

**Quality Improvement Plan – Subcommittee report to Board of Directors**

Committee	Date
Quality Committee	October 2016

**Actions considered for marking “blue” as embedded**

Workstream	Action	Evidence reviewed and recommended to Board to mark “blue” (Y/N)	Comments
Governance	2.5.14 – With support from the Post Graduate Dean of HEEM develop a bespoke support package for Emergency Department to address issues on lack of leadership out of hours, disconnect between ED and the rest of the trust	Y	
Governance	2.5.15 – Review the arrangements for senior medical review in the following specialties, cardiology and urology	Y	Workstream Lead to add further evidence from HEEM
Personalised Care	4.1.2 Refine 150 care plans based on the pilot core assessment and care planning documents	Y	Workstream Lead to add further evidence of Care Plans on Trust Intranet i.e. screen shots and intranet Link
Personalised Care	4.2.2 Complete staff awareness training on self-harm and re-launch one to one guidance	Y	
Personalised Care	4.2.10 Develop policy for assessment and management of patient at risk of self-harm	Y	Ensure correct policy added to Blue Form.

**Comments on review of Red/Amber actions**

Has the committee reviewed relevant Workstream summaries?	Yes / <input type="checkbox"/> (Please delete)
Does the committee agree with the assessment of Red and Amber actions identified on those reports?	Yes / <input type="checkbox"/> (Please delete)
Is the committee satisfied with the executive lead’s actions with regards these actions and have additional actions been required by the committee (please note)?	No further actions identified

**Additional comments from committee chair**

All evidence reviewed and, where action approved, accepted.