

Quality & Safety Committee

Committee Annual Report 2022-2023

QUALITY & SAFETY COMMITTEE ANNUAL REPORT 2022-2023

1. FOREWORD

I am pleased to be able to commend to you this annual report, which has been prepared for the attention of the Board and reviews the work of the Committee for the financial year 2022-2023.

During the year, I have been supported by James Hehir, Nicola Milligan, Dilys Jouvenat, Patsy Roseblade and Carolyn Donoghue who have contributed their considerable knowledge and wide-ranging experience to the Committee.

I would like to express my sincere thanks to all the officers of the Committee for their commitment in supporting the Committee in discharging its responsibilities through robust reporting. I would particularly like to extend my thanks to colleagues within the Corporate Governance Team for the support they provided me throughout the year. I also wish to record my appreciation for the support and contribution given by the Internal Audit team at the NHS Wales Shared Services Partnership (NWSSP), by Audit Wales, Healthcare Inspectorate Wales and Delivery Unit colleagues.

Going forward the Committee will continue to pursue a full programme of work covering quality and safety of care for our population together with matters affecting the health and safety of our workplaces with the aims of promoting learning and further strengthening the governance and assurance arrangements of the Health Board.

Jayne Sadgrove
Chair of the Quality & Safety Committee
Cwm Taf Morgannwg University Health Board (CTMUHB)

2. INTRODUCTION

The purpose of the Quality & Safety Committee “the Committee” is to provide assurance to the Board on the provision of workplace health & safety and safe and high quality care to the population we serve, including prevention through public health, primary and secondary care.

The Committee has embraced the new Strategic Goals in how it manages its agenda to ensure that its activity supports the ‘**CTM2030: Our Health, Our Future**’ Strategy and the **Values and Behaviours** of the Health Board.



The Committee meets every other month, with the key function to provide scrutiny on behalf of the Board on all matters relating to Quality and Safety.

A key area of the Quality Improvement work continues to be focussed on the Health Board’s response to the concerns raised in 2019 regarding failings in maternity services. The service and Maternity Improvement Team has continued to deliver improvements during 2022-2023 with a regular report on improvement activity received by the Committee.

During 2022-2023, targeted focus was paid to Ty Llidiard service improvements following concerns raised by the Welsh Health Specialised Services Committee and on Mental Health Services following reviews undertaken by Healthcare Inspectorate Wales. The Committee were also sighted on programmes of improvement in relation to Prince Charles Hospital, Stroke Services and the Minor Injuries Unit at Ysbyty Cwm Cyron.

3. ROLE, MEMBERSHIP, ATTENDEES AND COMMITTEE ATTENDANCES

3.1 ROLE

The role of the Committee is to advise and assure the Board on whether there are effective Quality & Safety arrangements in place – through the design and operation of the Health Board system of assurance – to support it in its decision taking and in discharging the accountabilities for securing the achievement of the Health Board objectives in accordance with the standards of good governance determined for the NHS in Wales.

The Committee’s Terms of Reference are reviewed annually and are available via the following link: <https://cwmtafmorgannwg.wales/how-we-work/standing-orders/>

3.2 MEMBERSHIP

The membership of the Quality & Safety Committee comprises of six Independent members, enabling the Committee to provide robust scrutiny and assurance to the Board independently of the management decision-making processes.

A summary of the Independent membership during 2022-2023 is outlined in table 1 below:

Table 1 – Composition & Membership of the Quality & Safety Committee Apr 2022-March 2023

| Name | Period |
|---|-------------------------|
| Members | |
| Jayne Sadgrove (Committee Chair) Independent Member | April 2022 – March 2023 |
| James Hehir Independent Member | Apr 2022 - March 2023 |
| Nicola Milligan Independent Member | Apr 2022 – March 2023 |
| Dilys Jouvenat Independent Member | April 2022 -March 2023 |
| Patsy Roseblade Independent Member | April 2022 – March 2023 |
| Carolyn Donoghue Independent Member | April 2022 – March 2023 |

