

St Raphael's Hospice
Meeting of the Clinical Quality & Governance Committee
Held at St Raphael's, London Road, Cheam, Sutton, SM3 9DX with video call
access
At 10:00 on Friday 11th July 2025

Members: Dr Carrie Chill – Trustee & Committee member (CC)
 Alan Cogbill – Trustee & Committee member (AC)
 Bernard Marley – Trustee & Committee member (BM)
 Norman McWhinney – Board Chair & Committee member (NM)

In attendance: Rebecca Trower – Joint CEO (RT)
 Dr Naomi Collins – Lead Consultant (NC)
 Francis Quinon (FQ) – IPU Lead (FQ)
 Alex Rudkin – Director of Quality and Governance (AR)
 Anna Machin - Governance (AM)

Agenda item	Action	Responsible	Timeline	Ref.
3. Evidence of Excellent Practice Register	Add section on positive feedback in monthly staff e-newsletter	Rebecca Trower with Anna Jackson	August update onwards	11.07.25/01
4. Clinical Risk Register	Update risk register as agreed with Committee	Rebecca Trower	Immediate	11.07.25/02
5. Clinical Quality & Governance Report	Update report on bed occupancy	Alex Rudkin	Immediate	11.07.25/03
	Share details on website project and budget to Finance Committee	John Groom	October 2025 meeting	11.07.25/04
	Consult Hospice User Group on relevant points of website refresh	Rebecca Trower	Summer/autumn 2025	11.07.25/05
	Reword description of third priority in Quality Account	Rebecca Trower	Immediate	11.07.25/06
6. Safeguarding Update	Secure contextual safeguarding information	Alex Rudkin	By October 2025 meeting	11.07.25/07
7. Minutes of internal meetings	Bring suggestions on change management	Senior team	For October 2025 Board	11.07.25/08

1. Welcome, apologies for absence and declarations of interest

The Chair welcomed Francis Quinon to the meeting and Committee members were introduced. There were no apologies from Committee members, and Nick Stevens did not attend as the meeting is held on a non-working day. The meeting was confirmed as quorate.

2. Review of minutes from 17th January 2025 Clinical Quality & Governance Committee meeting, Actions List and update on matters arising

The minutes of the previous meetings were approved as an accurate record of proceedings, and the matters arising considered. Francis Quinon had taken the invite to join the meeting, the letter of thanks had been circulated and report given on confidence around prescribing at a previous meeting. The risk register had been updated, and data on joint visits was included in papers; all actions from previous meetings could therefore be closed.

3. Evidence of Excellent Practice Register

The Committee noted that there had been no complaints since the last meeting, and a range of positive feedback had been received including for the work of IPU colleagues. The Committee commented on the value in defining learning experiences from feedback, and discussed how quotes are shared publicly (with permission) for example on the website or magazine. A standing update would be added to the e-newsletter that goes to staff, through the communications team. The work of the Wellbeing team was recognised, particularly in supporting and engaging different community groups.

4. Clinical Risk Register

Noting the live risks in the Register, the Committee first requested an update on Clinical capacity. The Consultant role has been recruited to, for an August 2026 start and a few time-bound visits to be carried out by the selected candidate (who currently lives in the US), with the aim to hire a 0.8 FTE Clinical Fellow soon who would also help to build capacity. Potential options for staffing such as a Locum Consultant were shared, should this not be possible, although cost considerations were recognised. A new full-time Registrar will join in October, and the team will move to one GP trainee in August. The Committee emphasised the importance of placing focus on maximising clinical capacity to ensure sustainability within the team.

The Committee asked the team, including Francis Quinon, about staff morale and capacity and if the risk levels on the Register matched day-to-day experience. In terms of IPU, one RGN left at the start of the year with some sickness cover also having been required. There were strong applications for recently advertised nursing roles and there is ongoing planning for winter including to support potential parental leave. The Acuity Tool was referred to, but requires a refresh so that it helps to guide day-to-day decision-making more clearly, and relationships with other Hospices have been built to seek their experiences around the best tools. The team values contributions from HCAs and also student placements. Committee members commended the work to plan bed capacity (currently at 75%).

