



AGENDA ITEM

6.3.2d

QUALITY & SAFETY COMMITTEE

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

DATE OF MEETING	16 March 2023
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report

PREPARED BY	Carole Tookey, Diagnostics, Therapies, Pharmacy & Specialties Nurse Director
PRESENTED BY	Carole Tookey, Diagnostics, Therapies, Pharmacy & Specialties Nurse Director
EXECUTIVE SPONSOR APPROVED	Greg Dix, Executive Nurse Director
REPORT PURPOSE	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 at its meeting on the 28th February 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

ALERT / ESCALATE	<ul style="list-style-type: none"> Compliance with Home Office legislation on controlled drugs for Parc Prison has been met after a significant amount of work by the pharmacy team, and the licence provided. Further work needed to achieve compliance in other sites across CTM footprint including primary care/ community premises’.
ADVISE	<ul style="list-style-type: none"> Concerns raised by staff regarding chaperoning for intimate radiological procedures – mitigations in place whilst longer term review is in progress 7 DTSPS risks on the corporate risk register scoring 16 or above: <ul style="list-style-type: none"> ➤ 3131 Mortuary Capacity remains a risk although reduced since new unit commissioned in mid-January. ➤ 5036 Pathology services unable to meet current workload demands – outsourcing has continued to help mitigate this. ➤ 2721 Capacity to deliver Point of Care (POC) test training. ➤ 4152 Backlog for imaging in all radiological modalities ➤ 4798 Unsafe therapy staffing in PCH/RGH/POW ITUs ➤ 4832 Paediatric pharmacy support RGH ➤ 5178 Staffing & capacity of Medicines management homecare service <p>All risks being reviewed with progress updates for next committee.</p>
ASSURE	<ul style="list-style-type: none"> HTA virtual and face to face site inspection performed between 13th – 22nd February 2023. Really positive feedback showing significant improvements from 2018 inspection, HTA will be sharing the CTM model for the

	<p>oversight and management of HTA regulated activities as an example of good practice</p> <ul style="list-style-type: none"> • Work underway to align Datix incidents reports for Care Group to the correct senior team in DTTPS. Advised this is likely to conclude by April 2023.
INFORM	<ul style="list-style-type: none"> • Service Resilience issues in the Biochemistry service – discussions currently underway with provider of managed service contract, an equipment refresh has been identified • Cellular Pathology equipment & estate is limiting ability of the service to meet demand of planned care recovery/single cancer pathway – outsourcing in place at present to support • Serious Hazards of Transfusion (SHOT) gap analysis completed and submitted, for further discussion at Transfusion Committee next week • Positive presentation on the benefits of a Bevan funded Radiology Cancer Navigator role – permanent funding sources being explored • HIW IR(ME)R inspection at POW in September 2022 – most actions now closed and progress made on outstanding recommendations. • Some therapy incidents show an increase in human error e.g. Information Governance errors with reports being sent to wrong people/ included in envelopes. This is being addressed with training but also conscious of impact of staffing numbers and volume of work. Also impact of managing expectations (colleagues and service users) and the impact of verbal aggression is negatively impacting on teams. Well-being champions are in place and leaders share the HB well-being support resources • Air handling unit at RGH aseptic unit is 23 years old and has a likely working life of 3-5 years. Risk Assessment (RA) completed and mitigating actions taken while we prepare a statement of need and capital replacement programme.
APPENDICES	NOT APPLICABLE