



	<ul style="list-style-type: none"> <li>• CC / IM-LA declared an interest as Chair of the Regional Partnership Board.</li> </ul>	
<b>QSE 20/04/004</b>	<p><b>Minutes of the Committee Meeting held on 18<sup>th</sup> February 2020</b></p> <p>The Committee reviewed the minutes of the meetings held on 18<sup>th</sup> February 2020.</p> <p><b>Resolved that:</b></p> <p>(a) the minutes of the meeting held on 18<sup>th</sup> February 2020 be approved as a true and accurate record.</p>	
<b>QSE 20/04/005</b>	<p><b>Action Log following the Committee Meeting held on 18<sup>th</sup> February 2020</b></p> <p>The Committee reviewed the action log and noted the following updates:</p> <p><b>QSE 20/08/008</b> – it was agreed that the Medicine Clinical Board Assurance Report would be brought to a future meeting, once the ongoing pandemic had eased.</p> <p><b>QSE 20/02/015</b> – The Executive Nurse Director (END) advised the Committee that all routine HIW inspections had ceased and at present, there were no areas of concern. It was agreed that HIW reports would be brought to the Committee in September 2020.</p> <p><b>QSE 20/02/017</b> – The Director of Corporate Governance (DCG) confirmed the Committee Annual Work Plan and Terms of Reference would be brought to the Committee in September 2020.</p> <p><b>QSE 19/12/016</b> – it was agreed that an update on Health Eating Standards for Hospital Restaurant and Retail Outlets would be brought to the next Committee meeting.</p> <p><b>QSE 19/12/019</b> – the Chief Officer – Community Health Council (CO-CHC) advised the Committee that a paper would be brought in December 2020 which would inform the Committee relating to their visits to Primary Care Contractors.</p> <p><b>QSE 19/09/016</b> – it was agreed that the Centralisation of Endoscopy Decontamination would be included as an agenda item at a future meeting.</p> <p><b>QSE 19/09/008</b> – it was confirmed that the Children’s Charter would be included on the Committee Work Plan.</p> <p><b>QSE 19/06/020</b> – the END advised the Committee that Maternity was a constant area of focus for the UHB, however, this action had been superseded by the HIW All Wales Review of Maternity Services. The END explained that Phase 2 of the HIW Review was very robust and looked at, in detail, areas around Governance. Initial verbal feedback from the report</p>	<p><b>CH</b></p> <p><b>RW</b></p> <p><b>NF</b></p> <p><b>FK</b></p> <p><b>SA</b></p> <p><b>FK</b></p> <p><b>NF</b></p>

	<p>was very positive which the team were very pleased about. The Committee agreed to close this action.</p> <p><b>Resolved that:</b></p> <p>(a) the Committee noted the action log and the verbal updates provided.</p>	
QSE 20/04/006	<p><b>Chair's Action taken since the last Committee Meeting held on 18<sup>th</sup> February 2020</b></p> <p>There had been no Chair's Action taken.</p>	
QSE 20/04/007	<p><b>PCIC – Patient Story</b></p> <p>Due to the ongoing and changing developments regarding COVID-19 the PCIC Clinical Board will bring their Patient Story and Assurance Report to a future meeting.</p>	
QSE 20/04/008	<p><b>Mortality Review – Learning from Deaths</b></p> <p>The Assistant Director of Patient Safety &amp; Quality (AD-PSQ) introduced the paper and it was taken as read by the Committee. The AD-PSQ explained that Level 1 Compliance had been an area of improvement over the past 12 months. It was noted that in Critical Care, compliance had improved from 66% to 100% in January 2020, and overall the Health Board was at 80% compliance. The AD-PSQ informed the Committee that discussions on an All Wales Level had taken place to confirm if Level 1 should be continued during the ongoing pandemic, and it had been agreed that the Qualified Death Certifier form, combined with the Public Health form would be accepted as a Level 1 review, this combined form approach would specifically be carried out when dealing with the death of COVID-19 patients.</p> <p>The CC/IM-LA queried who would be attendees of the UHB Mortality Group which was chaired by the Executive Medical Director (EMD). In response, the AD-PSQ explained the Terms of Reference were currently being developed, and would be shared with the Committee for information at a future meeting.</p> <p>The Independent Member – Legal (IM-L) asked if the process of appointment for Medical Examiners has been postponed due to the ongoing pandemic. The AD-PSQ explained that central appointments were in place, however, further enquiries would be made on how recruitment into assisting posts would be achieved.</p> <p>The IM-TU asked if the UHB had flow and follow through for morgue capacity. In response, the END advised that the UHB had mortuary capacity, as of 13.04.2020, the mortuaries were full, therefore, the UHB had moved into extra capacity arrangements, this was due to the weekend and undertakers not available to collect bodies.</p>	CE

