

Enw'r Pwyllgor / Name of Committee	Quality, Safety and Experience Committee (QSEC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Ms Anna Lewis, Independent Member
Cyfnod Adrodd/ Reporting Period:	Meeting held on 11 th October 2022
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Approval of Self-Assessment Questionnaire: The Committee approved the Self-Assessment Questionnaire and recognised that the question specifically relating to COVID-19 could be removed in advance of the next cycle, if appropriate at that time. • Patient Story Waiting List Support Service (WLSS): The Committee received a positive feedback from a patient describing their contact with the WLSS, with the kindness, sensitivity and helpfulness of the call handler clearly appreciated and noted. Members' attention was drawn to the significant developments, including the ongoing patient experience focussed evaluation of the service, staff supervision and governance arrangements in place, Welsh language provision and the risks associated with the fixed-term funding arrangements until March 2023. • Annual Plan Discussion Update: The Committee received an update on the development of the Health Board's Three Year Annual Plan and referred to the recent correspondence from Welsh Government (WG) stating that the Minister for Health and Social Care has accepted the recommendation of WG officials to escalate Hywel Dda University Health Board to 'Targeted Intervention' status for Planning and Finance and to remain at 'Enhanced Monitoring' for quality issues relating to patient experience concerns with reference to Maternity Services. <p>The Committee were concerned regarding these issues and it was noted these areas would be scrutinised by the Committee at its next meeting. Assurance was provided that the Health Board will continue to work with WG and Healthcare Inspectorate Wales (HIW) in respect of these matters. Additionally, the governance arrangements will be reviewed and reported back through QSEC. Furthermore, the Committee requested that further information was provided from Welsh Government and HIW in respect of these concerns with the methodology for undertaking this to be discussed with the Health Board Chair.</p> <p>Additionally, the governance arrangements relating to the increased escalation status are currently being established with a clear line of sight being put in place from the enhanced monitoring working group to QSEC. Furthermore, an Executive Risk Oversight Group has been established and will meet weekly throughout the winter period. The action plan will form a part of the enhanced monitoring reporting arrangements internally and with Welsh Government.</p> <p>Acknowledging the range of Planning Objectives aligned to the Health Board's Strategic Objectives, which are comprehensive in setting out aims, Members noted that these will be reprioritised accordingly.</p> <ul style="list-style-type: none"> • Health Visiting Service Update on Staffing Levels: Members received an update on the Health Visiting staffing levels since the previous update to QSEC in February 2022. 	

Although the position remains challenging, particularly in Ceredigion and North Pembrokeshire, there has been a slight improvement in Ceredigion with recent successful recruitment of twelve Specialist Community Public Health Nursing students.

Members noted the ongoing concern regarding the average 50+ age profile of Health Visitors in post, with the workforce planning actions underway to mitigate the risks within this important service, such as the continued development of the 'GROW YOUR OWN' model and the recruitment campaign which was carried out with the Workforce and Organisational Development Team and the Universities at the end of February 2022. Members received assurance from the continuous efforts to explore opportunities to mitigate the risks for the population, including discussions with Social Care Services and Third Sector partners with the possibility of reviewing functions and mapping out actions to make the role more attractive and improve staff retention. Members were pleased to note that cross-border collaboration opportunities have been explored, however, noted the national and regional workforce challenges limiting opportunities.

Members discussed the potential wider strategic direction for the service to expand to support children and families, recognising the current national and regional workforce challenges. Members requested an update in six to nine months' time on the staffing position, to include data detailing the average birth rates and associated expectations for the Health Visitor.

- **Winter Planning Update 2022/23:** Members received a slide set summarising the Winter Planning 2022/23 report, noting the current significant pressures and also received an update on the steps being taken to support the Unscheduled Care services such as the development of an Alternative Care Unit and Medical Assessment Unit to support the Clinical Decisions Unit. The Standard Operating Procedure, staffing model and specific criteria for patients will be shared with QSEC at the next meeting.

The Committee received an update on a recent operational meeting undertaken by the Director of Operations, Medical Director, Director of Nursing and Patient Experience and Emergency Department Consultants. The Director of Operations fed back that Consultant colleagues helpfully prepared a list of actions required to help mitigate the risks associated with ongoing pressures. The outcome of the meeting was positive with actions to follow up including a revised escalation framework and the development of a Control Group to progress and monitor workforce, patient flow and experience. While the work underway will not transform immediate challenges, Members noted that the metrics and indicators will be a tool for trajectory improvement. Acknowledging the fast moving and unprecedented position and risks for quality, safety and patient experience, the Chair of QSEC suggested monthly touchpoint meetings with the Director of Nursing, Quality and Patient Experience, Board Secretary and the Director of Operations which was agreed.

