

QSE COMMITTEE CHAIR'S REPORT TO BOARD

25 May 2021

MS Teams

10.00AM – 12.30PM



COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	Quality, Safety and Engagement (QSE) Committee
Meeting Date:	10/05/21
Chair/Report Author:	Vanessa Walker/ Cath Quilliam, Sally Shaw

KEY ITEMS DISCUSSED AT THE MEETING			
TO ALERT (Alert the Board to areas of non-compliance or matters that need addressing urgently or new risks)			
Issue	Committee concern	Action required	Timescale
Lack of robust validated data set for the Integrated Performance Report	The current data set regarding QSE matters is based on raw data collected manually from a variety of sources. Data validation then takes within the Care Groups for discussion at their performance and accountability meetings. This does not link into the creation of data sets that support the work of the QSE Committee Similar issues arise within social care with the added complication of externally provided services.	The committee requested a road map be submitted to the next meeting explain the road map to securing the data set needed to support assurance for the QSE Committee. The executive team would work with the care groups to agree a core data set that would be applied across the care groups which would link to the QSE dashboard. The next iteration of the IPR would focus on SI's, mortality, falls, and harm. A report advising on how commissioned social services are currently monitored in terms of performance will be considered by QSE in June 2021.	2 months
Risk Management processes not yet embedded across the organisation	A number of legacy risk registers had been inherited. This were not aligned or moderated and did not underpin an organisational wide risk management process.	The Audit committee are to be asked to pick up the work around risk management process.	Next meeting in May
Quality Report	Similar issues were considered in terms of the information provided by the quality data sets and the ability to extract lessons learnt from the data.	CQ/SS were asked to ensure that primary care, adult social work, children social work and social care are included in future reports along with the key themes of any complaints	June 2021

Falls Report	This was benchmarked against the Falls Prevention report of 2018. Whilst significant achievements have been made since the publication of the Falls Prevention Report (2018) there has been limited integration and shared responsibility for continuous quality improvement in falls prevention.	Progress plans for integrated frailty and services noted as assurance. Update on falls to be requested as per QSE workplan.	August 2021
ASSURE (Detail here any areas of assurance that the Committee has received)			
Issue	Assurance Received	Action	Timescale
Update on action plan relating to the Ockenden Report	The Head of Midwifery and Service Lead attended the QSE Committee meeting to answer questions on their prepared action plan.	Agreed work on midwifery performance indicators was to be prepared with assistance of the Medical Director. An update on authors improvement work and feedback from staff, mothers and families to be presented to Committee for August 2021	August 2021
Development of Patient, Service User, Carer Experience Framework	First draft of this document has been viewed by the QSE Committee. The strategy was not due until the end of June. A Patient Advisory Liaison Service is to be incorporated into the Framework.	The Committee agreed the approach towards developing a Manx Care 5 year Framework for patients, service users and carers experience.	June 2021 for strategy
The following existing risks were considered during the meeting: (if none please state "none")	Risk: Failure to achieve the data and digital transformation milestones which support safety improvements and financial controls	CRR/BAF N°: 4	Risk Score: L x C = tbc
	Risk: Failure to offer safe services and continuous improvement in quality and outcomes for patients and service users	CRR/BAF N°: 1	Risk Score: L x C =tbc