

Swansea Bay University LHB
Quality and Safety Committee
Unconfirmed minutes of the meeting held on 22nd August 2019
at 9.00am in the Millennium Room, HQ

Present

Martyn Waygood, Interim Vice Chair (in the chair)

Reena Owen, Independent Member

Maggie Berry, Independent Member

Jackie Davies, Independent Member

In Attendance

Chris White, Chief Operating Officer

Gareth Howells, Director of Nursing and Patient Experience

Hazel Lloyd, Head of Patient Experience

Sian Harrop-Griffiths, Director of Strategy

Delyth Davies, Head of Nursing Infection Prevention and Control (minute 114/19)

Cathy Dowling, Deputy Director of Nursing and Patient Experience (minute 116/19 to 125/19)

Lee Morgan, Head of Information Services (minute 121/119)

Paula O'Connor, Head of Internal Audit (minute 107/19 to 124/19 and 131/19)

Pam Wenger, Director of Corporate Governance

Richard Evans, Executive Medical Director (minute 107/19 to 117/19 and 121/19)

Jane Dale, Healthcare Inspectorate Wales (minute 107/19 to 127/19)

Liz Stauber, Interim Head of Corporate Governance (minute 117/19)

Leah Joseph, Corporate Governance Officer

Delyth Lewis, Wales Audit Office

Charlotte Higgins, Programme Management Office Lead for Transformation (minute 115/19)

Martin Bevan, Unit Medical Director Neath Port Talbot (minute 107/19)

Angharad Higgins, QSI Manager (minute 107/19)

Helen Kemp, Clinical Director of Quality and Safety for Primary Care and Community (minute 118/19)

Sarah Davies, Performance Improvement Officer (minute 118/19)

Minute

Action

107/19

PATIENT STORY

Martin Bevan and Angharad Higgins were welcomed to the meeting.

A patient story was received from a gentleman who had suffered an accident at home. He was treated at the Minor Injury Unit (MIU) at Neath Port Talbot Hospital. The staff completed a head assessment review and x-rays were taken. The patient commented that staff were thorough with their checks and that he was seen immediately on attending the unit. The patient was referred to the Ear, Nose and Throat department at Morriston hospital due to the injuries to his face. The patient praised the MIU staff for their care towards him.

The short film also outlined the past 12 months at the MIU in Neath Port

Talbot hospital following an unannounced visit from the Healthcare Inspectorate Wales (HIW). The unit had received positive patient feedback via the friends and family surveys. Kevin Randall introduced himself as the Lead Consultant Nurse at the Unit and provided information around the amount of patients that are treated at the Unit throughout the year.

In discussing the patient story, the following points were raised:

Angharad Higgins mentioned that following the HIW visit in September 2018, it was identified that systems were not sufficiently robust and recent changes have been implemented, quarterly governance group meetings have been arranged. She detailed that no complaints have been raised in the first quarter. Staff have worked extremely hard throughout this period. Angharad Higgins assured the committee that the Senior Matron for MIU completes unannounced spot checks throughout the hospital, including the birth centre.

Reena Owen acknowledged that people are appreciative, however the learning needs to be shared as it is applicable to other sites within the health board.

Chris White stated that the HIW report was received in a timely manner. He highlighted that Kevin Randall is due to visit Morriston Hospital to review the primary care referral process to ensure a robust system is implemented.

Sian Harrop-Griffiths described her recent visit at the MIU. It was clear that the unit has responded to the HIW report actions. The team's ethos was great, the department's commitment to staff development was clear and compassion to patients was fantastic.

Jane Dale commented that inspections are focused on improvement and it is pleasing to hear that learning has been shared throughout the site. Patients have benefited and there have been no complaints recorded.

Maggie Berry queried whether the Bridgend boundary change would have affected the flow of patients attending Neath Port Talbot Hospital. Gareth Howells responded, stating that the numbers of patients being treated at the hospital is enormous, however the numbers affected by the boundary change has probably not made a difference. Patients are inclined to "think with their feet". Angharad Higgins commented that there have been 38,000 new attendees and 43,000 call backs in the past year.

Hazel Lloyd advised that the patient story has been shared with other sites. The HIW newsletter is currently in draft and this tool is used for learning. She commented that the report was exemplary.

