

## Confirmed Minutes of the Public Quality, Safety & Experience Committee

Held on 16<sup>th</sup> July 2024

Via MS Teams

To view the meeting: [CAVUHB Quality, Safety & Experience Committee 16.07.2024 \(youtube.com\)](https://www.youtube.com/watch?v=CAVUHBQualitySafetyExperienceCommittee16.07.2024)

<b>Chair:</b>		
Ceri Phillips	CP	Committee Chair / UHB Vice Chair
<b>Present:</b>		
Akmal Hanuk	AH	Independent Member – Community
Rhian Thomas	RT	Committee Vice Chair / Independent Member – Capital & Estates
Mike Jones	MJ	Independent Member – Trade Union
<b>In Attendance</b>		
Edward Chapman	EC	Head of Clinical Engineering
Aled Roberts	AR	Associate Medical Director Patient Safety and Clinical Effectiveness
Jason Roberts	JR	Executive Nurse Director
Alexandra Scott	AS	Assistant Director of Quality and Patient Safety
Richard Skone	RS	Interim Executive Medical Director
Claire Beynon	CB	Executive Director of Public Health
Paul Bostock	PB	Chief Operating Officer
Vicki Burrell	VB	Senior Service Improvement Programme Manager
Francesca Thomas	FP	Head of Corporate Governance
Matt McCarthy	MM	Interim Head of Safety, Quality & Organisational Learning
Adam Christian	AC	Clinical Board Director – CD&T
Sarah Lloyd	SL	Director of Operations – CD&T
Helen Luton	HL	Director of Nursing – CD&T
Sarah Martin	SM	Research and Development Manager
Matt Wise	MW	Locum Consultant in Intensive Care
Suzanne Wood	SW	Consultant in Public Health Medicine
James Dunn	JD	Locum Consultant in Emergency Medicine
Helen Williams	HW	Interim Regional Director of Llais Cymru
<b>Observers</b>		
<b>Secretariat</b>		
Rachel Chilcott	RC	Corporate Governance Officer
<b>Apologies</b>		
Angela Hughes	AH	Assistant Director of Patient Experience
Matt Phillips	MP	Director of Corporate Governance
Emma Cooke	EC	Executive Director of Therapies & Health Science

<b>QSE</b> <b>24/07/001</b>	<b>Welcome &amp; Introductions</b>  The Committee Chair (CC) welcomed everyone to the meeting in English & Welsh.	<b>ACTION</b>
<b>QSE</b> <b>24/07/002</b>	<b>Apologies for Absence</b>  Apologies for absence were noted.	
<b>QSE</b> <b>24/07/003</b>	<b>Declarations of Interest</b>	

	No declarations of interest were raised.	
<b>QSE 24/07/004</b>	<p><b>Minutes of the Committee meeting held on 21.05.2024</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRipnuo4c?t=116">https://youtu.be/x_YRipnuo4c?t=116</a></p> <p>The minutes of the Committee meeting held on 21.05.2024 were received.</p> <p><b>The Committee resolved that:</b></p> <p>a) The minutes of the meeting held on 21.05.2024 were approved as a true and accurate record of the meeting.</p>	
<b>QSE 24/07/005</b>	<p><b>Action Log following the Meeting held on 21.05.2024</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRipnuo4c?t=151">https://youtu.be/x_YRipnuo4c?t=151</a></p> <p>The Action Log following the Meeting held on 21.05.2024 was received.</p> <p><u>QSE 23/12/007 – Royal College of Psychiatrists (RCP) Review:</u> - the Executive Medical Director (EMD) informed the Committee that they had received the report and several Executives had met with the Mental Health team to discuss the various themes, which included: dynamic risk assessments, note-keeping, communication, and patient engagement. A plan would be developed to address staffing and improvement delivery.</p> <p>The Chief Operating Officer (COO) added that they would meet with the Clinical Board every four weeks. He noted that they had not received the formal RCP report yet and suggested that an update be brought back to the QSE Committee in October.</p> <p><u>QSE 24/03/009 - Consent to Examination and Treatment:</u> - The EMD noted that this had been brought to SLB recently, and that it was agreed that it should form part of the mandatory training. The EMD had met with the Executive Director of People &amp; Culture (EDPC) and the Medical Education team to ensure it became embedded within the induction programme for junior doctors and consultants.</p> <p><b>The Committee resolved that:</b></p> <p>a) The Action Log from the meeting held on 21.05.2024 was noted.</p>	
<b>QSE 24/07/006</b>	<p><b>Committee Chair's Actions</b></p> <p>No Chair's Actions were raised.</p>	
	<b>Items for Review &amp; Assurance</b>	
<b>QSE 24/07/007</b>	<p><b>Clinical Diagnostics and Therapeutics (CD&amp;T) Clinical Board – Assurance Report</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRipnuo4c?t=518">https://youtu.be/x_YRipnuo4c?t=518</a></p> <p>The Clinical Board Director-CD&amp;T (CBD-CD&amp;T) shared a Patient Story with the Committee which showed the journey of a patient through the laboratory.</p> <p>The COO thanked the team and suggested that the video be shared with patients.</p> <p>The Independent Member – Community (IM-C) noted that patients may not want to know but suggested that it may be useful for training.</p> <p>The CBD-CD&amp;T responded that this was the first time they had shown the video, and that they hoped to educate staff on where they sat in the patient pathway. He noted that whilst patients may not need detailed explanations, the goal was to raise public awareness and interest in pathology.</p> <p>The Interim Regional Director of Llais (IRDL) noted that some patients would want to understand more about the journey through the laboratory, and that it would depend on the individual.</p>	

