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Addysgu Powys
Powys Teaching
Health Board

**POWYS TEACHING HEALTH BOARD
SUMMARY OF THE EXPERIENCE, QUALITY & SAFETY COMMITTEE
MEETING HELD ON THURSDAY 15 JULY 2021
VIA MICROSOFT TEAMS**

Present:

Trish Buchan
Frances Gerrard
Susan Newport

Independent Member (Chair)
Independent Member
Independent Member

In Attendance:

Alison Davies
Kate Wright
Claire Madsen
Wendy Morgan
Julie Richards

Director of Nursing and Midwifery
Medical Director
Director of Therapies and Health Sciences
Assistant Director of Quality and Safety
Head of Midwifery and Sexual Health (Joined for
Item 3.2 and 3.3 only)
Assistant Director of Women and Children's
(Joined for Item 3.2 and 3.3 only)

Louise Turner

Observers:

Sara Utley
Rhobert Lewis
Ronnie Alexander

Audit Wales
Independent Member

Apologies for absence:

Melanie Davies
Jamie Marchant

Vice-Chair (Committee Chair)
Director of Primary, Community Care and Mental
Health.
Director of Workforce, OD and Support Services
Board Secretary

Julie Rowles
Rani Mallison

Committee Support:

Shania Jones

Charity Administration Support Officer

COMMITTEE ACTION LOG

The Committee received the action log and noted the updates were provided within the paper.

SERVICE GROUP, QUALITY GOVERNANCE REPORTING: MENTAL HEALTH

The report outlined the approach within the MHL D Service Group for quality governance which included the use of the Commissioning Assurance Framework (CAF) for Mental Health and Learning Disabilities (MHL D) Service Group. The CAF was monitored outside of MHL D through a monthly meeting chaired by the Head of Commissioning and internally at MHL D Senior Management Team also on a monthly basis. A quality assurance and performance process within the Health Board reflected the progress the Mental Health (Wales) Measure 2010. Future service group reporting would provide analysis on specific indicators including outputs through the CAF.

GP ACCESS STANDARDS TO INCLUDE: a) PERFORMANCE REPORT

The report focussed on General Medical Services (GMS) Access which included opening hours, appointment availability and Access Standards achievement for 2020/2021. It included the findings of a Powys Community Health Council (CHC) access report following an access survey in autumn 2020. An Access Forum reviewed and monitored practice performance which was incorporated into the Primary Care - General Medical Services Commissioning Assurance Framework (CAF) reporting. The CAF would be reported through PTHB groups and committees in the future months once a year end data was available.

During 2020/21, NHS Wales Shared Services Partnership Audit and Assurance Services Internal Audit undertook a review of the Access Standards with the conclusion 'substantial' assurance was in place.

MORTALITY REPORT

The report provided an update on the mortality data for the period 1 January 2021 to 30 April 2021 and developments in the mortality review process. It included a summary on deaths of Powys residents occurring in Powys community hospitals and the services commissioned in out of county District General Hospitals. The findings of the second round of independent reviews of deaths occurring in Powys Community Hospitals were detailed. The paper also provided an update on the Datix Mortality Module and the roll out of the Medical Examiner project.

RESUSCITATION GROUP REPORT

The report informed the Committee of the following roles of the Resuscitation Sub-Group:

- Act as a liaison forum for the parties with an interest in supporting good clinical practice to meet and discuss quality and improvement.
- Act as an advisory body to assist the Medical Director in determining policy and practice for the organisation with respect to resuscitation.

The Sub-group met twice per year, under the Chairmanship of the Medical Director, but could be called on to provide advice outside of a meeting if required.

COMMISSIONING ESCALATION REPORT

The report highlighted providers in Special Measures or scored as Level 4 and above following the 27 May 2021 PTHB Internal Commissioning Assurance Meeting (ICAM). There were:

- 2 providers with services in Special Measures
- 1 provider at Level 4

The report also provided a high-level summary of key issues in relation to the two providers with services in special measures.

PUTTING THINGS RIGHT, COMPENSATION AND CLAIMS REPORT

The report provided an overview of the way Putting Things Right was discharged within the Health Board and compensation claims activity for the period 1 April 2021 to 31 May 2021. The internal review undertaken following the publication of a Special Report by the Public Service Ombudsman for Wales in October 2020, and the accompanying improvement plan were also shared.

REGULATORY INSPECTIONS REPORT

The report articulated the receipt and outcomes of regulatory inspections that had occurred during the reporting period and shared the Health and Social Care Regulatory Reports dashboard. Recent activity which related to Healthcare Inspectorate Wales (HIW) inspections included the submission of an updated improvement plan relating to a Tier 1 Quality Check report. An unannounced inspection of a Mental Health ward was carried out on 15 June 2021, with no immediate improvements identified. A dashboard overview of the current position was provided, relating to the implementation of actions in response to recommendations from the Health and Social Care Regulators.

CLINICAL QUALITY FRAMEWORK, PATIENT EXPERIENCE: REVISED PRIORITIES

The report articulated service user/ patient experience activity over the past year and current work in progress, which reflected Goal 1 of the Clinical Quality Framework. The paper shared new ways of working that had

contributed to positive experiences through the recent pandemic. A focus was on the improvements identified through the Health Board's Clinical Quality Framework. The paper set out the main priorities for the first quarter of 2021/22.

MEDICAL DEVICES AND POINT OF CARE TESTING REPORT

The report provided an update on the current position of Medical Devices and Point of Care Testing Management. It included recent organisational changes, the current structure and the functions of the team and information on key activities, progress and risks associated with Medical Devices and Point of Care Testing (PoCT). Capacity to progress with the PoCT Work Plan and Medical Devices Improvement Plan was challenged by additional unplanned workload.

REPORT OF THE LEARNING FROM EXPERIENCE GROUP

The Learning from Experience Group was a new forum established in March 2021. Its purpose was to support the safe and effective delivery of the care given to Powys residents both within the county and at commissioned services. The Group comprised of the Executive Clinical Directors for Medicine, Nursing and Therapies & Health Sciences together with the Chief Pharmacist. The Group met quarterly under the Chairmanship of the Director of Clinical Strategy and Medical Director.

Items discussed In-Committee

Due to the sensitivity of the information involved, the following items were discussed by the Committee in a closed meeting:

- Serious Incidents and Complex Concerns Overview

There was no other urgent business.

DATE OF THE NEXT MEETING

7 October 2021 at 10:00AM, Microsoft Teams.