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QUALITY & SAFETY COMMITTEE

HIGHLIGHT REPORT FROM THE RADAR GROUP

DATE OF MEETING 18 May 202	1
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PUBLIC OR PRIVATE REPORT | Public

IF PRIVATE PLEASE	Not applicable
INDICATE REASON	Not applicable

PREPARED BY	Janet Gilbertson – Head Of Clinical Education
PRESENTED BY	Dom Hurford – Assistant Medical Director (AMD) Quality and Clinical Effectiveness
EXECUTIVE SPONSOR APPROVED	Nick Lyons- Medical Director

REPORT PURPOSE	For Noting

ACRONYMS	
CRF	Clinical Research Facility
ICT	Information Communication Technology
ILG	Integrated Locality Group
M&C	Merthyr & Cynon
RADAR	Recognising Acute Deterioration and Resuscitation
RGH	Royal Glamorgan Hospital
RTE	Rhondda Taf Ely



RRAILS	Rapid Response to Acute Illness Learning Set
DNACPR	Do Not Attempt Cardio Pulmonary Resuscitation

1. PURPOSE

- 1.1 This report had been prepared to provide the Quality and Safety Committee with details of the key issues considered by the RADAR Group at its meeting on 15th March 2021.
- 1.2 The group reports to the Quality & Safety Committee and Management Board.
- 1.3 Key highlights from the meeting are reported in section 2, which have been RAG rated for ease of reference.
- 1.4 The Quality & Safety Committee are requested to **DISCUSS** and **NOTE** the report and the actions being taken.

2. HIGHLIGHT REPORT

ALERT / ESCALATE	 The Group received ILG updates and was advised of a - Resuscitation Training accommodation issue in the RTE and Bridgend ILGs: The Committee noted and agreed suitable accommodation urgently needs to be identified at both acute sites to support training and site based Resuscitation services. This has been escalated to Management Board. The Group received an update on the Resuscitation Training Compliance Risk and were advised that the compliance position has deteriorated further during 2020 due to COVID-19 pressures. Training was cancelled in the first wave and release of staff for training has also impacted due to staff redeployment subsequently. Training formats have been reviewed with e-learning options incorporated where appropriate. This is to increase training compliance and increase fact to face training capacity. As a result of staffing issues and redeployment of resus
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	training officers through a second wave of COVID-19, the review of training standards against which compliance is
	measured will now be submitted to the June RADAR

	meeting along with a review of Resus departments demand and capacity for training.
ADVISE	 There is now one overarching CTMUHB Resuscitation Policy due to re-aligning old CTUHB and Bridgend into one. A few further amendments are needed then the final policy to be agreed by Chair's action and sent to Clinical Policies Group. The Group received an update on the RRAILS work stream. A work plan to roll out Acute Deterioration compliance across the organisation has been identified by the RRAILS Improvement Manager. Acute Deterioration Programme Manager funding has been secured for a further 12months. This was deemed as essential to move forwards in improving our service and delivering high quality standardized care. We are grateful to the ILGs for their help with this.
ASSURE	 The Group received an update on the recruitment position of the ILG Critical care outreach Teams. No issues at M&C and RTE and recruitment is progressing at the Bridgend ILG. The Group was advised that Resuscitation trollies were to be purchased and installed where appropriate in Bridgend ILG to standardise practice across the Health Board. The CTMUHB RADAR Group has been established and is meeting quarterly. Three meetings have taken place 14.9.20, 14.12.20 & 15.3.2021. The Group received an update and noted progress on the creation of a Quality Dashboard to enable visibility and monitoring of RADAR related performance indicators across CTMUHB and ILGs.
INFORM	The Group was advised that there is a new All Wales DNACPR policy. The Group agreed following review that the All Wales Policy should be adopted by CTMUHB.
APPENDICES	NOT APPLICABLE