Martin Bevan mentioned that the HIW report had a negative effect on staff and queried if HIW have a process in place to assist with boosting moral after inspections. Jane Dale confirmed that there is no assistance in place, however the HIW try to ensure a balance when publishing their reports. Jane Dale said that she would share the feedback with the

Executive team at HIW.

Martyn Waygood provided a positive personal account on a visit to the MIU. The feedback was that the service was excellent and staff were extremely caring.

Resolved: The patient story be **noted**.

108/19 WELCOME AND APOLOGIES FOR ABSENCE

Martyn Waygood welcomed everyone to the meeting.

No apologies were noted.

109/19 DECLARATIONS OF INTEREST

There were no declarations of interest.

110/19 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 20th June were **received** and **confirmed** as a true and accurate record, except to note the following typographical error:

74/19 Patient Story

A patient story was received outlining the experience **of** a couple who had recently had their first baby at Singleton Hospital.

111/19 MATTERS ARISING NOT ON THE AGENDA

(i) 74/19 Patient Story

Martyn Waygood queried what actions were being taken in respect of midwives undertaking growth scans. Gareth Howells has met with the Interim Head of Midwifery and a discussion with Chris White on this matter is due to take place. A solution is required and a review of demand, capacity and recruitment is required. Gareth Howells gave assurance that the gap and grow programme will be captured in the maternity review.

Reena Owen raised concerns that feedback previously received regarding patients having to wait hours for scans when having to ensure their bladder is full would not be captured. Gareth Howells gave assurance it will also be captured in the maternity review.

(ii) Infection Control Report

Gareth Howells stated that there is work ongoing with prescribing in the community. The challenge is that the team was not in place to cover the community and he hoped that a proposal of a dedicated team is supported by the Investments and Benefits Group (IBG).

112/19 ACTION LOG

The action log was **received** and following comments were **noted**.

(i) Action 3

Gareth Howells highlighted that all cases have been reviewed in respect of the Singleton deep dive. A number of the cases relate to clinical susceptibility and avoidability is to be reviewed.

113/19 WORK PROGRAMME 2019/20

- The committee's work programme was **received** and **noted**.

114/19 INFECTION CONTROL REPORT

Delyth Davies was welcomed to the meeting.

A report providing an update in relation to infection control was **received**.

In introducing the report, Delyth highlighted the following points:

- Singleton are underfunded for cleaning. A task and finish group has been set up.
- The Datix team are involved in piloting new codes to assist staff to correlate incidents and rates of infection.
- The challenges over occupancy, the difficulty in completing deep cleans and no available space to decant.

In discussing the report, the following points were raised:

Paula O'Connor highlighted that internal audit have picked up discrepancies between the data on Datix and IC Net.

Reena Owen found the report interesting but commented that safety is a basic requirement and assurance was needed that the health board are 100% compliant with infection control policies.

Gareth Howells informed the committee that the IBG report is clear that cleaning and environmental funding is important. There are deficits in cleaning, and a large investment is required. The ability and capacity to decant and deep clean would assist.

Sian Harrop-Griffiths confirmed that four bedded bays are being utilised to decant in Morriston to assist with the refresh of walls and floors.

Pam Wenger highlighted that the board have agreed a long term annual plan in respect of infection control.

Chris White outlined that the health board are reviewing a number of options in respect of decanting facilities. Discussions are ongoing and an investment for intervention review is required.

Martyn Waygood requested regular reports regarding the key issues in

this report are provided.

Resolved: - The report be **noted**.

115/19 QUALITY IMPACT ASSESSMENT

A report providing an update in relation to quality impact assessment was **received**.

In introducing the report, Charlotte Higgins highlighted the following points:

- Nursing workforce and therapies high value opportunities have been reviewed. Value and variation and MCAS high values are to be reviewed in September.
- The delivery units have been asked to review high risks and monitor the metrics.

In discussing the report, the following points were raised:

Reena Owen queried if infection control was included in this review. Gareth Howells confirmed that it was.

Chris White provided the committee with background regarding the 'Vanguard' demountable unit in Morriston which assists planned care and cancer patient reviews. The Morriston Service Director has sought feedback from patients relating to it. Decisions are yet to be taken regarding the future of the unit. The committee was assured that staff are kept fully up to date on future plans.

Resolved: - The report be **noted**.

