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5.2.1

QUALITY & SAFETY COMMITTEE

LEARNING FROM EVENTS REPORTS

Date of meeting	24/01/2023
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Stephanie Muir, Assistant Director of Concerns & Claims
Presented by	Stephanie Muir, Assistant Director of Concerns & Claims
Approving Executive Sponsor	Executive Director of Nursing
Report purpose	FOR DISCUSSION / REVIEW

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		
LFERs	Learning from Events Reports	

1. SITUATION/BACKGROUND

1.1 The Health Board are required to submit Learning from Events Reports (LFERs) to Welsh Risk Pool (WRP) in respect of learning information relating to claims and redress cases in order that costs can be reimbursed.



- 1.2 LFERs should be submitted to WRP along with evidence of learning as follows:
 - Claims 60 working days from decision to settle.
 - Redress 60 working days from admission of qualifying liability.
- 1.3 The Welsh Risk Pool Committee relaxed this deadline during the pandemic period.
- 1.4 The Welsh Risk Pool Committee reinstated this deadline with effect from 1st November 2021. This gave a deadline of 31st January 2022 for submission of cases.
- 1.5 The Health Board already had a previous backlog of learning from events reports and a list of permanent deferred cases. The completion of these was exacerbated by the reinstated targets.
- 1.6 In October 2022, the Health Board were notified of 4 outstanding cases that were going to be recommended at WRP committee for permanent deferral. Before the committee date the Health Board provided the WRP with satisfactory evidence to ensure that did not happen.
- 1.7 The new Once for Wales Concerns Management system was updated to allow the legal team to efficiently track outstanding and deferred LFER's.
- 1.8 A full reconciliation of Welsh Risk Pool and CTM LFER data fully reconciled for the first time in November 2022.
- 1.9 In November 2021, the Health Board received the outcome of the Welsh Risk Pool's review of the management of redress, claims and inquests. In relation to LFERs this found:



"We found that there is a lack of clarity regarding which teams are responsible for the development of actions in response to issues identified in legal cases and that the introduction of the Taskforce has accentuated this situation. The arrangements do not align to the current Health Board governance structure and there is a lack of oversight by leadership teams who are accountable for service design and provision. Evidence seen at the national Learning Advisory Panel highlights that effective Learning from Events can only be achieved by clinical and service teams who are close to the source of the issues identified in a case"

The Health Board accepted the Welsh Risk Pool Review and have developed an action plan against recommendations. Although the position in relation to the historic legacy cases has diminished, a backlog of newer cases is starting to build.

- 1.10 The new operating model and proposed new arrangements for quality, safety and governance has provided an opportunity to revisit how learning from events reports are managed within CTM.
- 1.11 Within the new arrangements it is proposed that the Patient Safety Improvement Managers who work more closely with care groups take a lead on facilitating completion of LFERs.

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

- 2.1 The Health Board have reviewed the current outstanding LFERs with an approximate figure of 124 outstanding LFERs that have not been submitted or approved by the WRP.
- 2.2 This equates to approximately £18,000,000

Claims

TOTAL - 82

- 50 Red deferred (34 cases where blank LFER's were submitted to meet deadline)
- 15 Amber deferred (seen by panel, but requires some further evidence)
- 17 LFER submitted and awaiting WRP decision (8 were submitted blank)



Redress

TOTAL - **42**

- 6 Red deferred (3 cases where blank LFER's were submitted to meet deadline)
- 14 Amber deferred (seen by panel, but requires some further evidence)
- 22- LFER submitted and awaiting WRP decision (6 were submitted blank)

Claims

Bridgend - £365,000

Merthyr Cynon - £11,096,115

Rhondda Taf Ely - £6,538,306

Corporate (facilities etc) £90,000

Redress

£150,000

Note: These figures change daily

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

- 3.1 Whilst these figures remain high, it should be noted that considerable progress has been made to reduce the number of outstanding LFERs. With costs associated reducing from £52 million to £18 million. With 3 LFERs with substantial costs associated being submitted and approved.
- 3.2 The Health Board still carries a risk that the non-submission of LFERs can result in the Welsh Risk Pool imposing financial penalties.
- 3.3 The Health Board needs to move to a position whereby learning is recorded/captured in a centralised way at point of incident/complaint/claim.

3.4 Actions taken:

- Reports/dashboards developed for the newly formed care groups.
- LFER drop in sessions undertaken over the past 6 months
- LFER how to guide developed and shared



- Learning Framework developed
- Shared Learning Event undertaken
- Learning Repository developed to capture learning
- Training undertaken on Datix, highlighting the need to complete actions and upload evidence of actions

Actions in progress:

- LFER facilitation moved to patient safety improvement managers who work more closely with care groups.
- A clear escalation process for missed deadlines needs to be formulated and agreed.
- Ensure accountability for learning is clear in the new care group set up.
- Additional training for the Patient Safety Improvement Managers

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)		
	There are quality and safety implications. If learning from events does not occur, improvement actions and preventable measure will not be put in place and therefore incidents/complaints can reoccur.		
Related Health and Care standard(s)	Safe Care		
	If more than one Healthcare Standard applies please list below:		
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	Choose an item. 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 to be 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 /	Yes (Include further detail below)		



Impact	Resource will be required to take forward this work.
Link to Strategic Goals	Improving Health

5. RECOMMENDATION

- 5.1 The Committee are asked to:
 - **NOTE** progress made.
 - **SUPPORT** actions taken and in progress.