

Reporting Committee	Quality Patient Safety Committee
Chaired by	Ceri Phillips
Lead Executive Director	Director of Nursing & Quality
Date of Meeting	10 August
Summary of key matters considered by the Committee and any related decisions made	
<ul style="list-style-type: none"> Update from the Welsh Renal Clinical Network The report from the Welsh Clinical Renal Network was received and considered. The Network Lead highlighted the National Renal Audit Day taking place on 24 September 2021 and extended an invitation to Members to attend if wished to do so. Members noted the Home Dialysis Peer Review completed in July 2021 and noted that the process had identified several areas of excellent performance in each of the 5 Renal Units reviews, as well as highlighting areas for improvement/action. Presentation – QAIS – Summary of the Review of the NHS Wales CAMHS In-Patient Services Report Members received a presentation for information from Shane Mills, Director of Quality and Mental Health, NCCU who introduced slides on the following: <ul style="list-style-type: none"> Latest Benchmarking information for children and young people: Review of the two Tier 4 CAMHS Units that WHSSC commission: Review of designated beds for children and young people on adult wards requested by Welsh Government: Pandemic: Expected impact on Children and Young People's Mental Health: Actions; and Overview of the issues. A copy of the review of designated beds for children and young people on adult wards report commissioned by Welsh Government is available to Joint Committee members upon request. Members noted the increase in children with eating disorders and that WHSSC had undertaken a piece of work to understand the increase in demand, the outcome of which was being reviewed and would be reported back to the Committee in due course. Patient Story – Rookwood Hospital Prosthetics Service Members received a patient story and update from Gwen Griffith, Prosthetist at C&VUHB and her patient DB who had been fitted with a microprocessor controlled 	

prosthetic knee (MPK) 3 years after having his leg amputated above the knee aged 59. Members agreed the impact on emotional health of the MPK recipient was unquantifiable and noted that financial impact should never be the most important consideration in such a situation.

- **Commissioning Assurance Framework**

Members received and considered the report the purpose of which was to present the Commissioning Assurance Framework and suite of documents prior to submission to the Joint Committee on 07 September 2021 for final approval. It was noted that the Patient Engagement & Experience Framework had recently been discussed at Corporate Directors Group Board (CDGB) and following feedback the document would be strengthened to incorporate some additional information and that those minor amendments would be made prior to requesting final approval from Joint Committee in September 2021.

Members welcomed the inclusion of patient feedback and engagement in the CAF. Members were assured that whilst the CAF had a review date of 2024 it would be kept under constant review and updated as and when necessary.

- **Commissioning Team and updates**

Reports from each of the Commissioning teams were received and taken by exception. Members noted the information presented in the reports and a summary of the services in escalation attached to this report. The key points for each service are summarised below:

- **Cancer & Blood**

Members received the Cancer & Blood report and noted the progress made.

- **Cardiac**

Members received an update on the Getting It Right First Time (GIRFT) review of cardiac services and noted that cardiac services in SBUHB had been escalated to Level 4 of the WHSSC escalation process and that Cardiac services in CVUHB had been escalated to Level 2.

Members discussed the report and noted that a report had been presented to the Joint Committee's "in committee" meeting on the 13 July 2021, and noted that reassurance had been provided to the Committee that a number of immediate actions had been taken, and that it had been agreed that progress on the recommendations made would be monitored through the Q&PS Committee.

- **Mental Health & Vulnerable Groups**

Members noted that Ty Llidiard had been escalated to Level 4, a joint decision taken by both the Health Board and WHSSC as Commissioner.

Members also noted that Cefn Carnau a low secure provision had served notice on a complex patient requiring a medium secure placement. Despite extensive searching by the Case Managers and the Health Board of residency supported by

QAIS a placement had yet to be secured. Ongoing work with providers such as Llanarth Court was in progress alongside the development of a possible bespoke placement.

Members noted that WHSSC had placements for two of the NHS Wales patients currently at the St Johns Priory Group being decommissioned on 31 August. The WHSS Team are waiting to confirm a placement for the third and the matter had been escalated to the Chief Executive Officers of the affected Health Boards including the need to have a contingency plan in place in case WHSSC were unable to place any of the patients. SL reported the WHSS Team were working with medium secure providers to develop an All Wales response to this situation. Members agreed an update on the St John's patients would be provided at the next meeting.

- **Neurosciences**

Members noted the Cochlear Implant Service risk score had been lowered from 25 to 16 and that a programme of work had been developed including work streams to define the scope of service change and undertake an option appraisal on the delivery of the service. Workshops would take place in September 2021 with a view to preparing and approving the relevant documentation by the end of 2021 and proceeding to consultation early 2022.

- **Women & Children**

Members noted the following:

- There are a number of fragile paediatric services in sub-specialty areas but that there was some recruitment funding available that would reduce some of the risks. WHSSC developing a paediatric specialist service strategy;
- Serious concerns around staffing in neonatal services as a result of absence from work, in particular as a result of staff being pinged by the NHS COVID app, which may be alleviated in October as newly qualified nurses take up their posts. NHS England similarly affected;
- A number of pregnant women delivering early as they have been admitted to hospital with COVID-19 and are in the unvaccinated community;
- An increase in the number of children in hospital with respiratory viruses, expected over winter but presenting earlier than anticipated.

- **Intestinal Failure**

Members noted WHSSC intended to undertake a review of intestinal failure services and that the WHSS Team had already engaged with the providers and the review was welcomed by all parties.

