

**Swansea Bay University Health Board
Quality and Safety Committee**

**Unconfirmed minutes of the meeting held on 28th July 2020
at 1.00pm in the Millennium Room, Second Floor, HQ and via Microsoft Teams**

Present

Martyn Waygood, Interim Vice Chair (in the chair)
Reena Owen, Independent Member (via Microsoft teams)
Maggie Berry, Independent Member (via Microsoft teams)
Nuria Zolle, Independent Member (via Microsoft teams)

In Attendance

Christine Williams, Interim Director of Nursing and Patient Experience
Nigel Downes, Head of Quality and Safety
Darren Griffiths, Interim Director of Finance (via Microsoft teams)
Richard Evans, Medical Director (via Microsoft teams)
Sian Harrop-Griffiths, Director of Strategy (via Microsoft teams from minute 151/20)
Leah Joseph, Corporate Governance Officer
Lisa Hinton, Assistant Director of Nursing Infection Prevention & Control (via Microsoft teams minute 147/20)
Craig Wilson, Deputy Chief Operating Officer (via Microsoft teams)
Hazel Lloyd, Head of Patient Experience (via Microsoft teams to minute 155/20)
Pam Wenger, Director of Corporate Governance (via Microsoft teams)
Matt John, Associate Director of Digital Services (via Microsoft teams from minute 153/20)
Helen Higgs, Head of Internal Audit (via Microsoft teams)
Carole Mosley, Wales Audit Office (via Microsoft teams)
Scott Howe, Healthcare Inspectorate Wales (via Microsoft teams)
Kirsty Lagdon, Healthcare Inspectorate Wales (via Microsoft teams)

<u>Minute</u>		<u>Action</u>
139/20	WELCOME AND APOLOGIES FOR ABSENCE	
	The following apologies were noted: Chris White, Chief Operating Officer/ Director of Therapies and Health Science; Jackie Davies, Independent Member; Keith Lloyd, Independent Member.	
140/20	DECLARATIONS OF INTEREST	
	There were no declarations of interest.	
141/20	MINUTES OF THE PREVIOUS MEETING	
	The minutes of the meeting held on 23 rd June 2020 were recorded as a true and accurate record.	
142/20	MATTERS ARISING NOT ON THE AGENDA	
	There were no items identified.	
143/20	ACTION LOG	

	i. <u>Action 9 – Internal inspections within performance figures</u> Christine Williams advised that Nigel Downes is commencing work on this and an update is expected to be received in October 2020.	
144/20	WORK PROGRAMME 2019/20	
	Martyn Waygood requested that a clinical ethics committee update be added to the work programme as it is particularly pertinent in the current circumstances. He also requested that the COVID-19 metrics are brought to the committee on a monthly basis going forward.	MW DG
Resolved:	The work programme was noted .	
145/20	CHANGE IN AGENDA ORDER	
	The agenda order be changed and items 3.1 be taken next, with 2.1 following.	
146/20	QUALITY AND SAFETY GOVERNANCE GROUP	
	A report providing an update in relation to the Quality and Safety Governance Group was received . In discussing the report, the following items were raised: Martyn Waygood queried if the never event detailed within the report related to a retained swab, and needed assurance that a pattern was not emerging. Hazel Lloyd confirmed that the incident referred to a retained wire and advised that Gold Command are reviewing all never events. Richard Evans assured that in this case a guide wire was used in an arterial catheterisation, and as a foreign body was retained it was recorded as a never event. Martyn Waygood noted the lack of an adolescent environment issue highlighted in the report. Christine Williams advised that a risk assessment is due to take place in order to develop a suitable model with an update going to the Quality and Safety Governance Group in September. Pam Wenger queried whether the word 'escalation' applies in section 7 of the report, and whether 'exception' is more appropriate. Nigel Downes confirmed that the word 'exception' is appropriate and he will amend the report to reflect this.	
Resolved:	The report was noted .	
147/20	INFECTION PREVENTION CONTROL	
	A report providing an update in relation to infection prevention and control was received . In introducing the report, Lisa Hinton highlighted the following points: - The Clostridium difficile (C.diff), pseudomonas and staph aureus	

