



Quality and Safety Action Log

Open Actions						
Action No.	Minute Ref.	Date	Agreed Action	Lead	Timescale	Status
1.	121/19	22.08.2019	Update be provided on the improved use of ward to board dashboard following feedback from staff.	CWilliams	October 2020	On the work programme
2.	175/19	12.12.2019	Update be provided in respect of Substance Misuse Report	KR	September 2020	On the work programme
3.	17/20	28.01.2020	Deep Dive: Never Event position and the requirement to review and manage overarching improvement plan at corporate level to be brought to committee.	HL	September 2020	To be delayed as a result of COVID19 – a specified update has now been sought by the corporate governance team
4.	12/20	28.01.2020	Report and action plan in respect of the facilities at Morriston Hospital's Accident and Emergency Department be brought to February's committee.	Craige Wilson/ Deb Lewis	September 2020	To be delayed as a result of COVID19 – a specified update has now been sought by the corporate governance team
5.	42/20	25.02.2020	Quality and Safety Workshop 2020 to	CWilliams	September	To be delayed as a result of

			be arranged and the Quality and Safety Bill and duty of candour is incorporated into the workshop.		2020	COVID19 – a specified update has now been sought by the corporate governance team
6.	87/20	12.12.2019	Feedback from patients within a prison setting to be included within the patient experience report.	HL	August 2020	To be delayed as a result of COVID19 – a specified update has now been sought by the corporate governance team
7.	87/20, 143/20	24.03.2020	Discussion to take place to ascertain how to include the internal inspections within the performance figures.	CWilliams/ ND	October 2020	Update expected at October's committee.
8.	152/20	28.07.2020	Primary and Community Care complaints to be included in the patient experience report going forward.	HL	September 2020	To be included in the Patient Experience Report.
9.	152/20	28.07.2020	A communication update be provided in September's patient experience report.	HL	September 2020	To be included in the Patient Experience Report.
Closed Actions						
Action No.	Minute Ref.	Date	Agreed Action	Lead	Timescale	Status
1.	174/19	12.12.2019	Update be provided in respect of Suicide Prevention Report	KR	August 2020	On the agenda
2.	154/20	28.07.2020	Assurance be provided in respect of maintaining low ED attendance levels.	Craige Wilson	September 2020	Discussions have been held with 111 about establishing a "Phone First" service in Swansea Bay to help

						maintain low level of emergency department attendances. To achieve this the Health Board will need to establish a “hub” to direct calls to the appropriate pathway. Initial thoughts are to enhance the AGPU service to a seven day a week provision by increasing the clinical and administrative support. However there will also be a requirement for resources to support the alternative pathways e.g. hot clinics. A working group has been established to work up the proposal and there will be continue dialogue with the CASC who will be overseeing the national roll out.
3.	150/20	28.07.2020	Encapsulating the quality and safety implications within the committee reports.	PW	August 2020	Discussion with the Chair and agreed the need to ensure papers are more focussed for Committees. Reminder issued to Executive Directors.
4.	133/20	23.06.2020	Performance team to obtain and report	DG/SHG	September 2020	The PCCS unit has recently agreed a paper at their Unit

			the Primary Care metrics within the performance report.			Board setting out new metrics that have been collected since March 2020. Discussions will be held during the end of August and September to develop these for inclusion in the September Q&S performance report.
5.	158/19	24.10.19	Update be provided in respect of the older people's strategy.	NJ	October 2020	<p>The priorities of the Older People's Programme are being refreshed for the remainder of 2020/21 following the completion of H2H Phase 1 and the implementation of the Rapid Discharge Guidance (full Discharge to Assess model) as a response to the pandemic. In addition the appointment of a Patient Flow Manager for the Health Board has prompted the closure of some of the projects in the Good Hospital care workstream.</p> <p>The refreshed programme will maintain the workstreams on Keep Me At Home (standardised ACT model and Single Point of</p>

						<p>Access) and Hospital2Home (Care Closer to Home). The Good Hospital Care Workstream will align with the acute medical redesign project by focussing on Frailty at the Front Door and also have a renewed quality improvement focus for older people's inpatient care.</p> <p>The refreshed priorities and programme will be signed off at the OPCR in September.</p>
6.	107/20	26.05.2020	Screen shots of the dashboard to be provided to independent members.	MJ/MW	June 2020	Completed.
7.	133/20	23.06.2020	Patient referral concerns to be raised to the Health Minister.	MW	July 2020	Communication to patients of accessibility to services is a priority for Welsh Government.
8.	144/20	28.07.2020	Martyn Waygood requested that a clinical ethics committee update be added to the work programme as it is relevant in the current circumstances.	MW	July 2020	Completed.
9.	144/20	28.07.2020	COVID-19 metrics are brought to the committee on a monthly basis going forward.	DG	August 2020	Completed.
10.	155/20	28.07.2020	Update be provided as to why the	SHG	August	Significant progress has

			health board is not swabbing pre-op patients.		2020	<p>been made since the initial assessment was made. Plans are just being finalised to enable use of the Liberty Stadium. The plan is to start on 3rd August 2020 for all priority 1 patients. All in-patients are swabbed on the Singleton site. The slight delay in delivering to all patients was due to getting enough capacity in the system and ensuring safe processes are in place as these patients are shielding.</p>
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Quality and Safety Workshop **Pending** Action Log

Agenda Item	Comments/Action	Lead for Action	Progress	Timescale
	<p>Action: The “So What?” approach may be included going forward in respect of complaints. Knowing the impact on patients when they are cancelled or a breach. How does it feel to be a breach or to be cancelled?</p>	HL/PW		End of December
	<p>Action: The performance team consider utilising the efficiency framework toolkit alongside the performance report.</p>	DG		End of December
	<p>Action: Further guidance to be provided to authors for higher level training to understand the information received in papers to assist with assurance.</p>	ALL		September
	<p>Action: Martyn Waygood, Helen Kemp and Pamela Wenger to meet to discuss metrics.</p>	MW/DG/HK	Meeting has been cancelled and will be rescheduled sometime in 2020 due to COVID-19.	September