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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Agenda Item	2.3 (ii)
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Freedom of Information Status	Open
Reporting Committee	Quality and Safety Committee
Author	Liz Stauber, Head of Corporate Governance
Chaired by	Steve Spill, Vice Chair
Lead Executive Director (s)	Gareth Howells, Director of Nursing and Patient Experience
Date of last meeting	20 December 2022

Summary of key matters considered by the committee and any related decisions made:

Quality and Safety Performance Report

For urgent and emergency care, the four hour target was at 70.4% which was just below the 72% trajectory, 12 hour waits had reduced from 1,456 from 1,584 the previous month and ambulance handovers were above the trajectory. There had been a deterioration in cancer performance to 51% but an improvement reported in the backlog. The number of clinically optimised patients was reducing, with a daily average of 279. Planned care had seen a decrease in the numbers waiting 26, 36 and 52 (stage one) weeks and a consistent reduction in the number waiting more than 104 weeks for treatment – all areas were outperforming the trajectories submitted to Welsh Government. Eight-week diagnostic waits had reduced to 5,627 and specific endoscopy waits were also decreasing but remained above trajectory. Healthcare acquired infections were above trajectory in all areas. 11 nationally reported incidents had been recorded and one never event.

Key Matters Raised by Members

- Significant decrease in prompt surgery for fractured neck of femur
- Importance of pre-habilitation for orthopaedic patients
- Child and adolescent mental health services (CAMHS) performance

Draft Quality Strategy

The draft strategy was supported by an implementation plan to be completed by 28th February 2023. The Management Board had been engaged on the content of the strategy in September 2022 to determine if the right approach and priorities were proposed. Staff and key stakeholders had also been engaged, and a presentation given to the patient congress. Independent members and the community health council had also been sighted. A communications strategy and launch event were in the process of being finalised ready for March 2023 by the Deputy Director of Nursing and Patient Experience. Progress would be reported to the Management Board, Quality and Safety Committee and through annual quality statements. Members were invited to submit any final comments to the Head of Quality and Safety by 30th December before it was shared with the board for approval in January 2023.

Key Matters Raised by Members

- Importance of distilling the strategy to staff;

<ul style="list-style-type: none"> - Process to agree new quality priorities; - The need for staff to feel empowered to speak up when things are not right. 	
Key risks and issues/matters of concern of which the board needs to be made aware:	
Nothing further to raise.	
Delegated action by the committee	
None taken.	
Main sources of information received:	
<p>Due to the industrial action, the following reports were received and noted:</p> <ul style="list-style-type: none"> - Quality and Safety Committee risk register; - Infection prevention and control update; - Key issues report from the Clinical Ethics Group; - Highlight report for WHSSC (Welsh Health Specialised Services Committee) quality and patient safety group. 	
Highlights from sub-groups reporting into this committee:	
<p><u>Quality and Safety of Patient Services Group</u></p> <p>The monthly report was received for assurance.</p>	
Matters referred to other committees:	
There were no matters referred.	
Date of next meeting	24 January 2023