



GIG
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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



	Agenda Item	3.5 (ii)
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Freedom of Information Status	Open
Reporting Committee	Quality and Safety Committee
Author	Liz Stauber, Committee Services Manager
Chaired by	Martyn Waygood, Independent Member
Lead Executive Director (s)	Gareth Howells, Director of Nursing and Patient Experience
Date of last meeting	18 April 2019

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

Morrison Hospital Patient Staff Story – members received a patient story outlining the experience of a young child with Down’s syndrome who underwent treatment in the burns and plastic unit following a scalding. Members heard that due to her additional needs, the child rarely cried so it was difficult for the parents to gain the understanding of the nursing staff that when she did cry, it meant she was in significant pain. Having Down’s syndrome meant that the patient’s development was behind that of other children her age, this had an impact on the way in which she needed to be treated, and it would have been beneficial to have a nurse who specialised in learning disabilities available, particularly if an operation had been required. The family held the staff and treatment they received in high regard.

NHS Wales Delivery Unit 90 Day Review – the Delivery Unit had undertaken a follow-up of its 2017 review of systems and approaches to serious incidents and members received a progress update against the recommendations. It was noted that not only was there learning from the incidents to be taken but also the process by which they were investigated. This now comprised those involved talking through their accounts to find solutions. This had started with theatres due to never events occurring in 2017-18 and was currently in development for mental health, with a learning event taking place recently.

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

Infection Control Report – members noted the improvement in performance but made it clear that the health board’s ambition should be zero cases as opposed to the targeted intervention trajectories.

External Inspections – as a result of the issues raised by Healthcare Inspectorate Wales (HIW) in relation to dental and primary care facilities, meetings were to take place between the two organisations for HIW to gain a better understanding of the operational service and the services to understand more of how HIW worked.

Delegated action by the committee:

No delegation action was taken by the committee.

Main sources of information received:

GP Indemnity – members considered a report which outlined changes to the GP indemnity process.

Internal Audit Update – the findings of recent internal audits relating to quality and safety issues were noted.

Patient Experience Report – the quarterly patient experience report was received. Members noted that the health board was not compliant with three patient safety notices and charged the executive directors to review these and provide assurance of the actions required to ensure compliance.

Annual Quality Statement/Health and Care Standards – the draft annual quality statement and a report setting out the process for health and care standards was received. A further update would be provided at the next meeting.

Quality and Safety Performance Report – the quality and safety sections of the integrated performance report were received, noting that work was ongoing to develop a specific performance report for the committee.

Health Inspectorate Wales (KW) Action Plan - a report setting out progress against the action plan in response to the HIW review of the KW Special Review was received.

Quality Governance Review – members received a report setting out the approach to the Quality Governance Review in accordance with the recommendations from the Wales Audit Office's 2018 structured assessment. Members noted that a specific piece of work was needed to determine how quality governance corporately aligned with that of the units and how sub-groups of the committee were providing it with assurance.

Highlights from sub-groups reporting into this committee:

Clinical Senate Council – the committee received an update from the clinical senate council;

Quality and Safety Forum – the regular update from the forum was received. Concerns were raised as to the environment in which children are treated within the emergency department of Morriston Hospital and an update on the plans to address this were requested for the next committee.

Matters referred to other committees:

None identified.

Date of next meeting

20 June 2019