	<p>year-end targets are over trajectory;</p> <ul style="list-style-type: none"> - Sufficient domestic support is in place, with no historical vacancies left to recruit into at Morriston and Singleton Hospitals; - An infection prevention control 7 day service has commenced. <p>In discussing the report, the following points were raised:</p> <p>Reena Owen voiced concerns regarding the C.diff figures which remain an issue following targeted intervention. She highlighted that following the COVID-19 outbreak there had been a large influx of people wanting to work for the health board, but the guidance levels in relation to cleaning recruitment have not been achieved.</p> <p>Lisa Hinton advised that a proactive Hydrogen Peroxide Vapour (HPV) programme has been implemented for thorough decontamination. There is a need to work with the practices with the highest rates of C.diff to review their antimicrobial prescribing, and respiratory illnesses following COVID-19 as it may have affected antimicrobial prescriptions. She confirmed that Primary Care and Infection Prevention Control are setting up a working group to capture this information. She highlighted that there are no vacant domestic posts at Neath Port Talbot Hospital, and no historical vacancies at Morriston or Singleton Hospitals. The Health Care Support Work role is under review to enable utilisation of deep cleans.</p> <p>Christine Williams advised that there is a C.diff improvement plan in place, but it does require refreshing. She added that lessons need to be learned following the COVID-19 outbreak and there is a need to strengthen basic training for staff. She added that the social distancing guidance will support winter pressures including capacity and overcrowding.</p> <p>Martyn Waygood queried what improvements are anticipated following the implementation of the actions advised within the report. Lisa Hinton advised that benchmarking is taking place to identify key focuses, which will be reviewed in March 2021. A monthly sense check will take place to ensure the health board is on course to complete the actions detailed within the report.</p>	
Resolved:	The report was noted .	
148/20	FINAL DISCHARGE SUMMARIES REPORT	
	<p>A report providing an update in relation to the final discharge summaries report was received.</p> <p>In introducing the report, Helen Higgs highlighted that the report had been to the Audit Committee where the actions and deadlines of responses were agreed.</p> <p>In discussing the report, the following items were raised:</p> <p>Martyn Waygood highlighted that the deadlines were scheduled for June/July 2020. Helen Higgs advised that two of the actions have been</p>	

	completed, and the remaining two are ongoing. Richard Evans confirmed that he is optimistic that the remaining two actions will be finished within the deadline.	
Resolved:	The report was noted .	
149/20	QUALITY AND SAFETY ISSUES RELATING TO WAITING LIST MANAGEMENT	
	<p>A presentation on the quality and safety issues relating to waiting list management was received.</p> <p>In introducing the presentation, Nigel Downes highlighted the following points:</p> <ul style="list-style-type: none"> - The presentation was intended to stimulate conversation regarding the six areas of concern: mental health, orthopaedic, cancer, stroke, ophthalmology and cardiac; - The Quality Impact Assessment group meets weekly to review the return of essential services; - There is a need to capture harm and how the health board measures this needs to be discussed to minimise duplication of work. <p>In discussing the presentation, the following items were raised:</p> <p>Reena Owen queried if harm can be measured by using the four quadrants detailed at July's Performance and Finance Committee. Darren Griffiths advised that the committee needs to consider the new essential services priorities which will highlight the number of patients going through the dedicated timescales and will also measure the successes in higher priority areas. Richard Evans highlighted that the health board did not necessarily measure harm pre-COVID-19, and therefore did not fully grasp the implications, however the cancer framework and the new essential services priorities should be taken forward to measure harm with the support of new metrics. Nuria Zolle stated that the measurement of harm is incredibly complex and the outcomes for patients is the way forward, with the presentation of the information to the committee.</p> <p>Reena Owen also queried if there is an opportunity for the report template to be amended so that the quality and safety implications are readily available. Pam Wenger advised that there is a section within the report template which provides the opportunity for quality and safety issues to be detailed. Martyn Waygood welcomed a discussion outside of the committee as to how the quality and safety implications can be encapsulated. Pam Wenger agreed to be included in this discussion, but added that there is a broader aspect to be considered for reporting to health board, and agreed that she would initially discuss this with the Chair of the health board and will provide a response at the next committee.</p>	PW

