

Enw'r Pwyllgor / Name of Committee	Quality, Safety and Experience Assurance Committee (QSEAC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Ms Anna Lewis
Cyfnod Adrodd/ Reporting Period:	Meeting held on 1 st December 2020
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> <p>Children's Services Patient Story: QSEAC received a presentation from a patient who had been diagnosed with a mental health condition in 2013 and referred to the Child and Adolescent Mental Health Services (CAMHS). The patient received cognitive therapy, known as Tonic Surf Therapy, which changed his outlook and enabled him to see a future for the first time in his life. Since completion of the programme, he has restarted education and is now attending college, in addition to working with CAMHS in Carmarthenshire to support other young people in a similar position. QSEAC also received a presentation on the development of Future Minds, an initiative to influence future CAMHS projects which is co-produced by service users and stakeholders. QSEAC acknowledged the fragility of therapy services across all areas, and whilst recognising this is a service area which requires improvement, emphasised the need for flexibility when providing services acknowledging not all patients are comfortable working with professionals. QSEAC recognised that powerful and inspirational patient stories such as these provide the best focus to shape future services, and expressed thanks to the patient for taking the time to share their story.</p> <p>Specialist Children's and Adolescent Mental Health Services (S-CAMHS) report: QSEAC received the Specialist Children's and Adolescent Mental Health Services (S-CAMHS) report highlighting the key challenges for the service. Whilst welcoming the work undertaken to clear the historic waiting lists, QSEAC expressed concern regarding the plans in place to reduce waiting times for treatment. Members were advised that the continued demand on the service had been greater than anticipated, noting that a further factor has been the reduced availability of services provided by the three Local Authorities, due to the COVID-19 pandemic. The need for an in-depth review of the funding streams in collaboration with Local Authority colleagues, through the West Wales Children's Group was acknowledged, and how this is spent through co production. Whilst acknowledging the significant work undertaken operationally to improve access, QSEAC expressed a further concern that there may be a strategic gap in enabling further improvements. Assurance was received that as part of the planning objectives for 2020, an overarching 3 year improvement plan for Children's Services is currently in development, which may provide a resolution. Given the link to patient experience as a consequence of delays in assessment and treatment, QSEAC proposed that for assurance purposes, the plan should be presented to QSEAC once agreed.</p> <p>Quality Management System Approach: QSEAC Members were informed that the Quality Management System (QMS) Approach will dovetail both the Health Board's planning and performance objectives, noting that the focus of recent</p> 	

discussions has been on how this can be embedded within the Health Board. Members were advised that this approach considers the organisation's objectives in relation to quality, patient experience, workforce and finance, and aligns them to the Health Board's strategic objectives in order for the Board to receive assurance from the improvements made. It was noted that this is at the early stages of development, with further meetings planned between Improvement Cymru and the Health Board to progress. The approach also aligns to a number of pieces of work currently being undertaken such as value based healthcare, with the aspiration to improve data collection and analysis to ensure consistency across the Health Board. QSEAC recognised the improvements needed in quality and safety for patients of Hywel Dda, given the inherent challenges currently being experienced, and requested assurance that staff at ward level have the capacity to embed this new approach. Members were advised that the Executive Team is supportive of this approach, and given the success of the Enabling Quality Improvement In Practice (EQIIP) programme which delivered on a number of improvement initiatives to support change at grass-roots level, this approach will expand on these principles. QSEAC supported the QMS approach in principle, and whilst accepting that the support of Improvement Cymru would be pivotal to its success, expressed caution that QMS does not become an initiative that does not reach a conclusion.

- **Risk 635 - No Deal Brexit Affecting Continuity of Patient Care:** QSEAC received a verbal update on Risk 635 - No Deal Brexit Affecting Continuity of Patient Care, advising that all Wales Brexit Steering Group meetings are currently taking place on a weekly basis. The Group receives regular updates from the UK Government, with the focus relating to supply chains from 31st December 2020. QSEAC received assurance that no significant concerns have been raised in relation to the supply of Drugs and Medicines for both Primary and Secondary Care and noted that, given that the UK is still in the negotiation phase, a further update has been planned for Board Seminar on 17th December 2020.
- **Health Board Winter Plan 2020/21(Including DTOC) - Incorporating Risk 810:** QSEAC received the Health Board Winter Plan 2020/21(Including DTOC) - Incorporating Risk 810 report. QSEAC noted that there have previously been a number of risks that relate to care within the Unscheduled Care pathway, however these have been closed and superseded by a new integrated whole system unscheduled care corporate risk. Members were assured that the preparation of the Winter Plan for 2020/21 is the result of a cross-sector approach for the West Wales region. This has included an integrated approach, working in partnership with representatives from the Health Board, Carmarthenshire, Ceredigion and Pembrokeshire County Councils and the third sector and covering all population groups. The plan includes a number of actions which will be closely monitored on a fortnightly basis, and whilst noting that not all will be completed, it is recognised that the impact on key metrics, including quality and safety risks, will be important factors in establishing whether the plan is successful. Whilst acknowledging that this is not a 'normal' winter, Members were advised that the Winter Plan 2020/21 has been modelled on a worst case scenario, with increased flu and COVID-19 admissions. QSEAC welcomed the focus of the report, and whilst acknowledging the current challenges, was assured that the impact of delivery on the quality and safety of care, from a

