

REPORT TO THE TRUST BOARD: PUBLIC
25 July 2019

Title	Quality Assurance Committee 1 July 2019 – Chair’s Report
Committee Chair	Mary Elford, Committee Chair
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Purpose of the report

To bring to the Board’s attention key issues and assurances discussed at the Quality Assurance Committee (QAC) meeting held on 1 July 2019.

Issues to be brought to Board’s attention

At its meeting on 1 July 2019 the Committee considered a range of items including the Learning Disabilities quality and safety report, internal audit progress report, suicide prevention update, learning from transactions, BAF, Quality Committee assurance reports and various annual reports for 2018/19. The Committee wished to draw the Board’s attention to it discussions on:

- **Quality and Safety Reports:** The Quality and Safety Reports, and Cross-Cutting Themes Reports to the Quality Assurance Committee would in future focus on an overview of the service, what the service is proud of, any variation in terms of safety, quality and outcomes, and any key issues/hotspots/challenges. This was agreed in the light of the changes to strengthening the Executives’ oversight on quality and safety in respect of the work of the Executive Quarterly Quality Review meetings, Directorate Governance meetings, Executive Performance meetings, and the Quality Committee.
- **Quality and Safety Report (Cross Cutting Themes) – Learning Disabilities:** The presentation and discussions covered key achievements, priorities and challenges including:
 - A focus on prescribing had resulted in a 6% reduction in medications across Bedfordshire and Luton
 - The repository of good practice being built up through the national programme to learn from all deaths of school-aged children and adults with Learning Disabilities (LeDeR)
 - The Health Education England programme in schools to promote career pathways
 - The development of Nursing Associate and Apprenticeship courses to respond to the reduction in the number of Learning Disabilities nurses
 - The services’ support to primary care and mainstream secondary care when service users with Learning Disabilities access physical health services
 - The monitoring of those service users in residential care settings, in the light of the recommendations arising from the abuse at Winterborne View.
- **Suicide Prevention:** A comprehensive update on suicide prevention and reduction in the light of the national aim for a 10% reduction of suicide rates from 2015-2021 was provided [the report also being presented at the July Board meeting]. In discussion, the Committee was assured by:
 - The opportunity within STPs to highlight innovative community approaches to suicide prevention
 - The sharing of good practice across the Trust in working to achieve a 72 hour follow-up (previously 7-day follow up)
 - The support to GPs in providing good depression care in early stages.
- **Learning from Transactions:** An analysis of the review of the mobilisation of Bedfordshire Community Health Services and due diligence processes highlighted:
 - the importance of running these in parallel rather than as sequential processes
 - the importance of positive working with the pre-existing structures and cultures, and particularly proactive communications

- the outstanding ICT tasks
 - the time-consuming nature of large scale HR processes and the need to resource effectively
 - the impact and challenges of the geography of new services both in size of the area and its distance from East London .
- **Annual Reports:** The Committee reviewed and approved the following annual reports:
 - **Clinical Audit Annual Report 2018/19:** This report provided a summary of local clinical audit activity during 2018/19 and an outline of the proposed audits for 2019/20:
 - The Trust participated in 83% of national mental health clinical audits (5/6) and 100% (1/1) of national confidential enquiries which it was eligible to participate in
 - Directorate Management Teams and trust-wide leads were invited to review the standards being audited with particular reference to alignment with existing Trust and Directorate priorities, drivers that inform standards and other standards of good practice, and the usefulness and impact of the data collected.
 - **Information Governance Annual Report 2018/19:** This report provided an overview of the Trust's compliance at 31 March 2019 with the new annual Data Security and Protection Toolkit (DSPT), compliance with the new EU General Data Protection Regulation, and the work being undertaken to improve compliance in this area:
 - The Trust's compliance rating was 85% for the DSPT increasing from an Information Governance Toolkit score of 59% in March 2018
 - Although the Trust declared itself as 'not compliant' as it did not meet all the standards, compliance has been re-graded by NHS Digital to 'Standards not fully met – plan agreed'
 - Compliance with the GDPR increased to 11 of the 13 standards being met as at 31 March 2019 compared with three in the previous year
 - For both DSPT and GDPR the non-compliant areas relate training, asset management and contract management. Assurance was provided that action plans are in place to address these areas with the aim of being fully compliant by year end
 - A copy of the report is attached at appendix 1.
 - **SIRO Annual Report 2018/19 (Senior Information Risk Owner):** This report is required from all Government organisations to provide assurance on practice, progress and developments across information risk management:
 - The report detailed the Trust's compliance with the General Data Protection Regulation, the Data Security and Protection Toolkit, and the management of data and security and information risks
 - The Trust has made significant improvements in data security compliance over the last year, particularly the last six months of the financial year
 - The biggest remaining risks to the Trust are asset and data flows mapping plus information governance annual training compliance
 - Cybersecurity is an area of continued focus, and the Trust is working with NHSD and third party providers to address the ongoing risks
 - There is an overlap of information with this and the IG Annual Report
 - A copy of the report is attached at appendix 2
 - **Safeguarding Adults and Children Annual Report 2018/19:** The comprehensive report provided the Committee with assurance that the Trust is meeting all its safeguarding responsibilities in relation to adults and children, and demonstrated that the Trust has implemented the recommendations of the external review commissioned in 2017. The report is also being presented to the Board at its July meeting.
 - **Board Assurance Framework:** The Committee reviewed and agreed the proposed risks for 2019/20 for approval by the Board; these are presented in the Integrated Quality & Performance Report.