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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	26 July 2022	Agenda Item	6.2
Report Title	Report of the Quality Safety and Patient Services Group June 2022		
Report Author	Angharad Higgins, Interim Head of Quality and Safety		
Report Sponsor	Hazel Powell, Deputy Director of Nursing		
Presented by	Gareth Howells, Executive Director of Nursing, Co-chair Quality, Safety and Patient Services Group Hazel Powell, Deputy Director of Nursing		
Freedom of Information	Open		
Purpose of the Report	This report provides a summary on behalf of the Chair of the Quality, Safety and Patient Services Group meeting on June 21 st 2022, noting any issues requiring escalation to the Quality Management Board.		
Key Issues	<ul style="list-style-type: none"> - Inaugural meeting under new structures - Inaugural meetings of new sub-groups held Decisions made: <ul style="list-style-type: none"> - Agreement to change name to Patient Safety Group (PSG) - Agreement for Safeguarding to report into PSG - Approval of proposal to reintroduce Community Health Council unannounced visits to ward areas 		
Specific Action Required (please choose one only)	Information	Discussion	Assurance
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE/RECEIVE/CONSIDER/APPROVE/RECOMMEND/ENDORSE <p><u>Items for information will not be allocated time for consideration within the Board/Committee meeting.</u></p>		

(Quality Safety and) Patient Services Group June 2022

1. INTRODUCTION

This report provides a Chair's update to the Quality Management Board and Quality and Safety Committee on the Quality, Safety and Patient Services Group meeting of June 21st 2022.

2. BACKGROUND

In the Quality, Safety and Governance Group (QSGG) report to Quality and Safety Committee on 24th May 2022, forthcoming changes to the Health Board's quality and safety structures were set out. This included the disbanding of the previous Quality, Safety and Governance Group, to be replaced by the Quality, Safety and Patient Services Group, which the group have subsequently agreed to name the Patient Services Group (PSG). The quality and safety structures have been revised to reflect the recommendations of the Wales Audit and Internal Audit reports on our Quality and Safety Framework, and to prepare the organisation for the implementation of the Duty of Quality, which comes into effect in April 2023.

An implementation plan for the new structures was shared with Quality and Safety Committee in May and an updated plan is included in Appendix 1.

A summary of the new structures is included in Appendix 2.

The PSG has four reporting groups, namely

- Patient and Stakeholder Experience
- Patient Safety and Compliance
- Patient Outcomes and Clinical Effectiveness
- Quality Priorities Programme Board

Assurance and escalation reports are received from each of these groups in PSG, which then reports into the monthly Quality Management Board.

PSG held its inaugural meeting on June 21st 2022, with representation from each of the sub-groups and service groups.

2.1. Structure and terms of reference

The following areas of discussions were held in relation to the group's structure:

Area of Discussion	Outcome	Timescale and Lead
Terms of reference	Draft terms of reference were shared.	Group members will review and final draft to be agreed in next meeting on 19.7.22.

	Agreed to change name of group to Patient Safety Group (PSG) in order to be more concise and identifiable.	Final terms to be approved by Management Board. Draft terms reflect changed name.
Patient Voice	Rolling programme of patient stories from services to be presented to PSG	Mental Health and Learning Disabilities Service Group presenting story to meeting on 19.7.22
Work Plan	Annual work plan drafted, including reporting arrangements.	Final plan to be agreed in July 2022, including regular Quality Congress events.

2.2 Risk Management

A report on quality and safety risks within the Health Board risk register was received.

2.3 Sub-Group Updates

Updates were received from the following groups:

Patient and Stakeholder Experience

Inaugural meeting held 14.6.22. Terms of reference drafted. Template for service group reporting developed and shared.

Patient Safety and Compliance Group

Inaugural meeting held 14.6.22. Terms of reference drafted. Mapping of existing sub-groups and reporting mechanisms to be undertaken.

Patient Outcomes and Clinical Effectiveness Group

Terms of reference of Clinical Outcomes and Effectiveness Group (COEG) to be revised to included scope of this group, as COEG is well established and well attended.

Quality and Safety Priorities Programme Board

Next meeting 19.7.22.

