

Quality & Safety Committee

Tue 15 November 2022, 09:00 - 12:00

Virtually via Microsoft Teams

Agenda

09:00 - 09:00

0 min

1. PRELIMINARY MATTERS

Information Jayne Sadgrove, Vice Chair (Chair of the Committee)

1.1. Welcome & Introductions

Information Jayne Sadgrove, Vice Chair (Chair of the Committee)

Attending as Observers:
Dr Mary Self, Mental Health Medical Director
Melanie Barker, Deputy Director of Therapies & Health Sciences

1.2. Apologies for Absence

Information Jayne Sadgrove, Vice Chair (Chair of the Committee)

Hywel Daniel, Executive Director for People

1.3. Declarations of Interest

Information Jayne Sadgrove, Vice Chair (Chair of the Committee)

09:00 - 09:00

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2. SHARED LISTENING & LEARNING

2.1. Patient Story - Wellness Improvement Service Programme

Discussion Dr Liza Thomas-Emrus, Clinical Lead

09:00 - 09:00

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3. CONSENT AGENDA

3.1. FOR APPROVAL

3.1.1. Unconfirmed Minutes of the meeting held on 20 September 2022

Decision Jayne Sadgrove, Vice Chair (Chair of the Committee)

 3.1.1 Unconfirmed Mins Q&S Cmt 20.09.22 EWWPJGGJS.pdf (15 pages)

3.1.2.

Unconfirmed Minutes of the In Committee meeting held on 11 October 2022

Decision Jayne Sadgrove, Vice Chair (Chair of the Committee)


 3.1.2 Unconfirmed Mins In Committee Quality & Safety 11.10.22.pdf (2 pages)

3.1.3.

Quality & Safety Committee Terms of Reference Review

Decision Cally Hamblyn, Assistant Director of Governance & Risk

 3.1.3a Quality & Safety Committee Terms of Reference Review - Cover Paper.pdf (3 pages)

 3.1.3b Appendix 1 - Draft - GC01 - Standing Orders - Schedule 3.8 - Quality & Safety Committee ToR -reviewed 31.10.2022.pdf (11 pages)

3.2.

FOR NOTING

3.2.1.

Action Log

Information Cally Hamblyn, Assistant Director of Governance & Risk


 3.2.1 Action Log QSC 20.9.22.pdf (8 pages)

3.2.2.

Committee Annual Cycle of Business

Information Cally Hamblyn, Assistant Director of Governance & Risk

 3.2.2a Committee Cycle of Business - Cover Paper QSC 15 November 2022.pdf (2 pages)

 3.2.2b Quality & Safety Committee Cycle of Business November 2022.pdf (4 pages)

3.2.3.

Forward Work Programme

Information Cally Hamblyn, Assistant Director of Governance & Risk

 3.2.3 Quality & Safety Committee Forward Work Programme - 15 November 2022.pdf (9 pages)

3.2.4.

Welsh Ambulance Services NHS Trust Patient Experience Report

Information Greg Dix, Executive Nurse Director

This item has been moved to the main agenda at 6.11 as the Executive Nurse Director will provide a verbal update.

3.2.5.

Quality Governance - Regulatory Review Recommendations and Progress Updates

Information Greg Dix, Executive Nurse Director


 3.2.5 - Quality Governance - Regulatory Review Recommendations and Progress Update.pdf (6 pages)

3.2.6.

Health & Care Standards Annual Report

Information Greg Dix, Executive Nurse Director

 3.2.6a Health & Care Standards Annual Report QSC cover Nov 22 LM.pdf (6 pages)

 3.2.6b HCS Audit Report 2022 FINAL.pdf (72 pages)

3.2.7.

National Prescribing Indicator (NPI) Annual Report

Information

Dom Hurford, Executive Medical Director


 3.2.7 National Prescribing Indicator (NPI) Annual Report.pdf (11 pages)

3.2.8.

Clinical Education Annual Report

Information

Dom Hurford, Executive Medical Director

 3.2.8 Clinical Education Annual Report - V2.pdf (41 pages)

3.2.9.

Clinical Audit Quarterly Report

Information

Dom Hurford, Executive Medical Director

 3.2.9a Clinical Audit Quarterly Report - 2022NovVer1_0.pdf (7 pages)

 3.2.9b Clinical Audit Annual ReportV1_4.pdf (18 pages)

3.2.10.

Nosocomial Covid-19 Incident Management Programme

Information

Greg Dix, Executive Nurse Director

 3.2.10 CTM Nosocomial COVID-19 Incident Management Programme October 2022.pdf (9 pages)

3.2.11.

Human Tissue Authority Act Progress Report

Information

Gethin Hughes, Chief Operating Officer

 3.2.11 HTA Progress Report November 2022.pdf (7 pages)


3.2.12.


Annual Review 2021/22 – Welsh Risk Pool and Legal & Risk Services

Information

Stephanie Muir, Assistant Director of Concerns and Legal Services

 3.2.12a Annual Review 202122 – Welsh Risk Pool and Legal & Risk Services.pdf (3 pages)

 3.2.12b Annual Review 202122 – Welsh Risk Pool and Legal & Risk Services - 202209Sep09-Letter to CTMUHB.pdf (1 pages)

 3.2.12c Annual Review 202122 – Welsh Risk Pool and Legal & Risk Services - WRP Annual Review 2021-22 ENGLISH.pdf (55 pages)

09:00 - 09:00

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MAIN AGENDA

4.1.

Matters Arising not Considered within the Action Log

Discussion

Jayne Sadgrove, Vice Chair (Chair of the Committee)

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GOVERNANCE

5.1.

