South Wales and South West Congenital Heart Disease Network

Network Governance

Clinical Governance Group, 21st March 2019

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Items Arising

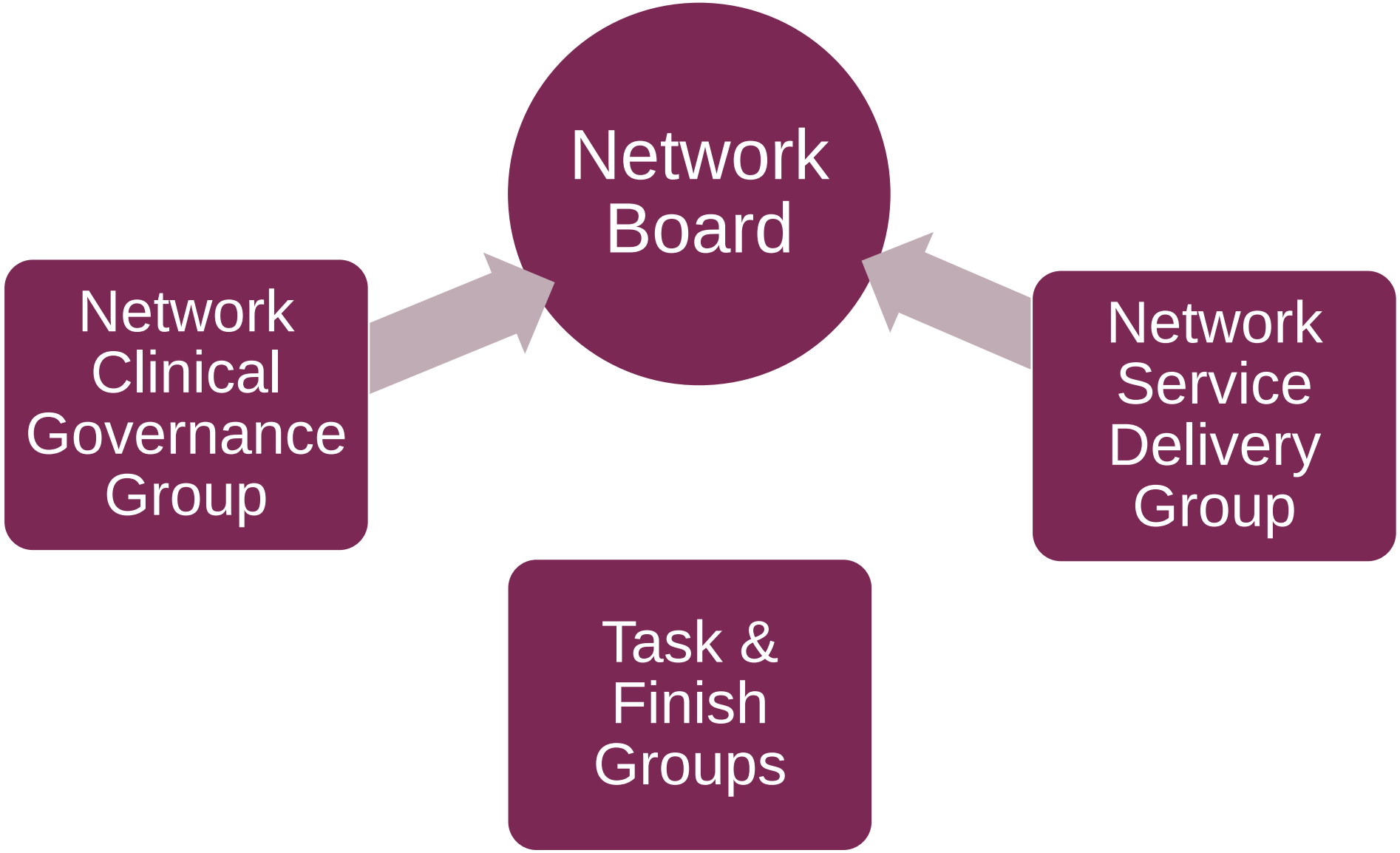
1. The Network Board Structure
2. Clinical Governance Group- roles and responsibilities
3. Chairperson of the group
4. Reporting to the Network Board (next meeting 21st May)

