Swansea Bay University Health Board

Unconfirmed
Minutes of the Meeting of the Quality and Safety Committee
22nd June 2021
at 1.30pm via Microsoft Teams

Present
Martyn Waygood, Independent Member (in the chair)
Nuria Zolle, Independent Member
Maggie Berry, Independent Member
Stephen Spill, Vice Chair

In Attendance
Christine Williams, Interim Director of Nursing and Patient Experience
Nigel Downes, Head of Quality and Safety
Lisa Hinton, Assistant Director of Nursing – Infection, Prevention and Control (from minute 130/21 to 132/21)
Richard Evans, Medical Director
Keith Reid, Director of Public Health (from minute 132/21)
Christine Morrell, Interim Director of Therapies and Health Science
Pam Wenger, Director of Corporate Governance (from minute 132/21)
Hazel Lloyd, Head of Patient Experience (to minute 131/21)
Darren Griffiths, Interim Director of Finance (from minute 133/21 to 134/21)
Scott Howe, Healthcare Inspectorate Wales (to minutes 133/21)
Kirsty Lagdon, Healthcare Inspectorate Wales
Rab McEwan, Interim Chief Operating Officer (to minute 137/21)
Delyth Brushett, Audit Wales
Prue Thimbleby, Arts in Heath Coordinator (minute 123/21)
Osian Lloyd, Deputy Head of Internal Audit
Vicki Burridge, Interim Deputy Head of Nursing, Children's Services (from minute 132/21 to 133/21)
Jannine Smith, Director of Neath Port Talbot's Children's Rights Unit (from minute 132/21 to 133/21)
Abi Price, Swansea Bay Youth (from minute 132/21 to 133/21)
Amy Brown, Swansea Bay Youth (from minute 132/21 to 133/21)
Leah Joseph, Corporate Governance Officer

Minute No.		Action
123/21	**PATIENT STORY: THE GIFT OF HOPE**	
	A story was **received** from a patient's daughter, which set out an experience of how the patient advice liaison service (PALS) supported a gentleman and his family throughout his stay at Morriston Hospital in the	

	COVID-19 pandemic. The family were able to communicate with their father via an electronic tablet, which brought hope and comfort to the gentleman. The family found the PALS service to be extraordinary in their support In discussing the patient story, the following points were raised: Martyn Waygood asked Prue Thimbleby to pass on the committee's sincere thanks to the gentleman and his family for sharing their experience. Prue Thimbleby advised that the team are trying to use positive stories to support changes in practice where felt appropriate. Christine Williams thanked Prue Thimbleby for producing the story as it demonstrated how working differently using alternative methods could benefit patients and their families.	
124/21	**WELCOME / INTRODUCTORY REMARKS AND APOLOGIES**	
	The chair welcomed everyone to the meeting. The following apologies were noted: Reena Owen, Independent Member; Wendy Lloyd-Davies, Community Health Council; Sian Harrop-Griffiths, Director of Strategy.	
125/21	**DECLARATION OF INTERESTS**	
	There were no declarations of interest.	
126/21	**MINUTES OF THE PREVIOUS MEETING**	
Resolved:	The minutes of the main meeting held on 25th May 2021 were **received** and **confirmed** as a true and accurate record.	
127/21	**MATTERS ARISING**	
	There were no matters arising raised.	
128/21	**ACTION LOG**	
Resolved:	The action log was **received** and **noted.**	
129/21	**CHANGE IN AGENDA ORDER**	
Resolved:	The agenda order be changed and items 3.2 be taken next, with 4.4 and 3.1 following.	
130/21	**QUALITY AND SAFETY RISK REGISTER**	

