



**AGENDA ITEM**

6.5e

**QUALITY & SAFETY COMMITTEE**

**HIGHLIGHT REPORT FROM THE DIAGNOSTICS, THERAPIES,  
PHARMACY AND SPECIALTIES QUALITY, SAFETY, RISK &  
EXPERIENCE (QSRE) MEETING**

<b>DATE OF MEETING</b>	24 May 2023
<b>PUBLIC OR PRIVATE REPORT</b>	Public
<b>IF PRIVATE PLEASE INDICATE REASON</b>	Not Applicable - Public Report

<b>PREPARED BY</b>	Carl Verrecchia, Care Group Service Director, Diagnostics, Therapies, Pharmacy & Specialities
<b>PRESENTED BY</b>	Greg Dix, Executive Nurse Director
<b>EXECUTIVE SPONSOR APPROVED</b>	Greg Dix, Executive Nurse Director
<b>REPORT PURPOSE</b>	Noting

**ACRONYMS**

PCH	Prince Charles Hospital
RGH	Royal Glamorgan Hospital
POW	Princess of Wales Hospital
ITU	Intensive Treatment Unit
HTA	Human Tissue Authority
DTPS	Diagnostics, Therapies, Pharmacy & Specialties
HIW	Healthcare Inspectorate Wales
IR(ME)R	Ionising Radiation (Medical Exposure) Regulations

## 1. PURPOSE

- 1.1 This report had been prepared to provide the Committee with details of the key issues considered by the Diagnostics, Therapies, Pharmacy & Specialties Quality, Safety, Risk & Experience Group through April 2023.
- 1.2 Key highlights from the meeting are reported in section 2.
- 1.3 The Committee is requested to **NOTE** the report.

## 2. HIGHLIGHT REPORT

<b>ALERT / ESCALATE</b>	<ul style="list-style-type: none"> <li>No new alerts</li> </ul>
<b>ADVISE</b>	<p><u>Pharmacy and Medicines Management</u></p> <ul style="list-style-type: none"> <li>The Medicines Management Quality and Safety Committee have approved the following policies and procedures: <ul style="list-style-type: none"> <li>Terms of reference (return)</li> <li>Alert distribution process (return)</li> <li>Stock shortages procedure (return)</li> </ul> </li> <li>The CTM Use of Medicines Policy is under development. A scoping exercise has been completed to determine what we have, what needs updating and what needs to be included. Work will now proceed to completing the Medicines Policy, which will then be forwarded for approval/ratification.</li> <li>Work is underway to ensure appropriate monitoring of patients prescribed biological therapies and received via Homecare Services, as a recent local audit identified non-compliance with national standards.</li> <li>Staffing resources still approximately 50% less than national standards; invest to save to address this nearing approval</li> </ul> <p><u>Therapies</u></p> <ul style="list-style-type: none"> <li>Provision of an effective and comprehensive stroke service across CTM (encompassing prevention, early intervention, acute care and rehabilitation), remains a high risk on the organisational risk register. Incidents relating to patients accessing the stroke pathway rose significantly throughout April. Weekly multi-disciplinary stroke task and finish group meetings</li> </ul>