3.3 ATTENDANCE AT QUALITY & SAFETY COMMITTEE 2022-2023

During the year, the Committee met on six occasions. All meetings were quorate and were well attended as shown in Table 2 below:

Table 2 - Meetings and Member Attendance 2022-2023

| In Attendance | 24 May 2022 | 19 July 2022 | 20 Sept 2022 | 15 Nov 2022 | 24 Jan 2023 | 16 Mar 2023 | Total |
|---|----------------------------|-----------------------------|-----------------------------|----------------------------|----------------------------|----------------------------|--------------|
| Independent Members | | | | | | | |
| Jayne Sadgrove (Chair of the Committee) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 6/6 |
| Dilys Jouvenat – Independent Member | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 6/6 |
| Nicola Milligan – Independent Member | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 6/6 |
| James Hehir – Independent Member | ✓ | ✓ | ✓ | ✓ | ✓ | x | 5/6 |
| Patsy Roseblade Independent Member | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 6/6 |
| Carolyn Donoghue - Independent Member | ✓ | ✓ | ✓ | ✓ | x | ✓ | 5/6 |

3.4 ATTENDEES

The Committee's work is informed by reports provided by leads within CTMUHB, Cwm Taf Community Health Council, Healthcare Inspectorate Wales, Audit Wales, Internal Audit and the Delivery Unit. Although not members of the Committee, colleagues from these areas are invited to attend each meeting of the Quality & Safety Committee. Invitations to attend the Committee meeting are also extended, where appropriate and on an 'ad hoc' basis, to specific staff when reports which relate to their specific area of responsibility are being discussed.

4. QUALITY & SAFETY COMMITTEE BUSINESS

The Quality & Safety Committee provides an essential element of the Health Board's overall assurance framework. All meetings continued to be held virtually via Microsoft Teams during 2022/2023 with continued use of the Consent Agenda. Any items included on the consent agenda were considered by Members prior to each meeting, with Members provided with the opportunity to raise questions prior to the meetings regarding the reports. All reports included on the Main Agenda were discussed during each meeting. The Quality & Safety Committee agenda broadly follows a standard format, comprising of specific sections, and the activity of the Committee during 2022/2023 is outlined in Appendix 1 of this report.

Links with Other Committees/Boards

Key risk areas from the Quality & Safety Committee are highlighted at full Board by the Committee Chair via the Committee highlight report.

At each meeting, if any Committee referrals are identified, the Chair of the Committee or the Corporate Governance Lead will ensure that the following questions are captured to ensure a referral is managed effectively:

- What are you referring?
- Why are you referring?
- What is the outcome you are anticipating from this referral?

During the course of 2022-2023, the following items were referred to the Quality & Safety Committee from other Committees

- Internal Audit Follow Up Review - Patient Pathway Appointment Management Process – Audit & Risk Committee requested that updates on progress were included in the Chief Operating Officers Report.

5. ACTION LOG

In order to monitor progress and any necessary follow up action, the Committee has developed an Action Log that captures all agreed actions. This has provided an essential element of assurance both to the Committee and from the Committee to the Board.

6. GOVERNANCE

The effectiveness of the Committee is monitored through the following key governance activity:

- Annual Review of the Terms of Reference & Operating Arrangements
- Committee Annual Report
- Highlight Reports from the Committee to the Health Board meetings
- Annual Committee Effectiveness Self-Assessment Survey
- Annual Cycle of Committee Business

The Corporate Governance Team maintain a "Committee Effectiveness Tracker" to ensure the above activity is undertaken at the appropriate times during the year.

Committee Annual Self-Assessment

The Committee is in the process of completing its Annual Self-Assessment for 2022-2023, any learning and themes identified following the assessment will be presented to the Committee for review and consideration.

