

# **Quality & Safety Committee**

## **Committee Annual Report 2021-2022**

# **QUALITY & SAFETY COMMITTEE ANNUAL REPORT 2021-2022**

## **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 2021-2022.

During the year, I have been greatly supported by Maria Thomas (former Chair of the Committee), James Hehir, Nicola Milligan, Dilys Jouvenat, Patsy Roseblade and Carolyn Donoghue 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.

Going forward the Committee will continue to pursue a full programme of work covering quality and safety of care for our population together with matters affecting the health and safety of our workplaces with the aims of promoting learning and further strengthening the governance and assurance 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 has embraced the new Strategic Goals in how it manages its agenda to ensure that its activity supports the ‘**CTM2030: Our Health, Our Future**’ Strategy and the **Values and Behaviours** of the Health Board.



The Committee meets every other month, with the key function to provide scrutiny on behalf of the Board on all matters relating to Quality and Safety.

A key area of the Quality Improvement work continues to be focussed on the Health Board’s response to the concerns raised in 2019 regarding failings in maternity services. The service and Maternity Improvement Team has continued to deliver improvements during 2021-2022 with a regular report on improvement activity received by the Committee.

## 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 2021-2022 is outlined in table 1 below:

**Table 1 – Composition & Membership of the Quality & Safety Committee Apr 2021-March 2022**

<b>Name</b>	<b>Period</b>
<b>Members</b>	
Jayne Sadgrove (Committee Chair) Independent Member	April 2021 – March 2022
Maria K Thomas Vice Chair/Independent Member	Apr 2021 – May 2021
James Hehir Independent Member	Apr 2021 - March 2022
Nicola Milligan Independent Member	Apr 2021 – March 2022
Dilys Jouvenat Independent Member	April 2021 -March 2022
Patsy Roseblade Independent Member	April 2021 – March 2022
Carolyn Donoghue Independent Member	September 2021 – March 2022

### 3.3 ATTENDANCE AT QUALITY & SAFETY COMMITTEE 2021-2022

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 2021-2022**

<b>In Attendance</b>	<b>18 May 2021</b>	<b>9 Aug 2021</b>	<b>22 Sept 2021</b>	<b>22 Nov 2021</b>	<b>18 Jan 2022</b>	<b>22 Mar 2022</b>	<b>Total</b>
<b>Independent Members</b>							

<b>In Attendance</b>	<b>18 May 2021</b>	<b>9 Aug 2021</b>	<b>22 Sept 2021</b>	<b>22 Nov 2021</b>	<b>18 Jan 2022</b>	<b>22 Mar 2022</b>	<b>Total</b>
Jayne Sadgrove (Chair of the Committee)	✓	✓	✓	✓	✓	✓	<b>6/6</b>
Maria K Thomas (Vice Chair/Independent Member up until May 2021)	✓						<b>1/1</b>
Dilys Jouvenat – Independent Member	✓	✓	✓	✓	✓	✓	<b>6/6</b>
Nicola Milligan – Independent Member	✓	✓	✓	✓	✓	✓	<b>6/6</b>
James Hehir – Independent Member	✓	✓	✓	✓	✓	✓	<b>6/6</b>
Patsy Roseblade Independent Member	✓	✓	✓	✓	x	x	<b>4/6</b>
Carolyn Donoghue - Independent Member (from September 2021)			✓	✓	✓	x	<b>3/4</b>

### 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. In response to the Covid-19 pandemic, all meetings continued to be held virtually via Microsoft Teams during 2021/2022 with continued use of the Consent Agenda. Any items included on the consent agenda were considered by Members prior to each meeting, with Members provided with 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, and the activity of the Committee during 2021/2022 is 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.

At each meeting, if any Committee referrals are identified, the Chair of the Committee or the Corporate Governance Lead will ensure that the following questions are captured to ensure a referral is managed effectively:

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

During the course of 2021-2022, the following items were referred to the Quality & Safety Committee from other Committees:

- Internal Audit Review Concerns - Referral from Audit & Risk Committee

## **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.

## **6. GOVERNANCE**

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

- Annual Review of the Terms of Reference
- Committee Annual Report
- Highlight Reports from the Committee to the Health Board meetings
- Annual Committee Effectiveness Self-Assessment Survey
- Annual Cycle of Committee 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 is in the process of completing its Annual Self-Assessment for 2021-2022, any learning and themes identified following the assessment will be presented to the Committee for review and consideration.

## **7. ASSURANCE TO THE BOARD**

The Quality & Safety Committee considers that on the basis of the work completed by the Committee during 2021 - 2022, there are effective measures in place that have delivered against its agreed Terms of Reference.

The forward work programme for 2022-2023 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 & Neonate 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.

The Annual Cycle of Committee Business has continued to be presented to each meeting of the Committee during 2021/2022, alongside the Forward Work Programme. This supports and helps identify the key areas of focus for the Committee and 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, and share risks with other Committees of the Board, particularly the Audit & Risk Committee, Planning, Performance & Finance Committee and the People & Culture Committee.

As a Sub Committee of the Quality & Safety Committee, regular highlight reports are received from the 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.