	<p>are enabling the development of a Standard Operating Procedure (SOP) to address the delays in accessing specialist stroke intervention.</p> <p><u>Radiology</u></p> <ul style="list-style-type: none"> <li>Planned care recovery proposal to significantly reduce waiting times for non obstetric ultrasound has been approved and will commence through May to help our patients have quicker access to diagnostics and ongoing treatment.</li> <li>Internal audit will be revisiting the radiology departments as a follow up through June / July 2023.</li> </ul> <p><u>Pathology</u></p> <ul style="list-style-type: none"> <li>Some further high risks identified that are being worked through in terms of mitigating actions around blood bank cover issues at PCH, LIMS support, and PM backlogs linked to HM coroner and Medical Examiner (ME) service.</li> <li>Very positive HTA report received following on from inspection, fuller detail included in Chief Operating Officers (COO) report.</li> </ul>
<b>ASSURE</b>	<p><u>Pharmacy and medicines management</u></p> <ul style="list-style-type: none"> <li>An action tracker has been developed and is being sent out weekly to monitor progress with applications for controlled drugs licences to ensure compliance with the Misuse of Drugs Act. The licences required for compliance have been identified, information and support provided to the teams applying for licences, and the tracker put in place to ensure this progresses in a timely fashion.</li> <li>Lack of pharmacy support to maternity identified in previous Q&amp;S reports has been rectified: a clinical pharmacist and pharmacy technician resource has been identified and assigned. The PCH Head of Pharmacy seeks to further strengthen this team in the future.</li> </ul> <p><u>Radiology</u></p> <ul style="list-style-type: none"> <li>Radiology Quality Assurance framework has now been ratified, no further updates from HIW and Learning From Events Reports (LFERs) ongoing.</li> <li>The Repetitive Strain Injury (RSI) RIDDORs and impact on waiting times (in process of adding this to RR and scoring). This is linked to Sonographers and the repetitive nature of Obstetric scanning.</li> </ul>

## INFORM

### Pharmacy and medicines management

- Regional Quality Assurance inspection of RGH aseptic unit due 12<sup>th</sup> and 13<sup>th</sup> June.
- Multiple complaints with Sciensus– escalated to WMHC (inc delayed deliveries, incorrect patient registration)

### Therapies

- The Verbal abuse to staff mentioned in the April report is continuing.  
Exploring support for a HB comms campaign with our local communities, explaining the impact (ABUHB were running a campaign that included statistics on how staff are leaving the profession due to this, and the impact on communities if staff continue to leave).
- Therapies have noted a trend in incidents related to newly qualified staff who trained during the COVID-19 lockdown. The breadth of multi-disciplinary working was reduced during this time, and the impact is now being seen. As a result, clinical supervision has been increased.
- An Allied Health Professionals team in Bridgend were finalists at the UK-wide Advancing Healthcare Awards for their multi-disciplinary approach to managing swallowing, nutrition and medication in elderly care home residents. The project showcased how an integrated AHP team can promote positive patient experience, improve clinical outcomes, reduce costs and contribute to a greener environment.
- CTM have appointed the first Consultant Podiatrist post in NHS Wales. The post holder provides strategic and clinical leadership on expert practice for the management of foot and ankle care. His specialist skills are of huge benefit to patients.

### **Pathology Services**

- GP electronic test requesting (**GPTR**): there has been a drive to increase uptake in Primary care led by the Biochemistry service, we have finally implemented in Morlais Medical Practice which is one of the largest practices in the Merthyr area. This has now boosted compliance to 93% uptake making us the leading HB in Wales at the last report. This has a significant positive impact on patient safety in terms of accuracy of data into

	<p>Pathology systems, and also improved laboratory workflows.</p> <ul style="list-style-type: none"> <li>• Notable reduction in concerns and incidents being reported around the Cell Path backlogs.</li> <li>• <b>Complaints compliance in DTPS for April is currently as follows:</b></li> </ul> <p><b>Therapies</b> – 50% (6 complaints in total 3 were resolved with early resolution 20 3 out of compliance)</p> <p><b>Radiology</b> – 0% (8 complaints in total with 6 being resolved early so 2 out of compliance)</p> <p><b>Pathology</b> – 100% (1 complaint)</p> <p><b>Medicines Management</b> – 100% no complaints received</p> <p>Overall compliance with 30 days in April is 67%</p> <ul style="list-style-type: none"> <li>• <b>Patient Safety Incidents with moderate or severe harm in month (April)</b></li> </ul> <p><b>Therapies</b> – 1 moderate</p> <p><b>Radiology</b> – 0</p> <p><b>Pathology</b> – 12 moderate and 2 severe</p> <p><b>Medicines management</b> – 2 moderate and 1 severe</p> <p>Further work will be done in DTPS on management of complaints and improving the quality of responses and compliance within 30 days during May.</p>
<b>APPENDICES</b>	<b>NOT APPLICABLE</b>