



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	23 March 2021	Agenda Item	4.3	
Report Title	Quality and Safety Governance Group Report			
Report Author	Nigel Downes, Head of Quality and Safety			
Report Sponsor	Christine Williams, Interim Director of Nursing & Patient Experience			
Presented by	Nigel Downes Head of Quality and Safety			
Freedom of Information	Open			
Purpose of the Report	To provide the Committee with an update from the Quality and Safety Governance Group			
Key Issues	This paper supports provides the QSC with an update on matters of Q&S overseen by the QSGG during Covid-19. The paper provides a formal route of escalation to QSC from QSGG where necessary.			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • Note this report • Note matters for escalation 			

Quality and Safety Governance Group Report

1. INTRODUCTION

This report provides the Quality and Safety Committee with an information report from Quality and Safety Governance Group. This report outlines the key Quality and Safety areas discussed at the Quality and Safety Governance Group on **18 February 2021**. Please note that the format has changed to reflect how QSGG is currently dividing the agenda into Covid-19 and general Q&S.

2. BACKGROUND

The Quality and Safety Governance Group (QSGG) was constituted to provide an operational focus and to strengthen the organisational flow of information to the Quality and Safety Committee.

3. GOVERNANCE AND RISK ISSUES

QSGG agenda has been amended during Covid-19 emergency preparedness to reflect a more concise approach.

Agenda template is not currently mapped against Health and Care standards themes as per previous/normal processes.

4. FINANCIAL IMPLICATIONS

None from this report

5. UPDATE REPORT

1	Preliminary Reports
1.1	Nutrition Update
	<p>Report provided to group: <u>Delegation of Enteral Feeding Tasks, Lack of a clear delegation framework</u></p> <p>Matter to remain as a standing agenda item, quarterly reporting, due to progress against other Health Boards.</p> <p><u>A WASSP Nutritional Screening Tool audit</u></p> <p>All-Wales Nurse documentation Project, looking to roll out where there are 6 different risk assessments and one of these is Nutrition, rollout will be starting in April, the further rollout plan to be confirmed. Report to be brought to May QSGG around the April rollout and compliance rates.</p>

1.2	HMP Swansea Listed Inquests
	<p>A briefing report to the Quality & Safety Governance Group on the listed Coroner's Inquests for HMP Swansea. The Report was presented and discussion re: for QSGG to monitor actions of actions undertaken by Health Board. A number of actions/issues related to legacy issues, however as a Health Board need to be assured any actions are being implemented and plans going forward provide a robust future service.</p> <p>Update reports to be provided quarterly.</p>
1.3	Controlled Drug Supply to HMP Swansea
	Report was received and discussions around the supplier withdrawing medications to HMP and the Health Board have applied for the licence to ensure the continuity of providing essential drug supplies to the patients at HMP Swansea.
1.4	Once for Wales Management System
	<ul style="list-style-type: none"> • There are some risks going live on the 1st April, especially the incident module. • Extra tools SB UHB developed will be incorporated into the new system. • Group acknowledged there may be some short term risks but medium to long term the situation looked positive and optimism expressed that the various modules would come online as soon as possible. • Safeguarding Module would not be ready to roll out on the 1st April 2021, as more engagement with regional partners and local authorities.
Part A	Covid-19
A1	Infection Control
	<p>The group received the paper and the priorities noted were:</p> <ul style="list-style-type: none"> • Outbreaks in NTP Hospital, MH & LDis have been closed • Lessons learned due to Covid, very high symptomatic positives. • Introduction of the staff symptom checker has been very helpful. • Issue with service provision to non Covid patients in secondary care. • Decrease in CDIff cases, it is believed that Covid does have an impact on this, particularly due to decrease in antibiotic prescribing – this may increase after 2nd wave.

