



AGENDA ITEM

3.2.6

QUALITY & SAFETY COMMITTEE

**HIW/AW JOINT REVIEW OF QUALITY GOVERNANCE
SUMMARY OF PROGRESS MADE – MAY 2022**

Date of meeting	24 May 2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	G Galletly, Director of Corporate Governance
Presented by	G Galletly, Director of Corporate Governance
Approving Executive Sponsor	Director of Corporate Governance / Board Secretary
Report purpose	FOR NOTING

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

AW	Audit Wales
HIW	Healthcare Inspectorate Wales
CTMUHB	Cwm Taf Morgannwg University Health Board

1. SITUATION/BACKGROUND

- 1.1 At the November 2019 CTMUHB Board meeting, Members received a report following a joint review undertaken by Wales Audit Office (now Audit Wales) and Healthcare Inspectorate Wales of quality governance arrangements at Cwm Taf Morgannwg University Health Board (CTMUHB).

- 1.2 The publication of the report highlighted a number of significant findings for CTMUHB to which the Health Board provided a comprehensive response to the recommendations which was received and approved at the subsequent Board meeting in January 2020.
- 1.3 Progress against these recommendations and the management actions in response, has been included in the wider monitoring by the Board and Welsh Government in the context of enhanced performance arrangements associated with CTMUHB being in Special Measures for maternity services and Targeted Intervention for quality & governance, leadership & culture and trust & confidence.
- 1.4 A year on from the original Joint Review Report, Audit Wales and Healthcare Inspectorate Wales undertook a follow-up review of the Health Board to assess progress against the original 14 recommendations made.
- 1.5 The findings of the follow-up review were reported to the Board at their meeting on 27th May 2021 which then led to a review of the action plan in light of the follow-up report to ensure they remained focused.
- 1.6 Progress against the management actions in response to the recommendations within the report is monitored within the Health Board's Audit tracker received at each Audit & Risk Committee meeting.

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

- 2.1 It is timely, a year since the follow-up report was received by the Board, for the Quality & Safety Committee to receive an update on the progress being made against the action plan in response to the Joint Review.
- 2.2 Committee members will recall a total of 14 recommendations were made in the original report, resulting in 83 detailed management actions being developed to address the areas for improvement, all with deadlines for completion.
- 2.3 The full position report is at appendix 1, and a summary of the current position is summarised below;

	58 actions cleared/completed	All cleared through ARC
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	20 actions in progress/on track	Most actions due for completion during summer 2022
	5 actions are outstanding	<p>Factors contributing to delays in completion include;</p> <ul style="list-style-type: none"> • Re-alignment of resource following operating model review • All Wales system functionality (CIVICA & Datix) • Final approval of the Learning Framework aligned with new structures

2.4 Audit Wales have informed CTMUHB that further follow-up work will be conducted in September 2022 and the Health Board is working with AW & HIW business partners to plan for this work.

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

3.1 The Q&S Committee is asked to note the position detailed within this report and attached action plan and to note the continued commitment to improving quality governance of the organisation to support our staff and ensure the high quality and safety of the services provided to our communities.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Completion of all actions will strengthen the quality of services and improve patient safety and patient experience.
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.	<p>No (Include further detail below)</p> <p>External Report.</p>



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 Care

5. RECOMMENDATION

5.1 The Q&S Committee is asked to;

- **NOTE** progress to date against the AW/HIW Joint Review of Quality Governance in CTMUHB as at April 2022.