	The Quality and Safety Committee Risk Register was **received.** In introducing the report, Hazel Lloyd highlighted the following points: - The Health Board Risk Register contained 15 risks assigned to the Quality and Safety Committee. A further four risks are overseen by other committees however the Quality and Safety Committee have sight of these due to the nature of the risks; - 'Induction of Labour' and 'Discharge of medically fit' patients are new risks detailed within the register; - Nosocomial transmission has been transferred from the COVID-19 risk register to the health board risk register. In discussing the report, the following points were raised: Nuria Zolle welcomed assurance on progress and solutions surrounding the delays in access to systematic anti-cancer therapy (SACT) treatment in the Chemotherapy Day Unit. Hazel Lloyd undertook to add this into the next iteration of the report. Martyn Waygood queried the ophthalmology regional sustainability plan. Rab McEwan advised that there is a three-phase plan. The first phase has begun which included sending 170 cases to the independent provider, Sancta Maria, with an additional 250 cases per week to be transferred. The second phase will be to open a day unit at Singleton Hospital, however firstly the orthopaedic hand service will need to be relocated and that is expected to begin in September 2021. The third phase could include a multi-site centre for ophthalmology and this could be based at Singleton Hospital witan additional twin site with another health board. A report has been written and Swansea Bay University Health Board (SBUHB) are awaiting confirmation from Welsh Government (WG) around capital funding. Rab McEwan confirmed that the paediatric Parkway Clinic contract has been extended until June 2022. Martyn Waygood queried the position on WG monies to support the Child and Adolescent Mental Health Service (CAMHS). Rab McEwan advised that SBUHB still has to admit CAMHS patients to Ward F at Neath Port Talbot Hospital. The investment monies should help to support the measures to increase the capacity of care. It is a national and local issue and SBUHB awaits confirmation surrounding the funding. Stephen Spill highlighted that he was not aware of any further developments, however he noted that there is benchmarking work being undertaken across health boards. He stated that in 2020 SBUHB admitted 26 children to Ward F, where Hywel Dda University Health Board (HDUHB) admitted 76 to an adult ward in similar circumstances. He added that the bed in Ward F was not designed for children and therefore it is inappropriate for that use. Rab McEwan assured committee members that the bed is only used when it is essential to admit into that environment and it can be distressing for staff on the ward when faced with that situation. Christine Williams noted that it is a	**HL**

	national problem and SBUHB endeavours to mitigate the risks. A review recently took place to consider the children's service and a second review will include CAMHS in the next few months. Martyn Waygood queried the induction of labour risks and whether delays have caused harm. Christine Williams advised that the risk was highlighted when there were capacity issues in peaks and demands, which could relate to the redeployment of staff and lack of beds. There are mitigating actions in place to support pressures, which included transferring patients to other hospitals. Singleton Hospital is reviewing their processes and appointing additional midwives, and a business case will be going to the delivery group for increased resource. Christine Williams advised that no harm had been caused following delays. Rab McEwan detailed that optimised patient lists were discussed at Performance and Finance Committee on 22nd June 2021 and work is underway with the regional partnership board to redefine accountability arrangements. A number of medium to long term interventions in train to support complex discharges, and recognition of the need to have a regular Director level forum focussed on developing and implementing solutions with immediate impact.	
Resolved:	- The next iteration of the report to include assurance on progress and solutions surrounding the delays in access to SACT treatment in the Chemotherapy Day Unit. - The updates to the Health Board Risk Register relating to risks assigned to the Quality & Safety Committee, the further changes being made in recognition of the changing risks facing the Health Board and the uncertainty in terms of modelling required as a result of the current third wave of COVID-19 were **noted.**	**HL**
131/21	**'ONCE FOR WALES' UPDATE REPORT**	
	An update report on 'Once for Wales' was **received.** In introducing the report, Hazel Lloyd highlighted the following points: - 'Once for Wales' has been through vigorous testing and although there are still issues, this should not delay the system going live; - The system is expected to go live on 1st July 2021 and feedback from HDUHB has been that the system was intuitive. In discussing the report, the following points were raised: Nuria Zolle acknowledged assurances from the report but queried how learning would be shared between SBUHB and HDUHB. Hazel Lloyd advised that SBUHB is linking in with HDUHB around the 13 different systems in place. Cardiff and Vale University Health Board have faced more system issues than SBUHB and HDUHB. There is a focus on	

	wider testing across all other health boards to minimise system issues when going live.	
Resolved:	The report was **noted.**	
132/21	**INFECTION PREVENTION AND CONTROL**	
	A report providing an update in relation to infection, prevention and control (IPC) was **received**. In introducing the report, Lisa Hinton highlighted the following points: - The COVID-19 outbreak position is improving and currently there is one outbreak area across SBUHB situated at Morriston Hospital. The Delta variant is within the organisation; - SBUHB remains in a challenged position surrounding the tier 1 targets. C. difficile (C.diff) is a concern. The Health Board has agreed to participate in a Public Health Wales-led epidemiological review exploring the relationship between COVID-19, secondary bacterial infections and C.diff to gain an improved understanding of the impact of COVID on the incidence of C.diff; - COVID-19 vaccination programmes are progressing well, however the service is under resourced from a substantive perspective and the service is currently being temporarily supported. The support will cease at the end of 2021 and there are therefore concerns about the service from January 2022 onwards; - The quality priority programme for healthcare associated infection improvement has been agreed and a 100-day plan developed; In discussing the report, the following points were raised: Nuria Zolle noted that the percentage of staff vaccination's second dose were slightly higher than the first dose. Keith Reid advised that this is due to a denominator shift and 82% of workforce have received their dose. Nuria Zolle queried the protocols in place to ensure staff remain compliant with the safety processes. Lisa Hinton advised that it is challenging for the staff as they are exhausted, however physical distancing is now a part of everyday life. There is work ongoing across the three main sites to highlight what hinders compliance in relation to behavioral aspects and this will be monitored by the nosocomial silver group. Nuria Zolle queried if there was any learning from the COVID-19 vaccination programme that could be transferred to the general vaccine rollout. Lisa Hinton advised that the influenza vaccine was delayed slightly due to the requirements of the COVID-19 vaccine; however, this is being worked through to de-conflict delays on vaccinations in the	