	<p>The END also confirmed that the Assistant Director of Patient Experience (AD-PE) had refreshed communication to staff across the UHB around End of Life, in particular in the following areas:</p> <ol style="list-style-type: none"> <li>1. Sensitively have conversations with patients around DNAR/CAR on arrival to hospital</li> <li>2. How to help families remain in contact with loved ones who are critically ill</li> </ol> <p>The END advised the Committee of two services that had been set up:</p> <ol style="list-style-type: none"> <li>(a) Helpline for the Public on patients</li> <li>(b) Bereavement Helpline – The team were contacting all patients who are bereaved, paying particular attention to COVID-19 patients.</li> </ol> <p>The AD-PE confirmed that both helplines had been very well received and the team were now looking at receiving messages from relatives, along with virtual visiting, both these areas would be discussed at the Operational Group.</p> <p>The CO-CHC asked what safeguards were in place to ensure that patients understand what is being asked on admission to hospital in terms of DNAR/CAR. The END confirmed that staff at senior levels would hold these conversations, they would ensure that the patient has appropriate capacity to answer and the process is reviewed on an ongoing basis. The END added whilst using technology for families to be involved in these conversations virtually would be supported, the END confirmed using technology can be very difficult, particularly in Critical Care due to PPE.</p> <p>The AD-PE added that the UHB were encouraging GPs and Primary Care to have DNAR/CAR conversations with patients, prior to admission to hospital to assist with the process.</p> <p>The IM-TU asked if the team would put together a package to support religious rituals around death. In response, the AD-PE confirmed that the UHB were still continuing to carry out rituals within 24 hours, especially for Muslim and Jewish patients and that the communities were being very appreciative and understanding of the current situation and difficulties faced.</p> <p><b>Resolved that:</b></p> <ol style="list-style-type: none"> <li>(a) the Committee noted the Mortality Review – Learning from Deaths</li> </ol>	
QSE 20/04/009	<p><b>Ophthalmology waiting times and the management of Patient risk</b></p> <p>The Director of Operations (DO) gave an overview of the report and confirmed that work had been undertaken to develop a sustainable and positive plan. The Ophthalmology team had developed and tested a virtual service which was successful. The DO advised previously, 4000 patients were outstanding that required care, however this had significantly improved and had moved down to circa 300-400 patients.</p>	

