

**EXPERIENCE, QUALITY AND SAFETY MEETING: 30 JULY 2020  
QUESTIONS RECEIVED IN ADVANCE OF THE MEETING**

**ITEMS FOR DISCUSSION  
AGENDA ITEM 3.1: COVID-19 COMMISSIONING ASSURANCE**

No.	Requestor	Date Received	Question Received	Director Lead	Response
1.	Frances Gerrard, Independent Member	29/07/2020	<p>Most routine activity and performance management arrangements for scheduled and unscheduled care were suspended following the letters from central governments. PTHB is attempting to monitor key issues in relation to essential services such as Cancer breaches. In line with other health boards it has reported to Welsh Government on access to essential services.</p> <p>Question: Has PTHB arranged to collate details from GP practices or other sources of patients in Powys awaiting secondary care deferred by pandemic, so that they can be monitored?</p>	Assistant Director of Commissioning	<p>The process for handling non-essential routine referrals to services which were suspended due to COVID was set out by Government (please see the attached letter and flow chart). Referrals were to be added (i.e. held) on provider Patient Administration Systems (PAS).</p> <p>The Medical Director wrote to all GPs in Powys re-affirming the process on the 11<sup>th</sup> May. (There was an issue with Wye Valley NHS Trust taking a slightly different approach in 7 specialities based on Royal College guidance, but has assured Powys it is now in line with Welsh Government requirements. It has crossed-checked 224 routine referrals.)</p>

**ITEMS FOR DISCUSSION  
AGENDA ITEM 3.2, CONCERNS AND SERIOUS INCIDENTS REPORT**

2.	Frances Gerrard, Independent Member	29/07/2020	Is there a detailed analysis of the complaints received in the peak 12/19 on the graph?	Director of Nursing and Midwifery	Please accept my apologies, there is an error in the title of the graphs, the data refers to compliments and is possibly raised because of the Christmas period. I will ensure this is noted where I present the paper.
3.	Frances Gerrard, Independent Member	29/07/2020	What are we doing to improve our speed of answering formal complaints?	Director of Nursing and Midwifery	In addition to the response given to a similar question during board today, there are regular meetings with the Concerns team to

			(Also see Draft report on quality - Improve our management of concerns • Percentage increase in the number of complaints responded to within 30 working days - • We achieved 54% in quarter 3 compared to 59% in 2018/19) and p231.		<p>discuss dates for compliance and to escalate any outstanding draft responses.</p> <p>Weekly trackers are sent out to services to assist in their continuous management of concerns, enabling them to track where the concerns are at, and the timeframes they need to work within.</p> <p>In addition, there are regular meetings with Heads of Services and Asst Directors to discuss all open concerns to ensure they remain on track for response. This meeting also discusses any challenges, escalation required and action taken to progress improvements.</p>
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**ITEMS FOR DISCUSSION**  
**AGENDA ITEM 3.5, INSPECTIONS AND EXTERNAL BODIES REPORT**

4.	Frances Gerrard, Independent Member	29/07/2020	<p>HIW thought pain assessment could be improved at Bronllys – what are the reasons for this?</p> <p>1. Also - We noted that staff wore household/gardening type green wellington boots whilst assisting patients when showering in the walk-in shower/wet room. In our opinion, the use of these wellington boots is not appropriate for a clinical/caring environment, and we recommend that more appropriate footwear be considered What has been done to sort this?</p> <p>I feel this is generally a very positive HIW report to Bronllys and Felindre and we should congratulate.</p>	Director of Nursing and Midwifery	<p>The all Wales Pain risk assessment tool chart was implemented at the end of last year. However, during the recent quality check audits it was identified that pain charts were not being completed correctly. This has since been addressed by the ward sister and audits will be carried out locally on a monthly basis to monitor this.</p> <p>The issue related to appropriate footwear is obviously unacceptable an issue in relation to the provision of dignified care. The appropriate footwear is now in place for wearing while showering patients</p>
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