Resolved:	<ul style="list-style-type: none"> - A discussion regarding encapsulating the quality and safety implications within the committee reports to take place with the Health Board Chair. - The presentation was noted. 	PW
150/20	TRANSCUTANEOUS AORTIC VALVE INSERTION (TAVI)	
	<p>A report providing an update in relation to Transcatheter aortic valve insertion (TAVI) was received.</p> <p>In introducing the report, Richard Evans highlighted the following points:</p> <ul style="list-style-type: none"> - A report was presented to the March Health Board meeting which detailed the action plan following the Royal College of Physicians review of 32 TAVI casenotes; - This report provides an update on the progress of the action plan which details that out of 50 actions, 48 have been completed. - The first outstanding recommendation is to review the commissioning arrangements with Welsh Health Specialised Services Committee (WHSSC) to align with the British Cardiovascular Intervention Society (BCIS) standards and component waiting times. The COVID-19 pandemic necessitated rescheduling this meeting, which will be arranged within the next 4 weeks; - The second outstanding recommendation is in regard to the formal appointment of a Clinical Lead for TAVI. An interim Clinical Lead for TAVI is in post. Formal expressions of interest for the substantive appointment have been made and it is expected that this appointment will be confirmed before the end of July 2020; - Communications are under review to understand clinicians' and stakeholders' opinions regarding service improvements; - Work is ongoing to establish a health board pathway to enable transfer of patients between sites. <p>In discussing the report, the following items were raised:</p> <p>Reena Owen queried if there is scope for the national requirements and waiting list times to change. Richard Evans advised that WHSSC fund the TAVI service to deliver a certain number of cases per year within a 26/36 week pathway. The current national guidance is that TAVI should be an 18 week pathway. The discussion with WHSSC should ascertain the waiting time pathway and there may be an effect on the demand for radiology and other diagnostics, but this remains under discussion with WHSSC. He advised that the previous concern around TAVI was the governance of the waiting list.</p> <p>Martyn Waygood stated that he found the framework reassuring.</p>	
Resolved:	The report was noted .	

151/20	PATIENT EXPERIENCE AND CONCERNS REPORTING	
	<p>A report providing an update in relation to patient experience and concerns reporting was received.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> - The Covid survey comments have been used to help celebrate the NHS birthday and there is a thank you bulletin on the intranet; - The Patient Experience Team have developed and managed the staff survey and to date there have been 1,050 completed surveys from staff; - 71 compliments were recorded and 133 complaints were recorded via Datix in June 2020. Complaint themes related to communication, treatment, admissions and appointments; - The details of the themes have been shared with the Directors of Transformation to inform the essential services work; - Complaints performance, against the target of responding to complaints within 30 working days, in April was 81%, previously 48% in March 2020 against Welsh Government target of 75%. For the period 2019/20 the overall performance was 82%; - Reduction in serious incidents reported linked to the change in criteria by Welsh Government in respect of what constitutes a serious incident during the pandemic. - Welsh Government are presently reviewing the serious incident framework and criteria for reporting with stakeholders; - Last Never Event reported to Welsh Government was on 23rd June 2020. <p>In discussing the report, the following points were raised:</p> <p>Maggie Berry noted that communication and mental health both scored highly and queried if there were any issues. Hazel Lloyd is linking with the mental health team to review their support.</p> <p>Martyn Waygood queried if the health board was going to utilise text messaging by way of communicating with patients. Hazel Lloyd confirmed that this is in the planning stage and an update will be included in September's report.</p> <p>Martyn Waygood voiced concerns following the All Wales Survey as out of eleven replies received, three patient's indicated they felt unsafe. Hazel Lloyd confirmed that the team have tried to locate the source and location of the patients, however they were not located due to the feedback being submitted anonymously. She advised that the Unit Medical Director of the site had been informed.</p> <p>Reena Owen was reassured that complaints are being resolved prior to</p>	<p>HL</p>

	<p>involvement of the Ombudsman, however noted that communication sometimes lets the health board down but was pleased to see early resolution being used. Hazel Lloyd supported this and added that discussing complaints verbally with patients is a benefit and can often mitigate the complaint.</p> <p>Martyn Waygood queried how the team captures Primary and Community Care complaints. Hazel Lloyd detailed that Primary and Community Care take the complaints forward as part of Quality and Safety, and going forward she will include them in the patient experience report.</p>	HL
Resolved:	<ul style="list-style-type: none"> - A communication update be provided in September's patient experience report. - Primary and Community Care complaints to be included in the patient experience report going forward. - The report was noted. 	HL HL
152/20	IMPACT OF VISITING POLICIES	
	<p>A report providing an update in relation to the impact of changes to visiting policies was received.</p> <p>In introducing the report, Hazel Lloyd highlighted the following points:</p> <ul style="list-style-type: none"> - Welsh Government have issued revised guidance in relation to patient visitation which came into force on 20th July 2020; - A Task & Finish Group was established to work through the changes in the visiting policy; - The Amazon Wish list has provided enough clean clothing and toiletries for the Health Board to distribute to patients across the hospitals. <p>In discussing the report, the following items were raised:</p> <p>Christine Williams commented that Gold Command previously agreed a phased return to patient visitation which included end of life visiting, Mental Health and Learning Disabilities, and mortuary visits. On the 27th July 2020, the second phase introduced secondary care visiting on hospital sites via a risk assessment. Also, a partner would be able to accompany their partner to a foetal 12 week scan, however the foetal 20 week scan would not be supported until 3rd August 2020 and this is to minimise the clinical risk.</p>	
Resolved:	The report was noted .	
153/20	PERFORMANCE REPORT	
	<p>The performance report was received.</p> <p>In introducing the report, Darren Griffiths highlighted the following points:</p>	