Noting that there will no longer be a winter specific plan for future reporting, with the content dovetailing within the scope of the Unscheduled Emergency Care programme planning, Members received an update on the development of a system risk and harms dashboard which provides a focus on measurable, quality metrics. The Unscheduled Emergency Care Delivery Group will monitor actions as part of the programme, via the Senior Operational Group and progress reports will be provided to QSEC to track key indicators in December 2022 and an update will be provided in February 2023.

Members received feedback from the Medical Conference and the national urge for a focus on frailty was shared, with Mrs Hardisty suggesting a greater focus on processes in place to measure the impact and risk on patients who pose a higher risk of being admitted to hospital than staying at home with a community package to support their ailments. In response to an enquiry from Mrs Hardisty to encourage the public to utilise all other service pathways before attending hospital due to the pressures and risks, Mrs Rayani offered assurance that discussions are underway on communication tools and clear messaging.

The Committee conveyed deep appreciation and gratitude to operational colleagues, acknowledging the extremely challenging pressures and efforts underway to mitigate the risks for the population.

- **Quality Assurance Report:** Members received the key findings from the Quality Assurance Report including:
 - A revised reporting process has been implemented as part of the Nosocomial COVID-19 infection reviews, which requires the Health Board to report directly to the Delivery Unit. The Health Board is progressing the reviews and taking cases to the Scrutiny Panel where appropriate and engaging with the families of patients effected.
 - As part of the Healthcare Inspectorate Wales (HIW) Inspection recommendations, which are tracked by the Quality and Safety Team and reported to the Audit and Risk Assurance Committee (ARAC), Members noted that Committee reporting arrangements are being revised and an update will be provided to QSEC when available.
 - Actions included within the Public Service of Wales Ombudsman reports are progressing well with one action outstanding relating to Section 12 Doctors and escalation processes in the Mental Health service, which is being addressed by the Directorate.
 - Members were pleased to note the learning shared as part of the mortality reviews process and the Datix Mortality Model.

Ms Rebecca Jewell provided an overview of key findings from the recent presentation at Public Board on the HIW Annual Report, which is based upon feedback from a number of sources beyond the inspection reports, including concerns from members of the public via the Community Health Council and Serious Incidents process. Highlighting the previous concerns regarding a unit within the Learning Disabilities service, Ms Jewell, on behalf of HIW, was pleased to confirm actions were underway to resolve the immediate required actions following the inspection, and further suggested that the Committee prioritise work to strengthen governance arrangements and risk escalation processes regarding an apparent disconnect between Board and Service level. Recognising the national challenges, in particular for the Unscheduled Care system, Ms Jewell acknowledged the actions taken to address recommendations and actions for quality improvement across the Health Board.

- **Planning Objectives Update:** Members were pleased to note the progress of Planning Objectives under the responsibility of QSEC with a Deep Dive on Planning Objective 5X: Quality Management System, scheduled for QSEC in December 2022 and received an update that Planning Objectives are in the process of being revised for greater alignment across Committees.

- **Planning Objective Deep Dive 1E: Personalised Contact for Patients Waiting for Elective Care:** Members received an update on Planning Objective 1E: Personalised Contact for Patients Waiting for Elective Care and were pleased to note that over 10,800 Stage 4 patients have been contacted with an offer of support via a single point of contact service. WLSS has a fully recruited team, with clinical and non-clinical call handlers, with funding secured until March 2023. Feedback for the service has been actively sought and is generally positive. The website will be live imminently and will be useful for signposting support and offering advice to patients. Members received an update on the development of scripts for clinical and non-clinical call handlers, and it was agreed that consideration would be given to include a veteran-related question as part of the telephone discussions due to priority NHS treatment for conditions relating to their service. Members were pleased to note that patient contact following the initial call is determined on an individual basis according to preference.
- **An Update on Access to General Medical Services:** Members received an update on access to General Medical Services (GMS), which is an ongoing priority for WG. As part of the GMS contract negotiations, access standards are contained within the Quality Assurance and Improvement Framework (QAIF). Members raised a concern that the associated standards are not mandatory. In response to the update, Mrs Hardisty suggested it would be helpful to understand the scale of the population that are registered within the Practices that do not meet the required standards and in response Ms Rhian Bond advised Members that the two practices are non-compliant due to digital requirements.

