

| 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<br>Highlight Report and Confirmed Minutes |
| Purpose of report   |  |
| To provide the Board with a summary of the key points from the meeting of the Quality and Safety Committee held on 8 May 2025 and the confirmed minutes from the 11 March 2025.   |  |
| Key points  |  |
| <p>The Committee considered several issues and supporting papers at its meeting held on 8 May 2025 and the key points are summarised below.</p> <ul style="list-style-type: none"> <li> <b>Quality Report</b> - The report provided the Committee with oversight of key quality themes, risks and exceptions outlined in the ICB Area Quality reports for the North and South Areas. Updates and assurance were provided on a number of areas including Never Events – with an annual position of 23 reported cases in 2024/25. The PSIRF new methodology was being used to investigate these; Healthcare Associated Infection (HCAI) rates continue to be over trajectory for key HCAI infections and plans are in place to address; concerns in relation to Carbapenemase Producing Enterobacteriaceae (CPE) outbreaks at two hospitals; Maternity service pressures and quality concerns relate to the ongoing fragility of maternity services both locally and nationally.         </li> <li> <b>Quality and Safety Committee Annual Review 2024/25</b> - The report informed the Committee of the annual review of its performance and provided a summary of the main areas of work and achievements throughout 2024-25. The Committee were assured they have met its terms of reference throughout the year for 2024/25 (report included in Appendix 2).         </li> <li> <b>Local Maternity &amp; Neonatal System Update</b> – The Committee received an update regarding the progress of the NHS England (2023) Three Year Delivery Plan for Maternity and Neonatal Services. Updates and assurance were provided on a number of areas including listening to and working with women and families with compassion; growing, retaining and supporting the workforce; developing and sustaining a culture of safety, learning and support and standards and structures that underpin safer, more personalised and equitable care.         </li> <li> <b>Martha's Rule Update</b> – The report provided the Committee with assurance that Martha's Rule was being implemented across NENC ICB. There are 143 pilot sites in England with 6 Trusts actively engaged with the pilot across NENC area.         </li> <li> <b>Overview assurance report of Safeguarding Children, Adults and Cared for Children Executive Summary</b> - The summary report provided assurance to the Committee of the work undertaken by NENC ICB safeguarding and children cared for teams in fulfilling its statutory responsibilities. Emerging risks and concerns from both providers, the ICS system and ICB local delivery teams were highlighted within the report.         </li> </ul> |  |

| Risks and issues   |   |  |    |   |     |   |
|--|---|--|----|---|-----|---|
| The Committee will continue to receive and review the corporate risks aligned to the quality and safety portfolio to provide assurance to the Board that the quality and safety risks contained within the corporate risk register reflect the current environment.  |   |  |    |   |     |   |
| Assurances and supporting documentation  |   |  |    |   |     |   |
| <p>The Committee received several items for assurance including:</p> <ul style="list-style-type: none"> <li>• Patient Safety and Incident Response Framework Update</li> <li>• Quality and Safety Committee Effectiveness Survey</li> <li>• Quality and Safety Risk Register and Board Assurance Framework – Quarter 4, 2024/25</li> <li>• Antimicrobial Resistance (AMR) and Healthcare Associated Infections (HCAI) Subcommittee Minutes</li> <li>• North and South Area Quality and Safety Subcommittee Minutes</li> <li>• SEND Assurance Subcommittee Minutes</li> <li>• System Quality Group Minutes</li> </ul> |   |  |    |   |     |   |
| Recommendation/action required   |   |  |    |   |     |   |
| <p>The Board is asked to;</p> <ul style="list-style-type: none"> <li>• Note the key highlights from the meeting held on 8 May 2025</li> <li>• Receive the confirmed minutes from the 11 March 2025 meeting (appendix 1) for information and assurance</li> <li>• Receive the Quality and Safety Committee annual review 2024/25 (appendix 2)</li> </ul>  |   |  |    |   |     |   |
| Acronyms and abbreviations explained   |   |  |    |   |     |   |
| As described in the report.  |   |  |    |   |     |   |
| <b>Sponsor/approving executive director</b>  | Professor Sir Pali Hungin, Chair of Quality and Safety Committee and Independent Non Executive Member<br>Dr Hilary Lloyd, Chief Nurse and AHP Officer |  |    |   |     |   |
| <b>Date approved by executive director</b>   | 22/05/2025  |  |    |   |     |   |
| <b>Report author</b>   | Rebecca Herron, Corporate Committee Officer   |  |    |   |     |   |
| Link to ICP strategy priorities (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  |   |  |    |   |     | ✓ |
| Relevant legal/statutory issues  |   |  |    |   |     |   |
| Note any relevant Acts, regulations, national guidelines etc   |   |  |    |   |     |   |
| <b>Any potential/actual conflicts of interest associated with the paper?</b><br>(please tick)  | Yes   |  | No | ✓ | N/A |   |
|  |   |  |    |   |     |   |
| <b>Equality analysis completed</b><br>(please tick)  | Yes   |  | No |   | N/A | ✓ |
| <b>If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment</b>   | Yes   |  | No |   | N/A | ✓ |

|  |   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| <b>been undertaken?</b> (please tick)              |   |  |  |  |  |  |
| <b>Key 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>                        | Clinical representation within the Committee                                    |  |  |  |  |  |
| <b>Health inequalities</b>                         | N/A   |  |  |  |  |  |
| <b>Patient and public involvement</b>              | The Committee receives regular updates concerning patient and public engagement |  |  |  |  |  |
| <b>Partner and/or other stakeholder engagement</b> | N/A   |  |  |  |  |  |
| <b>Other resources</b>                             | N/A   |  |  |  |  |  |