	future. Nuria Zolle queried whether the learning from the equity group developed for the COVID-19 vaccine would be integrated into SBUHB;s wider vaccination programme. Keith Reid recognised the need to integrate the learning. Keith Reid advised that a group in the community hosted by SBUHB is working with a number of organisations focused mainly on black, Asian and minority ethnic (BAME) and vulnerable people that is addressing the myths surrounding the vaccinations and increasing the access to these groups using the 'Immbulance'. He highlighted that there has been a reduction in the equity gap and that there is now an opportunity to review the previous issues raised by different immunisation programmes with an integrated approach. Martyn Waygood queried the under sourced aspect of the vaccination service. Lisa Hinton advised that a Matron is in place leading the team with a Band 7 supporting, however immunisation is wider than COVID-19 and there is a concern that resource will cease at the end of 2021 and therefore the service will not be able to provide the output that is needed. The resource for the service was a part of the key priorities however, it has now been removed. She will need to investigate and provide an update at July's meeting. Martyn Waygood noted that there had been an increase of infection in nearly all areas which is concerning. Lisa Hinton advised that IPC are always reviewing and working with neighboring health boards on best practice. Work is ongoing with the consultant-led bacteremia group, and resources provided around learning are better. Christine Williams advised IPC is one of the key quality priorities and there is a focus on strengthening education and training following implementation on learning standards following the pandemic. A twelve-month programme is underway to review the single room capacity and decanting facilities with a focus on Morriston Hospital initially.	**LH**
Resolved:	- An update surrounding vaccination resource and timescales be provided in the next iteration of the IPC report. - The progress against healthcare associated infection priorities up to 31st May 2021 was **noted.**	**LH**
133/21	**CHILDREN'S CHARTER PRESENTATION**	
	Martyn Waygood welcomed Amy Brown, Abi Price, Jannine Smith and Vicki Burridge to the meeting. A presentation on the Children's Charter update from Swansea Bay Youth representatives was **received.** In introducing the presentation, the following points were highlighted:	

	- The Children's Charter was launched in 2017 and Swansea Bay Youth was the first youth advisory panel for health in Wales; - The 15 steps challenge included a quality audit from a young person's perspective; - Kooth.com is an online and confidential service giving help and advice about emotional health and this is about to go live; - A COVID-19 flyer on the paediatric Welsh levels of care was developed by the team which is child and special needs friendly; - The team have helped develop an adolescent allergy clinic; - The team have been involved in many consultations to ensure they have a voice at a national and local level; - The Childrens' Rights Promises initiative is ready to go live and a video is being developed to accompany the written format. In discussing the presentation, the following points were raised: Martyn Waygood thanked the team for their presentation and noted the team's importance. Nuria Zolle stated that she is a great advocate for children's rights and was pleased to see the work and progress, and queried whether the Swansea Bay Youth team felt supported by the health board. Amy Brown stated that she had always been supported; however, there are times that children are talked over by their parents and staff but this is dependent on the particular service being provided. Nuria Zolle queried if SBUHB lives up to its commitments regarding listening to children. Amy Brown advised that Swansea Bay Youth is able to hold adults to account when children have not been listened to. Christine Williams was familiar with the work undertaken by the team over the past four years and highlighted the huge contribution made by the team to develop the charter. She noted that the team hold the service to account and are leading work in this field. Martyn Waygood queried how the team ensures they have as wide view on consultations as possible. Amy Brown advised that the team are there to make a difference and they utilise a form to ensure meaningful work takes place. Jannine Smith advised that there could be a power imbalance when different organisations ask for the team's opinions, however Swansea Bay Youth make the decisions and it should never be a tick box exercise. Martyn Waygood suggested that the presentation is presented to the health board. Pam Wenger advised that this could be a possibility later in the year.	
Resolved:	The presentation was **noted.**	
134/21	**QUALITY AND SAFETY PERFORMANCE REPORT**	

