



AGENDA ITEM

3.2.8

QUALITY & SAFETY COMMITTEE

**REGULATORY REVIEW RECOMMENDATIONS AND PROGRESS UPDATE
HEALTHCARE INSPECTORATE WALES (HIW) ROUTINE QUALITY
CHECKS**

Date of meeting

19th July 2022

FOI Status

Open/Public

**If closed please indicate
reason**

Not Applicable - Public Report

Prepared by

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Report purpose

FOR NOTING

**Engagement (internal/external) undertaken to date (including
receipt/consideration at Committee/group)**

Committee/Group/Individuals

Date

Outcome

(Insert Name)

(DD/MM/YYYY)

Choose an item.

ACRONYMS

HIW

Healthcare Inspectorate Wales

ED

Emergency Department

CDU

Clinical Decisions Unit

PCH

Prince Charles Hospital

1. SITUATION/BACKGROUND

1.1 This report is based on Healthcare Inspectorate Wales activity and correspondence since the last report for committee in May 2022. Due to the bi-monthly nature of these meetings, this report will cover the 6-week period from the previous report.

An overview table has been included below in 2.1 to provide a 'summarised snapshot' of most recent activity.

This report also includes information from the recently published HIW Operational Strategy 2022-2023 on 23/06/22.

HIW Operational Strategy 2022-2023

HIW's strategy identifies four main priorities for the coming year. These priorities define key deliverables and how these will be measured to ensure HIW meet actions and statutory duties. HIW's focus this year is on driving and strengthening engagement and improving and modernising ways of working. They will continue to share lessons learnt, reflect on what has worked well and take forward the learning to continually improve.

The four main priorities are:

- Focus on the quality of healthcare provided to people and communities as they access, use and move between services.
- Adapt their approach to ensure they are responsive to emerging risks to patient safety.
- Work collaboratively to drive system and service improvement within healthcare
- Support and develop their workforce to enable them, and the organisation to deliver the priorities.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Quarter 1 (May – 27th June 2022) HIW activity across Cwm Taf Morgannwg University Health Board included:

Number of Unannounced	0
Number of Announced	0
Number of patient concerns via HIW	0
Number of concerns raised through Fieldwork	1
Number of ongoing improvement plans	3

2.2 **Unannounced Inspections:**

There have been no unannounced inspections.

2.3 **Announced Inspections:**

There have been no announced inspections in quarter 1.

2.4 **Public Concerns raised via HIW**

The Health Board has not received any patient concerns via HIW since the last report.

2.5 **Ongoing HIW activity**

- i. *Prince Charles Hospital ED & CDU:* HIW accepted the improvement plan sent at the end of March 2022. Factual accuracy comments from the Health Board were reviewed and updated by HIW in early April. The full report was published on the HIW website on the 20th April 2022. Progress regarding actions was due by the service for submission early June 2022. No further update has been received at present, however this is expected to be received imminently. Further progress will be shared in future reports. Ongoing progress is not required to be sent to HIW before the expected dates of completion. However, as a Health Board we feel it is essential to provide an update approximately every 3 months to demonstrate the developments which have taken place.

ii. *Ty Llidiard Concerns:* Following the unannounced inspection in Ty Llidiard in November 2021, a populated Improvement Plan was submitted to HIW and subsequent Factual Accuracy was received and approved from HIW. An update on the progress of the Improvement Plan was submitted to HIW in June 2022. Some of the evidence submitted included:

- *Documentation audits*
- *Environment audits/ checklists*
- *Information leaflet*
- *Health & Safety policy*

No feedback has been received to date from HIW regarding the quantity or quality of evidence submitted.

iii. **Maternity Services: POW**

Following the unannounced inspection in Maternity services in the Princess of Wales Hospital in March 2022, the embargoed report was received into the Health Board in May 2022 and provided an opportunity to comment regarding factual accuracies.

