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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	2nd August 2018		Agenda Item	7a
Meeting	Quality and Safety Committee			
Report Title	Ratification of Clinical Policies			
Report Author	Charlotte Higgins, Interim Business Manager Corporate Nursing			
Report Sponsor	Pam Wenger, Director of Corporate Governance			
Presented by	Pam Wenger, Director of Corporate Governance			
Freedom of Information	Open			
Purpose of the Report	This report outlines a proposal for the ratification of Clinical Policies.			
Key Issues	<ul style="list-style-type: none"> • A proposal has been made for Clinical Policies to be ratified by the Quality and Safety Forum. • Ratified Clinical Policies will be reported to the Quality and Safety Committee within the Quality and Safety Forum Report. • An exception has been made this month for the following Clinical Policies to be ratified by the Quality and Safety Committee: <ul style="list-style-type: none"> - Revised Policy for the Prevention and Management of Pressure Ulcers - Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults - Policy and Procedure for the Prevention and Management of Adult Inpatient Falls 			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
				✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> • Note the proposal for Clinical Policy ratification • Ratify the following policies: <ul style="list-style-type: none"> ○ Policy for the Prevention and Management of Pressure Ulcers ○ Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults ○ Policy and Procedure for the Prevention and Management of Adult Inpatient Falls Clinical Policies for approval by the Committee 			

RATIFICATION OF CLINICAL POLICIES

1. INTRODUCTION

This report will outline a proposal for the future ratification of Clinical Policies. The approval and assurance process will inform the Quality and Safety Committee of the Policies ratified by Quality and Safety Forum.

Until the Quality and Safety Committee have agreed the proposed approval process, this report requests that an exception is made for the following Clinical Policies to be ratified by the Committee:

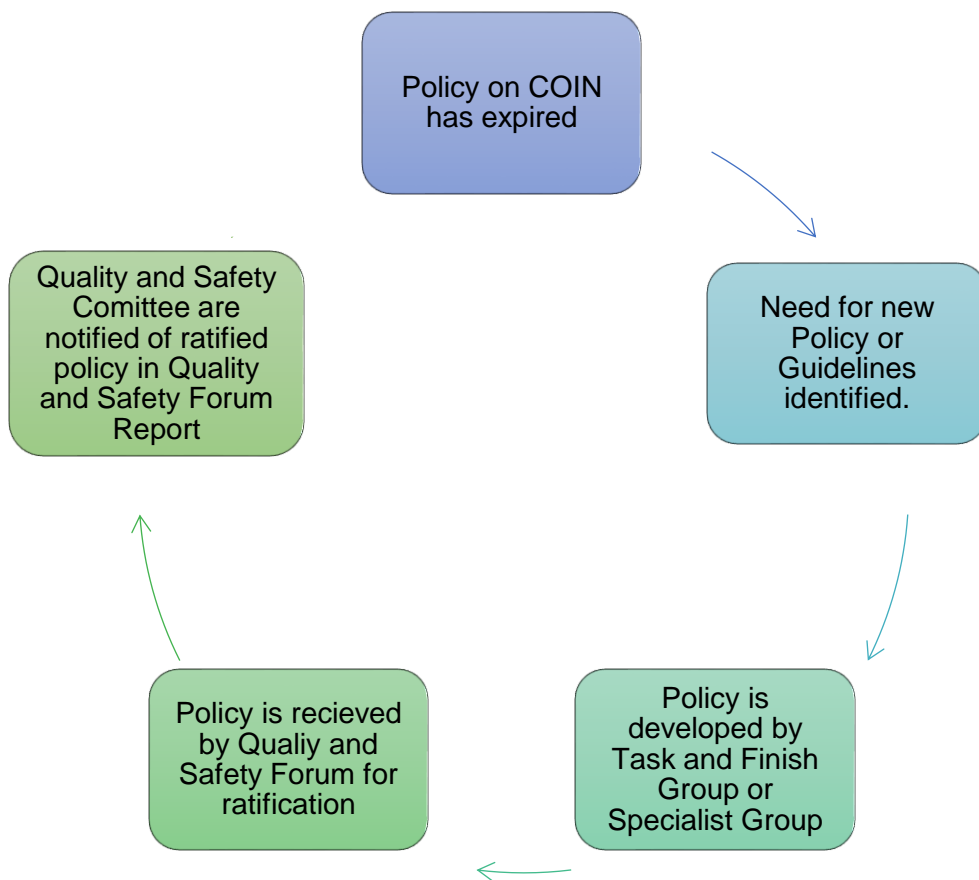
- Revised Policy for the Prevention and Management of Pressure Ulcers **(Appendix 1)**.
- Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastic) Feeding (and Drainage) Tubes in Adults **(Appendix 2)**.
- Policy and Procedure for the Prevention and Management of Adult Inpatient Falls **(Appendix 3)**.

2. BACKGROUND

The Quality & Safety Forum is an operational group which meets bi-monthly and has been established to support the role and function of the Quality & Safety Committee. Part of the Forum's Terms of Reference is to approve relevant Abertawe Bro Morgannwg University Health Board Quality and Safety Policies and Guidance.

