

Quality & Safety Committee

Committee Annual Report 2020-2021

QUALITY & SAFETY COMMITTEE ANNUAL REPORT 2020-2021

1. FOREWORD

I am pleased to be able to commend to you this annual report, which has been prepared for the attention of the Board and reviews the work of the Committee for the financial year 2020-2021.

During the year, I have been greatly supported by Maria Thomas (former Chair of the Committee), James Hehir, Nicola Milligan, Dilys Jouvenat, Paul Griffiths, Keiron Montague and Patsy Roseblade who have contributed their considerable knowledge and wide-ranging experience to the Committee.

I would like to express my sincere thanks to all the officers of the Committee who have supported and contributed to the work carried out and for their commitment in meeting important targets and deadlines. I would particularly like to extend my thanks to colleagues within the Corporate Governance Team for the support they provided me throughout the year. I also wish to record my appreciation for the support and contribution given by the Internal Audit team at the NHS Wales Shared Services Partnership (NWSSP), by Audit Wales, Healthcare Inspectorate Wales and Delivery Unit colleagues.

I would like to extend my thanks to David Jenkins, Independent Advisor to the Board who attended a number of meetings throughout the year, and would like to thank him for the invaluable support provided to the Board during 2020/2021.

Going forward, the Committee intends to continue to pursue a full programme of work covering a wide range of topics and subject areas as part of its long term aim to help further strengthen the governance arrangements of the Health Board.

Jayne Sadgrove
Chair of the Quality & Safety Committee
Cwm Taf Morgannwg University Health Board (CTMUHB)

2. INTRODUCTION

The purpose of the Quality & Safety Committee “the Committee” is to provide assurance to the Board on the provision of workplace health & safety and safe and high quality care to the population we serve, including prevention through public health, primary and secondary care. The Committee embraces the values of the Health Board and the objectives outlined within its Integrated Medium Term Plan (IMTP) which are:

- Work with communities and partners to reduce inequality, promote well-being and prevent ill-health.
- Provide high quality, evidence based and accessible care.
- Ensure sustainability in all that we do, economically, environmentally and socially.
- Co-create with staff and partners a learning and growing culture.

The key function of the Quality & Safety Committee is to provide scrutiny on behalf of the Board on all matters relating to Quality and Safety.

Following the introduction of monthly meetings during 2019/2020, a decision was made to move to holding bi-monthly meetings during 2020/2021.

As part of the actions arising from the maternity service review a significant organisational development programme continued to be rolled-out to deliver sustainable cultural and behavioural changes. The Board has continued to use this opportunity, together with the learning from the 2019 Wales Audit Office (WAO – now Audit Wales) & Healthcare Inspectorate Wales (HIW) national thematic audit on quality governance and the proposed HIW local governance review to further strengthen both internal controls and quality governance arrangements going forward.

3. ROLE, MEMBERSHIP, ATTENDEES AND COMMITTEE ATTENDANCES

3.1 ROLE

The role of the Committee is to advise and assure the Board on whether there are effective Quality & Safety arrangements in place – through the design and operation of the Health Board system of assurance – to support it in its decision taking and in discharging the accountabilities for securing the achievement of the Health Board objectives in accordance with the standards of good governance determined for the NHS in Wales.

The Committee’s Terms of Reference are reviewed annually and are available via the following link: <https://cwmtafmorgannwg.wales/how-we-work/standing-orders/>

3.2 MEMBERSHIP

The membership of the Quality & Safety Committee comprises of six Independent members, enabling the Committee to provide robust scrutiny and assurance to the Board independently of the management decision-making processes.