7. ASSURANCE TO THE BOARD

The Quality & Safety Committee considers that on the basis of the work completed by the Committee during 2022 - 2023, there are effective measures in place that have delivered against its agreed Terms of Reference.

The forward work programme for 2023-2024 and beyond, ensures that the Committee retains scrutiny on key areas of activity, not exclusive to but including the following:

- Listening and Learning Stories (Patient and Staff)
- Learning lessons and sharing best practice
- Maternity & Neonate Services oversight and scrutiny
- Quality Governance arrangements
- Compliance with the Nurse Staffing Levels (Wales) Act
- Quality improvement initiatives
- Scrutiny of any Regulatory and Inspectorate Body reports
- Consideration of the Audit Wales Structured Assessment feedback to consider how best to manage and prioritise the volume of the Committees business.
- Monitoring the activity considered by the Health, Safety & Fire Sub Committee established in August 2019

In addition the Committee Chair will meet with the lead officers and the Chair of the Board to discuss progress of the work of the Committee.

The Annual Cycle of Committee Business has continued to be presented to each meeting of the Committee during 2022/2023, alongside the Forward Work Programme. This supports and helps identify the key areas of focus for the Committee and is one of the key components in ensuring that the Committee is effectively carrying out its role. It also facilitates the management of agendas and Committee business.

8. LINKS WITH OTHER COMMITTEES

The Quality & Safety Committee will continue to have close links, and share risks with other Committees of the Board, particularly the Audit & Risk

Committee, Planning, Performance & Finance Committee and the People & Culture Committee.

As a Sub Committee of the Quality & Safety Committee, regular highlight reports are received from the Health Safety & Fire Sub Committee.

Through either specific meetings or the regular Independent Member meetings there is an opportunity for Committee Chairs to support the work of each of the Committees they Chair, share learning and avoid duplication. All Committee Chairs have access to Committee Highlight Reports to the Board.

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APPENDIX 1

1. Consent Agenda

During 2022 – 2023 the following items were received on the Consent Agenda for Approval/Endorsement:

- Quality & Safety Committee Annual Report 2021/2022;
- Quality & Safety Committee Annual Cycle of Business;
- Facilities Policy - Security Policy;
- Estates Policies - PAT Testing Policy;
- Quality & Safety Committee Terms of Reference;
- Children & Young People 16-17 year's Acute Admission Policy;
- Chairs Urgent Action - Policy Approvals;
- Independent Member Walkround Protocols.

During 2022 – 2023 the following items were received on the Consent Agenda for Noting/Information:

- Committee Forward Work Programme;
- Quality & Safety Committee Annual Self-Assessment;
- WHSSC Quality & Patient Safety Chairs Report;
- Audit Wales/Healthcare Inspectorate Wales Joint Review of Quality Governance – Summary of Progress made – April 2022;
- Welsh Ambulance Services NHS Trust - Patient Experience Reports;
- Community Acquired Pressure Ulcer Improvement Plan Update and Measurement Strategy;
- Quality Governance - Regulatory Review Recommendations and Progress Updates;
- Controlled Drug Accountable Officer Annual Report;
- GAP Analysis Children's Community Nursing Service;
- GIRFT Review of Cwm Taf Morgannwg University Health Board February 2022;
- Human Tissue Authority Act Progress Reports;
- WHSSC Quality & Patient Safety Committee Annual Report;
- Putting Things Right Annual Report;
- RADAR Committee Highlight Reports;
- Clinical Audit Quarterly Report and Annual Plan;
- Individual Patient Funding Request Annual Report;
- Learning Disabilities 6 Monthly Progress Report;
- Community Health Council National Surveys and Quality Monitoring Reviews;
- Incident Management Framework - Listening, Learning & Improving Safety;
- Health & Care Standards Annual Report;
- Radiation Safety Committee Highlight Reports;
- Thematic Review of the feedback received from the Community Health Council - Primary Care;
- Transition and Handover from Children to Adults Health Services;
- Health & Care Standards Annual Report;
- National Prescribing Indicator (NPI) Annual Report;