It was agreed that the proposed resident doctors' strike would be added to the Register, as it also impacts the operating climate for the Hospice and organisations making referrals. Reference to the government's 10 Year Plan would also be added, with the Board and this Committee to keep a watching brief in particular around the policy focus on 'hospital to community' (neighbourhood working), and 'analogue to digital'. The team reflected on the significant time requests to attend local working groups as policy evolves and the Committee contributed insights from the sector. Assurance was given that there were no further risks to be added to the Register.

5. Clinical Quality & Governance Report; Clinical Action Plan; Quality Account

Rebecca Trower confirmed that the Psychological Support team is now up to full complement, and running the sessions for the Prison Project has been challenging at times in relation to scheduling by their team. The uptick in work of the Social Work team was recognised, who provide very strong support particularly in supporting patients/ families with complex needs.

The Committee noted the list of various groups supported by Wellbeing Services, alongside the Complementary Therapy offer. Francis Quinon updated on the Clean Supply refurbishment, and plans for other relevant use of the space and maintenance over the summer. The key priorities of the Community Palliative Care Team were shared, with a busy set of requests for the time given that it is early summer. The Education team continues to deliver a range of valued sessions and the Student outreach event will be postponed to generate more interest.

Alex Rudkin next presented the sections of the paper relating to data, with incidents, accidents and near misses sitting slightly above the norm for this time of year but on the basis of analysis, this is not a cause for concern - an explanation was given for key trends and the Joint Visits data was noted. An update to data reported on bed occupancy (page 15) would be made for accuracy including an explanation of the reasons for a time-bound reduction to 8 beds due to a failure in air conditioning in certain rooms during the heatwave.

The Committee asked about the handling of the significant incident with a patient fall, and Rebecca Trower shared reflections that the safeguards were put in place for the patient that were required in relation to their level of need and they were not classified as in need of one-to-one support. Relevant reports have been made and external bodies confirmed that all elements of the process were followed that should have been. Staff could have recognised earlier that this was a reportable incident and the Education team will therefore give supplementary training on this.

The Committee next reviewed the Quality Account and the first Future Planning priority is to undertake an improvement project to implement a new website which will positively impact engagement across patient experience, fundraising and community engagement. There is an internal working group of colleagues to ensure a joined up approach. The Hospice User Group can also be consulted. It was requested that further detail on costings and implementation plans be given to the Finance & Resources Committee, noting also that Anna Jackson would present on the Brand Refresh at the Income Generation Committee. The second priority is about ensuring strong outreach and engagement with different local communities to ensure equity of access, and the third is to put in place an improvement project develop a 'Hospice Outpatient Clinic'. The language would be updated for example to be called a 'Hospice Community Clinic' with reference also to work in local neighbourhoods. The timeline for publication was shared.

6. Safeguarding Update

The Committee noted the annual Safeguarding Audit Report for 2024. The Committee requested informal information to be sought from local hospices (that would be calibrated according to the size of the organisations) to understand how the number of incidents reported by St Raphael's compares.

7. Minutes of internal meetings and audit reports

The Committee noted the minutes of internal meetings. The Committee raised whether there is a Change Management process, or how QIAs and EQIAs are undertaken for significant projects. This is particularly important during times of external change in the policy environment. It was requested that the senior team consider how to approach this and bring suggestions to the Board.

8. Any Other Business and Dates of future meetings

Board members were reminded to complete mandatory training. There were no further items raised under Any Other Business. The Committee thanked Francis Quinon for joining. Norman McWhinney would update the Board at the Committee as apologies were noted from Carrie Chill.

The date of the next meeting was confirmed as Friday 10th October 2025 from 10am-12pm in person at Raphael's, to which Bernard Marley shared apologies.

The meeting ended at 11.50am.

Approved.....

Date.....

DRAFT