



**AGENDA ITEM**

3.2.9

**Quality and Safety Committee**

**HIGHLIGHT REPORT FROM THE RECOGNISING ACUTE DETERIORATION AND RESUSCITATION (RADAR) GROUP**

**DATE OF MEETING**

19/07/2022

**PUBLIC OR PRIVATE REPORT**

Public

**IF PRIVATE PLEASE INDICATE REASON**

Not applicable

**PREPARED BY**

Janet Gilbertson – Head Of Clinical Education

**PRESENTED BY**

Dom Hurford – Executive Medical Director

**EXECUTIVE SPONSOR APPROVED**

Dom Hurford – Executive Medical Director

**REPORT PURPOSE**

For Noting

**ACRONYMS**

AKI Acute Kidney Injury

CPR Cardio Pulmonary Resuscitation

ED Emergency Department

ESR Electronic Staff Record

ICT Information Communication Technology

ILG Integrated Locality Group

M&C Merthyr & Cynon

PCH Prince Charles Hospital

RADAR	Recognising Acute Deterioration and Resuscitation
RGH	Royal Glamorgan Hospital
YGT	Ysbyty George Thomas
RTE	Rhondda Taf Ely
RRAILS	Rapid Response to Acute Illness Learning Set

## 1. PURPOSE

- 1.1 This report has been prepared to provide the Committee with details of the key issues considered by the RADAR Group at its meeting on May 23<sup>rd</sup> 2022.
- 1.2 The group reports to the Quality & Safety Committee and Executive Leadership Group
- 1.3 Key highlights from the meeting are reported in section 2, which have been RAG rated for ease of reference.
- 1.4 The Committee are requested to **DISCUSS** and **NOTE** the report and the actions being taken.

## 2. HIGHLIGHT REPORT

<b>ALERT / ESCALATE</b>	
<b>ADVISE</b>	<ul style="list-style-type: none"> <li>The Group <b>reviewed</b> the current organisational risk position regarding Resuscitation Training compliance. The Group <b>noted</b> progress in trajectory of training compliance and that ESR is now live with the new training standards. The Group <b>agreed</b> that the risk has reduced due to the work completed and the current Covid demand situation had stabilised.</li> <li>The Group <b>received</b> further updates on the RRAILS work stream. The Group <b>noted</b> the significant <b>progress</b> made so far with the comprehensive work plan and that the focus has now moved to sepsis pathway improvement. The Group <b>noted</b> and <b>agreed</b> that permanent funding for the RADAR Clinical Lead and the Acute Deterioration Lead Posts is essential to continue to make progress and ensure equity and continuity of service and patient safety across the health board.</li> </ul>



<b>ASSURE</b>	<ul style="list-style-type: none"><li>From ILG updates received we were <b>advised</b> that the closure of Ysbyty Seren means Resus training for <b>RTE and Bridgend ILGs</b> is currently being delivered from Ysbyty George Thomas. The Group <b>noted</b> and <b>agreed</b> suitable permanent accommodation arrangements still urgently needs to be agreed (<b>this issue has been considered by the Executive Leadership Group</b>).</li><li>The Group <b>received</b> an update and was <b>advised</b> that progress to create a RADAR Quality performance dashboard (aim to monitor RADAR related performance indicators more visibly) has been delayed due to the lack of availability of resource to support in the Performance Information team. The absence of a functional Quality Assurance Dashboard impairs the RADAR committee, ILGs and clinicians from rapidly identifying areas needing focus for acute deteriorating and resuscitation issues. This has some impact on organisational risk (<b>this issue has been considered by the Executive Leadership Group</b>).</li><li>In light of the proposed organisational restructure the Group reviewed the potential impact on RADAR and its locality sub-structure. It was <b>agreed</b> that there would still need to be RADAR clinical leadership locally at each acute site and to continue with the local RADAR meetings for now. The Group also agreed that the overarching RADAR group meet <b>three</b> times over the coming year and review the position again when re-structure is complete and embedded.</li><li>The Group was <b>advised</b> that the business case for an automated CPR device is being progressed for M&amp;C ILG.</li><li>The Group was <b>informed</b> of progress in resolution of the situation regarding cardiac arrest calls from Ty Llidiard. A process has been agreed and is now live. Any future significant events will be brought to the RADAR committee for review and to make any relevant suggestions in emergency care delivery.</li><li>The Group was <b>updated</b> on the progress of work on adapting the All Wales Treatment Escalation Plan for use across CTMUHB.</li><li>The Group was <b>informed</b> that both secondary care and community NEWS charts are functioning well with an ongoing audit process established.</li><li>Sepsis Tool is now being trialed in Emergency Departments</li></ul>
<b>INFORM</b>	<ul style="list-style-type: none"><li>The Group was <b>informed</b> that;<ul style="list-style-type: none"><li>A Critical Care Outreach Standard Operating Procedure has been approved.</li><li>NEWS and Escalation Procedure has been approved.</li></ul></li></ul>
<b>APPENDICES</b>	<b>NOT APPLICABLE</b>