

Item: 7.3

Enclosure:

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	

BOARD	
3 JUNE 2025	
Report Title:	Quality and Safety Committee Annual Review 2024/25
Purpose of report	
In line with its terms of reference, the Committee must undertake an annual review of its performance and provide an account of its work to the Board. The attached report is proposed to be sent to Board in May as a summary of the Committee's work in 2024-25.	
Key points	
As set out in the ICB Constitution, each formal committee of the Board is required to undertake an annual review of its effectiveness against its agreed terms of reference and provide assurance to the Board it has delivered its delegated functions.	
The attached review has been undertaken for the period 1 April 2024 – 31 March 2025 and will be used to inform the accountability report within the ICB annual report for 2024-25. The report includes a review of attendance and any key issues to highlight to the Board.	
The report provides a brief introduction of the scope and remit for the Committee and provides a summary of the main areas of work and achievements throughout 2024-25. The work areas are captured under the three headings of – patient safety; clinical effectiveness; and patient experience.	
Risks and issues	
No significant risks or issues to consider for the annual review. The report includes details of how the Committee receives regular risk reports concerning the risks aligned to the Committee within the corporate risk register.	
Assurances and supporting documentation	
<ul style="list-style-type: none"> <li>The Committee is required to undertake an annual review of its effectiveness against its terms of reference to ensure delivery of the committees required roles and responsibilities</li> <li>The Committee has met its terms of reference throughout the year for 2024/25</li> <li>The report highlights the various reports presented to the Committee throughout the year providing assurance on services commissioned</li> </ul>	
Recommendation/action required	
The Board is asked to receive the 2024/25 annual review of the Quality and Safety Committee for information and assurance.	
Acronyms and abbreviations explained	
As described in the attached report.	

<b>Sponsor/Approving Executive Director</b>	Professor Sir Pali Hungin, Chair of the Quality and Safety Committee and Independent Non Executive Member					
<b>Date approved by Executive Director</b>	02/05/2025					
<b>Report author</b>	Rebecca Herron, Corporate Committees Officer					
<b>Link to ICP strategy priorities</b> (please tick all that apply)						
Longer and Healthier Lives						✓
Fairer Outcomes for All						✓
Better Health and Care Services						✓
Giving Children and Young People the Best Start in Life						✓
<b>Relevant legal/statutory issues</b>						
Note any relevant Acts, regulations, national guidelines etc						
<b>Any potential/actual conflicts of interest associated with the paper?</b> (please tick)	Yes		No		N/A	✓
<b>Equality analysis completed</b> (please tick)	Yes		No		N/A	✓
<b>If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken?</b> (please tick)	Yes		No		N/A	✓
<b>Essential considerations</b>						
<b>Financial implications and considerations</b>	N/A					
<b>Contracting and Procurement</b>	N/A					
<b>Local Delivery Team</b>	N/A					
<b>Digital implications</b>	N/A					
<b>Clinical involvement</b>	N/A					
<b>Health inequalities</b>	N/A					
<b>Patient and public involvement</b>	N/A					
<b>Partner and/or other stakeholder engagement</b>	N/A					
<b>Other resources</b>	N/A					

## ANNUAL REVIEW OF THE QUALITY AND SAFETY COMMITTEE

In line with its terms of reference, the Committee must undertake an annual review of its performance and provide an account of its work to the Board.

<b>Review period</b>	1 April 2024 to 31 March 2025		
<b>Number of Meetings</b>	6		
<b>Members</b>	<b>Number of meetings eligible to attend:</b>	<b>Number of meetings attended by members:</b>	<b>Number of meetings deputy attended: (*n/a – no deputy)</b>
Independent Non-Executive Director (Chair)	6	6	n/a
Chief Medical Officer	6	4	1
Chief Nurse, AHP and People Officer	2	2	n/a
Chief Nurse and AHP Officer	1	1	n/a
Chief Contracting and Procurement Officer	6	5	1
Chief Corporate Services Officer	6	4	n/a
Foundation Trust Partner Member	6	2	n/a
Primary Medical Care Partner Member (Vice Chair from June 2024)	6	6	n/a
Local Authority Director of Public Health or Partner Member	6	0	n/a
Director of Allied Health Professions	6	4	n/a
Clinical Director of Medicines Optimisation and Pharmacy	6	3	n/a
Director of Nursing (North)	6	4	n/a
Director of Nursing (South)	6	2	n/a
	6	4	n/a
Director of Safeguarding	6	1	n/a
Director of Quality	6	5	n/a
Deputy Chief Nurse & Interim Chief Nurse and AHP Officer	6	6	n/a

### Main achievements and assurances

This annual report summarises the activities of the Quality and Safety Committee (the Committee). The Committee was consistent in reporting to the Board, providing highlight reports from April 2024 to March 2025, to demonstrate the extent to which the Committee has met its terms of reference and providing assurance regarding key priorities since the establishment of the North East and North Cumbria Integrated Care Board (the ICB).

