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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	24th May 2022	Agenda Item	4.3
Report Title	Overview Report of the Quality and Safety Governance Group (QSGG) Meeting of 3rd May 2022		
Report Author	Angharad Higgins, Interim Head of Quality and Safety Hazel Powell, Deputy Director of Nursing		
Report Sponsor	Gareth Howells, Executive Director of Nursing & Patient Experience		
Presented by	Hazel Powell, Deputy Director of Nursing		
Freedom of Information	Open		
Purpose of the Report	To provide an update report of the Quality and Safety Governance Group (QSGG) meeting of 3 rd May 2022 and a formal route of escalation of quality and safety issues.		
Key Issues	<ul style="list-style-type: none"> • Final meeting of QSGG • Establishment of new quality and safety structures • Engagement with QSGG members on implementation of new structures 		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	Quality and Safety Committee and Management Board are asked to: <ul style="list-style-type: none"> • Note the contents of the overview report of the QSGG meeting of 3rd May 2022 		

Quality and Safety Governance Group Report

1. INTRODUCTION

This report provides an outline of the key quality and safety areas discussed at the QSGG meeting on 3rd May 2022.

2. BACKGROUND

QSGG was constituted to provide an operational focus and to strengthen the organisational flow of information to the Quality and Safety Committee. Following the internal review of quality and safety structures within the Health Board, it has been agreed to disband the QSGG in its current format and to replace this with new a new reporting structure. This meeting was the final meeting of the QSGG.

3. GOVERNANCE AND RISK ISSUES

This meeting of the QSGG focussed on preparing for the new structures, however whilst new structures are being embedded members of the QSGG have been asked to report any quality and safety issues to the Quality and Safety of Patient Services Group (QSPSG) until all sub-groups are established.

The action plan for QSGG has been formally closed and any outstanding actions will be transferred to the QSPSG.

3.1 Key areas of reporting

The specific areas of reporting at this month's QSGG meeting were received from:

General Quality & Safety Group Exception Reports

- **Neath Port Talbot Singleton Children and Young People's Services**
The service reported the successful recruitment of a named Dr for Safeguarding.
- **Primary Care and Community**
Written report received following verbal update in previous meeting, this was reported to Quality and Safety Committee in April 2022.

Reporting

- **Health & Care Standards Update**
The Annual Health and Care Standards self-assessment was shared for noting. The 2022/23 process to be developed and agreed following direction from Welsh Government.
- **Infection Prevention and Control**
The Infection Prevention and Control Committee reports directly to Quality and Safety Committee.
- **Safeguarding**
Safeguarding Committee reports directly to Quality and Safety Committee.
- **Putting Things Right**
On-going challenges in achieving the internal and Welsh Government targets for complaints responses were noted. *Post-meeting a focus session for quality and safety leads has been arranged in order to agree actions to support them in meeting the target.*

- **Community Health Council (CHC) Report on Inpatient Experience** (Appendix 3)

In line with the Health Board process for responding to CHC reports, which was shared with Quality and Safety Committee in April 2022, this report was received by QSGG for noting. A full action will be developed in response to the report, which will be presented separately to the CHC and Quality and Safety Committee. The plan will include actions from the service groups, including Maternity Services.

In order to support the reintroduction of inpatient ward visits by the CHC, a proposal is being developed jointly by the Health Board and CHC. This proposal will be presented to the QSPSG meeting on June 21st with an intention to reintroduce the CHC visits shortly afterwards. Quality and Safety Committee will be kept informed on the progress of reintroduction of the visits in future reports.

3.2 Items for approval

None

4. DISCUSSION THEMES

The meeting used a workshop approach to consider the new structures as set out in Appendix 1, and how to implement these effectively across the organisation.

Themes from these workshops are summarised below:

- **Accountability and routes of escalation**

Discussion featured the importance of ensuring that the new structures did not obscure lines of sight for quality and safety. The importance of being able to escalate issues, sometimes quickly, was also noted and will be included in the new ways of working.

- **Relationships between sub-groups**

The relationships between the sub-groups and the need for clarity within terms of reference was agreed as essential in order to avoid duplication of effort. Service groups identified the need to consider how the work of the sub-groups will be taken forward locally and will review their structures in response to the new arrangements.

- **Reporting and provision of information**

In order to support the effective operation of the sub-groups, reporting templates will be developed for service groups.

- **Development of Service Group annual quality plans**

The development of annual quality plans within service groups was positively received as a mechanism for ensuring congruence between organisational and service group objectives, and for delivering improvements in quality and safety.