Providing an update on the Community Health Council (CHC) access survey results, Members recognised that the survey was undertaken during the COVID-19 pandemic where there was a higher than average staff sickness rate. Members noted the actions underway in response to the survey such as sharing with the Locality Leads for sharing with practices and offering Care Navigation training opportunities to GP Practice leads. Members noted, at the Primary Care Quality Panel on 26th September 2022, a commitment made to scope any Practices that continue to have their doors shut as a result of undertaking risk assessments for access into waiting areas.

- **Health Board Managed Practices Update:** Members received an update on the Health Board Managed Practices, with the following highlighted:
 - The Managed Practices continue to face considerable GP workforce pressures which are having a significant impact on rotas.
 - As part of the five Managed Practices Programme of works and improvements, the tendering process has identified circa £100k lack of available Capital funding to complete all work identified across the Managed Practice sites. Work in Ash Grove, Llanelli, including flooring in non-clinical areas, has been delayed until 2023/24 anticipating some slippage in the Capital Programme that will enable this to be brought forward to March 2023.
 - Following the Board decision, from 1st November 2022, Neyland and Johnston GP Surgery will be added to the Health Board's portfolio of Health Board Managed Practices.
 - A dashboard reporting process on the various methods of consultations undertaken has been piloted in Ashgrove Surgery, Llanelli and will be rolled out.

Members requested a flavour of the patient feedback that is being received within the Managed Practices. In response, Ms Bond acknowledged that, in the absence of patient groups at the Practices, options will be explored to capture feedback.

- **Improvement Cymru and Institute for Healthcare Improvement Service Visits:**

Members received an update on the recent service visits undertaken by Improvement Cymru and The Institute for Healthcare Improvement. A draft report has been shared with teams for immediate learning opportunities and the more detailed report will be shared with QSEC when available and feedback will be built into a wider, overarching improvement programme.

Members noted that further discussions will take place at a Quality Panel meeting in December 2022 regarding the recommendations, what will be taken forward and how to engage with teams on national Improvement Cymru collaborative work underway. Positive feedback was provided in terms of staff honesty and engagement and potential areas to progress and a workshop has been arranged for staff members involved with recent Improvement Cymru programmes to explore further opportunities.

- **Operational Quality, Safety and Experience Sub Committee:** The Committee received the Operational Quality, Safety and Experience Sub Committee update report of the meeting held on 6th September 2022. Referring to the temporarily restricted level 3 access to the Critical Care unit in Prince Philip Hospital (PPH) with the interim management plan for the transfer of patients to GGH, which was agreed to be reviewed on 2nd October 2022, Mrs Hardisty requested an update. Mr Carruthers informed Members that the temporary arrangements have been extended to January 2023, noting a relatively low number of patient transfers due to demand. Members were pleased to note that the All Wales Critical Care transfer service will support the service over the next three months.
- **Listening and Learning Sub Committee:** The Listening Learning Sub Committee Update Report was deferred.
- **Welsh Health Specialised Services Committee (WHSSC) Quality and Patient Safety report:** Mrs Delyth Raynsford, as the Health Board's representative at the Joint Committee, updated Members on a development day undertaken to gather patient feedback and the new commissioning framework in place. Ms Lewis and Mrs Raynsford agreed to meet to discuss feedback for the WHSSC Joint Committee on behalf of QSEC.

**Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer /
Matters Requiring Board Level Consideration or Approval:**

There were no matters requiring Board level approval.

**Risgiau Allweddol a Materion Pryder /
Key Risks and Issues / Matters of Concern:**

- **Three Year Annual Plan Discussion:** Concern raised regarding the escalation of Planning and Finance services to 'Targeted intervention' status by Welsh Government and quality matters relating to performance remaining at 'Enhanced Monitoring'. The Committee requested that further information be provided from Welsh Government and HIW in respect of these concerns with the methodology for undertaking this to be discussed with the Health Board Chair.

- **Winter Planning 2022/23 Discussion:** Concern raised from the Director of Operations that the winter ahead is anticipated to be the most challenging since the COVID-19 pandemic partly due to the broader social care system challenges.

Concern raised regarding the prioritisation list for Flu and COVID-19 boosters which is being managed by the Joint Committee on Vaccinations and Immunisations, with Members highlighting a recent invitation for a COVID -19 booster based on age profiling rather than staffing role.

- **WHSCC QPS Joint Committee Report:** Concern raised regarding no improvement in the trajectory of services in escalation since the previous QSEC meeting.

**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 December 2022.