116/19 MATERNITY SERVICES UPDATE

A report providing an update in relation to the maternity services was **received**.

In introducing the report, Cathy Dowling highlighted the following points:

- There are no red alerts, and ambers are being rolled to green. The work in Gynaecology is near completion and the dashboard has been recognised as good practice.
- The foetal wellbeing business case is progressing.
- ESR is capturing mandatory training.
- The recent HIW inspection feedback was positive. The report has not yet been published, but it is expected in the next few weeks. The health board's action plan and HIW's report correlated and it was detailed in the feedback that it was the best record keeping the inspectors had seen.
- The staff module for ante-natal is being reviewed.

In discussing the report, the following points were raised:

Cathy highlighted that the reliability of compliance was not to an optimum level and it is paper based. Hazel Robinson is working on a piece of work to streamline this.

Jane Dale agreed to provide the committee with timelines for reports and actions. Pam Wenger noted that this would provide simple guidance for when an inspection has taken place.

JD

Chris White thanked Cathy Dowling for the hard work, reflected in the HIW report.

Martyn Waygood closed the discussion commenting on the great work that has taken place in the maternity unit. Martyn found his and Pamela Wenger's recent visit to the maternity unit extremely positive.

Resolved: - The report be **noted and approved**.

- Jane Dale to provide the committee with timescales for reports and actions.

JD

117/19 PERFORMANCE REPORT

The quality and safety committee performance report was **received**.

In discussing the report, the following points were raised:

Chris White informed colleagues that the recent unscheduled care summit took place. The health board is working with colleagues in the ambulance service to speed up handovers. A review of system capacity is expected and the winter plan is to be brought to the Performance and Finance Committee meeting in October. Cancer metric expectations have been uploaded to Welsh Government. Breast and Gynaecology are under review. Referral to treatment times have been affected by operational pressures and by the impact of HMRC (Her Majesty's Revenue and Customs) rules on tax regarding pensions in terms of the ability to find consultants to undertake waiting list initiatives.

Sian Harrop-Griffiths highlighted a recent call with Andrew Goodall where he raised the importance of quality and safety committees' scrutiny of ambulance handovers.

Chris White declared that the health board has the best immediate release rate in Wales. Immediate release and high level amber one are under review. Chris confirmed that care packages have decreased due to companies going into administration. Chris highlighted that unscheduled care meetings take place every Wednesday with him and the Service Directors. Chris agreed that he would provide an overview of the front and back end issues in unscheduled care.

CW

Gareth Howells confirmed that he plans to meet with social services and the local authority regarding care packages.

Sian Harrop-Griffiths announced a repackage of a proposal which has been referred to Welsh Government to support unscheduled care which included additional occupational therapy vacancies.

Paula O'Connor detailed that the General Practitioner (GP) Out of Hours data is not clear. Gareth Howells highlighted that the number of pressure ulcers and falls have decreased. Maggie Berry raised concerns around the self-assessment infection levels and not matching the hand hygiene percentages. Gareth Howells assured the committee that he trusted the figures. Cathy Dowling informed the committee that the infection control team's carried out unannounced spot checks. Gareth Howells indicated that spot checks are assisting staff to reinforce bare beneath the elbow and hand washing monitoring. Richard Evans commented that the process assists in highlighting non-compliant members of staff and supports staff who have made comments to non-compliant peers.

Martyn Waygood indicated intentions to discuss the data at the Quality and Safety workshop in October.

- Resolved:**
- The report be **noted**.
 - Chris White to provide an overview of the front and back end of unscheduled care.
- CW**

118/19 CHANGE IN AGENDA ORDER

The agenda order be changed and item 4.3 be taken next.

119/19 PRIMARY CARE DASHBOARD

Martyn Waygood welcomed Dr Helen Kemp and Sarah Griffiths to the meeting.

A report providing an update in relation to the primary care dashboard was **received**.

In discussing the report, the following points were raised:

Chris White found the paper most useful. Sian Harrop-Griffiths commented that the measures look good and it will be interesting to see how we are sharing learning around the care we provide off the back of the clusters.

Helen Kemp informed colleagues that access to information for patients is one of the parts of the framework due to be implemented in September. Helen will feedback to colleagues that it should be detailed on the performance dashboard. Helen commented that investment may be required to obtain a customer experience element for the dashboard.