- **Other Reports received**

Members received reports on the following:

- **Services in Escalation Summary**
- **CRAF Risk Assurance Framework**
- **WHSSC Policy Group**
- **CQC/HIW Summary Update**

- **Incidents and Complaints Report**

- **Items for information**

Members received a number of documents for information only which members need to be aware of:

- Chair's Report and Escalation Summary to Joint Committee 13 July 2021;
- National Patient Safety Incident Reporting Policy – Implementation Group;
- National Framework for Managing Patient Safety Incidents following Nosocomial COVID-19;
- NHS Wales Quality Assurance Improvement Service 2021 9th Annual Position Statement 2020-2021;
- NHS Wales Executive Board – Duty of Quality and Candour; and
- Health Board QPS Leads Contacts

Key risks and issues/matters of concern and any mitigating actions

Cardiac Service – The GIRFT report and escalation of these services.
Ty Llidiard escalation to Level 4

Summary of services in Escalation (Appendix 1 attached)

Matters requiring Committee level consideration and/or approval

The Committee are asked to note the concerns raised regarding adult Cleft Lip and Palate Services and the actions requested.


Matters referred to other Committees


None


Confirmed Minutes for the meeting are available upon request



Date of next scheduled meeting:	12 October 2021
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SERVICES IN ESCALATION

Date of Escalation	Service	Provider	Level of Escalation	Reason for Escalation	Current Position	Movement from last month
November 2017	North Wales Adolescent Service (NWAS)	BCUHB	2	<ul style="list-style-type: none"> Medical workforce and shortages operational capacity Lack of access to other Health Board provision including Paediatrics and Adult Mental Health. Number of Out-of-Area admissions 	<ul style="list-style-type: none"> QAIS report outlined key areas for development including the recommendation to consider the location of NWAS due to lack of access on site to other health board provision. Participation in weekly bed management panel meeting Environmental works complete. Unit currently able to accommodate full 12 bed establishment. 	

Date of Escalation	Service	Provider	Level of Escalation	Reason for Escalation	Current Position	Movement from last month
March 2018	Ty Lliard	CTMUHB	4	<ul style="list-style-type: none"> Unexpected Patient death and frequent SUIs revealed patient safety concerns due to environmental shortfalls and poor governance 	<ul style="list-style-type: none"> Concerns raised by CTMUHB re culture & leadership issues in the unit which were being investigated 	
Sept 2020				<ul style="list-style-type: none"> SUI 11th September 	<ul style="list-style-type: none"> Emergency Response to the unit remain outstanding from March 2018 Paper to CDGB on 28th June 2021 decision made to escalate to level 4. Mr Stuart Davies identified as Executive Lead 	
June 2021				<ul style="list-style-type: none"> Culture & Leadership issues raised by CTMUHB 	<ul style="list-style-type: none"> Letter to Health Board explaining decision Meeting with Health Board 12th July 2021 with agreed actions going forward Letter from CEO CTMUHB with actions to be taken against 8 agreed action points Letter from WG 9th July 2021 concerning Ty Lliard 	

					<ul style="list-style-type: none"> Next escalation meeting 10th August 2021 	
Date of Escalation	Service	Provider	Level of Escalation	Reason for Escalation	Current Position	Movement from last month
September 2019	Cochlear Implant Service	South Wales	4	<ul style="list-style-type: none"> Quality and Patient Safety concerns from C&V Cochlear Implant team, from the patients who were immediately transferred to the service in Cardiff following the loss of audiology support from the Bridgend service. 	<ul style="list-style-type: none"> C&VUHB treating all patients Interim CHC arrangements agreed Following further discussions with WHSSC Corporate Directors, it was agreed that an initial key piece of work, which was started prior to the concerns raised about the Bridgend service should be re-established before the commencement of the engagement process. It is anticipated that the first 2 workshops will take place in September. The aspiration is that documentation can be prepared and approved by the end of the calendar year, with a view to commencing consultation early 2022, subject to capacity within the Planning team. 	

Date of Escalation	Service	Provider	Level of Escalation	Reason for Escalation	Current Position	Movement from last month
February 2020	TAVI	SBUHB	2	<ul style="list-style-type: none"> Quality and Patient Safety concerns due to the lack of assurance provided to the WHSS team regarding the actions taken by the HB to address 4 Serious Incidents relating to vascular complications. 	<ul style="list-style-type: none"> Action Plan completed Service sustainability being monitored through the bi-monthly Risk, Assurance and Recovery meetings (next Meeting July 2021) WHSSC Quality Team to monitor PROMS and PREMS on a quarterly basis 	
July 2021	Cardiac Surgery	SBUHB	4	<ul style="list-style-type: none"> Lack of assurance regarding current performance, processes and quality and patient safety based on the findings from the Getting It Right First Time review 	<ul style="list-style-type: none"> QPS agreed the monitoring arrangements in place, with 6 weekly meetings Further discussions to be held with both South Wales centers regarding the future pathways for aorto-vascular cases 	

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July 2021	Cardiac Surgery	C&VUHB	2	<ul style="list-style-type: none"> Lack of assurance regarding processes and patient flow which impact on patient experience 	<ul style="list-style-type: none"> C&VUHB in process of agreeing a Programme of improvement work to address the recommendations set out in the GIRFT report Outline programmed to be shared with WHSSC Bi- monthly meetings agreed for monitoring purposes 	
September 2020	FACTS	CTMUHB	3	<ul style="list-style-type: none"> Workforce issue 	<ul style="list-style-type: none"> 5 CQV meetings have now been held. Still waiting for substantive. Consultant Psychiatrist role to be advertised. Plans in place for all other roles. FACTS service specification is still in development. Next CQV meeting is planned for 2nd August. 	



Level of escalation reducing / improving position



Level of escalation unchanged from previous report/month



Level of escalation increasing / worsening position