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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



		Agenda Item	2.4 (i)
Freedom of Information Status	Open		
Reporting Committee	Quality and Safety Committee		
Author	Leah Joseph, Corporate Governance Officer		
Chaired by	Martyn Waygood, Interim Vice Chair		
Lead Executive Director (s)	Christine Williams, Interim Director of Nursing and Patient Experience		
Date of last meeting	26 January 2021		
Summary of key matters considered by the committee and any related decisions made:			
<p>Nurse Staffing Levels (Wales) Act 2016 Internal Audit Report - The audit review undertaken in early 2019/20 provided 'reasonable assurance'. The 2020/21 internal follow up audit review reported significant progress made and the review provided 'substantial assurance'. All actions were implemented prior to the follow up audit review.</p> <p>COVID-19 Quality and Safety issues – A verbal update was provided by the Medical Director which detailed that isolation measures are getting traction and rates are not dropping rapidly, but in plateaus. One of the biggest challenges is to stop the spread of COVID-19 to patients and staff who are negative. A Nosocomial transmission group has been set up, along with the outbreak oversight group which meets up to 5 times per week.</p>			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<p>Ombudsman Public Interest Report – The report was disappointing. The experience was harrowing for the family and there was a communication issue where the family was not fully aware of the diagnosis of the patient. Future update reports will be received at June and October's Quality and Safety Committee.</p> <p>Infection Prevention and Control Report (IPC) - There has been year-on-year improvement in pseudomonas and staph aureus, E. coli and klebsiella infections. C.difficile cases have increased year-on-year by 29%, however there has been a significant decline since August 2020. Deep dive work is underway to make improvements following a 14% increase of the bacteraemia klebsiella. The IPC team are supporting the vaccination roll out, and also supporting the COVID-19 response in care homes and delivery groups.</p>			
Delegated action by the committee:			
Clinical Ethics Group Terms of Reference were ratified by the committee.			
Main sources of information received:			
<p>Performance Report -The report presented the four quadrants of harm and data in respect of COVID-19, fractured neck of femur, unscheduled care, planned care, cancer performance and stroke metrics. The report was received for assurance.</p> <p>Patient Experience Report was received for assurance. For the month of December there were 639 friends and family online survey returns which resulted in 77% of people stating they would highly recommend SBUHB to friends and family which was a 7% decrease from</p>			

November 2020. 64 compliments were recorded and 148 complaints were received in December 2020. The last never event was recorded on 19th November 2020.

Highlights from sub-groups reporting into this committee:

Quality and Safety Governance Group - The most recent QSGG meeting took place on 22nd January 2021 and the report was received for assurance. There have been no serious incidents recorded in the neonatal service for the last 12 months. A meeting is due to take place to find out what the service is doing and whether the lessons can be shared across SBUHB and wider.

Matters referred to other committees:

None identified.

Date of next meeting	23 February 2021
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