Chris White confirmed that he is happy to meet with Welsh Government to put primary care's ideas forward.

Maggie Berry was pleased to see clusters developing. Maggie visited the Neath hub recently and witnessed staff being inventive and supportive of the health board's goals. Maggie also highlighted a physiotherapy referral at the hub goes back to the GP, however the hospital walk-in physiotherapy information is not referred back to the GP.

Helen Kemp will feedback that the telephone policy requires review as

the hybrid communication policy is better.

Paula O'Connor informed the committee that measures need to be clear to enable positive change. Paula queried how the health board is measuring the success of enhanced GP services.

Martyn Waygood is keen to obtain feedback on the GP's service and this can be discussed at the workshop in October. Martyn asked Helen Kemp for representation at the workshop and Chris White invited Helen to attend the Quality and Safety meeting in December 2019.

HK

- Resolved:**
- The report be **noted**.
 - Helen Kemp to attend the Quality and Safety workshop in October and the Quality and Safety Committee meeting in December.

HK

120/19 PATIENT EXPERIENCE REPORT

A report providing an update in relation to the patient experience report was **received**.

In introducing the report, Hazel Lloyd highlighted the following points:

- Patient experience is constantly being captured.
- Main issues: appointment times; car parking; and information.
- All complaints are classed as formal. There is no longer an option to differentiate between formal and informal.
- A deep dive is ongoing.

In discussing the report, the following points were raised:

Cathy Dowling highlighted the need for a hybrid approach with volunteers leading on collecting patient feedback.

Hazel Lloyd commented that we can respond to the public who have left low scores, as long as they provide their contact information. We can then inform them of what actions have taken place in light of their comments or recommendations. Reports are circulated amongst the wards on a weekly basis informing staff of comments made.

Pam Wenger highlighted her experience when she shadowed the volunteers. Pam detailed that she assisted patients and families to complete the feedback forms. Pam suggested that it may be helpful for independent members to be involved in a similar experience. Pam also mentioned that Patient Experience week is being celebrated soon. As a health board, a proactive communications approach is required next year to highlight the celebration.

- Resolved:**
- The report be **noted**.
 - The committee is to support the ongoing commitments.

121/19 WARD TO BOARD DASHBOARD

Lee Morgan was welcomed to the meeting. A report providing an update in relation to the ward to board dashboard was **received**.

In introducing the report, Lee Morgan and Cathy Dowling highlighted the following points:

- Eight areas have been covered on the dashboard: falls; pressure ulcers; patient experience; older people's standards; safeguarding; medicines; safer staffing; and infections. The ninth area, quality assurance framework, is ongoing and is not yet live.
- The information is connected to Datix and the data can be transferred into Excel or copied into graphs for a Word document.
- The information is updated daily. The process is evolving to ensure the data is transparent. A high level of assurance is in place regarding the data.
- Approximately 160 people use this data each month, which makes this dashboard one of the health board's most utilised dashboards. All members of staff can view it.
- Singleton are now using this dashboard at their weekly scrutiny panels.
- The red, amber and green (RAG) ward hotspot will be reflected via this dashboard.

In discussing the report, the following points were raised:

Martyn Waygood queried whether improvements can be made in respect of scrutiny panels. Lee Morgan confirmed that elements of the dashboard in relation to Quality and Safety can be improved with feedback from staff. Martyn requests an update in February 2020.

GH

Pam Wenger highlighted the need for board members to have access to the dashboard to assist in their role.

Resolved:

- The report be **noted**.
- Gareth Howells to provide an update in February 2020 regarding improvements of the dashboard following patient feedback.

GH

122/19 HEALTH AND CARE STANDARDS SELF-ASSESSMENT 2019/2020 REPORT

A report setting out the findings of recent health and care standards self-assessment 2019/2020 was **received**.

In introducing the report, Cathy Dowling highlighted the following points:

- Metrics need to be firmer and clearer.
- An establishment group will take this forward.
- The guidance document is to support improvement.

In discussing the report, the following points were raised:

Maggie Berry commented that the report was excellent and it's getting the delivery units to work together.

Gareth Howells highlighted that there are good modules out there that we can adapt to our sites. Paul O'Connor cited Aneurin Bevan for their clear timescales and good documentation. This is worth consideration for the future.