- Clinical Education Annual Report;
- Annual Review 2021/22 – Welsh Risk Pool and Legal & Risk Services;
- Safeguarding & Public Protection Annual Report

2. Main Agenda

During 2022 – 2023 the following items were received:

- Patient Experience/Listening & Learning Stories;
- Sepsis Compliance Improvement Plan;
- Organisational Risk Register - Risks Assigned to the Quality & Safety Committee;
- Concerns, Redress, Claims & Inquests – Actions arising from Internal Audit & Welsh Risk Pool Reviews (also received via the consent agenda on occasion);
- Health, Safety & Fire Sub Committee Highlight Reports (also received via the consent agenda on occasions when no issues to escalate);
- Maternity & Neonates Services Improvement Programme;
- Presentation of PREMS (Patient Reported Experience Measures);
- Maternity Services Self-Assessment Against Ockenden 2022 Recommendations;
- RCOG Recommendations Closure Report;
- Maternity Metrics Report;
- Quality Dashboard Report;
- Spotlight Report on Patient Falls;
- Report from the Chief Operating Officer;
- Planned Care Recovery – Presentations;
- Cancer Services Annual Report;
- Stroke Services Progress Report;
- National Nosocomial Covid-19 Programme - CTM Update (also received on the consent agenda on occasion);
- Response to 'Improving Care, Improving Lives' National Care Review for Inpatients with a Learning Disability;
- Infection, Prevention & Control Committee Highlight Reports (routinely received on the consent agenda – added to main agenda when items for escalation had been identified);
- Digitisation of the Nursing Care Record;
- Prince Charles Hospital Neonatal Deep Dive Review Update
- NHS Delivery Unit Findings Report: CTMUHB Maternity and Neonatal Services Serious Incidents Assurance Review & Board Systems and Processes for Reporting, Management and Review of Patient Safety Incidents;
- Ty Llidiard Progress Report;
- Quality & Performance of Service Provision HMP and Young Offenders Institute Parc;
- Dental Contract Reform;
- Development of a Quality Strategy;
- Patient Falls and Absconsions Lessons Learnt Report;
- Covid 19 Inquiry Preparedness;

- Assurance on the Health Board's plan to improve monitoring and reporting in relation to Continuing Healthcare (CHC) and Funded Nursing Care (FNC) activity;
- Annual Letter 2021/2022 – Public Services Ombudsman for Wales;
- NCCU Quality Assessment and Improvement Service - Annual Quality position statement;
- Datix Cymru - Assurance Report;
- Learning from Mortality Reviews/Mortality Indicators Report;
- Civica - People's Experience Feedback System;
- Peer Review of Urgent Primary Care (Out of Hours and UPCC) In CTMUHB;
- Ward Based Nursing Assurance Report;
- Learning From Events Reports - Progress Report;
- CTMUHB Quality and Safety Framework 2022-2025;
- Deep Dive into CAMHS;
- Liberty Protection Safeguards Preparation;
- Child T - Child Practice Review;
- Care Group Spotlight Presentation - Mental Health & Learning Disabilities;
- Care Group Spotlight Presentation - Unscheduled Care;

Integrated Quality & Safety Exception Reports were received up to September 2022 from the following areas:

- Bridgend Integrated Locality Group;
- Merthyr & Cynon Integrated Locality Group
- Rhondda Taff Ely Integrated Locality Group;
- Primary Care Directorate.

The Health Board implemented a new organisational structure during 2022-2023 and reporting changed from Integrated Locality Group reports to a Care Group Structure. Care Group Highlight Reports were received from the following areas:

- Planned Care;
- Unscheduled Care;
- Children & Families;
- Diagnostics, Therapies, Pharmacy & Specialities;
- Primary Care and Community;
- Mental Health & Learning Disabilities.