	<p>The Director of Nursing-CD&amp;T (DON-CD&amp;T) presented the Assurance Report which provided the Committee with a summary of the arrangements, progress, and outcomes within the CD&amp;T Clinical Board. It outlined the achievements and innovations leading to improved quality and care for patients, and it described some key challenges, risks, and the mitigations in place to continue into 2024/25.</p> <p>The Committee Vice Chair (CVC) asked for more detail around the robust action plan to overcome the radiology backlog. In addition, she asked how the team captured the good sustainability work being undertaken.</p> <p>The Director of Operations-CD&amp;T (DO-CD&amp;T) responded that the action plan involved multiple strategies due to the variety of modalities and challenges. Efforts would include increasing activity through existing facilities with consultants and sonographers, and utilising independent service providers for additional capacity. In addition, there was a South-East Wales programme which looked to improve regional diagnostic access.</p> <p>Regarding sustainability, the DON-CD&amp;T noted that the Clinical Board had a dedicated Green Group with members who also participated in the Health Board's Sustainability Group to provide feedback and insights.</p> <p>The CC noted that the diagnostic backlog was topical in conversations between Welsh Government (WG) and the Executives.</p> <p><b>The Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The progress made by the Clinical Board to date was noted; and</li> <li>2) The content of the report and the assurance given by the CD&amp;T Clinical Board was noted.</li> </ol>	
<p><b>QSE</b> <b>24/07/008</b></p>	<p><b>Quality Indicators Report</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=2699">https://youtu.be/x_YRjpnuo4c?t=2699</a></p> <p>The Assistant Director of Quality and Patient Safety (ADQPS) presented the Quality Indicators Report and slides which provided assurance in relation to several quality, safety, and patient experience priorities.</p> <p>The Executive Director of Public Health (EDPH) asked whether equity could be incorporated into the Quality Indicators Report.</p> <p>The CC welcomed the EDPH's suggestion.</p> <p>The CC asked to what extent a thematic analysis of Health Inspectorate Wales (HIW) reports had been undertaken to address the common themes.</p> <p>The ADQPS explained that the Clinical Safety Group were in the early stages of implementing a thematic analysis of HIW reports.</p> <p><b>The Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The assurance provided by the quality indicators was noted.</li> </ol>	
<p><b>QSE</b> <b>24/07/009</b></p>	<p><b>Never Events Deep Dive</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=3348">https://youtu.be/x_YRjpnuo4c?t=3348</a></p> <p>The ADQPS presented the Never Events – Deep Dive report to the Committee which provided an overview of the Nationally Reportable Incidents (NRI) framework, the definition of Never Event categories, a thematic analysis of the NRIs reported in Cardiff and Vale UHB between 1<sup>st</sup> April 2023 and 31<sup>st</sup> May 2024, and the work undertaken to reduce further risk.</p>	