- **Safeguarding**

The structures will be revised to ensure that Safeguarding issues are included within reporting arrangements.

- **Support and co-ordination**

The need for additional support to service the new sub-groups was noted.

5. IMPLEMENTATION OF NEW STRUCTURES

A timetable for implementation has been developed and is included in Appendix 2.

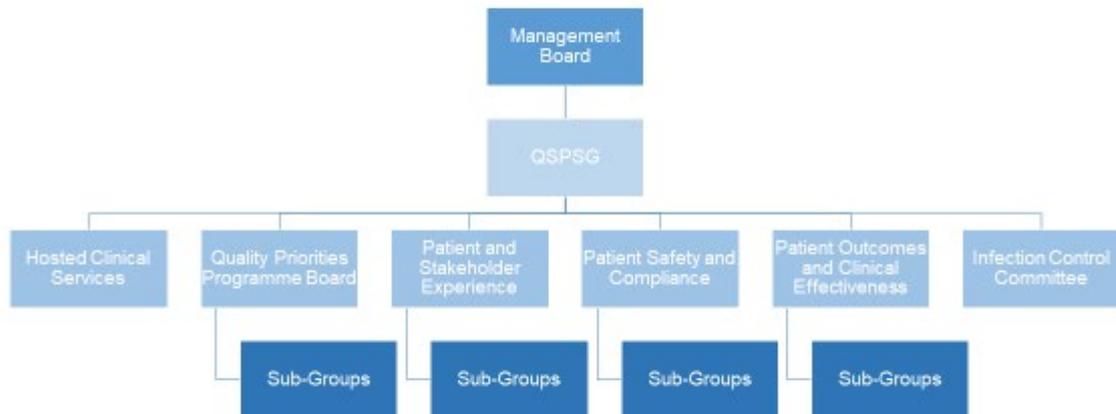
6. FINANCIAL IMPLICATIONS

There is a resource requirement to service the new sub-groups.

Governance and Assurance		
Link Enabling Objectives (please choose)	to	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 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 checked="" type="checkbox"/>
		Outstanding Research, Innovation, Education and Learning <input checked="" 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		
<p>This paper provides a summary from the Quality & Safety Governance Group meeting. In future, patient experience will be reported into the Patient and Stakeholder Experience sub-group of the Quality Safety Patient Services Group.</p> <p>The findings of the Community Health Council report on inpatient experience was shared and will be discussed within service groups for further action in response to the findings.</p>		
Financial Implications		
<p>Resource required to support sub-groups.</p> <p>Financial risk in relation to Learning From Events reports compliance with Welsh Risk Pool raised.</p>		
Legal Implications (including equality and diversity assessment)		
<p>Putting Things Right report included potential legal implications in relation to Putting Things Right Compliance.</p>		
Staffing Implications		
<p>Workforce requirements to support the new structures were noted in discussions</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The remit of the QSGG and the QSPSG reflects the aims and ways of working set out in the Wellbeing of Future Generations Act.</p>		
Report History	<p>Quality and Safety Committee May 2022</p> <p>Management Board May 2022</p>	
Appendices	<p>Appendix 1- Revised Quality and Safety Structures</p> <p>Appendix 2- Timescales for implementation</p> <p>Appendix 3- Community Health Council Reports on Inpatient Experience</p>	

Quality Safety and Patient Services Group Structures

Quality Safety and Patient Services Group Sub-Structure



Timeline for the Implementation of Revised Quality and Safety Structures

Date	Forum	Required Action
3.5.22	Quality Safety Governance Group (QSGG)	Engagement with QSGG on revised structures
(by)31.5.22	Out of committee	Agreement of all sub-group chairs
(by)31.5.22	Out of committee	Draft terms of reference drafted for each subgroup
(by)31.5.22	Out of committee	Administrative support for subgroups confirmed
(by) June 14 th	<ul style="list-style-type: none"> • Patient and Stakeholder Experience • Patient Safety and Compliance • Patient Outcomes and Clinical Effectiveness 	Initial meeting of sub-groups held
June 21st	Quality, Safety and Patient Services Group (QSPSG)	Inaugural Quality Safety and Patient Services Group meeting
(by) July 5th	QSPSG	Development of annual reporting plan for QSPSG and subgroups
(by) October 18th	QSPSG	Development and presentation of service groups' Annual Quality Plans to QSPSG.
(by) November 15th	QSPSG	Interim review of Terms of Reference