



AGENDA ITEM

3.2.4 Appendix 1

CTM BOARD

HIGHLIGHT REPORT FROM THE QUALITY & SAFETY COMMITTEE

DATE OF MEETING

30 March 2023

PUBLIC OR PRIVATE REPORT

Public

IF PRIVATE PLEASE INDICATE REASON

Not Applicable - Public Report

PREPARED BY

Emma Walters, Corporate Governance Manager

PRESENTED BY

Jayne Sadgrove, Vice Chair and Chair of the Quality & Safety Committee

EXECUTIVE APPROVED

SPONSOR

Greg Dix, Executive Nurse Director

REPORT PURPOSE

NOTING

ACRONYMS

1. INTRODUCTION

1.1 This report had been prepared to provide the Board with details of the key issues considered by the Quality & Safety Committee at its meeting held on the 24 January 2023 and the In Committee session held on 30 January 2023.

1.2 Key highlights from the meeting are reported in section 3.

2. PURPOSE OF THE QUALITY & SAFETY COMMITTEE

2.1 The purpose of the Quality and Safety Committee is to provide assurance to the Board on the provision of workplace health & safety and safe and

high quality care to the population we serve, including prevention through public health, primary and secondary care.

2.2 The Committee will:

- Put the needs of patients, carers and the public at the centre of all its business.
- Ensure appropriate arrangements are in place to support workplace health & safety.
- Provide evidence based and timely advice to the Board, based on local need, to assist in discharging its functions and meeting its responsibilities.
- Provide assurance to the Board in relation to the CTMUHB's arrangements for safeguarding the public and continuously improving the quality and safety of the services we provide.
- Ensure that care is delivered in accordance with the Health & Care Standards for Health Services in Wales.

3. HIGHLIGHT REPORT FROM THE LAST COMMITTEE MEETING

ALERT / ESCALATE	<ul style="list-style-type: none"> • There were no items for escalation
ADVISE	<ul style="list-style-type: none"> • The Organisational Risk Register – Risks Assigned to the Quality & Safety Committee was received. Members noted that Care Group Directors had now assigned all of the risks escalated to the Organisational Risk Register to the new Care Group model structure, and noted that a workshop had been held with the Executive Team to commence a programme of work to review all risks within their portfolio. Queries on individual risks were raised by Members with updates being sought to outside the meeting; • A report in relation to Learning from Events Reports was received. Members welcomed the progress made to date and acknowledged that systems were working more effectively. Members requested a further update on progress in three months to ensure progress was being sustained; • A Datix Cymru Assurance Report was received. Members noted that incidents continued to be reported, themes and trends continued to be identified via the system, a robust corporate audit programme was in the process of being developed and noted that a significant improvement in the quality of data being reported should be seen over the next few months. The Committee requested a further update in six months; • The Quality Dashboard report was received and a detailed discussion held. A verbal update was provided regarding the review undertaken in relation to Emergency Care Incidents which had been coded as severe and catastrophic, which highlighted the main areas of concern during the winter period being pressure

	<p>ulcers and falls. Members requested a spotlight report on Pressure Ulcer and Falls be presented to the next meeting. The Executive Director of Nursing advised that he still remained concerned in relation to the criticalness of the position and the level of care provided within the Emergency Departments;</p> <ul style="list-style-type: none"> • A Deep Dive into Children and Adolescent Mental Health Service (CAMHS) was received. Members expressed concern in relation to part 1 performance compared to performance within other Health Board's and also regarding the care and treatment plan performance which was worsening and would inevitably affect the quality of care being provided. Members noted an upward tick was being seen in relation to care and treatment plan performance with an anticipated improvement being expected by February/March 2023. • Members received a report on Liberty Protection Safeguards Preparation and noted that the implementation date had been delayed from October 2023 to April 2024. Members noted that the full impact this would have on colleagues would not be known until the Code of Practice was received. Members agreed to receive a further update on progress later in the year; • Members received a report on the Child T – Child Practice Review. Members noted that an improvement plan was in place and lessons learned being shared. <p>At the In Committee session held on 30 January 2023, a report on Parc Prison, Controlled Drugs was received. Members noted the challenges faced and the actions being taken to mitigate any risks to the service.</p>
<p>ASSURE</p>	<ul style="list-style-type: none"> • A Listening & Learning Story was shared in relation to the Cariad Pet Therapy project which was recognised by Members as a wonderful contribution to the service and difference it was making; • A report on Progress following Internal Audit on Concerns and Welsh Risk Pool Review of Claims/Redress/Inquests was received. Members noted the positive progress that had been made and supported the ongoing monitoring of progress through operational processes moving forwards; • The CTMUHB Quality & Safety Framework 2022-2025 was received and welcomed by the Committee. The Committee agreed to ENDORSE the Framework for Board APPROVAL; • The Maternity Services & Neonates Improvement Programme report was received. The Committee Chair advised that she was assured to note that some of the areas discussed at the Maternity & Neonatal Improvement Board would be taken forward and was pleased to see that feedback being received was being considered and acted upon. The Committee Chair also



	<p>formally congratulated the service for receiving their PROMPT training award;</p> <ul style="list-style-type: none"> • The Ty Llidiard Tier 4 CAMHS Inpatient Unit Report was received. Members received assurance that the Welsh Health Specialised Services Committee had now formally de-escalated the Unit from Level 4 to Level 3 following a quality visit that was undertaken. • Quality Dashboard – Members noted that the Health Board had recently attended the performance meeting with Welsh Government and the Delivery Unit where the Health Board was thanked for the work that had been undertaken in relation to delivery of the Patient Safety Notices; • The report from the Chief Operating Officer was received. Members recognised the positive improvement that had been made in relation to red release performance in January; • The Monitoring & Reporting of Continuing Healthcare and Funded Nursing Care Activity was received. Members agreed to receive annual updates moving forwards, with regular reporting of any homes in escalation to be captured in the Quality Dashboard report
INFORM	<p>The Committee received and approved the following items on the consent agenda:</p> <ul style="list-style-type: none"> • Minutes of the meetings held on the 15 and 17 November 2022; • Committee Annual Cycle of Business for 2023; • Committee Terms of Reference. <p>The Committee received and noted the following items on the consent agenda:</p> <ul style="list-style-type: none"> • Committee Action Log; • Committee Forward Work Programme; • Safeguarding Annual Report; • Quality Governance – Regulatory Review Recommendations and Progress Updates; • Progress Report 'Improving Care, Improving Lives' National Care Review for Inpatients with a Learning Disability; • CTMUHB Nosocomial Covid-19 Incident Management Programme.
APPENDICES	NOT APPLICABLE

4. RECCOMENDATION

4.1 The Board is requested to **NOTE** the report.