The Performance Report was **received.**

In introducing the report, Darren Griffiths highlighted the following points:

- There was a strong reduction in COVID-19 rates across all sites. The percentage of staff sickness absence due to COVID-19 significantly reduced from 13.2% in April 2020 to 1.0% in May 2021;
- Ambulance response times for May were at 62.4%, dropping it below the 65% target. The current figure for May stands at 68%;
- In May 2021, there were 477 ambulance to hospital handovers taking over one hour. This is a significant deterioration from 20 in May 2020 and an in-month increase of 277 from April 2021. In May 2021, 462 handovers over 1 hour were attributed to Morriston Hospital and 15 were attributed to Singleton Hospital. The number of handover hours lost over 15 minutes significantly increased from 125 in May 2020 to 1,154 in May 2021;
- Emergency Department (ED) and Minor Injury Unit attendances have been steadily increasing month on month until September 2020 when attendances started to reduce. Attendances have been increasing again since March 2021 and in May 2021, there were 10,818 ED attendances. This is 5% more than April 2021 and 39% more than May 2020;
- Neath Port Talbot Hospital Minor Injuries Unit continues to achieve and exceed the national target of 95% achieving 98.99% in May 2021. Morriston Hospital's performance deteriorated from 62.80% in April 2021 to 61.70% in May 2021;
- In May 2021, performance against the number of patients who spend 12 hours or more in ED deteriorated compared with April 2021, increasing from 631 to 684;
- There were on average 189 patients who were deemed medically/ discharge fit but were still occupying a bed in one of the Health Board's Hospitals in May 2021;
- There were 15 cases of Staph. aureus bacteraemia in May 2021, of which 5 were hospital acquired and 10 were community acquired;
- Six Serious Incidents (SI) were reported to WG in May 2021. Of the six new serious incidents reported to WG in March, 3 related to Primary Care, 2 related to Morriston Hospital and 1 related to Singleton Hospital;
- The number of falls reported via Datix for SBUHB was 228 in May 2021. This is 9% more than May 2020 where 209 falls were recorded;

- The number of General Practitioner (GP) referrals and additions to the outpatient waiting list has increased each month since May 2020;
- The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. The number of breaches increased from 22,752 in April 2021 to 23,700 in May 2021;
- There were 4,842 patients waiting over 8 weeks for specified diagnostics as at the end of May 2021. There is a focus on endoscopy following financial investment;
- At the end of May 2021 the number of patients with an active wait status of more than 63 days is growing and currently stands at 428 this week;
- There was a decrease in percentage of Primary-CAMHS routine assessments undertaken within 28 days following assessment in April 2021. A report is planned for July's Performance and Finance Committee and plans are in place to recover the position, however there is no recovery trajectory to date. It is common for patients to be assessed and intervention to begin on the same day, which will minimise the waiting time.

In discussing the report, the following points were raised:

Stephen Spill queried if the ambulance triaged patients prior to arriving at the hospital. Darren Griffiths advised that patients are triaged prior to arrival and their medical acuity is taken into account on admission to assist with prioritisation.

Nuria Zolle requested that the Performance and Finance Committee maintains a review of the concerns and issues. Darren Griffiths advised that CAMHS is currently not a sustainable service; however, SBUHB are in receipt of £518k additional funding this year for schools in-reach so there are innovative new models being developed subject to workforce availability.

Martyn Waygood noted that the CAMHS report is to be taken through July's Performance and Finance Committee. He queried if the delays affected the children and how are the team measuring this. Darren Griffiths advised that the issues are due to workforce resource.

Martyn Waygood noted the high increase in falls. Christine Williams advised that the increase related to November and December 2020. Throughout this period, there were staffing deficits at a rate of 50% that was linked to the increase of falls. There is an expectation that the number of falls will improve. There is work ongoing in secondary care to improve and re-energise processes to embed the key standards.

