

**PWYLLGOR ANSAWDD, DIOGELWCH A SICRHAU PROFIOD
QUALITY, SAFETY AND EXPERIENCE ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 April 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Listening and Learning Sub-Committee Annual Report 2020/21
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Louise O'Connor, Assistant Director (Legal Services/Patient Experience)

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The purpose of this paper is to present the Listening and Learning Sub-Committee Annual Report 2020/21 to the Quality, Safety & Experience Assurance Committee. The Sub-Committee Annual Report provides assurances in respect of the work that has been undertaken during 2020/21 and outlines the main achievements which have contributed to robust integrated governance across the University Health Board (UHB).

Cefndir / Background

The UHB's Standing Orders and the Terms of Reference for the Listening and Learning Sub-Committee require the submission of an Annual Report to the Quality, Safety & Experience Assurance Committee to summarise the work of the Sub-Committee and to identify how it has fulfilled the duties required of it.

The fundamental purpose of the Sub-Committee is to provide clinical teams across the Health Board with a forum to share and scrutinise learning from concerns and to share innovation and good practice. The Sub-Committee will also provide a forum to promote changes and innovations to service delivery and ensure that best practice is shared and areas of concern are highlighted and communicated to the responsible officer or Board Committee/Working Group. Through identifying learning points and changes to practice evolving from investigation and review of concerns and patient experiences, the Sub-Committee will identify themes and trends, providing assurance that robust management plans are in place for current and emerging clinical risks.

The Listening and Learning Sub-Committee Annual Report specifically comments on the key issues considered by the Sub-Committee in terms of assurance around lessons learnt.

Asesiad / Assessment

The Listening and Learning Sub-Committee has been established under Board delegation with the Health Board approving terms of reference for the Quality, Safety & Experience Assurance Committee most recently at its Board meeting on 28th May 2020. The terms of reference of the

Listening and Learning Sub-Committee were approved at its inaugural meeting on 3rd June 2020.

These terms of reference clearly detail the Sub-Committee's purpose to provide assurance to the Quality, Safety & Experience Assurance Committee around the organisation's management of learning from events from significant events, and identification and escalation of risk.

In discharging this role, the Sub-Committee is required to oversee and monitor the Concerns Management and Learning from Events agenda for the Quality, Safety & Experience Assurance Committee in respect of its provision of advice to the Board, and ensure implementation of the agenda against the following areas of responsibility:

- Learning from the investigation of concerns (incidents, complaints and claims, health and safety incidents) is shared with, and communicated with, clinical teams across the Health Board.
- Patient experience informs the evaluation of known or emerging concerns or challenges with clinical services, and solutions to improve the quality and safety of the services provided by the Health Board.
- Provide a safe and open forum for peer review and support for the investigation processes, and recommendations or learning arising from this work.
- Identify themes and trends from feedback, external reviews, and through other patient experience mechanisms such as surveys and patient stories.
- Request 'deep dive' reviews into any areas of concern highlighted by the review of emerging themes/trends. Escalate any immediate areas of concern to the relevant Group/Committee or senior staff, as appropriate.
- Consider actions that have been, or are proposed to be, implemented following investigations into concerns and consider where actions can be shared with other services to ensure that best practice and improvements to the quality and safety of patients and learning is disseminated across the Health Board.

The Listening and Learning Sub-Committee Annual Report 2020/21 is intended to outline how the Sub-Committee has complied with the duties delegated by the Quality, Safety & Experience Assurance Committee through the terms of reference set, and to identify key actions that have been taken to address issues within the Sub-Committee's remit.

Constitution

From the terms of reference approved in June 2020, the membership of the Sub-Committee was agreed as the following:

- Health Board Chair (Chair)
- Independent Member (Vice Chair)
- Independent Member
- Deputy Medical Director (Acute Services)
- Associate Medical Director (Primary Care and Community)
- Associate Medical Director (Quality and Safety)
- Assistant Director (Legal Services/Patient Experience) (Lead Officer)
- Assistant Director of Nursing (Quality Improvement/Service Transformation)
- Assistant Director of Nursing (Operational Nursing and Quality Acute Services)

