

DATE	22 nd December 2015
REPORT FOR	Trust Board of Directors – Part A
REPORT FROM	Quality Patient Experience Committee – Alan Bell, Chairman and Tara Filby, Chief Nurse
CONTACT OFFICER	Tara Filby, Chief Nurse
SUBJECT	Highlight Report
BACKGROUND DOCUMENT (IF ANY)	N/A
REPORT PREVIOUSLY CONSIDERED BY & DATE(S)	
EXECUTIVE COMMENT (INCLUDING KEY ISSUES OF NOTE OR, WHERE RELEVANT, CONCERN AND / OR NED CHALLENGE THAT THE BOARD NEED TO BE MADE AWARE OF)	This report provides the issues which the Quality Patient Experience Committee have highlighted as requiring escalation by exception to the Trust Board, 9th December 2015.
HAVE THE STAFF SIDE BEEN CONSULTED ON THE PROPOSALS?	N/A
HAVE THE RELEVANT SERVICE USERS/CARERS BEEN CONSULTED ON THE PROPOSALS?	N/A
ARE THERE ANY FINANCIAL CONSEQUENCES ARISING FROM THE RECOMMENDATIONS?	N/A
IF YES, HAVE THESE BEEN AGREED WITH THE RELEVANT BUDGET HOLDER AND DIRECTOR OF FINANCE, AND HAVE ANY FUNDING ISSUES BEEN RESOLVED?	N/A
ARE THERE ANY LEGAL IMPLICATIONS ARISING FROM THIS PAPER THAT THE BOARD NEED TO BE MADE AWARE OF?	N/A
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO THE NHS CONSTITUTION IN ANY DECISIONS OR ACTIONS PROPOSED?	N/A
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO SUSTAINABILITY IMPLICATIONS (QUALITY & FINANCIAL) & CLIMATE CHANGE?	N/A
THE PROPOPSAL OR ARRANGEMENTS OUTLINED IN THIS PAPER SUPPORT THE ACHIEVEMENT OF THE TRUST OBJECTIVE(S) AND COMPLIANCE WITH THE REGULATORY STANDARDS LISTED	
ACTION REQUIRED BY THE BOARD	Note the report and agree any further action.

**Quality & Patient Experience Committee: December 2015
Highlight Report to the Trust Board**

Report for Trust Board meeting on:	December 2015
Report From:	QPEC – 9 th December 2015
Highlight Report:	
<p>QPEC approved the revised End of Life Care Plan for Trust-wide roll out to acute and community settings, subject to minor amendments. The roll out will be supported by an educational programme and a rolling audit of key KPIs will be developed that will be fed back to the EOL Strategy Group, for which QPEC has oversight.</p> <p>A patient story was discussed in relation to exemplary care provided to a patient and their family on C1H. The story highlighted the need to have individualised end of life care in place and for the family to feel supported. The story highlighted the excellent leadership on the ward and reflected good triangulation of work across all areas involved.</p> <p>The committee heard about the introduction of revalidation for nurses and midwives and agreed that this process needs to be as easy as possible for staff and welcomed it being a focus within the nursing strategy for next year.</p> <p>The committee registered their disappointment with the increase in pressure ulcers at Grimsby Hospital. RCAs are being undertaken on all ulcers - the 4 avoidable pressure ulcers were 3x grade 2 ulcers and 1x grade 3. Gill Mould reported that the increased training uptake had led to increased reporting but at times there was still a lack of skin inspection on admission. Ulcers were however being found earlier and hence the number of Grade 3 and 4 ulcers was reducing.</p> <p>QPEC received a revised report on the uptake of clinical supervision by registered nurses which had not met the trajectory agreed of 95%. Significant progress had been made in some groups, particularly within community & therapies with more work still to do in Medicine and also within Surgery & Critical Care. It was agreed that a punitive approach would not be helpful but to continue to explore ways of emphasising the benefits of clinical supervision and tying it into preparation for nurse revalidation.</p>	
Action Required by the Trust Board:	
<p>The Trust Board is asked to note the report and support any further action required.</p> <p>Alan Bell, Non-Executive Director and Tara Filby, Chief Nurse December 2015</p>	