



AGENDA ITEM

3.2.11

QUALITY & SAFETY COMMITTEE

**Update Report on progress following
Internal Audit on Concerns & Welsh Risk Pool Review
on Claims/Redress/Inquests**

Date of meeting	20/09/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Stephanie Muir, Assistant Director of Concerns & Claims
Presented by	Georgina Galletly, Director of Corporate Governance
Approving Executive Sponsor	Director of Corporate Governance / Board Secretary
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

WRP	Welsh Risk Pool
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1. SITUATION/BACKGROUND

1.1 The Health Board had experienced challenges in relation to the management of claims and redress cases over recent years, with the Welsh Risk Pool Creditor/Debtor level rising to an unacceptably high value and penalties applied by the Welsh Risk Pool Committee for deviation from the WRP Reimbursement Procedures.

- 1.2 With the challenges in respect of the management of claims and inquests, the Health Board commissioned a review by Welsh Risk Pool.
- 1.3 At the same time, in line with the Internal Audit Plan for 2021/22, a review of processes for dealing with concerns was completed.
- 1.4 The Health Board underwent the following reviews in the latter half of 2021:
 - The Management of Concerns – Internal Audit Review
 - Review of procedures for the management of claims, redress cases and coronial investigations at CTM – Welsh Risk Pool
- 1.5 Reports were received at the end of last year.
- 1.6 The Health Board have accepted the Welsh Risk Pool Review and Internal Audit Review and have developed detailed action plans against recommendations.
- 1.7 This report gives an update of progress against actions and any barriers/challenges facing achievement of actions

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

- 2.1 The Welsh Risk Pool review on the management of claims, redress cases and coronial investigations had 9 overarching recommendations, which had 28 assigned management actions to achieve the recommendations.
- 2.2 Good progress has been made to complete the Welsh Risk Pool actions, with only 8 actions remaining open and in progress.
- 2.3 There are no specific challenges in relation to implementation of actions, however actions already taken and planned actions need to be aligned to any changes to the operating model.
- 2.4 The Internal Audit Review of Complaints management had 28 overarching recommendations with 35 assigned actions to achieve the recommendations.



- 2.5 Progress has been made on many actions, however 19 actions remain open, with progress delayed due to staff absence in the key complaints management role. In addition, the impending changes to the operating model, will have a direct impact on any changes to policies and Standard Operating Procedures (SOPs) that will need to be worked through.
- 2.6 The complaints manager post has now been successfully recruited into and on commencement, a focus will be on the completion of the remaining actions as a priority.

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

- 3.1 Good progress continues to be made, with it noted that the main challenges to progress, namely staff absence and changes to the operating model, are now in hand and therefore it is expected that any outstanding actions will be completed by the end of the financial year.
- 3.2 A piece of work is required in respect of reviewing any actions already completed, to ensure that they are aligned with any changes being made to the operating model.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	There are quality and safety implications. If actions arising from WRP and IA reviews are not undertaken and improvements note made.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	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.	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.



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) Resource realised through the operating model re-alignment will be required to take forward this work. An 'invest to save' case is also being progressed to cover immediate resources to tackle the high number of Redress Cases being managed by the HB.
Link to Strategic Goals	Improving Health

5. RECOMMENDATION

5.1 The Committee is asked to:

- Note progress made and any challenges highlighted.