



AGENDA ITEM

7.1.1

HEALTH BOARD MEETING

HIGHLIGHT REPORT FROM THE QUALITY & SAFETY COMMITTEE

DATE OF MEETING

09/08/2021 and 16/08/2021

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, Committee Chair

**EXECUTIVE SPONSOR
APPROVED**

Greg Dix, Executive Director of Nursing

REPORT PURPOSE

FOR NOTING

ACRONYMS

HSE

Health & Safety Executive

WHSSC

Welsh Health Specialised Services Committee

NCCU

National Collaborative Commissioning Unit

CAMHS

Child & Adolescent Mental Health Services

ILG

Integrated Locality Group

PCH

Prince Charles Hospital

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 meetings on 9 August 2021 and 16 August 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

ALERT / ESCALATE	<ul style="list-style-type: none"> The Committee received an In Committee report on Ophthalmology Services. Concerns were expressed by the Committee regarding the issues that had been highlighted in the report; The Committee received an In Committee report regarding the HSE Briefing for Maesteg Hospital. Concerns were expressed by the Committee regarding the issues that had been highlighted within the report, particularly in relation to the notification issued by the HSE regarding intended prosecution regarding the incident that occurred;
ADVISE	<ul style="list-style-type: none"> An In Committee report was received on the Homicide Review and the Committee noted that an action plan had been developed to address the issues identified; A verbal update was received at the In Committee meeting regarding Patient Safety Alert PSA13. The Committee noted that a number of issues were being worked through in accordance with the alert; A Quality Assurance and Improvement Services Annual Position Statement/Annual Report was presented by the NCCU. The report identified quality issues being experienced within CAMHS across Wales and the UK. The comprehensive report was welcomed by Members; A report on Assurances on Risks Assigned to the Quality & Safety Committee was received and scrutinized; A Mortality Reviews Update report was received. Members noted that there were resource issues which was impacting on the ability to review all cases and noted that a resource proposal was being developed for discussion at Management Board; The Quality Dashboard report was received. Members requested that a full discussion was held on Medicines Management and the Safe Storage of Medicines at a future meeting as this had been an issue for some time; The report from the Chief Operating Officer was received. Members requested a report was presented to a future meeting in relation to Ophthalmology Waiting Times;



	<ul style="list-style-type: none">• The Committee received the Merthyr & Cynon ILG Quality & Safety report and recognized that improvement plans were in place to address environmental and cultural issues at PCH;• The Committee received the Bridgend ILG Quality & Safety report and noted the issues being experienced in relation to the provision of WARRN training to staff.
ASSURE	<ul style="list-style-type: none">• A patient story was received which related to the care of a patient during the Covid-19 Pandemic with reduced visiting and how the team went the extra mile to support the family seeing the patient. Members welcomed the story which they found to be positive;• The Committee received a verbal update from the Shared Listening and Learning Forum and welcomed the decision made to implement the seven minute briefing format;• A presentation was shared with the Committee in relation to the Development of a Concept for a new Approach to Concerns. The Committee welcomed the reflection being undertaken as to how processes could be strengthened and improved;• The Committee received a comprehensive report on the Maternity Services & Neonates Improvement Programme. Members welcomed the support that had been provided from the Delivery Unit in relation to the Serious Incident Review and welcomed the benchmarking data included within the report;• A Six Monthly Update on Learning Disability Services was received. The Committee welcomed the improvement that had been made in relation to Clinical Psychology staffing.
INFORM	<p>The following reports were approved/noted by the Committee via the consent agenda:</p> <ul style="list-style-type: none">• Tracheostomy Care;• Clinical Policy Review Update;• NHS Wales National Incident Reporting Policy;• Health, Safety & Fire Sub Committee Highlight Report;• Infection, Prevention & Control Committee Highlight Report;• Medicines Management Expenditure Committee Highlight Report;• Putting Things Right (Concerns) Annual Report;• Health & Care Standards Annual Report;• Individual Patient Funding Request (IPFR) Annual Report;• Critical Care Update;• Covid 19 Update;• Delivery Unit Review Serious Incidents and Concerns – Update on Self-Assessment;• Once for Wales RLDATIX Implementation;• Infection, Prevention & Control Annual Report 2020 – 2021;• WHSSC Quality & Patient Safety Committee Chairs Report 8 June 2021;



	<ul style="list-style-type: none">• WHSSC Quality & Patient Safety Committee Annual Report 2020-2021. <p>The Committee received and noted the following reports on the main agenda:</p> <ul style="list-style-type: none">• Rhondda Taff Ely ILG Quality & Safety Report;• Primary Care Quality & Safety Report;• Elective Care Recovery Portfolio;• Quality Governance – Regulatory Review Recommendations and Progress Updates.
APPENDICES	NOT APPLICABLE