A summary of the Independent membership during 2020-2021 is outlined in table 1 below:

Table 1 – Composition & Membership of the Quality & Safety Committee Apr 2020-March 2021

Name	Period
Members	
Jayne Sadgrove (Committee Chair) Independent Member	April 2020 – March 2021 Committee Chair from August 2020
Maria K Thomas Vice Chair/Independent Member	Apr 2020 – March 2021 Committee Chair up until July 2020
Keiron Montague Independent Member	Apr 2020 – June 2020
James Hehir Independent Member	Apr 2020 - March 2021
Nicola Milligan Independent Member	Apr 2020 – March 2021
Dilys Jouvenat Independent Member	April 2020 -March 2021
Paul Griffiths Independent Member	July 2020 – December 2020
Patsy Roseblade Independent Member	From March 2021

3.3 ATTENDANCE AT QUALITY & SAFETY COMMITTEE 2020-2021

During the year, the Committee met on six occasions. All meetings were quorate and were well attended as shown in Table 2 below:

Table 2 - Meetings and Member Attendance 2020-2021

In Attendance	12 May 2020	14 July 2020	8 Sept 2020	18 Nov 2020	19 Jan 2021	16 Mar 2021	Total
Independent Members							
• Not required to attend as held as quorate meeting							
Maria K Thomas (Chair of the Committee up to July 2020)	✓	✓	x	✓	✓	✓	5/6
Jayne Sadgrove (Chair of the Committee up from August 2020)	✓	✓	✓	✓	✓	✓	6/6
Keiron Montague – Independent Member (up until June 2020)	✓						1/1
Nicola Milligan – Independent Member	✓	x	✓	✓	✓	✓	5/6
Dilys Jouvenat – Independent Member	*	✓	✓	✓	✓	✓	5/5
James Hehir – Independent Member	*	✓	x	x	✓	✓	3/5
Paul Griffiths – Independent Member (from July 2020 to December 2020)		✓	x	✓			2/3
Patsy Roseblade Independent Member (from March 2021)						✓	1/1

3.4 ATTENDEES

The Committee's work is informed by reports provided by leads within CTMUHB, Cwm Taf Morgannwg Community Health Council, Healthcare Inspectorate Wales, Audit Wales, Internal Audit and the Delivery Unit. Although not members of the Committee, colleagues from these areas are invited to attend each meeting of the Quality & Safety Committee. Invitations to attend the Committee meeting are also extended, where appropriate and on an 'ad hoc' basis, to specific staff when reports which relate to their specific area of responsibility are being discussed.

4. QUALITY & SAFETY COMMITTEE BUSINESS

The Quality & Safety Committee provides an essential element of the Health Board's overall assurance framework. As a result of the Covid-19 pandemic, all meetings were held virtually via Microsoft Teams during 2020/2021 and a Consent Agenda process was introduced during the year also. Any items included on the consent agenda were considered by Members prior to each meeting, with Members given the opportunity to raise questions prior to the meetings regarding the reports. All reports included on the Main Agenda were discussed during each meeting. The Quality & Safety Committee agenda broadly follows a standard format, comprising of specific sections, the activity of the Committee during 2020 are outlined in Appendix 1 of this report.

Links with Other Committees/Boards

Key risk areas from the Quality & Safety Committee are highlighted at full Board by the Committee Chair via the highlight report.

During the course of 2020-2021, the following items were referred from other Committees:

- Audit Wales Operating Theatre Department Review - Referral from Audit & Risk Committee
- Internal Audit Follow Up Review - Head & Neck Position Statement - Referral from Audit & Risk Committee

During 2020/2021 a new process was introduced for Committee referrals. At each meeting, for any Committee referrals made, the Chair of the Committee or the Corporate Governance Lead will ensure that the the following questions are captured should a referral be made:

- What are you referring?
- Why are you referring?
- What is the outcome you are anticipating from this referral?

5. ACTION LOG

In order to monitor progress and any necessary follow up action, the Committee has developed an Action Log that captures all agreed actions. This has provided an essential element of assurance both to the Committee and from the Committee to the Board.

During 2020/2021, an Annual Cycle of Committee Business was also introduced which has helped to structure the forward work programme for future Committee meetings and helped to identify the key areas of focus for the Committee.

6. GOVERNANCE

The effectiveness of the Committee is monitored through the following key governance activity:

- Annual Review of the Terms of Reference
- Annual Committee Annual Report

- Highlight Reports from the Committee to the Health Board meetings
- Annual Committee Effectiveness Self-Assessment Survey
- Committee Annual Cycle of Business

The Corporate Governance Team maintain a "Committee Effectiveness Tracker" to ensure the above activity is undertaken at the appropriate times during the year.

