback from stakeholders. Both reports will be published on the 30 of June 2025.
- Key risks and issues – risk 5388 will be reassigned to the Norfolk Adult Service Assurance Committee (NASAC), and risk 5200 will be assigned to all relevant Committees including the NASAC.

Key escalation:

There were no formal escalations from the Committee to the Trust Board. The following items are for noting only:

- Both Quality Accounts 2024/ 25 were approved by the Committee and will be presented at
- Board for noting. These will be published in line with national requirements.
- The Committee currently has 6 CCS risks and 2 NCHC risks scoring 12 and above.
- The policies presented to the Committee were ratified.

Key risks and issues:

The Committee does not have any risks or issues that are 15 and above or any that have a catastrophic outcome.

Good practice or innovation:

The following good practice was highlighted:

- MUST audit outcomes which showed overall improvement in clinical practice (NCHC).
- The ongoing co-production work in CCS within Luton's diverse communities, to understand the barriers to accessing palliative and end of life care.
- Any learning from the deep dive process into a complaint will be included in the updated Complaint policy.

Innovation:

- Both Trusts are working together on a single Duty of Candour process.
- A Learning from Deaths Workshop in the Autumn will be attended by both the Norfolk and Suffolk Coroners.
- The AHP Safer Staffing Report was welcomed by the Committee, ways to integrate this with the Nursing Report will be investigated