- Clinical Director, Therapies
- Assistant Director of Therapies and Health Science
- Senior Member Triumvirate Team – Mental Health and Learning Disabilities
- Head of Quality and Governance
- Concerns Manager
- Head of Legal Services/Solicitor
- Patient Experience Manager
- Head of Health, Safety and Security
- Ombudsman Liaison Manager
- Risk and Assurance representative
- Service representatives – invited according to agenda

Meetings

Since its inception in June 2020, with the exception of September 2020 and January 2021 meetings which were cancelled due to pressures associated with the pandemic, Sub-Committee meetings have been held on a monthly basis and all were quorate as follows: ,

- 3rd June 2020
- 1st July 2020
- 5th August 2020
- 7th October 2020
- 4th November 2020
- 2nd December 2020
- 3rd February 2021
- 3rd March 2021

As the Listening and Learning Sub-Committee is directly accountable to the Quality, Safety & Experience Assurance Committee for its performance, assurance has been provided to the Committee through a formal written update report following each meeting, which is received at the subsequent Committee meeting.

Sub-Committee Terms of Reference and Principal Duties

In discharging its duties, the Listening and Learning Sub-Committee has undertaken work during 2020/21 against the following areas of responsibility in relation to its terms of reference:

- **Forum to scrutinise and share learning across the Health Board**
During 2020/21, the Sub-Committee has reviewed over 40 cases across the spectrum of complaints, redress, patient experience, claims, serious incidents and external reports including Healthcare Inspectorate Wales (HIW) and Public Services Ombudsman reports. Ombudsman report reviews include public interest reports against other Health Boards for consideration of the learning from other public bodies.
- **Promote changes, innovations and share best practice**
The Sub-Committee has identified a number of common themes following review of the cases, which have resulted in deep dives/quality improvement initiatives being initiated to address the learning in these areas. Themes include:
 - Avoidable Inpatient Falls
 - Delays/Missed Diagnosis due to failure to act on test results

- Missed Fractures
- Review and audit of the World Health Organisation (WHO) surgical checklist
- Referral process and management of patients requiring specialist services
- Process for the management of patients presenting with Head and Neck Pain to the Emergency Department

Findings from external reviews on patient experience have been shared to inform best practice and national publications on themes and trends across Wales, including those from the Welsh Risk Pool and Legal and Risk Services.

Any issues requiring escalation have also been referred to the appropriate Lead Officer, Sub-Committee, or Committee. However, this is an area that will require further strengthening as the Sub-Committee develops during the next financial year to ensure that the relevant Group or Committee is engaged in the review and assurance process.

Key Risks and Issues/Matters of Concern

During 2020/21, the following key risks and issues/matters of concern were raised at the Quality, Safety & Experience Assurance Committee:

- Record keeping and records management – concerns were raised in relation to the quality of the clinical entries and standard of documentation; security of the record (part or whole of the record was missing); and standard of the filing and maintenance of the record.
- Avoidable inpatient falls was a consistent theme across the concerns agenda, with the standard of risk assessment documentation, and lack of preventative measures being taken, identified as the main contributory factors.
- Follow up and action of test results, which had been noted as one of the root causes in concerns resulting in delayed or missed diagnosis. A quality improvement initiative was established to identify solutions.
- Diagnosis and management of fractures had also been identified as a common theme in concerns, which is being taken forward as a quality improvement initiative.

Sub-Committee Developments for 2021/22

The Sub-Committee is currently undertaking a review of the terms of reference and outcomes/successes during its inaugural year.

The Sub-Committee will seek to strengthen the use of patient stories, invite service user/carer attendance at meetings, and further develop the links between staff and patient experience.

The Improving Experience Charter will be implemented during 2021/22. Reporting on the key performance indicators will be incorporated into the patient experience feedback.

The Sub-Committee will consider establishing a working group, which would oversee the triangulation and use of feedback from various sources including engagement, staff experience, carers, and equality and diversity.

Argymhelliad / Recommendation

To endorse the Listening and Learning Sub-Committee Annual Report 2020/21.

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Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.4.1 Report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes the submission of a Committee update report, as well as the presentation of an annual report within six weeks of the end of the financial year.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability

Effaith/Impact:	
Ariannol / Financial: Ansawdd / Patient Care: Gweithlu / Workforce: Risg / Risk: Cyfreithiol / Legal: Enw Da / Reputational: Gyfrinachedd / Privacy: Cydraddoldeb / Equality:	Included within the report, where appropriate.