Reference:	FOI.7543.21
Subject:	Clinical Governance
Date of Request:	29 November 2021

Requested:

I write regarding a Freedom of Information request regarding clinical governance and would be grateful if you could provide me with the following information.

- 1. Whether you can provide a clear clinical governance structure for each hospital in your Local Health Board;
- 2. The number of filled WTEs broken down by profession, role, qualification and hospital, specifically, for the management of clinical governance issues and
- 3. The number of currently unfilled WTE vacancies broken down by profession and hospital, specifically, clinical governance.

Clarification

I mean Quality and Safety, but if you can include clinical audit, clinical effectiveness, complaints, incidents, claims etc if that helps?

Response:

Hywel Dda University Health Board (UHB) is unable to provide you with the information requested for questions 2 and 3, as it is estimated that the cost of answering your request would exceed the "appropriate limit" as stated in the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004. The "appropriate limit" represents the estimated cost of one person spending 18 hours (or 2 ½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

Clinical Governance encompasses clinical audit, clinical effectiveness, patient safety, quality assurance, morbidity/mortality and more. Any member of staff with quality and safety in their remit will likely have clinical governance in their job description. Therefore, in order to provide you with the information requested, the UHB would need undertake a manual review of all job descriptions to identify those with a responsibility for quality and safety to identify the information requested, as it is not recorded centrally.

Consequently, the UHB is applying an exemption under Section 12 of the Freedom of Information Act 2000 (FoIA), which provides an exemption from a public authority's obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under Section 16 of the FoIA, we are required as a public authority to provide advice and assistance, so far as it is reasonable, to individuals who have made a request under FoIA. Therefore, the UHB provides the information for question 1 below.

1. The UHB confirms that each of its four (4) acute hospitals, Bronglais General Hospital, Glangwili General Hospital, Prince Philip Hospital and Withybush General Hospital, are managed by a Triumvirate team, which include a Hospital Director, General Manager and a Head of Nursing, who are responsible for quality and safety. All sites and community

governance meetings report quality governance matters of escalation to the Operational Quality Safety Experience Sub Committee (OQSESC), with formal reports being addressed within the UHB's Quality Safety Experience Committee (QSEC), which reports directly to the Board.

Additionally, the senior team in each Directorate is responsible for quality and safety for their specific area. Directorates hold regular Quality, Safety and Experience meetings that are chaired by either the Clinical Lead or Head of Nursing and report through the UHB's governance structure for quality and safety. The Director of Nursing, Quality & Patient Experience provides board level leadership for quality governance and is supported by other members of the Executive Team, including the Medical Director and the Director of Therapies and Health Sciences. The UHB's QSEC is chaired by an Independent Member (IM) of the UHB, and together with other IMs, provides scrutiny of the quality governance agenda and matters raised at the meeting.

There are also several corporate roles across the UHB with responsibility for quality and safety. Details have been provided within attachment 1.