## **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 2021 – 2022 the following items were received on the Consent Agenda for Approval/Endorsement:

- Quality & Safety Committee Annual Report 202/2021;
- Clinical Audit Policy and Strategy;
- Tracheostomy Care;
- Clinical Policy Review Updates;
- NHS Wales National Incident Reporting Policy;
- Ionising Radiation Protection Policy;
- Pharmaceutical Needs Assessment;
- Quality & Safety Committee Terms of Reference;
- Waste Management Policy;
- Clinical Audit Assurance Framework;
- Nurse Staffing Levels (Wales) Operating Framework and Escalation Policy for Paediatrics;
- Quality & Safety Committee Annual Cycle of Business.

During 2021 – 2022 the following items were received on the Consent Agenda for Noting/Information

- Controlled Drugs Local Intelligence Network Annual Report;
- Welsh Health Specialised Services Quality & Patient Safety Committee Highlight Reports;
- Highlight Reports;
- Research & Development Six Monthly Progress Reports;
- Welsh Ambulance Services NHS Trust Patient Safety & Experience Highlight Reports;
- Clinical Audit Forward Plan 2020/2021;
- Covid-19 Related Mortality in Care Homes;
- Cancer Services Annual Report;
- Facilities Directorate Highlight Report;
- Putting Things Right (Concerns) Annual Report;
- Health & Care Standards Annual Report;
- Individual Patient Funding Request Annual Report;
- Critical Care Update;
- Delivery Unit Review Serious Incidents and Concerns – Self Assessment Update;
- Once for Wales RLDATIX Implementation;
- Infection, Prevention & Control Annual Report 2020-2021;
- Welsh Health Specialised Services Quality & Patient Safety Committee Annual Report 2020-2021;
- National Prescribing Indicators Report;



- Safeguarding Annual Report;
- Clinical Education Annual Report;
- Maternity Services Community Health Council Patient Experience Report at Tirion Birth Centre;
- Maternity Services Clinical Supervision for Midwives Peer Review;
- Deprivation of Liberty Safeguards and the Implementation of the Liberty Protection Safeguards;
- Annual Letter 2020-2021 – Public Services Ombudsman for Wales;
- IRMER Inspection Progress Report and Action Plan;
- Review of the Governance Matrix (Targeted Intervention);
- Delivery Unit Quality & Safety Dashboards;
- Covid-19 Closure Report – Including an update on the Vaccination Programme;
- Organ Donation Annual Report;
- National Clinical Audit Programme Update 2021/2022.

### **3. Main Agenda**

During 2021 – 2022 the following items were received:

- Patient Experience Stories;
- Assurances on Risks Assigned to the Quality & Safety Committee;
- Covid-19 Progress Reports (also received via the consent agenda on occasion);
- Maternity Services & Neonates Improvement Programme Updates;
- Suicide Prevention Update;
- Patient Safety Quality Dashboard – including various Hot Topic areas of focus;
- Nosocomial Healthcare Acquired Infections Reports;
- Urgent Care Improvement Programme Updates;
- Nursing Assurance Report;
- Stroke Quality Improvement Updates;
- Quality Assurance and Improvement Service Annual Position Statement/Annual Report;
- Learning from Mortality Reviews Updates;
- Shared Listening & Learning Forum Updates;
- Development of our concept for a new approach to Concerns;
- Reports from the Chief Operating Officer;
- Elective Care Recovery Portfolio;
- Quality Governance – Regulatory Review Recommendations and Progress Updates;
- Learning Disability Services Six Monthly Updates (also received via the Consent agenda on occasions);
- Delivery Unit Report and Management Response – Maternity Serious Incidents;
- Child and Adolescent Mental Health Services Progress Report;
- Prince Charles Hospital Improvement Programme Progress Reports;
- Launch of the National Quality & Safety Framework – Gap Analysis in relation to Cwm Taf Morgannwg UHB's Framework;
- A Summary of Avoidable Mortality between 2011-2019 and the Covid-19 Update in Cwm Taf Morgannwg;

- Cwm Taf Morgannwg Response to the Welsh Critical Care Network Peer Reviews;
- Assurance of Mortuary and Body Stores Security and Dignity in Cwm Taf Morgannwg
- Human Tissue Authority Compliance Update Reports (also received via the consent agenda on occasions);
- Welsh Risk Pool Review of Claims, Redress Cases and Inquests;
- Response to the MBRRACE UK Perinatal Mortality Report 2019 Births;
- Neonatal Services Improvement Briefing;
- Proposed Maternity Metrics for Health Board Assurance;
- Cancer Harm Reviews;
- Medicines Management Directorate Medicines Storage Update;
- Sepsis Compliance Improvement Plan;
- Response to the Healthcare Inspectorate Wales Review of the Emergency Department at Prince Charles Hospital;
- Executive Director and Independent Member Walkrounds September 2021 – December 2021;
- Delivery Unit Review of Open Incidents within Maternity & Neonatal Services;
- Neonatal Services Deep Dive Report;
- Healthcare Inspectorate Wales Mental Health Inspections;
- Preparedness for the Covid-19 Inquiry;
- Development of a Listening & Learning Framework

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;
- Primary Care Directorate.

The following Chairs reports and minutes from the Committee Sub Groups were received by the Committee during 2021 – 2022:

- Infection, Prevention & Control Committee;
- Health, Safety & Fire Sub Committee
- Medicines Management Expenditure Committee;
- Recognising Acute Deterioration and Resuscitation Committee.