Committee Annual Self-Assessment

The Committee completed its Annual Self-Assessment for 2019-2020 via Survey Monkey and the analysed results were presented to the March 2021 meeting of the Committee.

7. ASSURANCE TO THE BOARD

The Quality & Safety Committee considers that on the basis of the work completed by the Committee during 2020 - 2021, there are effective measures in place that have delivered its agreed Terms of Reference.

The forward work programme for 2021-2022 and beyond, ensures that the Committee retains scrutiny on key areas of activity, not exclusive to but including the following:

- Patient experience
- Learning lessons and sharing best practice
- Maternity Services oversight and scrutiny
- Quality Governance arrangements
- Compliance with the Nurse Staffing Levels (Wales) Act
- Quality improvement initiatives
- Scrutiny of any Regulatory and Inspectorate Body reports
- Community Health Council visits
- Consideration of the Audit Wales Structured Assessment feedback to consider how best to manage and prioritise the volume of the Committees business.
- Monitoring the activity considered by the Health, Safety & Fire Sub Committee established in August 2019

In addition the Committee Chair will meet with the lead officers and the Chair of the Board to discuss progress of the work of the Committee.

A committee cycle of business was also developed for 2020-21. The cycle of business will identify the reports which will be regularly presented for consideration. The annual cycle is one of the key components in ensuring that the Committee is effectively carrying out its role. It also facilitates the management of agendas and Committee business.

8. LINKS WITH OTHER COMMITTEES

The Quality & Safety Committee will continue to have close links with other Committees of the Board, particularly the Audit & Risk Committee and Health Safety & Fire Sub Committee.

Through either specific meetings or the regular Independent Member meetings there is an opportunity for Committee Chairs to support the work of each of the Committees they Chair, share learning and avoid duplication. All Committee Chairs have access to Committee Highlight Reports to the Board.

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APPENDIX 1

1. Preliminary Matters

This included the apologies for absence, welcome and introductions, declarations of interest, receiving and approving the unconfirmed minutes of the last meeting and receiving the action log. This section also included a Patient Story as and when available.

2. Consent Agenda

During 2020 – 2021 the following items were received on the Consent Agenda for Approval/Endorsement:

- Quality & Safety Committee Terms of Reference
- Major Trauma Network Clinical Guidelines
- Cancer Services – Standard Operating Procedure for Harm Reviews
- Annual Quality Statement
- Quality Governance Framework
- Quality & Safety Committee Annual Report 2019/2020
- Once for Wales Concerns Management System
- Health, Safety & Fire Sub Committee Terms of Reference
- Quality & Safety Committee Annual Cycle of Business
- Environmental Policy
- Medicines Management Vaccine Policy
- Handling Persistent & Serial Complaints Policy

During 2020 – 2021 the following items were received on the Consent Agenda for Noting/Information

- Improvement Plan to support the Intervention into CTMUHB Systems and Processes for Reporting, Management and Review of Patient Safety Incidents and Concerns
- Healthcare Inspectorate Wales Review of Mental Health Services at Ward 7, Ysbyty Cwm Cynon;
- Child Protection Medicals
- Equality & Welsh Language Update
- Committee Forward Work Programme
- Corporate Policies Sub Group Update
- Quality Impact Assessment Process
- Safeguarding & Public Protection Annual Report 2019/2020
- Policy Management Improvement Plan (Clinical and Non Clinical Policies)
- NHS Wales Shared Services Partnerships Legal & Risk Services – Impact & Reach Report
- Covid 19 Lessons Learnt Report
- Shared Listening & Learning Forum update
- Staff Incident Reporting Feedback
- Community Health Council (CHC) Briefing - Living with Coronavirus: Health and Care Services During Winter
- Community Health Council Briefing - Maternity Services in Wales: What CHCs have heard during the coronavirus Pandemic and Health Board Response
- Welsh Ambulance Services NHS Trust Patient Experience Highlight Reports
- Leave No-One Behind Report
- Clinical Audit Quarterly Update