The Committee has structured its business around the three core pillars of patient safety, clinical effectiveness, and patient experience.

This report had been informed by a review of the papers presented to the Committee against the responsibilities set out in its terms of reference and priorities outlined in the cycle of business. Some of the key areas of discussion by the Committee are summarised below (further details can be found in the individual highlight reports from each meeting):

#### 9 May 2024

- Quality Strategy
- ICB Quality Report
- Patient Safety Partner Proposal
- Involvement and Engagement Update

#### 31 July 2024

- Patient Safety Incident Response Framework
- Complaints Report
- Learning Disability and Autism Network Update
- Cancer Alliance Update
- Closedown of Serious Incident panels
- Fuller Report into Mortuary Compliance
- Maternity and Neonatal Services - Listening to Women and Families
- Clinical Effectiveness and Governance Subcommittee Terms of Reference

#### 10 September 2024

- Patient Story
- Safeguarding Annual Report
- Medicines Optimisation Annual Report
- Learning from Lives and Deaths Review Annual Report
- Neurorehabilitation Programme Update
- Patient involvement and Experience Update

#### 12 November 2024

- Green Plus Drugs and GP Collective Action Update
- Paediatric Audiology Update
- North and South Quality and Safety Subcommittee Terms of Reference
- Patient Story Video
- Infection Control Update
- Local Maternity and Neonatal System Update
- Complex Care Incident Management Report
- All Age Continuing Care Transformation Quality Update
- Involving People and Communities Strategy 2024-28

#### 14 January 2025

- Patient Story Video
- Patient Safety Centre Update
- ICB Well-Led Self-Assessment
- Quality and Safety Monitoring in Urgent and Emergency Care
- Special Educational Needs and Disabilities Update Report
- North East and North Cumbria ICB Commitments and Arrangements to meet the Statutory Responsibilities Outlined in Working Together to Safeguard Children 2023

#### 12 arch 2024

- Terms of Reference for Integrated Care System Safeguarding Health Executive Group Subcommittee
- Patient Story - Autism Diagnosis Waiting Times
- Patient Story - Missed Opportunities and Breakdown in Communication
- Paediatric Audiology Quarterly Update
- Patient Safety Incident Response Framework Update
- Publication of the Williams Memorandum of Understanding
- Special Educational Needs and Disabilities Statutory Duties

## Governance and Assurance

The Committee also received assurance reports on the following items:

- North and South Area Quality Exception Reports
- Board Assurance Framework and Risk Register
- Corporate governance (statutory duties)
- Complaints quarterly reports
- Patient Voice Group Updates
- Policy management (review of policies)
- Subcommittee Minutes
- Clinical Effectiveness and Governance Subcommittee Highlight Reports
- Integrated Delivery Report

### Details of main challenges faced by the Committee during the year

Members of the Committee were asked to complete a short survey and provide their reflections on the Committee's work. The survey sought views on the terms of reference; meeting frequency; chairing arrangements; the skills and experience of its members; management of conflicts of interest; meeting papers/information format; and Committee successes and improvements to consider.

Most members agreed that the terms of reference were appropriate noting that the responsibilities within scope of the Committee were vast. Members agreed that the meeting frequency seemed appropriate, and meetings are well chaired but there are challenges with such a full agenda and being able to give sufficient time to each agenda item.

Members did note the volume of papers presented to the Committee were very comprehensive which could make it difficult to read and process all of the papers in advance of the meeting. Members also noted the work that had been carried out within the year to refine the quality exception reports which had improved the presentation.

Members noted the success of the introduction of additional deep dive sessions. Further work was suggested to define the terms of reference and the focus of the Committee, along with a vision for what constituted quality and how this would be achieved.

### Key issues to highlight to the Board

The Committee has continued to explore improvements to its effectiveness and efficiency of management to ensure that the meetings are productive and committee member time is effectively utilised. New processes have been put in place to support this and ensure all essential business is conducted appropriately and provide assurance to the Board on delivery of its delegated functions.

The annual review has identified the Committee has delivered its responsibilities as set out in its terms of reference.

<b>Proposal to review Terms of Reference?</b>	No - to note that a review of the terms of reference will take place in June/July 2025 aligned with the ICB Governance Review.
<b>Chair of the Committee</b>	Professor Sir Pali Hungin, Independent Non-Executive Member
<b>Report Author</b>	Rebecca Herron, Corporate Committees Officer
<b>Date:</b>	30 April 2025