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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date				Agenda Item	xxx
Report Title	Process for Managing Swansea Bay Community Health Council (CHC) Reports and Responses				
Report Author	Nicola O'Sullivan, Head of Engagement and Partnerships Catrin Evans, Engagement Manager				
Report Sponsor	Siân Harrop-Griffiths, Executive Director for Strategy Gareth Howells, Interim Executive Director of Nursing and Patient Experience				
Presented by	Nicola O'Sullivan, Head of Partnerships and Engagement				
Freedom of Information	Open				
Purpose of the Report	To provide the Quality & Safety Governance Group (QSGG) with an updated more robust mechanism for managing CHC reports and the current status of responses to CHC reports				
Key Issues	<p>CHC reports are received by the Strategy Department and disseminated to relevant departments and directorates. A mechanism for managing the reports was previously agreed but this had changed during Covid. An updated mechanism has been developed to:</p> <ul style="list-style-type: none"> - Provide clarity around the process for managing different CHC reports; - Confirm the process and responsibilities of departments and directorates; - Reiterate the importance of responding to reports in a timely manner; - Ensure Quality and Safety Governance Committee are aware the report has come into the organisation; and - Ensure Quality and Safety Committee are aware of the issues raised within the CHC reports and responses provided. 				
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Recommendations	<p>The Quality & Safety Governance Group are asked to:</p> <ul style="list-style-type: none"> • Approve the process for managing CHC reports • Note the outstanding reports requiring Health Board responses 				

QUALITY AND SAFETY GOVERNANCE GROUP REPORT

1. INTRODUCTION

The aim of this report is to provide the Quality & Safety Governance Group (QSGG) with an updated more robust mechanism for managing CHC reports and the current status of responses to CHC reports.

2. BACKGROUND

Swansea Bay Community Health Council (CHC) is the independent watchdog of the National Health Service, within Neath Port Talbot and Swansea. They encourage and support people to have a voice in the design and delivery of healthcare for their families and local communities.

The CHC works with the NHS, inspection and regulatory bodies, providing an important link between those who plan and deliver NHS services, those who inspect and regulate it and those who use it.

Before the pandemic, the CHC would undertake in-person visits to wards, departments and primary care settings to gather views of patients and a review of the area from a patient perspective. The CHC would develop a report of their findings and feedback for units / directorates to respond to any issues, queries or comments raised.

With the Covid pandemic, it was no longer possible to undertake face to face visits and subsequently the CHC has changed the way it engages with the public and patients, using surveys, social media and videoconferencing apps such as Zoom, Teams and Skype, to hear from people directly about their views and experiences of the NHS services in general and the Swansea Bay University Health Board.

The CHC develops four main categories of reports;

- **Thematic** – a cross cutting theme affecting many services or departments e.g. feedback from inpatients, phlebotomy, primary care
- **Quarterly Monitoring Reports** – inpatient quarterly review and GP quarterly review
- **National** – reports are provided by the Board of CHCs in Wales and the national picture as well as local feedback is shared
- **Weekly Feedback** – local comments received from a national survey are shared

The reports include feedback on what patients and carers have told them and what they have observed. The CHC findings are then shared with the Health Board. The report is then forwarded to the Service Lead who has the opportunity to address any comments, issues or concerns raised by the public and patients. The response from the Health Board is then shared with the CHC. All responses to reports should be returned to the CHC within three weeks, unless otherwise agreed.

Historically, the Strategy Department has encountered difficulty in obtaining responses to the reports from Delivery Groups and Departments.

In an attempt to make responding easier the CHC agreed to include the recommendations separately and to receive our responses via an action plan or a letter, whichever is the best fit for the response. While this initially worked well, the Covid pandemic has meant responding to CHC reports has taken a lower priority.

There is therefore now a need to reiterate the importance of responding to reports in a timely manner, contributing to the positive working relationship the Health Board has with the CHC.

To provide clarity around the different reports and how these are managed a flowchart has been produced (Appendix 1), to streamline the process for providing comments to the CHC. By bringing the reports to the Q&SGG and to the Quality and Safety Committee colleagues will be sighted on any new reports and outstanding ones for action to be escalated.

Current position on reports

Currently the Health Board has five outstanding reports; namely

Date received	CHC Report	Position	Department / Delivery Group Leading Response
September, 2020	National Report Living with coronavirus: health and care services during winter	<p>This report came into the Health Board while the Health Board was still on high alert and the focus was still very much on the pandemic.</p> <p>The report was shared promptly and to date no response has been received. As more time passes it becomes increasingly difficult to provide responses to reports as the context and service may have changed or evolved.</p> <p>The response remains outstanding and despite the passage of time the CHC are keen to receive the Health Board's response. Given the passage of time the Health may wish to provide a more generic response acknowledging the issues raised rather than a more detailed response to specific queries raised which may well be significantly out of date.</p>	Assistant COO
November 2020	National Report Feeling Forgotten: Hearing from people waiting for NHS care and treatment	This report came into the Health Board while the Health Board was still on high alert and the focus was still very much on the pandemic.	Head of Governance

	during the coronavirus pandemic	<p>The report was shared promptly and to date no response has been received. As more time passes it becomes increasingly difficult to provide responses to reports as the context and service may have changed or evolved.</p> <p>The response remains outstanding and despite the passage of time the CHC are keen to receive the Health Board's response. Given the passage of time the Health may wish to provide a more generic response acknowledging the issues raised rather than a more detailed response to specific queries raised which may well be significantly out of date.</p>	
May 2021	National Report Ask My GP	<p>Response provided.</p> <p>Currently with Corporate Governance for inclusion on the next Q&SC (April 2022)</p>	Primary Care
November 2021	National Report Tablets, Telephones and Technology	<p>Response provided.</p> <p>Currently with Corporate Governance for inclusion on the next Q&SC (April 2022)</p>	Digital, Primary Care and Community Nursing, Mental Health, Medical Director
December 2021	National Report In-patient Experience Quarterly Report	<p>Response provided.</p> <p>Currently with the Strategy Department for collation of final response.</p> <p>To be included on the next Q&SC (April 2022)</p>	Nursing, Support Services

Subject to agreement of the new approach, any reports received will be processed as outlined in the flowchart.

3. GOVERNANCE AND RISK ISSUES

CHC reports provide a snapshot at a moment in time around the patient and public experience of our services. It is important we review and address these concerns in a timely manner.

Sharing the feedback from the CHC and subsequent responses with Quality and Safety Committee provides a level of assurance as a Health Board we are aware of the issues and responding appropriately. It also provides an opportunity to identify themes across the organisations being raised by patients and the public that may need to be addressed or considered in more detail.

In future, the findings from these reports will be used to provide more insightful intelligence and triangulation of feedback from the public/patients/staff to better inform the Health Board's future working.

4. FINANCIAL IMPLICATIONS

None from this report

5. RECOMMENDATION

The Quality & Safety Governance Group is asked to:

- **Approve** the process for managing CHC reports
- **Note** the outstanding reports requiring Health Board responses

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
CHC report provide feedback to the Health Board on the public and patient experiences of our services. It is important to consider this feedback in a timely manner and act on the recommendations as appropriate.		
Financial Implications		
None		
Legal Implications (including equality and diversity assessment)		
None		
Staffing Implications		
None		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
None		
Report History	N/A	
Appendices	Nil	

Appendix 1 – Flowchart

