



**Minutes of Meeting  
3 August 2023**

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**1. Welcome and introductions.**

All were welcomed to the meeting. The minutes of last meeting were agreed. There were no outstanding actions.

**2. Pathways of Care**

The health board gave a presentation outlining a number of actions the health board is taking, including the partnership approach. The health board is building on the work of the Six Goals programme across Pillars 2 and 5.

Welsh Government colleagues highlighted the clinical variation, with some clinicians being good at getting patients out of hospital, and others that just keep them in. The health board was aware of the variation and are looking to address it as part of the wider work.

It was noted that Carmarthenshire has the highest number of delays and patients tend to stay in hospital longer than in other parts of Wales. The health board cited the different demographic in the area compared to other parts of Wales.

**3. Adult Mental Health**

The health board gave a presentation outlining the work they are doing. It was noted that Internal Audit had carried out a review of anti-ligature assessment and the report was published in February 2023. It was noted progress had been made and was now subject to an annual audit. It remains on the risk register. In terms of next steps, the health board has set up a clinically led group with input from various areas.

On safe staffing, the health board recognised there was further work to do. There are actions in place with the health board looking at ways of improving staffing numbers, including strengthening the compliment of bank staff.

On discharge planning, the health board starts planning from the moment the patient is admitted. The Crisis Resolution Team or the Community Mental Health Team will join in-patient multi-disciplinary team meetings to engage with patients, family members to plan for safe discharge. A 72-hour follow-up on discharge is required for all patients. Patients are also given information to contact 111 press 2. With regards to the HIW review, the health board used the findings to do a self-assessment.

Information is taken to Board meetings and is discussed at professional forums. A discharge review group has been set up and benchmarking work has begun.

NHS Executive colleagues acknowledged the presentation and noted the on-going work to triangulate information and for all parties to work together. In terms of audit processes, it is important for staff to have the day-to-day skills to enable them to pick up this work and not be reliant on a one-off annual audit. On safe staffing, it is important for all parties to be involved. The health board advised they are using colour-coded doorframes to highlight areas that are free from ligature risk and ensuring processes are in place for handover. It is important for the health board to learn and share good practice.

#### Performance

It was noted there was a slight improvement in psychological therapy performance in June. There had been a dip in part 1a due to long term sickness, but the health board expects to see an improvement in the July data. There has been an increase in the number of referrals when compared to the previous year.

On part 2, performance is generally good, though there are some staffing shortages.

#### **4. Maternity**

The health board reported there was an unannounced HIW inspection on-going at Bronglais. On training compliance, the health board provided information split by groups. It was noted for a couple of the groups where the target was not achieved, these areas were being prioritised and the 95% compliance will be achieved.

In terms of foetal surveillance, compliance will be achieved by the end of the year for midwives and obstetricians. For unexpected term admissions, the target is 5.1% and the health board is working towards achievement. ATAIN meetings are embedded, and a concentrated programme is in place for management of hypoglycaemia.

In terms of midwifery recruitment, by September, the health board will be three WTE over establishment. However, over the summer period the health board will be notified of those staff that want to move to health visiting, some will be leaving, and some will be returning from maternity and will be reducing their hours, so that will level out to maintain the birth-rate plus requirements. For booking women by 10 weeks, the health board reported latest data for 2023 showed 89% booked. The latest available Welsh figure for 2021 was 81%.

Welsh Government acknowledged the work done within the health board and congratulated them on being shortlisted for a NHS award. In response to a query around assurance of medical training compliance for locums, the health board reported that all staff are treated equally.

In response to a query around the 11% not booked by 10 weeks, the health board responded this relates to the diversity of some of the communities, with some mums to be always booking late. The health board is working with the communities to engage with them earlier. On the perinatal mortality tool and whether audits were carried out in a timely manner, the health board reported there is a monthly meeting

where they are reviewed. The health board also works with other health boards if a mother has been transferred elsewhere. A perinatal audit meeting takes place every month and the information goes to the mat-neo network meeting. Responding to a query about doulas, the health board reported they had a good relationship with their doulas and meet regularly with them. They keep the offer of support very broad and are looking at how they can engage them to ensure the health board services are used.

## 5. Quality and Safety

The Q&S section was by exception. On never events, the health board reported one new event with a guide wire being retained. The spike in EWNs was linked to professional conduct matters, linked to some form of safeguarding.

On CIVICA, the health board reported over 4,000 pieces of feedback had been received in July. The health board is using various mechanisms to collect feedback and the information is starting to bear fruit and the health board is looking at how it can embed it further across other areas.

Welsh Government colleagues highlighted that the Patient Experience framework is being revised at present.

## 6. Any other business

The health board provided an update on the concrete situation at Withybush. The health board is undertaking a series of survey works. The issue affects six wards at Withybush and several other areas. The three wards inspected so far have all had to be closed as they need propping to keep them safe and the number of props required makes the ward clinically unusable. There is a meeting due to take place on the legal position around some of the health and safety legislation. It is likely the remaining three wards will also have to be closed which gives a capacity issue for the health board to overcome. As an interim, the health board has been using South Pembrokeshire Hospital and is looking at alternative models of care. The risk to services on the ground floor has been less and the health board is hopeful of being able to continue to use those areas. A paper is going to the 'in committee' Board meeting on 10 August.

**Action: Health board to keep Welsh Government updated.**

Welsh Government officials will contact health board colleagues off-line to discuss further.

Date of the next meeting: 14 September 2023, 13:00 via teams.

<b>Action Log</b>			
<b>Area</b>	<b>Action</b>	<b>Owner</b>	<b>Update</b>
<b>Any Other Business</b>	<b>Health board to keep Welsh Government updated on concrete</b>	<b>Health Board</b>	

	<b>situation at Wthybush hospital.</b>		
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**In attendance:**

Welsh Government

Jeremy Griffith (Chair)  
Caroline Lewis  
Chris Jones  
Chris Pickett  
Karen Jewell  
Aled Brown  
Rebecca Luffman  
Stuart Hackwell  
Martyn Rees

Health Board

Andrew Carruthers  
Kathryn Greaves  
Caroline Burgin  
Tracy Price  
Liz Carroll  
Sharon Daniel  
Catherine Wilkins  
Alison Bishop  
Frances Howells  
Helen Mitchell  
Keith Jones  
Mandy Rayani  
Rhian Matthews  
Rebecca Temple-Purcell

NHS Executive

Gareth Lee  
Kate Burton  
Cathy Dowling  
James Davis  
Dave Semmens

Apologies

Olivia Shorrocks  
Gaynor Evans (Secretariat)  
Phil Kloer  
Samia Edmonds  
Nick Wood