



AGENDA ITEM

7.3.2

QUALITY & SAFETY COMMITTEE

BRIDGEND ILG QUALITY SAFETY AND EXPERIENCE REPORT

Date of meeting	18/01/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Ana Llewellyn, Nurse Director - Bridgend ILG
Presented by	Ana Llewellyn, Nurse Director – Bridgend ILG
Approving Executive Sponsor	Executive Director of Nursing
Report purpose	FOR NOTING

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

Committee/Group/Individuals	Date	Outcome
ILG Leadership Team	04/01/2022	SUPPORTED

ACRONYMS

ILG	Integrated Locality Group
PALS	Patient Advice and Liaison Service

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to provide members with an update on quality and safety issues in Bridgend ILG.
- 1.2 As the ILG has prioritised deploying colleagues to the vaccination programme during December and is in the process of managing the

omicron variant and associated risks, this report is limited to providing a brief overview of the key challenges on this occasion.

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

2.1 Booster Vaccination Programme

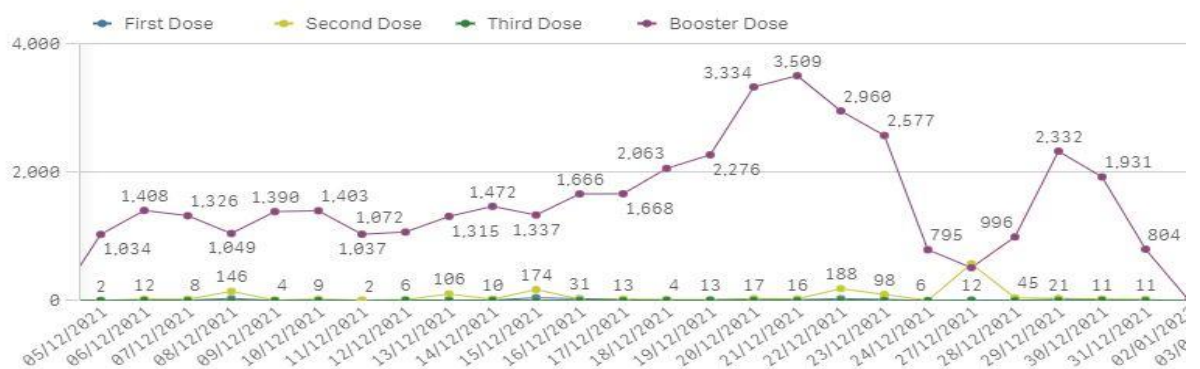
2.2 During December all Health Boards in Wales were asked to prioritise the booster vaccination programme, with the aim of offering a booster to all eligible adults before the end of December in order to reduce the risk of overwhelming hospital admissions with the new covid variant.

2.3 In order to ensure that this target was met, all clinical staff in leadership and support roles were asked to support the vaccination programme. All Clinical Service Groups in Bridgend ILG were asked to review their service provision and to provide support where possible. Welsh Government advised that when considering the deployment of school nursing and health visitors Health Boards should give consideration to ten principles. Bridgend ILG can confirm that there was no impact on the ten principles as a result of sessional support to the vaccination programme.

2.4 The redeployment did however impact on routine oversight and leadership activity for a three week period but this was mitigated by it being the festive period when there are traditionally fewer planned oversight activities taking place.

2.5 All colleagues in Bridgend supported the vaccination effort and at the end of December all eligible people had been offered a booster and 77.18% of the eligible population had taken up that offer.

Vaccine Doses Administered by Dose Number



2.6 **Management of Omicron**

2.7 Despite the success of the booster vaccination programme, the new Omicron variant poses significant challenge to the sustainability of services.

2.8 As it is highly transmissible there is particular concern about the potential for hospital outbreak. In order to reduce the risk to hospital patients, steps have been taken to reduce footfall on hospital sites and to reduce contact where possible. Bridgend ILG colleagues have been asked to work from home where possible, community caseloads have been reviewed and contacts prioritised. In addition, for a three week period routine activity has been limited to covid, unscheduled care, maternity and children's services, mental health and cancer care.

2.9 Essential visitors have been asked to do a lateral flow test prior to attending hospital sites. PALS are providing support to families who are unable to visit.

2.10 During January clinical teams have been asked to prioritise clinical activity. The impact of this will be that it will not be possible to adhere to usual timescales for typical governance activities, such as responding to complaints.

2.11 Learning from previous waves is that Clinical Service Groups are required to dynamically risk assess and respond, rather than to respond with the blanket cessation of services.

2.12 **Staffing Challenges**

2.13 The Omicron modelling suggests a significant impact on staffing and Clinical Service Groups are therefore prioritising essential clinical activity during January.

2.14 Daily staffing meetings are being conducted and agile deployment of staff to areas of most need is being prioritised. In addition risk assessments and risk management plans will be completed when there are concerns that care may be compromised as a consequence of staffing levels.

2.15 As in previous waves, contingency planning has some value but as it has not been possible to predict where absence will occur, service leaders are responding dynamically to utilise staffing resource in areas of most need.

2.16 As this wave is predicted to have a shorter duration, there are no plans for medium term redeployment.

2.17 **Additional Capacity**

2.18 In order to support increased demand, Ysbyty'r Seren has increased capacity from 33 to 40 beds.

2.19 Risks associated by nurse staffing ratios per shift are mitigated by an addition of an additional supervisory nurse leader. Additional facilities colleagues have been rostered to mitigate a risk associated with fire evacuation.

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

3.1 Members are asked to note the risks associated with the new variant and the proactive actions taken by the Bridgend ILG to protect the public.

3.2 The consequence of staffing challenges and prioritising clinical activity inevitably impacts on governance activity, such as routine quality and patient safety oversight. The current modelling is indicating a short-lived peak and it is therefore the ILG assessment that these activities can be recovered from February onwards.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	This report focuses entirely on quality, safety and patient experience issues
Related Health and Care standard(s)	Choose an item.
	If more than one Healthcare Standard applies please list below: Safe 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 to be required in the box below.



	No new, changed or withdrawn policies. Services that have been temporarily stood down are managed through the Welsh Government Essential Services Framework.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Improving Health

5. RECOMMENDATION

5.1 Members are asked to **NOTE** this report.