2.4 Items for assurance

Putting Things Right

Paper received reporting

- 1% increase in patient satisfaction in April 2022 compared to previous month-overall score 90%
- 45 compliments received in May 2022
- 219 complains received in May, complaint response performance 65%, WG target 75%. Action as a result: the Quality Improvement Team are working with service groups to review processes for managing concerns in order to identify potential improvements
- 1 Never Event in May 2022, relating to retained object in Orthopaedics, this is currently under investigation
- Non-compliance with 3 Patient Safety Alerts/ Patient Safety Notices, these are being proactively managed in order to achieve compliance

Safeguarding

Report received, agreement that Safeguarding should report into PSG in future.

2.5 Items for Approval

Community Health Council Unannounced Visits

The Group **approved** a proposal to reintroduce CHC visits to inpatient areas, noting the need for individual sites to consider what systems they need to put in place to support this.

2.6 Items for noting

Feedback from positive Improvement Cymru Diagnostic visit shared.

AMaT business case shared.

3. GOVERNANCE AND RISK ISSUES

No items for escalation were identified within this meeting.

The PSG noted the potential future risk to delivery of the quality and safety structures due to the increased administrative and capacity demand of the new sub-groups. This will be reviewed over the next quarter.

The PSG acknowledged that there will be a process of realignment as the new quality and safety structures are established and noted the importance of regularly reflecting on the functioning of this and the sub-groups in order to ensure that they meet their objectives and support the delivery of safe patient care.

4. FINANCIAL IMPLICATIONS

None.

5. RECOMMENDATION

The Board and Committee are asked to note the contents of this report and the progress made in implementing the new quality and safety structures.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" 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 checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" 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 checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
The Patient Services Group provides a clear and comprehensive structure for quality, safety and patient experience.		
Financial Implications		
Implication of long term administration requirement.		
Legal Implications (including equality and diversity assessment)		
Legal implications considered within individual reports, including Putting Things Right and Safeguarding.		
Staffing Implications		
Longer term administration requirement to support sub-groups.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<ul style="list-style-type: none"> ○ Long Term - The group will consider quality planning in order to adopt a strategic approach to quality and improvement. ○ Collaboration – The group seeks to share learning and improvement across the organisation ○ Involvement - The Patient and Stakeholder Experience Group promotes involving and learning from those who use our services. 		
Report History	Quality Management Board July 2022 Quality and Safety Committee July 2022	
Appendices	Appendix 1- Updated Implementation Plan Appendix 20- Quality and Safety Structures	

Appendix 1: Quality and Safety Structures Implementation Plan June 2022

Date	Forum	Required Action	Position 30.6.22
3.5.22	Quality Safety Governance Group (QSGG)	Engagement with QSGG on revised structures	Complete
(by)31.5.22	Out of committee	Agreement of all sub-group chairs	Complete
(by)31.5.22	Out of committee	Draft terms of reference drafted for each subgroup	Complete
(by)31.5.22	Out of committee	Administrative support for subgroups confirmed	Complete for first three months
(by) June 14 th	<ol style="list-style-type: none"> 1. Patient and Stakeholder Experience (PSE) 2. Patient Safety and Compliance (PSC) 3. Patient Outcomes and Clinical Effectiveness (POCE) 	Initial meeting of sub-groups held	<ol style="list-style-type: none"> 1. Inaugural meeting held 14.6.22 2. Inaugural meeting held 14.6.22 3. COEG terms of reference to be revised to reflect scope of POCE
June 21st	Quality, Safety and Patient Services Group (QSPSG)	Inaugural Quality Safety and Patient Services Group meeting	Inaugural meeting held
(by) October 2022	QSPSG	Development of annual reporting plan for QSPSG and subgroups	Initial draft shared within QSPSG. PSE and PSC plans to be agreed in August meetings. Timescale amended
(by) October 18 th	QSPSG	Development and presentation of Service Groups' Annual Quality Plans to QSPSG.	
(by) November 15 th	QSPSG	Interim Review of Terms of Reference	

Appendix 2: Quality and Safety Structures June 2022