The Quality and Safety Forum submits a report to the Quality and Safety Committee, which provides an assurance update from the previous Forum. The Quality and Safety Committee can be notified of any Clinical Policies discussed and ratified within this report.

The proposed process for developing, revising and ratifying policies is as follow



As an exception, the Quality and Safety Committee is asked to ratify the following policies:

- **Revised Policy for the Prevention and Management of Pressure Ulcers**

The current Policy for the Prevention and Management of Pressure Ulcers required review to include actions and learning from the August 2017 Internal Audit Report on pressure ulcer prevention and to incorporate the 2018 changes to All Wales Guidance on the reporting and investigation of pressure ulcers. The Pressure Ulcer Prevention Strategic Group (PUPSG) set up a task and finish group and has overseen the revision of the Policy. The latest version has been widely distributed via the Nursing and Midwifery Board, the Assurance and Learning Group and PUPSG for comment and amendment.

The policy was taken to the Quality and Safety Forum on the 5th July 2018 and no further comments received.

- **Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults**

The Patient Safety Alert PSA008 issued May 2017 contained actions for Health Boards where Nasogastric or orogastric tubes are used. The actions included the requirement to revise the Health Board Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults and Procedures in place, to reflect all the safety critical requirements.

A Multidisciplinary Task & Finish Group chaired by the Deputy Medical Director conducted a review of the policy and finalised training options for consideration.

The policy has also been presented for comments to Nursing Midwifery Board in January and June 2018 where proposed training requirements were agreed. The Policy has also been circulated and presented to the Nutrition Steering Group for comments. The policy has been presented to the Quality & Safety Forum initially on the 12th January 2018 for comments and also in July 2018 where final comments were received from Princess of Wales Delivery Unit and Primary Care & Community Service Delivery Unit.

- **Policy and Procedure for the Prevention and Management of Adult Inpatient Falls**

The Health Board Falls Policy and associated documentation, did not fully meet NICE CG161 (2013) guidelines and address all the key recommendations from the National Audit of Inpatient Falls (NAIF) (2015). There was an identified need to realign and review the falls documentation currently in place to enable it to be more user-friendly and allow all health care professionals to appropriately assess patients at risk, plan their care and document robust information.

The Health Board Falls Improvement Group was re-established in 2017 and one of its first tasks was to review and revise the Falls Policy, training and associated documentation and record keeping.

The Falls Policy and associated documentation has now been reviewed and revised which was completed with full engagement of all delivery unit falls representatives. The revised draft policy and associated documentation has been successfully trialled on wards within Princess of Wales Service Delivery Unit. The final draft policy incorporates all recommended guidance from NICE and the recommendations from the 2017 National Inpatients Falls Audit. Each delivery unit will be provided with a step by step presentation to enable them to highlight to their staff the key changes within the policy.

The policy was taken to the Quality and Safety Forum on the 5th July 2018 and final comments received.

3. GOVERNANCE AND RISK ISSUES

There are significant governance and risk issues for the Health Board if there is not an agreed process for the approval and assurance of Clinical Policies.

The Health Board *“Policy for the production, consultation, approval, publication and dissemination of strategies, policies, protocols, procedures and guidelines”* requires the Quality and Safety Committee to approve all clinical policies. This policy is due for review in October 2018 and as part of the process of review, it is proposed that the Quality Forum becomes the approving authority with reports to the Quality and Safety Committee confirming policies approved.

4. FINANCIAL IMPLICATIONS

The process would have no additional financial implications for the Health Board.

5. RECOMMENDATION

Members are asked to:

- **Note** the proposal for Clinical Policy ratification
- **Ratify** the following policies:
 - Policy for the Prevention and Management of Pressure Ulcers
 - Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults
 - Policy and Procedure for the Prevention and Management of Adult Inpatient Falls Clinical Policies for approval by the Committee

Governance and Assurance														
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships					
			✓						✓					
Link to Health and Care Standards (please ✓)	Staying Healthy		Safe Care		Effective Care		Dignified Care		Timely Care		Individual Care		Staff and Resources	
			✓											
Quality, Safety and Patient Experience														
There are significant governance and risk issues for the Health Board if there is not an agreed process for the approval and assurance of Clinical Policies. This could have an impact on quality, safety and patient experience.														
Financial Implications														
The process would have no additional financial implications for the Health Board.														
Legal Implications (including equality and diversity assessment)														
The Health Board is required to have an approved process for the ratification of Clinical Policies.														
Staffing Implications														
No impact identified.														
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)														
No impact identified.														
Report History		None.												
Appendices		Appendix 1 - Revised Policy for the Prevention and Management of Pressure Ulcers Appendix 2 – Clinical Policy for the Insertion and Maintenance of Nasogastric (or Orogastric) Feeding (and Draining) Tubes in Adults Appendix 3 - Policy and Procedure for the Prevention and Management of Adult Inpatient Falls												