A number of the actions include:

- The Health Board must ensure that staff maintain patient information confidentially in the ward offices
- The Health Board should consider consultant job plans that formally allocate a separate consultant to supervise the caesarean section lists and gynaecology work
- The Health Board must ensure that ongoing environmental improvements continue to reflect modern day maternity care
- The Health Board must ensure that the controlled drugs book is accurately completed and entries comply with health board policies.
- The Health Board must ensure that medical discussions and decisions are accurately recorded in patient records
- The Health Board must ensure that occupational health referrals are dealt with in a timely manner

The Service provided an improvement plan in May 2022. This improvement plan has a proposed date of completion for actions end of August 2022. A summary of the improvements made will be reported at the September 2022 committee.

2.6 **Local Reviews:**

HIW are conducting a local review of mental health services across CTM UHB as part of HIWs annual review programme for 2021-22.

The review is focusing and assessing the quality and safety arrangements in relation to the discharge of adult patients from inpatient mental health units, back into the community. A list of anonymised patients who have been discharged from inpatient units from 24 February 2021 to February 2022 has been submitted and interviews with staff have taken place as part of the review.

'Do the current arrangements for the discharge of patients from inpatient mental health services into the community support the delivery of safe, effective and timely care?'

Estimated Timescales for the Review:

- Fieldwork planning and documentation review has taken place between January & March 2022
- Fieldwork commenced in April and ended in May 2022
- Publication of the HIW report is expected in August 2022

Following the field work exercise, concerns were raised by HIW which required an immediate response and assurance.

A summary of the concerns raised were:

- Concerns around communication across teams, particularly between inpatient, primary and community services
- Staff not being appropriately trained in risk assessments
- Patients not always being involved in the planning of their discharges
- Appropriate actions not in place prior to discharge to ensure patients can be discharged safely.

Written assurance was provided by the Director of Mental Health and an improvement plan put in place to address the concerns in detail. A number of the improvements include:

- Further enhancing training needs analysis for staff
- Ensure presence of dedicated community clinicians in all inpatient multidisciplinary discussions and discharge planning meetings
- Ensure all discharge planning is multidisciplinary and Consultant led.
- All discharge documentation and planned communication will have senior clinical oversight.

2.7 National Review Patient Flow (Stroke Pathway)

A National Review is underway, reviewing patient flow with a focus to gain a greater understanding of the challenges that health care services face in relation to how patients flow through healthcare systems. In addition, it will test if arrangements for patient flow are robust. As part of the test process, HIW will focus on patients travelling through the stroke pathway. Leads have been identified and work is underway. HIW had an onsite visit to the Princess of Wales Hospital for 3 days from 23-25 May 2022. Fieldwork concluded at the end of June. No feedback has been provided since the onsite visit or field work to date. Feedback will be provided at the September 2022 committee.

- 2.8 HIW Improvement Plans for each Integrated Locality Groups (ILG's) are reported to the ILG Quality, Safety and Patient Experience Groups. These are reviewed, monitored and reported against for assurance of compliance and lessons learned. Where there are any themes or trends, the ILG's share this learning through their governance groups.
- 2.9 Further work is currently being scoped to use the AMaT system to capture the actions arising from HIW activity to allow themes and trends to be identified and allow one dedicated space to capture oversight of HIW actions/ recommendations across the Health Board.

All HIW Summary Findings can be accessed via the following link:
<https://hiw.org.uk/>

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

There are no key matters for escalation to Board/ Committee.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Subject to the findings and outcomes of the HIW reviews.
Related Health and Care standard(s)	Staff and Resources
	All of the Healthcare Standards Governance, Leadership & Accountability Staff & Resources Staying Healthy Safe Care Individual Care Timely Care Dignified Care Effective Care



Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.
	If no, please provide reasons why an EIA was not considered required in the box below.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
	Subject to the findings and outcomes of the HIW reviews
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

5.1 The Committee are requested to **NOTE** the report.