



Agenda Item

5.3.2

Quality, Safety & Experience Committee

Highlight Report from the Highlight Report from the Children & Families Care Group Quality, Safety and Experience Meeting

Dyddiad y Cyfarfod / Date of Meeting	23/09/2025
Statws Cyhoeddi / Publication Status	Open/ Public Not Applicable
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Pwrpas yr Adroddiad / Report Purpose	For Noting
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
(Insert Details)	Click or tap to enter a date.	

Acronyms / Glossary of Terms	
Badgernet	Digital Maternity Information System
BR+	Birthrate Plus – nationally recognised midwifery workforce acuity tool
CTM	Cwm Taf Morgannwg
CYP	Children & Young People
HIW	Health Inspectorate Wales



PCH	Prince Charles Hospital
IQPD	Integrated Quality, Performance & Delivery
MatNeo SSP	Maternity and Neonatal Safety Support Programme
NHS	National Health Service
PACE	Playfulness, Acceptance, Curiosity and Empathy
PoW	Princess of Wales Hospital
QSE	Quality, Safety and Experience
RGH	Royal Glamorgan Hospital
RTT	Referral to Treatment
WG	Welsh Government
Wte	Whole Time Equivalent

1. Introduction

1.1 This report has been prepared to provide the Committee with details of the key issues considered by the Children and Families Care Group at its last meeting.

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

2. Specific Matters for Consideration

2.1 The Children & Families Care Group Quality, Safety and Experience Meeting (QSE) will:

- Put the needs of patients, carers and the public at the centre of all its business.
- Provide evidence based and timely advice based on local need, to assist in discharging its functions and meeting its responsibilities.
- Provide assurance to the Children and Families Care Group in relation to the 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 Duty of Quality and Health & Care Standards for Health Services in Wales.
- Ensure that services are delivered in compliance with regulatory legislation and accreditation bodies.

3. Highlight Report

Alert / Escalate	<ul style="list-style-type: none"> • Welsh Government national maternity and neonatal assurance assessment underway. Self-assessment tool submitted 31/10/25. Site visits will be based on the 15 steps approach, Staff and services user voices workstream also planned for November. P&I have indicated that they require to meet with Board leaders as part of the assurance process, communication to be received via CEO office imminently.
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- Special School Nursing (Risk ID 5753) remains the highest Care Group risk within Children & Families (Risk score 20). Sickness absence position improving in Bridgend. One registrant recruited to Heronsbridge, recruitment to Ysgol Ty Coch unsuccessful, back out to advert. Risk score reviewed but remains at 20 due to fragility of services.
- Unite are currently balloting their members in the Health Visiting Service, on decision to vote to strike, Unite issued the Health Board with a letter of intention to ballot if the Band 7 uplift of posts was not agreed.
- Badger net implementation - The current status, risks, and resource requirements for the implementation: critical gaps in technical delivery, training, infrastructure, and governance, potential to cause delay in the safe and successful go-live in March 2026. Escalated to Director of Digital for point of contact to try to progress mitigating actions.
- Maternity Priority Unit. - The Maternity Priority Unit is an assessment unit for women in pregnancy requiring Urgent attention and care. The Birmingham Symptom specific Obstetric Triage System (BSOTS) model is used to standardise the assessment and prioritisation process, it aims to improve the overall efficiency of the maternity unit and enhance patient safety. Using the BSOTS model is also a directive from Welsh Government.

Recent serious incidents and scrutiny on the delivery of high-risk care women with complex needs received, necessitated the establishment of a high care area for women requiring additional clinical care in the labour ward area. This occurred during the PoW closure and resulted in the Maternity Priority Unit (MPU) being displaced to accommodate this. During the closure MPU was located on ward 32 (Paeds outpatients) which was an ideal area to fully implement the BSTOS model. Since the PoW reopening, MPU is now run from 2 single rooms (previously 4 beds) on the labour ward corridor the following challenges are faced which impact on patient safety and experience:

- Insufficient rooms to assess women on arrival in line with BSOTS causing delays in care
- No oversight of the waiting room area if women become unwell
- challenges with confidentiality as this is located on a main corridor to labour ward -