	<p>The DO advised this significant progress had been made prior to COVID-19, and since the start of the pandemic, the team had managed to maintain some virtual work with colleagues, however demand had increased therefore conversations were being held with Welsh Government to explore how to move this area forward. Patients were still being treated at the Llanishen site, with a patient risk management plan in place. The DO explained that the pandemic emphasised the need to enhance technology across the UHB. The DO explained there was a concern that patients were not attending clinics, therefore, there was a potential for a backlog of patients when the pandemic ends. The DO commended Clinicians who had worked very hard to maintain services for non COVID-19 patients.</p> <p>The IM-TU recognised the technology failing on an All Wales level and explained there was not sufficient digital infrastructure to support the Health Boards during the pandemic. The IM-TU added that the Ophthalmology model provided the Committee with assurance that all risks were being managed.</p> <p>The CC/IM-LA requested Committee gratitude to be passed onto colleagues.</p> <p><b>Resolved that:</b></p> <p>(a) the Committee noted the Ophthalmology Waiting Times and the management of Patient risk update</p>	
QSE 20/04/010	<p><b>Exception Reports – Key Issues</b></p> <p>The END introduced the report and confirmed that the focus was on management of COVID-19 patients and patients who are waiting for care.</p> <p>The END advised the Committee of All Wales concerns around PPE and informed the Committee of the loss of two colleagues.</p> <p>The Committee sent condolences to the families and staff across the UHB.</p> <p>The END advised the Committee that it was agreed between the END and EMD, that in the event of a colleague dying from COVID-19, an assessment would be undertaken to identify where they were working at the time.</p> <p><b>Resolved that:</b></p> <p>(a) the Committee noted the Exception Reports – Key Issues</p>	
QSE 20/04/011	<p><b>Annual Quality Statement</b></p> <p>The AD-PSQ informed the Committee that due to the ongoing pandemic, and current pressure on services, the Annual Quality Statement would be brought to the next Committee meeting</p> <p><b>Resolved that:</b></p>	CE

	(a) the Committee agreed that the Annual Quality Statement would be brought to the next Committee meeting for approval	
QSE 20/04/012	<p><b>Items for Noting &amp; Information</b></p> <p>The following item was presented for noting:</p> <ul style="list-style-type: none"> <li>UHB self-assessment and improvement plan against the Cwm Taf HIW/WAO governance review</li> </ul> <p>The CC/IM-LA confirmed the Committee supported the UHB to do whatever was required to increase capacity in this area to ensure colleagues are able to carry out their duties safely. The IM-TU added that it had been noted that the UHB improvement plan had been very lean for some time and congratulated the team for what has been achieved.</p> <p>The END explained that the self-assessment had been presented to Management Executive, but requested it be taken to Board level.</p> <p>The END added that it was very important to keep corporate oversight over Quality &amp; Safety whilst the pandemic is ongoing.</p> <p><b>Resolved that:</b></p> <ul style="list-style-type: none"> <li>(a) the Committee noted the UHB self -assessment and improvement plan against the Cwm Taf HIW/WAO governance review and the verbal updates provided.</li> <li>(b) the Self-Assessment Outcomes be presented to the Board</li> </ul>	NF
QSE 20/04/013	<p><b>Any Other Business</b></p> <p>The AD-PSQ advised the Committee that the National Clinical Audit Plan had been stood down by Welsh Government, however, the team would keep in touch with the Clinical Audit Teams to ensure that data is still inputted, although it is not a priority. The AD-PSQ advised that due to the pandemic there would be a 6 month gap in the data when it is over.</p> <p>The IC-TU acknowledged the work that had been undertaken to date in this area, and confirmed the Committee were assured by the robust systems in place that this would be handled appropriately.</p>	
QSE 20/04/014	<p><b>Items to bring to the attention of the Board/Committees.</b></p> <p>It was agreed that the following items would be taken to the Board:</p> <ul style="list-style-type: none"> <li>(a) Ongoing work around complaints and concerns</li> <li>(b) Self-Assessment outcomes against the Cwm Taf HIW/WAS Governance Review</li> </ul>	NF
QSE 20/04/015	<b>Review of the Meeting</b>	

	<p>The IM-TU facilitated a review of the meeting. Members confirmed that:</p> <ul style="list-style-type: none"> <li>• Good robust conversations had taken place</li> <li>• Acknowledgement of technology issues and the ongoing work to address these</li> <li>• The need for the UHB to start thinking about non COVID-19 patients awaiting routine appointments/operations</li> <li>• Expressed thanks to all teams across the UHB for the ongoing work undertaken.</li> </ul>	
<p><b>QSE 20/04/016</b></p>	<p><b>Date &amp; Time of next Meeting</b></p> <p>Tuesday 16<sup>th</sup> June 2020  9.00am – 12:30pm  Coed y Bwl Room, Ground Floor, Woodland House</p>	