- Medical Device Alert MDA 2020/019 Abbott Trifecta Valve Prosthesis
- Vaccination Update

3. Main Agenda

During 2020 – 2021 the following items were received:

- Update on Maternity Services and Neonates;
- COVID-19 Update
- COVID-19 Nursing Workforce Plan to Support Increased Capacity
- Royal College of Anaesthetists & Royal College of Surgeons Invited Service Review on the Intensive Care Service for General Surgery Patients At Princess Of Wales Hospital
- Development of Universal Mortality Reviews in Cwm Taf Morgannwg University Health Board
- A Summary of Avoidable Mortality in Cwm Taf Morgannwg University Health Board
- Cwm Taf Morgannwg University Health Board National Clinical Audit Programme and Covid-19
- Quality Governance Arrangements for non COVID-19 Activities
- Guidance Note Issued by Welsh Government – Discharging Board Committee Responsibilities During COVID-19 Response Phase
- Health, Safety & Fire Report
- Revised Quality Governance Framework
- Ophthalmology Follow Up Outpatients Not Booked Update
- General Follow Up Outpatients Not Booked Update
- National Collaborative Commissioning Unit NHS Wales Quality Assurance Improvement Service Annual Position Statement
- Resetting Cwm Taf Morgannwg Operating Framework
- Organisational Risk Register – Risks Assigned to the Quality & Safety Committee
- Quality Governance – Regulatory Review Recommendations and Progress Updates
- Delivery Unit (DU) Management Review of Patient Safety Incidents and Concerns - Quarterly Update
- Healthcare Inspectorate Wales (HIW) and Wales Audit Office - Joint Review into Quality Governance
- Resetting Cwm Taf Morgannwg Operating Framework – Harm Reviews
- Out of Hours Cwm Taf Morgannwg Peer Review
- Inpatient Mortality Review Update
- Primary Care Covid-19 Mortality Review Update
- MBRRACE Perinatal Mortality Surveillance Report
- Peer Review – Systematic Anticancer Therapies (First Round)
- CTM Response to “First Do No Harm” – The Report of the IMMDS Review the Cumberlege Report
- Management & Review of Organisational Wide - Clinical and Non Clinical Policies
- Ophthalmology Position Statement
- Learning From Improvement Position
- Quarter 3 & Quarter 4 Plan Implications on Potential Harm

- Delivery Unit Review of Ophthalmic Diagnostic & Treatment Centre - Progress Report
- Delivery Unit Review on Cardiology to Cardiac Surgery Follow Up - Progress Report
- Rationale for opening of the Field Hospital and Assurances received by Gold to inform the decision - To include Quality Impact Assessment
- Specialist COVID Mortality Review Oversight Group Draft Terms of Reference
- Improving Serious Incident Management in CTM: Revised Serious Incident Toolkit and Serious Incident Team
- Learning Disability Services Covid Reflections
- Improving Quality & Preventing Reoccurrence within Maternity Services
- Resilience in the Workforce in Maternity Services
- Neonatal Services - An Update of Perinatal Mortality Review
- Delivery Unit Action Plan - Cancer Services
- Update on Covid19 Nursing Workforce Plan to Support Increased Capacity
- Chief Operating Officer Report
- Committee Annual Self-Assessment Questionnaire Response

Integrated Quality & Safety Exception Reports were received from the following areas:

- Bridgend Integrated Locality Group;
- Merthyr & Cynon Integrated Locality Group
- Rhondda Taff Ely Integrated Locality Group;
- Facilities Directorate
- Primary Care Directorate

The following Chairs reports and minutes from the Committee Sub Groups were received by the Committee during 2020 – 2021:

- Infection, Prevention & Control Committee;
- Health, Safety & Fire Sub Committee
- Medicines Management Expenditure Committee

4. Items for Information

During 2020 – 2021 the following items were received:

- Ombudsman Annual Report and Accounts for 2019/2020
- Cwm Taf Morgannwg UHB Ombudsman Report