



**Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD
QUALITY, SAFETY AND EXPERIENCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	15 April 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Planning Objectives Closure Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sharon Daniel, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Daniel Warm, Head of Planning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

A revised set of Planning Objectives (PO) has now been incorporated into Hywel Dda University Health Board's (HDdUHB) plan for 2023/24 that set out the aims of the organisation, *i.e.* the horizon that HDdUHB is driving towards over the long term, as well as a set of specific, measurable Planning Objectives, which move the organisation towards that horizon over the next year.

For 2023/24, one Planning Objective, 3b: Infection Prevention and Control Action Plan, under the Executive Leadership of the Director of Nursing, Quality and Patient Experience was aligned to the Quality, Safety and Experience Committee (QSEC)

As in previous years it is the expectation that QSEC would receive an update on the progress made in the development (delivery) of the Planning Objectives for onward assurance to the Board through the Board Assurance Framework.

This report provides an overview regarding progress of the Planning Objectives and acts as a closure report for the 2023/24 Planning Objectives aligned to QSEC.

Cefndir / Background

The Planning Objectives were the bedrock our Annual Plan for 2023/24, and this report is presented as an update to demonstrate where progress has been made in delivering those Planning Objectives aligned to the QSEC, as per the table below:

Planning Objective	Executive Lead
3b Infection Prevention and Control Action Plan	Director of Nursing, Quality and Patient Experience

Asesiad / Assessment

The Planning Objectives (POs) articulated in the Health Boards annual plan for 2023/24 were intrinsically linked to the recovery work necessitated by financial constraints, as they both strive to operationalise recovery and support the Health Board's long-term strategy, "A Healthier Mid and West Wales." For instance, POs focused on recruitment and career progression directly interface with fiscal challenges tied to variable pay. Scenario analyses further contribute to this

interconnection, as they offer quantitative frameworks for understanding the resourcing implications of strategic decisions, such as maintaining staff quality whilst being financially sustainable. The outcome of this work has been presented to the Board at its September 2023 Public meeting.

As 2023/24 draws to a close, Planning Objective 3b is currently on-track, as the actions will continue to be developed and instigated moving into 2024/25.

A highlight report for the Planning Objective noting key achievements; Outstanding actions / elements still to be completed (if applicable); and any other comments, can be found in annex 1.

Planning Objectives remain a key component moving forward. Based on the learning and progression against the previous Planning Objectives, a revised set of Planning Objectives for 2024/25 was approved by the Board at its meeting in January 2024, and form an essential element of our 2024/25 Annual Plan. The table below shows the alignment of the 2023/24 Planning Objectives to the 2024/25 Planning Objectives. Work is continuing to align the 2024/25 Planning Objectives to the appropriate Committee, and as such these Committees will receive regular updates Board for assurance. This reporting will also continue to be visible through the Board Assurance Framework.

2024/25 Planning Objectives	2023/24 Planning Objectives
PO1: Workforce stabilisation	1a Develop an attraction & Recruitment plan
	1b Develop career progression opportunities
	2a Engage with and listen to our people
	2b Continue to strive to be an employer of choice
	2c Develop and maintain an overarching workforce, OD and partnerships plan
PO 2: Financial recovery and roadmap	6b Pathways and Value Based Healthcare
	8b Local Economic and Social Impact
	8c Financial Roadmap
PO 3: Transforming urgent and emergency care	3a Transforming Urgent and Emergency Care programme
PO 4: Planned care (including cancer, diagnostics and therapies performance)	4a Planned Care and Cancer Recovery
	4b Regional Diagnostics Plan
PO 5: Mental health and CAHMS	4c Mental Health Recovery Plan
PO 6: Clinical services plan	6a Clinical Services Plan
PO 7: Primary care and community strategic plan	7b Integrated Localities
PO 8: A Healthier Mid and West Wales infrastructure	5a Estates Strategies
	8a Decarbonisation & Sustainability
PO 9: Digital strategic plan	5c Digital Strategy
PO 10: Population Health (including the social model for health and wellbeing)	7a Population Health
	7c Social Model for Health and Wellbeing
Orphan POs (not taken forward from 2023/24 into 2024/25)	3b Healthcare Acquired Infection Delivery Plan
	5b Research and innovation
	6c Continuous Engagement
	8d Welsh Language and Culture