	<ul style="list-style-type: none"> • Klebsiella cases have increased and this is thought to be linked to Covid. • Norovirus and influenza cases have drastically dropped in comparison to the same period as last year, which is evidence that the precautions that are being used for Covid are helping. • It was also acknowledged that HCAI's are part of the quality priorities work taking place.
A2	PPE
	<p>Verbal update received:</p> <ul style="list-style-type: none"> • Stock Levels are currently good. • Ongoing challenges around PPE provision, but assurance is provided around national guidelines.
A3	Safeguarding
	<p>The group discussed the report.</p> <p>Extended working hours for the service have been praised.</p> <p>Iris rollout for Safeguarding progressing well.</p>
A5	Putting things Right: Incidents, Concerns, Claims, Inquests, Risk
	The group received and discussed papers. Q&S Committee to receive direct report from Patient Feedback Services.
Part B	General Q&S
B1	<p>Morrison Service Group</p> <p>The report was received and the top 3 priorities/themes were noted as:</p> <ul style="list-style-type: none"> • Work around Nosocomial Death reviews is ongoing. Currently identified 335 patients and reviewing each of these patients to ascertain if there was a nosocomial transmission whilst the patient was in Morrison and death occurring within 28 days of admission. • Controlled drugs assurance, currently undertaking review of controlled drugs management within theatres of Morrison, Singleton & NPT. Report to be brought to QSGG in April. • Adult Safeguarding reports in January, drilled down to patients being admitted to hospital in extremely poor condition. 10 of these patients noted as having pressure ulcers. Concerns expressed over worrying trend during Covid-19 of patients arriving for treatment in very poor health. An adult at risk a correct referral is made as required.
B2	<p>Singleton & NPT Service Group</p> <p>The report was received and the top 3 priorities/themes were noted as:</p>

	<ul style="list-style-type: none"> Revised Governance arrangements for the new service group are currently being developed. Overdue incidents, particularly falls and pressure ulcers. HIW Tier 1 review will be reporting into the next meeting.
B3	<p>Maternity Service</p> <p>The report was received.</p> <ul style="list-style-type: none"> 4 formal concerns received during December. For January 2021, 13 women completed online patient feedback for Maternity Services which was 100% positive.
B4	<p>Primary Care and Community Services</p> <p>The report was received and the top priorities/themes were noted as:</p> <ul style="list-style-type: none"> Picture Book developed by speech and language colleagues. New wellness centre on Swansea High Street. Use of consultant connect, platform for GP's to contact clinicians, the number of contacts and specialties is increasing and has been considered a huge success. Working with complaints process with MH & LDis colleagues.
B5	<p>Mental Health and Learning Disabilities Service Delivery Unit</p> <p>Report was received, it was noted:</p> <ul style="list-style-type: none"> The number of falls reported in December was 29, with 31 in November. There were 2 Fracture Neck of Femur on Ysbryd y Coed which are being investigated using the RCA methodology. Complaints performance was 92% in January 2021.
B6	<p>Director of Therapies and Health Sciences</p> <p>Paper noted – no attendance to support paper. Representation is expected for next month's meeting.</p>
	For Noting
	<p>QSGG TOR (version February 2021) – revised to reflect the new Service Groups and reporting structure.</p> <p>Corporate Assurance Report HIW ED</p> <ul style="list-style-type: none"> Ligature points remain a concern

	<ul style="list-style-type: none"> • Improvement of area against the Assurance Report was noted.
	Any Other Business
	<ul style="list-style-type: none"> • HIW have confirmed they are looking to recommence inspections. • Healthcare Standards work continues. • Quality Workshop meeting this afternoon (18/02/2021).

6 Main issues to be escalated to Quality & Safety Committee

- LocSSIPS & NatSSIPS work is ongoing and reports to be fed back to QSGG.
- Ligature & suicide are key themes of discussion across a variety of services
 - This has been identified within one the quality priorities for 2021 – 2022.
- Nutrition screening tools, delegation and governance. This is an extensive piece of work that requires clarity. Expectations are that electronic documentation will enable to the service to improve and reduce risk.
- HMP Prison actions that are key and vital pieces of work moving forward, recognising that some of the actions were inherited. However, progress can be documented and discussed with the regular reports to QSGG.
- Mixed reporting around Infection Control and the suspected links with Covid and its impact on HCAI's, including Norovirus and Infeunza, C-Diff with prescription changes with antibiotics.
- Once for Wales roll out and risk associated incident reporting with changeover to new system in April.
- Controlled Drugs governance and infrastructure review to facilitate a smooth transition for the new rollout.
- Iris rollout for Safeguarding progressing well.
- Nosocomial deaths remain a theme, that is being continually reviewed by WG and the Health Board.

7 RECOMMENDATION

The Quality and Safety Committee is asked to:

1. Note report
2. For the Committee to highlight any areas of improvement they require of the Group to support current review and development.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input 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 type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	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		
This paper provides a summary from the Quality & Safety Governance Group.		
Financial Implications		
None		
Legal Implications (including equality and diversity assessment)		
None		
Staffing Implications		
None		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
None		
Report History	N/A	
Appendices	Nil	