	<ul style="list-style-type: none"> ○ No sluice facilities for urine testing causing Infection, Prevention & Control (IP&C) challenges - ○ Environmental challenges have resulted in the BSOTS model not being followed correctly causing delays in care, and negative experiences for women and staff. Data collection shows around 20% of women are not being seen in the 15 min timeframe standard, from the 1st to the 4th of November, this increased to 40%, contour to monitor. <p><u>Mitigations</u></p> <ul style="list-style-type: none"> ● A handover room has been established in a storage area to allow an area to take triage calls and be within a close distance to the assessment rooms. ● Two midwives allocated to MPU when possible to assess women and utilise rooms on Labour ward and tair afon when available, however this creates logistical challenges as this involves the women being cared for in different areas. <p>This risk is on the risk register (6249). Conversation taken place with the senior clinicians and management to evaluate options which are limited due to the footprint of maternity. Ideal location for MPOU is on ward 32. However, this is a separate department and are not in a position to support.</p>
Advise	<ul style="list-style-type: none"> ● Birth rate + report is in draft and under review, suggestive of requirement of significant additional funding in clinical and specialist/management workforce to align with the standard. Care Group is reviewing the draft with a view to draft a paper for executive team. ● Waiting time performance for Neurodevelopment children (RISK ID 2808) currently remains at a risk score of 12. This is being reviewed to see how the National Neurodivergence Improvement Programme (NDIP) funding received is likely to affect the trajectory. NDIP 25/26 – total budget for region and for ND team now confirmed by WG and is reduced from what was expected. This will limit our improvement opportunities and our aim to get below 78 weeks at March 2026. Raised at Welsh Government IQPD in July and again in November. Monthly trajectory meetings with Performance and Escalation team. Current wait at 102weeks. ● Menopause service review delayed due to absences, the review will ensure provision within CTM is in accordance with national standards and guidance awaiting further date.



	<ul style="list-style-type: none"> • Welsh Government report on Allergy Services across Wales published, joint working group for paediatrics & adult services being led by Head of Commissioning. • Multi-professional baby abduction drills carried out across all maternity units in August. The exercise has highlighted the need for standardised security systems across all sites (weighted mattresses at RGH and PoW vs fully secure XTAG system in PCH). (Statement of Need (SON) submitted awaiting capital approval) • External review of previous four nationally reportable incidents – midwifery review completed, awaiting outcome of obstetric and anaesthetic review. Early learning highlighted from internal governance and assurance process and external recommendations completed (Improvement plan available for review on request). Internal investigations on schedule. • Healthcare support workers at PoW Maternity and Paediatrics continue to be responsible for hostess trolley / mealtimes. Concerns raised by the team as this task continues to detract from providing clinical care to women.
Assure	<ul style="list-style-type: none"> • Risk ID 6199 reduced as PROMPT training compliance has significantly improved over the recent months due to additional sessions. • 20 newly qualified midwives recruited, unfilled vacancies newly appointed into and will be in post by January. Streamlining events attended by Heads of Midwifery at University of South Wales (USW) in readiness for March cohort of graduates. 7.96 wte streamlining nurses recruited across children and young people services (CYP). • Resolution to school hearing screening service progressing. School entry hearing screening service will move to audiology. Posts have been recruited to awaiting start dates. School Nursing Service commencing transition year pupils following Fluenz Program in December. • Plans to fully return wards 18 at Royal Glamorgan Hospital underway, due to be handed back to paediatrics week commencing 10th November, deep cleaning and repatriation of all equipment required, target date for active use of ward week commencing 24th November. • Gynaecology Cancer action plan underway to deliver significant improvement in cancer treatment for our population. July Performance dipped to around 31%.



(unvalidated but August trajectory heading over 40% and should continue to improve as we work on both the triage at single point of access and the treatment stages. Risks to this are for the patients who require tertiary level treatment

- Gynaecology RTT target of no patients over 104 weeks at end of October 2025 met. SIG meetings have been established to have oversight and progression of improvements.
- Some outstanding estates issues remain following the re-opening at PoW. There is a schedule of maintenance work for Estates team to rectify which is still outstanding, this has been escalated through IP&C committee and Children & Families Operational Management Board (C&F OMB).
- Midwifery and Health Visitor skills sessions introduced across all areas to share learning and build relationships, all three sessions have been delivered and are currently being evaluated.
- Health Inspectorate Wales (HIW) Unannounced visit to maternity unit at Princess of Wales Hospital Bridgend. No immediate assurances given. Action plan accepted and final report published.
- School Fluenz Campaign progressing, as of Friday 7th November 2025, end of week 7 16,662 children and young people have received their vaccination in school. Uptake rate of 54.7%. The team are currently working on two service improvement projects around e-consent and digital.
 - Invested in digital and data support for the school nursing team.
 - Development of individual links for schools containing universal nasal flu information, so we can measure uptake against parents/carers engagement, and also evidence if schools send out information we send to them.
 - Development of a bespoke vaccination data capture tool, support by power Business Intelligence (Bi), to give live updates on vaccine uptake, etc.
 - Rolling out of phase two of the e-consent system for all schools in Merthyr and Bridgend.
- Recruited Lead Nurse for women's health (18.75hrs) recruited to lead on the Womens Health Plan