Martyn Waygood noted that there was previous progress made surrounding ED attendances throughout the pandemic and queried the controls in place to ensure this can be sustained. Rab McEwan advised that GP's and Primary Care are under pressure and in recovery following the pandemic. Many patients are being reviewed virtually;

	however, some patients are unfamiliar with this option. There is an opportunity to stream away from ED and set up an urgent Primary Care facility on the Morriston Hospital site. There has been a general increase in mobility, which has increased the need for ambulances.	
Resolved:	The current Health Board performance against key measures and targets was **noted.**	
135/21	**PROGRESS AGAINST OMBUDSMAN RECOMMENDATIONS**	
	A verbal update surrounding progress against Ombudsman recommendations was **received.** In introducing the update, Richard Evans highlighted the following points: - All actions recommended by the Ombudsman to be completed within one month from 8th January 2021 have been completed; - The type of surgery referred to in the report no longer takes place at Morriston Hospital or within SBUHB's sites; - There were two actions to be completed within three months from 8th January 2021. The action relating to recording of telephone support offered by the Specialised Nurse Service has been completed. The second action surrounding random sampling of the patient opinion survey is due to be completed once the new system has been implemented; - There were three actions to be completed within six months from 8th January 2021. Richard Evans is satisfied that the clinician still employed by SBUHB has reflected robustly and appropriately; - Training for all doctors and nurses treating and managing patients with gastro-intestinal cancer is being worked through by Richard Evans and Christine Williams; - The General Medical Council have issued detailed guidance on discussing patient's prognosis which has been helpful assisting clinicians with their communication; - There were three actions to be completed within nine months from 8th January 2021 that are being worked through. In discussing the report, the following points were raised: Christine Morrell outlined that there is an action plan for Nutrition and Dietetics with two groups of actions. The first to be completed by end of July and the remaining actions by end of September 2021. Martyn Waygood requested an update in September 2021.	**RE**

Resolved:	- An update be received at September's Quality and Safety Committee. - The update was **noted.**	**RE**
136/21	**QUALITY AND SAFETY GOVERNANCE GROUP**	
	A key issues report from the Quality and Safety Governance Group (QSGG) was **received.** In introducing the report, Nigel Downes highlighted the following points: - The last meeting took place on 2nd June 2021; - The primary cause of staff incidents at work is related to behaviour of patients toward staff, including physical assault. Funding to renew the CCTV system at Morriston Hospital's ED has been agreed with work to commence in June 2021; - At Neath Port Talbot Hospital (NPTH) there have been delays in investigating incidents with potential missed opportunities for learning, and the Service Group holds a significant risk in relation to the number of overdue incidents; - Within the maternity service, Birth Rate Plus (BR+) summary has reported there is a deficit of 9.49 whole time equivalent (wte) personnel. There is a paper being drafted which details plans to increase the band 5 hours to mitigate the deficit from 9.49 wte to 4 wte; - There is an expectation to recruit 12 newly qualified midwives in September 2021; - The prison (HMP) review inquest action plans have been combined into one 13-point action plan to maintain and track accurate progress against the actions raised. An update report will be brought to QSGG on a quarterly basis; - In relation to Electronic Staff Records (ESR) and mandatory training, the Assistant Manager OD and Learning for ESR to meet with Assistant Director Nursing and Head of Quality and Safety to have further discussions. In discussing the report, the following points were raised: Nuria Zolle requested that action timescales are detailed within the report going forward. Nigel Downes confirmed that this would be included in the next iteration. Christine Williams advised that she met with Singleton Hospital Delivery Group following Morriston Hospital confirming that due to restrictions, Morriston Hospital cannot be utilised for the Children's Service and will be reviewing suitable alternative options.	

	Martyn Waygood queried timescales for the antibiotic stewardship meetings. Richard Evans advised that electronic prescribing at NPTH and Singleton Hospital had brought different opportunities for better prescribing and noted that there is work ongoing in Primary Care with GP prescribing. He added that clinical engagement is important and he will need to discuss correct approach with Christine Williams.	
Resolved:	The report was **noted.**	
137/21	**ITEMS TO REFER TO OTHER COMMITTEES**	
	There were no items to refer to other committees.	
138/21	**ANY OTHER BUSINESS**	
	(i) Chair of Quality and Safety Committee Martyn Waygood informed committee members that Stephen Spill would be taking over as Chair from July's Quality and Safety Committee. Martyn Waygood thanked committee members for their support throughout his time as committee Chair. (ii) Older People's Charter Maggie Berry found the Children's Charter positive and queried if there were plans to develop the Older People's Charter as the Children's Charter could be used as a step in the process for development. Christine Williams advised that there is work ongoing to pull the dementia standards together.	
139/21	**DATE OF NEXT MEETING**	
	The date of the next meeting was confirmed as 27th July 2021.	