Health Board wide perspective, would be monitored via the Operational Quality, Safety and Experience Sub-Committee, and reported to QSEAC.

- **COVID-19 Risk Assessments:** QSEAC received the COVID-19 Risk Assessments noting that these had previously been discussed at both Gold Command and Tactical Group meetings, with the agreement that these Risk Assessments be presented to QSEAC for assurance purposes. Members were advised that the Risk Assessments outline the change in process for field hospitals and outbreak management in order to manage the flow from acute settings, following an extremely challenging weekend where pragmatic decisions had needed to be made. The issues relate to two groups of patients, Group 1 (post COVID-19 patients) and Group 2 (green COVID-19 patients with negative PCR tests), who will be transferred to the Field Hospitals. QSEAC acknowledged the risks around assumptions relating to false negative results and accepted that there could be an increased risk when transferring a patient who has tested negative, as opposed to transferring a patient who is recovering from COVID-19. However, it was understood that all Health Boards are experiencing similar challenges and have established similar approaches to mitigate the associated risks.

Members were informed of a COVID-19 matter due for consideration and approval at Executive Team on 2nd December 2020, relating to staffing challenges at both Llandovery Cottage Hospital and Amman Valley Hospital, with the Health Board currently working on the most appropriate resolution. QSEAC noted that any actions taken would be clinically-led to ensure the safety of all patients in both facilities, and that the Community Health Council would receive a further briefing once the changes have been agreed, emphasising that these changes would be made on a temporary basis only. QSEAC received assurance that the patients, their families and other professionals would be informed of the proposed plans. QSEAC acknowledged that the matter is evolving and that Members would be supportive of the actions taken to ensure patient safety.

- **Operational Quality, Safety and Experience Sub-Committee (OQSESC):** QSEAC received the Exception Report from the Operational Quality, Safety and Experience Sub-Committee (OQSESC), with no comments received from Members.
- **Listening & Learning Sub-Committee (L&LSC):** QSEAC received the Exception Report from the Listening & Learning Sub-Committee (L&LSC), with no comments received from Members.
- **Research & Development Sub-Committee (R&DSC):** QSEAC received the Exception Report from the Research & Development Sub-Committee (R&DSC), noting the draft R&D strategy which is a result of strong leadership within the management of R&D. QSEAC welcomed the focus in terms of R&D across the organisation and the progress relating to the allocation of accommodation for a research facility in Glangwili General Hospital (GGH).
- **Effective Clinical Practice (ECP) Working Group:** QSEAC received the Effective Clinical Practice (ECP) Working Group report, noting that a review of the

groups that report into the ECP Working Group has been undertaken. QSEAC supported the proposal to transfer the reporting arrangements for the Blood Transfusion Group (BTG) from the Effective Clinical Practice Working Group, to Carmarthenshire's quality and safety structures, as the service currently sits under their leadership. QSEAC also welcomed the action to clarify whether the Learning Disabilities service is involved with the mortality review of a patient with learning disabilities in an acute setting.

- **Medicines Management Operational Group:** QSEAC received the Medicines Management Operational Group report, with no comments received from Members.

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd ar u cyfer /

Matters Requiring Board Level Consideration or Approval:

- None

Risgiau Allweddol a Materion Pryder /

Key Risks and Issues/ Matters of Concern:

- **Specialist Children's and Adolescent Mental Health Services (S-CAMHS) report:** concerns regarding the potential for a strategic gap in enabling further improvements to be made to reduce the waiting times for S-CAMHS treatment. QSEAC received assurance that as part of the planning objectives for 2020, an overarching 3 year improvement plan for Children's Services is currently in development, which may provide a resolution. For assurance purposes, this plan will be presented to QSEAC once agreed.

Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf /
Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol / Future Reporting:

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified above will be undertaken.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

14th January 2021.