





		Agenda Item	2.5 (i)
Freedom of Information Status	Open		
Reporting Committee	Quality and Safety Co	ommittee	
Author	Leah Joseph, Corpora	ate Governance Off	icer
Chaired by	Martyn Waygood, Inte	erim Vice Chair	
Lead Executive Director (s)	Christine Williams, Interim Director of Nursing and Patient Experience		
Date of last meeting	24 November 2020		

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

None identified.

Key risks and issues/matters of concern of which the board needs to be made aware:

Infection Prevention and Control Report (IPC) - There has been year-on-year improvement in pseudomonas and staph aureus, E. coli and klebsiella infections. There has been a 49% year-on-year increase in Clostridium difficile (C.diff). Meetings on an all Wales basis are taking place to understand the increase of C.diff on sites. There is a lack of decant facilities when occupancy is at acceptable levels on acute sites which compromises effectiveness of the '4D' cleaning/decontamination programme. COVID-19 may have had an impact on C.diff infections, which may relate to antimicrobial treatment for respiratory tract infections. There are also increasing single room pressures following the pandemic. The second wave of COVID-19 began in mid-September and infections have increased sharply during October and November. Incidents are closely monitored with delivery groups holding meetings with operational outbreak control groups, which report to the Health Board Outbreak Control Group. Daily Situation Updates are also sent to Welsh Government. Immunisation work is underway and expected to go live on 1st December 2020. Swansea Bay is currently the only health board in Wales that has a 7 day IPC service available

Delegated action by the committee:

Healthcare Standards Process 2020-21 was approved.

Main sources of information received:

Mental Health Services response to the COVID-19 pandemic – The assurance report highlighted that the Transforming Mental Health Services Programme was suspended due to the pandemic in March 2020, with project managers redeployed to support COVID-19 emergency planning. It was reinitiated in July with projects asked to take specific account of the impact of COVID-19 as well as longer term development. The COVID-19 pandemic has enabled digital innovation within mental health, ensuring clinical prioritisation to support the most in need remaining a focus.

Performance Report – The report presented the four quadrants of harm and data in respect of fractured neck of femur metrics, unscheduled care, planned care, cancer performance and stroke. A system of red/amber/green assessment has been introduced for those measures without a profile. The report was received for assurance.

Patient Experience Report was received for assurance. The report reflects improvement in complaint response times. The Corporate Complaints Team have returned to a 7 day working schedule, and targeted support and training is being provided to the mental health team in relation to serious incident responses.

Quarter 2 Operational Plan - Delivery of Actions was received for assurance.

Planned Care Report was received for assurance. The report detailed the recovery and redesign of outpatient services in line with essential services guidance and the National Outpatient Strategy.

Update report on 'phone first' and 111 for non-urgent patients was received for assurance. The local 'phone first' model will be provided throughout the 24 hour period, and will be integrated into existing services including the Acute GP Unit and the GP out of hours' service. The model is aimed at reducing ED demand by streaming patients to appropriate alternative pathways of care.

Consultant Connect was received for assurance. The service is a mechanism for communication between clinicians. It facilitates conversations with GP's and secondary care clinicians. There is scope to extend the service into other specialities.

External Inspections report was received for assurance.

Highlights from sub-groups reporting into this committee:

Quality and Safety Governance Group - The most recent QSGG meeting took place on 23rd October 2020. There has been an increase in stillbirths and social media communication was provided in the report surrounding this issue. The review of stillbirths is yet to be completed, but will be reported to QSGG once approved. The timescale to complete service plans to replace the fleet of ventilators in neonatal department has accelerated, and procurement will be involved with purchasing new ventilators.

Matters referred to other committees:		
None identified.		
Date of next meeting	15 December 2020	







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Author	Leah Joseph, Corporate Governance Officer		
Chaired by	Martyn Waygood	I, Interim Vice Chair	
Lead Executive Director (s)	Christine Williams, Interim Director of Nursing and Patient Experience		
Date of last meeting	15 December 20	20	

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

Nosocomial transmission Report was received for assurance following nosocomial transmission and outbreaks occurring within SBUHB during the last few months. A Nosocomial Silver Group had been established to ensure there are processes in place to prevent nosocomial spread, and to ensure there are effective processes to respond to prevent further transmission. The green pathway at all hospital sites had been maintained despite outbreaks in other areas of hospitals. A robust protocol for managing elective patients via a 'green' pathway has been in place, which includes testing on admission as well as a range of other areas.

Key risks and issues/matters of concern of which the board needs to be made aware:

Infection Prevention and Control Report (IPC) - There has been year-on-year improvement in pseudomonas and staph aureus, E. coli and klebsiella infections. The immunisation programme is underway. Gene sequencing work is ongoing, with the Delivery Groups presenting their findings in December 2020. Overcrowding across the sites has not been a problem, however there are no decant facilities available.

Delegated action by the committee:

None identified.

Main sources of information received:

Quality and Safety Risk Report – The report, which was received for assurance, confirmed that 12 risks are assigned to the Quality and Safety Committee, with a further four risks referred to the committee by other Committees. The COVID-19 risk register was appended to the report. Two new risks were added to the COVID-19 risk register in November 2020, which were nosocomial transmission and sustainable services.

Care Home Action Plan and John Bolton Report were received for assurance. The report highlighted that workforce remained an issue and one of the aims was to manage people within their own homes and own beds to ensure secondary care is not an option for residents, when not appropriate. A local website had been developed for care homes with information that is updated frequently. The feedback has been positive. The most recent action plan was submitted to Welsh Government on 11th December 2020.

Maternity Review Report – The report confirmed that phase one of the report was complete and was published on 19th November 2020. Phase two is due to commence in 2020 and will

focus on the experiences of mothers and their families. The findings to date show the quality of care that is being provided across Wales is generally good, and that the majority of women and families who use maternity services report positive experiences, with Swansea Bay University Health Board (SBUHB) feedback being generally positive.

Highlights from sub-groups reporting into this committee:

Quality and Safety Governance Group - The most recent QSGG meeting took place on 19th November 2020. The review of stillbirths is yet to be completed, but will be reported to the committee once approved. The Arts in Health Co-ordinator is currently training staff across England and Wales on the Swansea Bay University Health Board (SBUHB) methodology on digital story telling.

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Matters referred to other committees:			
Air exchange rates to be referred to Health and Safety Committee.			
Date of next meeting	26 January 2021		