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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Princess of Wales Hospital

Quality and Patient Safety Committee

Business

TERMS OF REFERENCE

Purpose:

The Quality & Safety Committee [Business] has been established to review and manage all Quality and Safety matters and oversee a Quality and Safety Improvement Programme for the Princess of Wales Hospital (POWH) site.

The committee will provide a report to the Hospital Management Committee and the Abertawe Bro Morgannwg University Health Board Quality and Safety Committee in relation to arrangements for safeguarding and improving the quality and safety of patient-centred healthcare in accordance with the requirements and Healthcare Standards determined for the NHS in Wales.

Membership:

The Quality and Safety Committee of the Princess of Wales Hospital will be chaired by the Unit Nurse Director. The deputy chair will be the Unit Medical Director.

The membership consists of the core group who manage and work in the Princess of Wales Managed Unit and there is a wider attendance group of colleagues who represent and work in areas in the Princess of Wales Hospital and surrounding community but are not the management responsibility of the Unit Service Director.

Princess of Wales Managed Unit Quality and Safety Committee – Meeting the Challenge	
Debbie Bennion (Chairperson)	Nurse Director
Dr Jonathan Goodfellow (Vice-Chairperson)	Medical Director
Jamie Marchant	Service Director
TBC	Head of Quality & Safety
Jenny Oliver /Judith Lewis	Governance & Patient Experience Manager
Alison Cobley / Jayne Evans / Hayley Ellis-Evans	Senior Matron
David Hughes	Pharmacy Manager
Sue Williams/Jane Phillips	Governance Manager, Women & Child Health
Diana Griffith	CHC Bridgend Representative
Mr Richard Johnson, Dr Matthew Jones, Dr Sian Phillips, Dr Gary Constable,	Clinical Directors representative

Harvey Caesar. (One to attend on a rotational basis)	
Gavin Owen	Representative of General Managers
Rachael Gdesis-Evans	Locality Lead Occupational Therapist
Jo McHattie	Head of Adults Speech and Language
Jo Rowlands	Assistant Head of Physiotherapy
Madeline Najjar	Deputy Head of Dietetics
Nicola Hartley/Nicola Davies	Infection Control Representative

The Committee Chair may extend invitations to relevant personnel to attend committee meetings as required

Frequency of meetings:

Bi-monthly

Quorum:

The Chairperson or vice-chairperson, a minimum of 3 clinicians and 2 managers from POW Managed Unit will need to be present for the meeting to go ahead.

Reporting:

The Committee will provide a report to the Abertawe Bro Morgannwg University Health Board Quality and Safety Forum as required and the Princess of Wales Hospital Management Committee.

Duties:

The Committee will oversee improvement in:

- Health & Safety
- Infection Control and Prevention
- Concerns
- Patient Safety
- Patient Experience
- Risk
- Medical Gases
- Medical Devices
- Information Governance
- Safety Alerts

The Committee will:

- Promote and manage a Quality and Improvement Annual Plan for the Princess of Wales Hospital
- Identify and promote opportunities for hospital and organisational learning, ensuring that lessons learned from concerns are shared
- Ensure that identified risks are managed and included in the POWH risk register
- Monitor and act on POWH Hospital Mortality Information including Risk Adjusted Mortality Indicators (RAMI) scores
- Scope, drive and monitor the progress of any relevant work programmes or subgroups
- Ensure that appropriate corporate support arrangements are in place where required and that Quality and Safety issues requiring corporate consideration are escalated.

- Encourage and support all service areas, in POWH, to have a citizen centred approach, putting patients, patient safety and safeguarding above all other considerations
- Ensure that there is an ethos of continuous quality improvement
- Base decisions on valid, accurate, complete and timely data and information
- Ensure that recommendations made by internal and external reviewers are considered and acted upon on a timely basis
- Receive and act on reviews and report from the Community Health Council (CHC) and Health Inspectorate Wales(HIW)
- Work with internal audit and clinical audit teams
- Ensure all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the quality and safety of care provided
- Receive reports from:
 - Governance & Patient Experience team
 - POWH Infection Control & Prevention Group
 - POWH Falls Scrutiny Panel
 - POWH H&S committee
 - Medical Gases Group
 - Medical Devices Group
 - POWH Pressure Ulcer Group
 - POWH Safeguarding Group
 - POWH Information Governance Group
 - Medicines Management Report
 - Health Records Management Group
 - Nutrition & Hydration Group
 - Women & Child Health Governance Group
 - Internal Audit
 - CHC and HIW Reports
 - Service Group Reports - Medicine, Surgery, Emergency and Acute Care, and CSS (Clinical Support Services) Service Group Board reports
- Receive a highlight report of 'fundamentals of care' provision in POWH
- Quality Assurance ward reports

The Quality and Safety Committee will receive a highlight report from individual work streams and sub groups as required.

Review:

Review Date **May 2020**