Jane Dale reminded the committee that HIW measure against the healthcare standards and they need to be referenced in the papers.

Martyn Waygood requested this be added to the work plan.

LJ

- Resolved:**
- The report be **noted and approved**.
 - Leah Joseph to add to work plan.

123/19 CHANGE IN AGENDA ORDER

The agenda order be changed and item 5.2 be taken next.

124/19 QUALITY AND SAFETY ASSURANCE FRAMEWORK

A report setting out the findings of the recent Quality and Safety Assurance Framework was **received**.

In introducing the report, Gareth Howells highlighted the following points:

- Gareth thanked Martyn Waygood for his highly constructive comments on the paper prior to this meeting.
- This version of the document is not the final article and Gareth requires a sense check at the next Quality and Safety meeting in October.
- The dashboard, framework and workshop are key.

In discussing the report, the following points were raised:

Reena Owen queried if the document should have reference to the stakeholder group. Pam Wenger advised that it might be helpful to share a draft document for stakeholder comments. Martyn Waygood agreed to share the draft paper with the stakeholder group.

- Resolved:**
- The report be **noted**.

125/19 Delivery Unit 90 DAY REVIEW ACTION PLAN

A report setting out the findings and recommendations of the recent DU 90 day review action plan was **received**.

In introducing the report, Cathy Dowling highlighted the following points:

- The Quality Assurance Framework was actioned and is to be closed down.

In discussing the report, the following points were raised:

Gareth Howells confirmed that monthly engagement meetings with the DU take place.

Cathy Dowling advised that the Mental Health and LD units have embraced the plan. The toolkit has been shared across Wales.

Resolved: - The report be **noted**.

126/19 CHANGE IN AGENDA ORDER

The agenda order be changed and item 5.4 be taken next.

127/19 EXTERNAL INSPECTIONS

A report providing an update in relation to the external audit and outcome review plan was **received** and **noted**.

In discussing the report, the following points were raised:

Gareth Howells highlighted two focus areas. The first is maternity and the second Primary Care and Dental. A summit has been arranged in September to discuss progression, HIW assurance and to understand the position.

Resolved: - The report be **noted**.

128/19 CLINICAL AUDIT UPDATE

A report providing an update in relation to the clinical audit and outcome review plan was **received** and **noted**.

In introducing the report, Richard Evans highlighted the following points:

- Welsh circular provides expectations for 2020.
- National Audits are taking place. It is important to note our participation in the audit programme and this paper should provide assurance.
- Additional audits are in place health board audits; organisational priorities for audits; delivery unit audits; and personal audits.
- The audits will link into service and clinical plans.

Martyn Waygood thanks Richard Evans for a refreshed look on audits and it providing the committee with assurance

Pam Wenger gave recognition to Richard in respect of the local audits.

Resolved: - The report be **noted**.

129/19 ITEMS FOR INFORMATION

- A report providing items for information was **received** and **noted**.

130/19 CHANGE IN AGENDA ORDER

The agenda order be changed and item 5.3 be taken next.

131/19 INTERNAL AUDIT REPORT

A report providing an update in relation to the internal audit and outcome review plan was **received** and **noted**.

In introducing the report, Paula O'Connor highlighted the following points:

- The health board is overall in a positive position.
- The medicines management report was reasonable.
- The nurse staffing levels were acceptable, however recommendations have been taken forward.
- The data in regards to Infection Prevention Control is variable between Datix and IC Net. There are long delays with closures of recommendations.

In discussing the report, the following points were raised:

Richard Evans found the report useful and the report should assist in streamlining the health board. It is a refresh for staff of the requirements needed.

Gareth Howells was pleased with the report. Gareth commented that the report is a fair assessment of the challenges faced this year in regards to nurse staffing. The actions are practical and progress has been reflected.

Jackie Davies queried if the health board is compliant with the Nurse Staffing Act. Gareth Howells confirmed that the health board is compliant.

Resolved: - The report be **noted**.

132/19 ANY OTHER BUSINESS

There was no further business and the meeting was closed.

133/19 NEXT MEETING

This was scheduled for 24th October 2019.

134/19 MOTION TO EXCLUDE THE PRESS AND PUBLIC IN ACCORDANCE WITH SECTION 1(2) PUBLIC BODIES (ADMISSION TO MEETINGS) ACT 1960.