	<p>The EMD noted that they had placed emphasis on the Five Steps to Safer Surgery in theatres in the University Hospital of Llandough (UHL).</p> <p>The CC acknowledged the slight increase in the number of Never Events in CAVUHB and stressed the need for processes to minimise human failings. The CC emphasised the need to understand the rate of Never Events in the context of the total number of procedures undertaken across the Health Board.</p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>a) The assurance provided by the improvements being implemented to eradicate Never Events was noted.</li> </ol>	
<p><b>QSE</b> <b>24/07/010</b></p>	<p><b>Update on the Hepatitis B/C Recovery Plan</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=3873">https://youtu.be/x_YRjpnuo4c?t=3873</a></p> <p>The EDPH informed the Committee of the three main priorities in public health (vaccination, smoking and obesity), and highlighted the ongoing Health Protection responsibility. She noted that the Hepatitis B/C Recovery Plan formed part of their proactive approach to preventing disease.</p> <p>The Consultant in Public Health Medicine (C-PHM) took the paper as read, and highlighted the following:</p> <ul style="list-style-type: none"> <li>- The goal set by the World Health Organisation (WHO), WG, and the local authorities was to eliminate Hepatitis B &amp; C by 2030</li> <li>- Significant effort was required to achieve this, which included adequate resources, capacity, and delivery mechanisms</li> <li>- The C-PHM chaired a multi-agency forum which met bi-monthly to ensure the action plan was on track</li> <li>- The prevention and treatment of Hepatitis B &amp; C were highly cost-effective and offered significant savings in lives and NHS costs</li> </ul> <p>The CC asked for a further update to be provided to the Committee in six months.</p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The progress to date was noted; and</li> <li>2) The content and ambition of the Hepatitis B and C Elimination Plan 2024/25 was noted.</li> </ol>	
<p><b>QSE</b> <b>24/07/011</b></p>	<p><b>Joint Inspection of Child Protection Arrangements (JICPA) Update</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=4136">https://youtu.be/x_YRjpnuo4c?t=4136</a></p> <p>The Executive Nurse Director (END) presented the JICPA report to the Committee which provided an overview of the multi-agency inspection which took place during January 2024, the findings of the review, the immediate improvement plan assigned by HIW, and the actions taken to provide assurance.</p> <p>The CC requested that a further update on the Improvement Plan be provided to the Committee in six months.</p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The safeguarding arrangements across the UHB were noted for awareness.</li> </ol>	
	<p><b>Items for Approval / Ratification</b></p>	
<p><b>QSE</b> <b>24/07/012</b></p>	<p><b>Policies</b></p> <p><i>No policies for approval.</i></p>	
<p><b>QSE</b> <b>24/07/013</b></p>	<p><b>Patient Safety Notice 066 (Safer Identification of Unknown Patients)</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=5045">https://youtu.be/x_YRjpnuo4c?t=5045</a></p>	

	<p>The Interim Head of Safety, Quality &amp; Organisational Learning (IHSQOL) presented the report to the Committee which summarised the Patient Safety Notice 066 requirement for the Health Board to develop a plan for a system for safer identification of unknown patients, and outlined the update to the Emergency Unit (EU) Clinical Workstation to allow for the generation of these safer temporary identifiers when an unknown patient is admitted to the EU.</p> <p>The Independent Member – Trade Union (IM-TU) asked how frequently unidentified patients came into the EU.</p> <p>The IHSQOL responded that it was not an everyday occurrence, but that it was not unusual.</p> <p>The Senior Service Improvement Programme Manager (SSIPM) asked how the records of patients married up once the patient's identity had been found.</p> <p>The IHSQOL responded that it went back into Medical Records.</p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The go-live of the updated process for identification of unknown patients, in line with the requirements of Patient Safety Notice 066, was approved.</li> </ol>	
	<b>Items for Noting &amp; Information</b>	
<b>QSE 24/07/014</b>	<p><b>Minutes from Clinical Board QSE Sub-Committees and the Safeguarding Steering Group (SSG)</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=5537">https://youtu.be/x_YRjpnuo4c?t=5537</a></p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The minutes from the Clinical Board QSE Sub-Committees and the Safeguarding Steering Group (SSG) were noted.</li> </ol>	
<b>QSE 24/07/015</b>	<p><b>Research and Development Update</b></p> <p>To view the minute: <a href="https://youtu.be/x_YRjpnuo4c?t=5559">https://youtu.be/x_YRjpnuo4c?t=5559</a></p> <p>The Research and Development Manager (R&amp;DM) presented the report and slides which provided the Committee with an overview of research activity ongoing within the Health Board.</p> <p>The EMD highlighted the close dialogue between the finance team and the research team and emphasised the importance of research in improving patient care and outcomes. He informed the Chair that he would bring the necessary information back to the QSE Committee for informed decision-making.</p> <p>The CC suggested that an update on Research and Development activity be brought back to the QSE Committee in six months.</p> <p><b>The QSE Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>1) The Research and Development Update was noted.</li> </ol>	
	<b>Items to bring to the attention of the Board / Committee:</b>	
<b>QSE 24/07/016</b>	<i>No items.</i>	
	<b>Agenda for Private QSE Meeting</b>	
<b>QSE 24/07/017</b>	<ol style="list-style-type: none"> <li>i) Minutes and Action Logs from the Private QSE Committee on 21.05.2024</li> <li>ii) Any Urgent / Emerging Themes – Verbal Update</li> <li>iii) Ophthalmology WET AMD</li> </ol>	

	<b>Any Other Business</b>	
<b>QSE 24/07/018</b>	<i>No items.</i>	
	<b>Date &amp; Time of Next Meeting:</b>	
<b>QSE 24/07/019</b>	Tuesday 27 <sup>th</sup> August 2024 at 2pm via MS Teams	