	<ul style="list-style-type: none"> - The number of emergency department (ED) attendances, ED 4 hour breaches and ED 12 hour waits have all increased; - The referral to treatment (RTT) waiting lists have increased to 13,000 patients; - There are an increasing number of urgent RTT outpatient breaches; - Cancer referrals are increasing, however the treatment volumes have reduced; - The diagnostics and therapies waiting list has increased which indicates that the new essential services programme is working; - There is an increasing volume of patients 100% over their target follow up date, following a number of months of improvement. <p>In discussing the report, the following points were raised:</p> <p>Nuria Zolle voiced concerns regarding the possible harm caused due to the essential services waiting times. Darren Griffiths advised that the cancer comparator is not yet completed, however the percentage remains high and non-surgery oncology have high rates. Craige Wilson advised that outpatient services are slowly restarting and there is a focus on urgent patients through the Quality Impact Assessment process. Christine Williams advised that many virtual clinics for urgent patients have taken place throughout the COVID-19 pandemic.</p> <p>Reena Owen informed the committee that she was aware update correspondence had been issued to patients on waiting lists this week. Martyn Waygood identified that medically fit for discharge patient numbers are increasing, ED attendances are returning to normal and falls are increasing. He voiced concerns that people could be attending ED instead of utilising the NHS 111 Wales service and queried what the health board is doing to minimise non-urgent ED attendances. Craige Wilson highlighted that the health board is reviewing 'phone first' schemes, but there is a need to ensure appropriate pathways to route patients in the right direction. Martyn Waygood requested assurance around maintaining ED attendance levels.</p>	
Resolved:	<ul style="list-style-type: none"> - Assurance be provided in respect of maintaining low ED attendance levels. - The report was noted. 	CWilson
154/20	QUARTER ONE TRACKER	
	<p>The quarter one tracker report was received.</p> <p>In introducing the report, Sian Harrop-Griffiths highlighted the following points:</p> <ul style="list-style-type: none"> - The health board is still receiving guidance from Welsh Government; - The quarter one plan was prepared prior to receipt of the cancer national guidance; - The health board remains in a challenging position regarding 	

	<p>capital funding and the report details the impacts;</p> <ul style="list-style-type: none"> - Replacement of the cladding at Singleton Hospital, replacement CT-SIM scanner in the cancer centre at Singleton Hospital, and phase 2 anti-ligature work in Mental Health and Learning Disabilities premises are progressing; - Access Road design planning at Morriston Hospital is on hold. <p>In discussing the report, the following points were raised:</p> <p>Martyn Waygood queried why the health board is not swabbing pre-operative patients as detailed in appendix 2. Sian Harrop-Griffiths advised that she would follow this up and provide an answer at July's health board meeting. She added that the reason for this may be due to the cancer framework being received after the quarter one plan was prepared.</p>	<u>SHG</u>
Resolved:	The report was noted .	
155/20	COMMITTEE ANNUAL REPORT	
	The Quality and Safety Committee Annual Report was received and approved .	
156/20	COMMITTEE TERMS OF REFERENCE	
	The Quality and Safety Committee Terms of Reference was received and approved .	
157/20	MANAGEMENT OF AN INCIDENT WITH ELECTRONIC REFERRALS	
	A report providing an update in relation to the management of an incident with electronic referrals was received and noted .	
158/20	ITEMS TO REFER TO OTHER COMMITTEES	
	There were no items to refer to other committees.	
159/20	ANY OTHER BUSINESS	
	There were no items raised.	
160/20	DATE OF NEXT MEETING	
	The next meeting is scheduled for 25 th August 2020.	
	MOTION TO EXCLUDE THE PRESS AND PUBLIC IN ACCORDANCE WITH SECTION 1(2) PUBLIC BODIES (ADMISSION TO MEETINGS) ACT 1960.	