

Escalation and Assurance Report (AAA+D)

Report from the: Quality & Safety Committee
Date of meeting: 16th March 2023
Report to the: Board of Directors

**Agenda
Item
12.1**

| Key escalation and discussion points from the meeting | | | |
|---|----------------------|---------|-------------|
| Alert | Action (to be taken) | By Whom | Target Date |
| No alerts to report | | | |
| Advise: | | | |
| <ul style="list-style-type: none"> Sickness rates have increased again by 0.4% this month and labour turnover remains above target. Fill rates are generally increasing and moving to Bank rather than Agency. Appraisal compliance has increased slightly to 59.22% against the target of 80% Focus remains on managing inappropriate out of area placements for adult MH services. The committee noted the need to continue to have close oversight on the support needed for people to prevent harm whilst waiting for services. Need to retain a focus on the lack of commissioned service for adults with learning disabilities who need ongoing prescribing and monitoring for ADHD or need an assessment for ADHD. Continued reduced medical capacity to undertake initial health assessments in C&YP's services. Only 7% were completed within 20 working days a decrease from 22% and a target of 90%. Review health assessments also have decreased from 62.5% to 50% against a target of 90% Current compliance for all medical devices remains below target. Good progress has been made in ensuring the compliance of high-risk devices, in particular syringe drivers where all devices are 100% compliant and the number of devices in quarantine is being steadily reduced. Concerns about capacity in podiatry services remain along with the impact on service delivery. The Ofsted inspection of LA children's services in Bradford (21/12/22- 2.12.22) reported widespread and serious failures across all service areas. Services were graded Inadequate in all 4 areas: 1) the impact of leaders on social work practice with children and families 2) the experiences and progress of children who need help and protection, 3) the experiences and progress of children in care and care leavers 4) overall effectiveness. Complex children remain an area of concern but the report of system partners working together on this is welcome. Inpatient and Adult community vacancies remain high. Assurance was provided that the Transformation Programme and Model 3 Roster are being introduced by way of mitigation. | | | |
| Assure: | | | |
| <ul style="list-style-type: none"> Our involvement partner shared a powerful personal story of a high-quality health and wellbeing support response by the Trust at multi-levels that showed that the wellbeing of our involvement partners is taken seriously and is embedded at multi-levels. Work is well underway to strengthen our approach to involvement at a number of levels. The volunteer to career programme which has received national recognition is to be commended and is delivering positive results. | | | |

- Continued improvement in antenatal contacts performance.
- Success is filtering through as a result of a range of new ways of working and are impacting positively on morale of staff.
- Although vacancies within Community Nursing remain a challenge some significant improvements have been made in successful recruitment in District Nursing and Palliative Care Teams
- Mandatory training targets were surpassed in Medicine Management and Clinical supervision form all APH teams.
- Improvements in service performance in SALT RTT from 62.5-74.9% towards target of 95%. Community dentistry has also seen an improvement towards target. District Nursing – activities of daily living compliance is just 0.4% below target.
- The committee welcomed the Ligature Risk Assessment Annual Report which showed a 16% reduction in ligature incidents in 22/23. The dynamic and creative approach to learning was acknowledged.
- The leadership team received positive feedback following a robust meeting with the Health Overview & Scrutiny Committee
- There are no vacancies in 0-19 services, skill mix has been introduced and the service is reporting an improved picture in terms of achieving KPI targets.
- TB was reported to be high and will be reviewed at SQC.

Decisions / Recommendations:

- Risks discussed:**
- SO1
 - SO3

- New risks identified:**
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Report completed by:

[Alyson McGregor]

Committee Chair and Non-Executive Director

[16th March 23]