



AGENDA ITEM

2.2.8

CTMUHB BOARD MEETING

HIGHLIGHT REPORT FROM THE QUALITY & SAFETY COMMITTEE

DATE OF MEETING

27/05/2021

PUBLIC OR PRIVATE REPORT

Public

**IF PRIVATE PLEASE
INDICATE REASON**

Not Applicable - Public Report

PREPARED BY

Emma Walters, Corporate Governance
Manager

PRESENTED BY

Jayne Sadgrove, Independent Member

**EXECUTIVE SPONSOR
APPROVED**

Greg Dix, Executive Director of Nursing

REPORT PURPOSE

NOTING

ACRONYMS

None Identified.

1. PURPOSE

- 1.1 This report had been prepared to provide the Board with details of the key issues considered by the Quality & Safety Committee at its meeting on 18 May 2021.
- 1.2 Key highlights from the meeting are reported in section 2.
- 1.3 The Sub Committee is requested to **NOTE** the report.

2. HIGHLIGHT REPORT

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| ALERT / ESCALATE | <p>Positive Escalation:</p> <ul style="list-style-type: none"> The Committee noted within the Bridgend ILG report that the Child & Adolescent Mental Health Service Clinical Service Group had been awarded funding for Carnegie Clinic and the Princess of Wales Clinic; The Committee noted within the Merthyr & Cynon ILG report the planned opening at the end of May of Ty Enfis, which would provide dementia care for patients. Members noted that this would be an important development for patients and staff; The Committee were pleased to note that the RTE ILG Locality Nurse Director and nursing leads from across the ILG and Infection, Prevention & Control Team (IP&C) team had won an award at a national Celebration Event in the category 'project with the biggest potential impact'. |
| ADVISE | <ul style="list-style-type: none"> A patient story was shared with the Committee which described the experiences of a family member who had a relative in hospital during the Covid-19 pandemic. The story highlighted communication failures that had occurred along the patient's pathway which had been deeply upsetting for the family at such a difficult and worrying time. Members valued the story being shared and were keen to learn of the improvements being implemented to prevent reoccurrence. The Organisational Risk Register was received and Members noted that steps were being taken to ensure the Committee were being presented with the most latest version of the register which was welcomed and endorsed; An update on the Maternity and Neonatal Improvement Programme was received. Members noted the further progress that had been made and that concerns had been raised by the Independent Maternity Services Oversight Panel in relation to medical input into Serious Incident reviews which they felt needed to be strengthened; The Chief Operating Officers report was received. Members requested sight of the Planned Care Recovery Programme at a future meeting and noted the increase in attendances at Emergency Departments. Concerns were raised by an Independent Member in relation to availability of adequate Personal Protective |



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| | <p>Equipment (PPE) for hard of hearing staff. Concerns were also raised in relation to delays in ambulance handovers and the ILG's were asked to include their improvement journeys in relation to this activity in future reports;</p> <ul style="list-style-type: none">• The Committee received and noted the Integrated Locality Group Quality & Safety Reports together with the Primary Care Quality & Safety report and key matters were brought to the attention of the Committee;• The Quality Dashboard was received. Members requested an update at a future meeting on Medication Errors;• A report on Nosocomial Healthcare Acquired Infections was received. Members noted that a review would need to be undertaken of cases as the Health Board's transmission rate was in excess of 2000 patients and noted that a standardised approach was being taken across Wales;• A Stroke Quality Improvement report was received. Members noted that discussions were being held regarding the provision of stroke services within the Health Board and across Wales. The Committee requested a further update at a future meeting.• Updates were received on the Urgent Care Improvement Programme and Nursing Assurance, the Committee welcomed these reports and requested a further update on progress at a future meeting;• |
| ASSURE | <ul style="list-style-type: none">• The Committee received an update on the latest position regarding the Covid-19 pandemic. Members noted the reduction in cases, low positivity rates and the success of the vaccination programme, with further work required to encourage people to receive their second vaccination. Members noted that whilst not presently an issue for Wales, the Indian variant was being monitored |
| INFORM | <p>The Committee received the following reports for approval via the consent agenda:</p> <ul style="list-style-type: none">• Quality & Safety Committee Annual Report 2020/2021;• Clinical Audit Policy & Strategy. <p>The Committee received the following reports for noting via the consent agenda/main agenda:</p> <ul style="list-style-type: none">• Action Log and Forward Work Programme;• Controlled Drugs Local Intelligence Network Annual Report; |

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| | <ul style="list-style-type: none"> • Infection Prevention & Control Committee Highlight Report and Annual Report; • Welsh Health Specialised Services Committee Quality & Patient Safety Chairs Summary Reports; • Radar Committee Highlight Report; • Research & Development Six Monthly Update; • WAST Patient Safety & Experience Highlight Report February 2021; • Clinical Audit Forward Plan 2020/2021; • Covid-19 Related Mortality Rates in Care Homes; • Human Tissue Authority Compliance Update Report and Annual Report; • Cancer Services Annual Report; • Highlight Report from the Facilities Directorate; • Update report on Suicide Prevention; <p>The Committee received the following reports/updates at the In Committee section of the meeting:</p> <ul style="list-style-type: none"> • Ty Lidiard Update report; • Homicide Review – verbal update; • Healthcare Inspectorate Wales Routine Quality Checks Tier 1 Activity; • Management of Commissioning Risks. |
| APPENDICES | NOT APPLICABLE |