Organisational Risk Register – Risks Assigned to Quality & Safety Committee

Discussion

Cally Hamblyn, Assistant Director of Governance & Risk

To Follow

- 5.1a Organisational Risk Register November 2022 Review - QSC Report 15.11.2022.pdf (5 pages)
- 5.1b Master Organisational Risk Register -Final November 2022 - QSC Assigned Risks 15.11.2022.pdf (11 pages)

5.2.

Datix Cymru - Assurance Report

Discussion *Stephanie Muir, Assistant Director of Concerns and Legal Services*

- 5.2 Datix Cymru Incident Reporting.pdf (8 pages)

5.3.

Health, Safety & Fire Sub Committee Highlight Report

Discussion *Dilys Jouvenat, IM and Chair of the HS&F Sub Committee*

- 5.3a Health, Safety & Fire Sub Committee Highlight Report.pdf (4 pages)
- 5.3b HSFSC - Appendix 1 Health Safety & Fire Sub Committee Annual Report.pdf (8 pages)

5.4.

Infection, Prevention & Control Committee Highlight Report

Discussion *Debbie Bennion, Deputy Director of Nursing*

- 5.4 Infection, Prevention & Control Committee Highlight Report - Nov 22.pdf (3 pages)

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IMPROVING CARE

6.1.

Maternity and Neonatal Improvement Programme Highlight Report September 2022

Discussion *Suzanne Hardacre, Director of Midwifery /Sallie Davies, Deputy Medical Director*

- 6.1 Maternity & Neonatal Improvement Programme Highlight Report September 2022.pdf (43 pages)

6.2.

Ty Llidiard Progress Report

Discussion *Lauren Edwards, Executive Director of Therapies and Health Sciences*

- 6.2 Ty Llidiard Progress Report.pdf (12 pages)

6.3.

Quality Dashboard

Discussion *Louise Mann, Assistant Director of Quality, Safety & Safeguarding*

- 6.3 Quality Dashboard Rpt QSC 02.11.22 LMGDKNDH.pdf (38 pages)
- 6.3a QPAR_All Wales_Summary Dashboard_Sept22.pdf (1 pages)
- 6.3b QPAR_CTM_Summary Dashboard_Sept22.pdf (1 pages)
- 6.3c 20221010 Compliance Summary Alerts.pdf (2 pages)
- 6.3d 20221010 Compliance Summary Notices.pdf (4 pages)
- 6.3e Data Details_All Wales Dashboard.pdf (2 pages)
- 6.3f Data Details_UHB Dashboards.pdf (2 pages)
- 6.3g Bridgend QS Dashboard Sep-22 Final QSC 15 November 2022.pdf (6 pages)
- 6.3h Merthyr & Cynon QS Dashboard Sep-22 Final QSC 15 November 2022.pdf (6 pages)
- 6.3i RTE QS Dashboard Sep-22 Final QSC 15 November 2022.pdf (6 pages)

6.3.1.

First Quality & Safety Report: Mental Health Care Group

- 6.3.1 First Quality & Safety Report Mental Health Care Group - QSC 151122.pdf (13 pages)

6.3.2.

Care Group Exception Reports

Integrated Locality Group Exception Reports have been received and have been included as appendices to the Quality Dashboard Report

6.4.

Report from the Chief Operating Officer

Discussion *Gethin Hughes, Chief Operating Officer*

 6.4 COO's Report QS November 2022.pdf (6 pages)


6.5.

WHSSC Quality & Patient Safety Committee Chair's Report

Discussion *Dilys Jouvenat, Independent Member*

 6.5a WHSSC Quality & Patient Safety Committee Chairs report.pdf (14 pages)

 6.5b Appendix 2 WHSSC Quality Newsletter.pdf (16 pages)

 6.5c Appendix 3 - WHSSC Quality Internal Audit Report.pdf (11 pages)

6.6.

Learning from Mortality Reviews

Discussion *Dom Hurford, Executive Medical Director*

 6.6 Learning from Mortality Reviews Update 20102022.pdf (10 pages)

6.7.

Quality Strategy

Discussion *Lauren Edwards, Executive Director of Therapies & Health Sciences*

 6.7a Quality Strategy - Cover Paper Nov 22 v2.pdf (3 pages)


 6.7b Quality Strategy 0.21.pdf (15 pages)

6.8.

Civica - People's Experience Feedback System

Discussion *Sharon O'Brien, Assistant Director of Nursing & Peoples Experience*

 6.8a Civica - Peoples Experience Feedback System.pdf (7 pages)

 6.8b Appendix A CIVICA Report - Push_Report_Heat Map Sept 22.pdf (6 pages)

6.9.

Peer Review of Urgent Primary Care (Out of Hours and UPCC) in CTMUHB


Discussion *Julie Denley, Deputy Chief Operating Officer (Primary Care, Community, Mental Health and Learning Disabilities)*

 6.9 Peer Review of Urgent Primary Care (OOH and UPCC) In CTMUHB.doc.pdf (12 pages)

6.10.

Ward Based Nursing Assurance Report

Discussion *Becky Gammon, Head of Nursing Professional Standards & Education*

 6.10 Ward Based Nursing Assurance Report.pdf (6 pages)

6.11.

Welsh Ambulance Services NHS Trust Patient Experience Report

Greg Dix, Executive Nurse Director

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7. ANY OTHER BUSINESS

Discussion *Jayne Sadgrove, Vice Chair (Chair of the Committee)*

7.1. Highlight Report to Board

Jayne Sadgrove, Vice Chair (Chair of the Committee)

7.2. How did we do in this meeting

Discussion *Jayne Sadgrove, Vice Chair (Chair of the Committee)*

09:00 - 09:00
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8. DATE AND TIME OF NEXT MEETING - TUESDAY 24 JANUARY 2023 AT 1.30PM

09:00 - 09:00
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9. CLOSE OF MEETING