Argymhelliad / Recommendation

The Committee is asked to receive an assurance on the current position in regard to the progress of the Planning Objectives aligned to the Quality, Safety, and Patient Experience Committee in order to onwardly assure the Board where Planning Objectives are progressing

and are on target, and to raise any concerns where Planning Objectives are identified as behind in their status and/or not achieving against their key deliverables.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 To receive an assurance on delivery against all Planning Objectives aligned to the Committee.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services Not Applicable
Amcanion Cynllunio Planning Objectives	3b Healthcare Acquired Infection Delivery Plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	3 Year Plan and Annual Plan Decisions made by the Board since 2017-18 Recent <i>Discover</i> report, published in July 2020 Gold Command requirements for COVID-19 Input from the Executive Team Report presented to Public Board in September 2020
Rhestr Termiau: Glossary of Terms:	Explanation of terms is included within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofiod: Parties / Committees consulted prior to Quality, Safety and Experience Committee:	Public Board - September 2020 Executive Team

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Any financial impacts and considerations are identified in the report
Ansawdd / Gofal Claf:	Any issues are identified in the report

Quality / Patient Care:	
Gweithlu: Workforce:	Any issues are identified in the report
Risg: Risk:	Consideration and focus on risk is inherent within the report. A sound system of internal control helps to ensure any risks are identified, assessed and managed.
Cyfreithiol: Legal:	Any issues are identified in the report
Enw Da: Reputational:	Any issues are identified in the report
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable

Planning Objective: 3b Infection and Prevention Control Plan

Executive Lead: Sharon Daniel

Overall status: On-track

Key achievements over 2023/24

- Re-established Infection Prevention standards and engagement, following complacency and Infection, Prevention and Control (IP&C) fatigue as a result of the pandemic
- Improvement of approx. 10% less cases than last year's *C.diff* figures. *C.diff* ward rounds and Healthcare Acquired Infection (HCAI) Scrutiny meetings embedded across all sites to learn from events
- *C.diff*, UTI and Isolating Iris workshops have been held throughout the year in Glangwili (GGH) with excellent attendance and engagement, rolling out to other sites
- Responding to requests from HR and workforce, the team have provided Infection Prevention workshops in local schools
- Improvements in reduction in *Staph.aureus* and *Klebsiella* bacteraemias
- Progress being seen with feasibility study agreement for potential installation of an extra negative pressure isolation suite on the GGH site, this is a step forward towards compliance with WHC 2018 (033)
- Hand hygiene: improvement work has yielded an increase of 30% compliance across the Health Board— Actively engaging with CNO/Bevan Commission/RCN on forthcoming 'gloves off' campaign (plus other PPE). Local initiative demonstrated reduction in glove usage of 10-30% - this forms part of our sustainability objective. Currently working with Swansea Bay University Health Board and national sourcing to commence change of hand hygiene product with the aim to increase compliance and remain cost neutral
- The IP&C team have further developed the Health Board's FMT (faecal microbiota transplant) service enabling the offer of equitable access for both community and acute patients, negating the need for admission
- ANTT competency assessors established in all areas and disciplines across the Health Board, thereby increasing compliance—aiming for Bronze accreditation by end Q1 2024
- Successful pilot of cleaning trial with disaggregation of catering and cleaning tasks. Awaiting paper to be presented to board for widespread role out.

Outstanding actions / elements still to be completed (IF APPLICABLE)

- Working with our Public Health and local authorities to improve health of our Hywel Dda population including addressing high instances of *E.coli* within the community
- Environmental audits including kitchens across all sites—these audits are now outstanding and shall need to be completed in the new Financial Year
- Streamline meetings across sites
- Use of HPV (hydrogen peroxide vapour) still not enabled—awaiting trial on Prince Philip (PPH) site

Any other Comments / General Observations

- HDUHB HCID (High Consequence Infectious Disease) training day planned for 12th April in GGH, working with procurement to secure stock of nationally (PHW) agreed PPE
- Collaborative working with Swansea University to develop multidisciplinary ANTT virtual reality module for training and competency assessment
- Develop mechanism for decant of wards to enable effective deep cleaning and refurbishment of areas
- Developing process for monitoring of equipment such as location of air purifiers
- Main laundry in GGH closing as laundering service to move to Llansamlet (Shared Services)—minimal communication regarding this process and operational issues need to be finalised. IP&C visit to Llansamlet before end of March for assurance