	<p>Risk Register There is currently one risk scoring high with 16 or more. Discussed with executive colleagues</p> <table border="1" data-bbox="432 427 1315 584"> <thead> <tr> <th data-bbox="432 427 703 465">Risk ID</th> <th data-bbox="703 427 1031 465">Description</th> <th data-bbox="1031 427 1315 465">Score</th> </tr> </thead> <tbody> <tr> <td data-bbox="432 465 703 584">5753</td> <td data-bbox="703 465 1031 584">Inadequate Special School Nurse provision</td> <td data-bbox="1031 465 1315 584">20</td> </tr> </tbody> </table>	Risk ID	Description	Score	5753	Inadequate Special School Nurse provision	20
Risk ID	Description	Score					
5753	Inadequate Special School Nurse provision	20					
<p>Inform</p>	<ul style="list-style-type: none"> • Research, Development and Service Improvement update received at Care Group Quality and Safety Committee in August. Several clinical research portfolio, non-portfolio, commercial, non-commercial and service evaluation projects underway across the Care Group. • Health & Safety have recently supported the review of Entonox exposure levels across maternity services. This involved environmental and personal monitoring. The Care Group team is working through actions to reduce risks in the areas with higher readings. • Consent training within maternity has commenced across sites for obstetricians. • Sickness absence among nursing workforce within special care baby units at PCH and PoW improving. • Labour ward beds at PCH have been replaced, bed borrowed from PoW returned. • Maternity & Neonatal National Assurance Assessment (NMNAA) self-assessment tool has been completed and submitted on 31/10/25. • Informatics Midwife has been shortlisted for NHS Wales award 18th November; Consultant midwife shortlisted for Royal College of Midwifery (RCM) leadership award. Bereavement Midwives and Infant feeding team have been shortlisted RCM Awards London (2026). International Confederation of Midwives (ICM) Lisbon (2026) conference - four midwifery leaders from CTM have had their posters/abstract accepted. • World Prematurity day 17th of November, engagement events occurring across CTM 						
<p>Appendices</p>	<p>Not applicable.</p>						



4. Assessment

Objectives / Strategy	
Dolen i Nod (au) Strategol BIP CTM / Link to CTMUHB Strategic Goal(s)	Improving Care
	If more than one applies please list below: <ul style="list-style-type: none"> • Creating Health • Inspiring People • Sustaining our Future
Dolen i Feysydd Strategol BIP CTM / Link to CTMUHB Strategic Areas	Starting Well
	If more than one applies please list below: <ul style="list-style-type: none"> • Growing Well • Living Well
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals <i>150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)</i>	A Healthier Wales
	If more than one applies please list below: <ul style="list-style-type: none"> • A Globally Responsible Wales
Dolen i Hwyluswyr Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality (Duty of Quality Statutory Guidance (gov.wales))	Whole-systems Perspective
	If more than one applies please list below: <ul style="list-style-type: none"> • Culture and Valuing People • Leadership • Learning, Improving and Research
Dolen i Feysydd Ansawdd (Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality (Duty of Quality Statutory Guidance (gov.wales))	Safe
	If more than one applies please list below: <ul style="list-style-type: none"> • Timely • Equitable • Efficient • Effective • Person Centred
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	Yes - Reduce
	If more than one applies please list below: <ul style="list-style-type: none"> • Repurpose • Reuse • Refine • Recycle

Impact Assessment		
Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below:



<p><i>Have you undertaken a Quality Impact Assessment Screening?</i></p>		<p>Not a policy or guideline</p>
<p>Cydraddoldeb a'r Gymraeg <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb a'r Gymraeg? /</i> Equality and Welsh Language <i>Have you undertaken an Equality and Welsh Language Impact Assessment Screening?</i></p>	<p>Yes: <input type="checkbox"/></p> <p>Outcome for Equality (delete as appropriate): POSITIVE/NEUTRAL/NEGATIVE</p> <p>Outcome for Welsh Language (delete as appropriate): POSITIVE/NEUTRAL/NEGATIVE</p>	<p>No: <input checked="" type="checkbox"/></p> <p>If no, please include rationale below:</p> <p>Not a policy or guideline</p>
<p>Cyfreithiol / Legal</p>	<p>There are no specific legal implications related to the activity outlined in this report.</p>	
<p>Enw da / Reputational</p>	<p>There is no direct impact on the reputation of the Health Board as a result of the activity outlined in this report.</p>	
<p>Effaith Adnoddau <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i></p>	<p>There is no direct impact on resources as a result of the activity outlined in this report.</p>	

5. Recommendation

- 5.1 The Committee is asked to **NOTE** the highlights outlined in section 3 of this report.