The Previous Network Board Structure- a recap

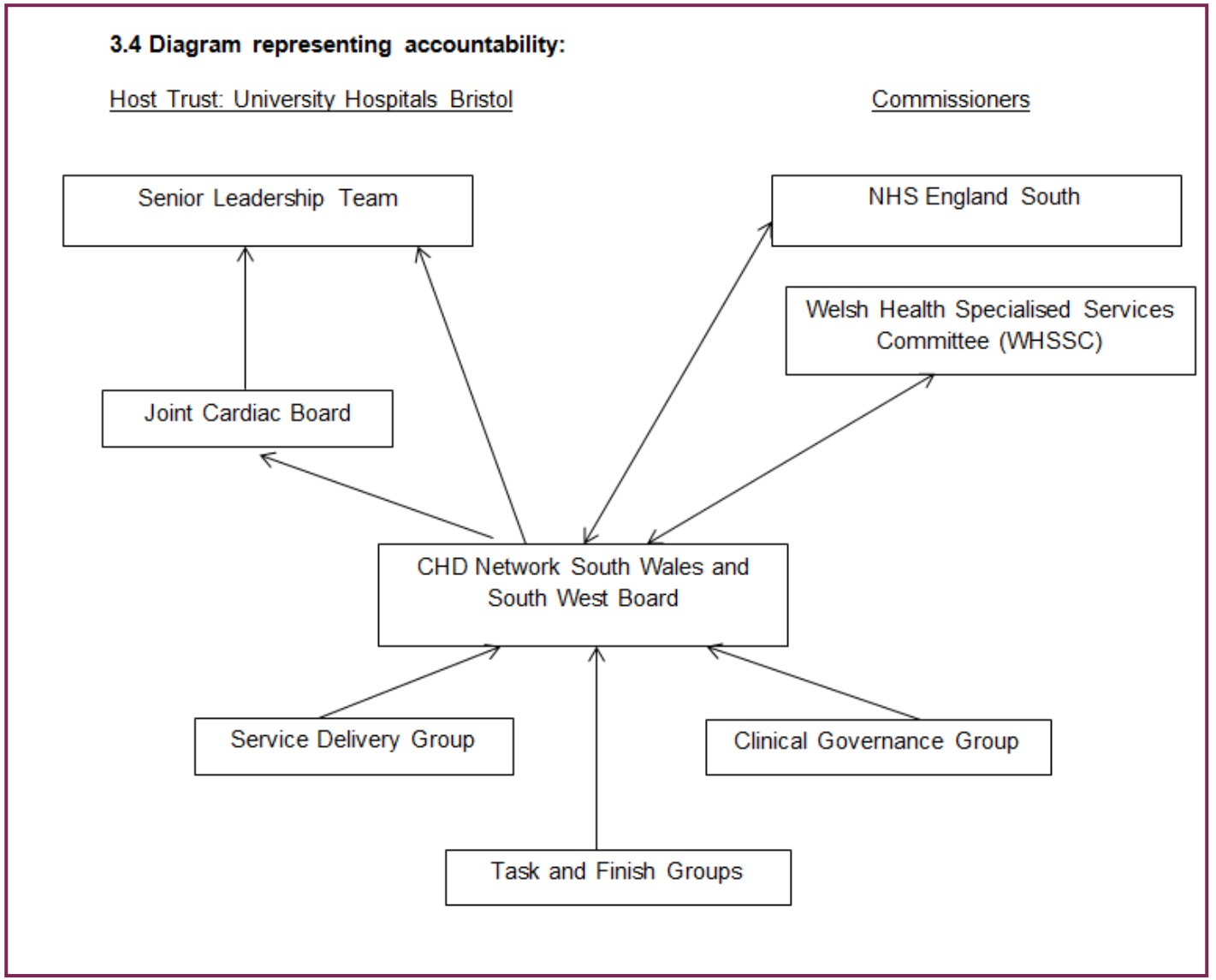
Strengths	Weaknesses
Good representative of **stakeholders**	**Infrequent** for core team
Good general **engagement**	Lack of **time** for detail/can feel rushed
Broad range of **topics** covered	Limited opportunity for members to **contribute**
Making **progress**	Some inconsistency of **membership**
	Range of issues covered **too broad**
	Lack of **accountability**?

Opportunities	Threats
To break functions into smaller groups able to get into **detail**	Issues may fall through **gaps**
To have focused **task and finish groups** for defined short term projects	The groups don't **interface** properly
To use members' **expertise** & interests more	May have inconsistent **membership**
Better **rhythm** of meetings for Network team	
Greater **accountability**	

Agreed Network Board Structure



Network Governance



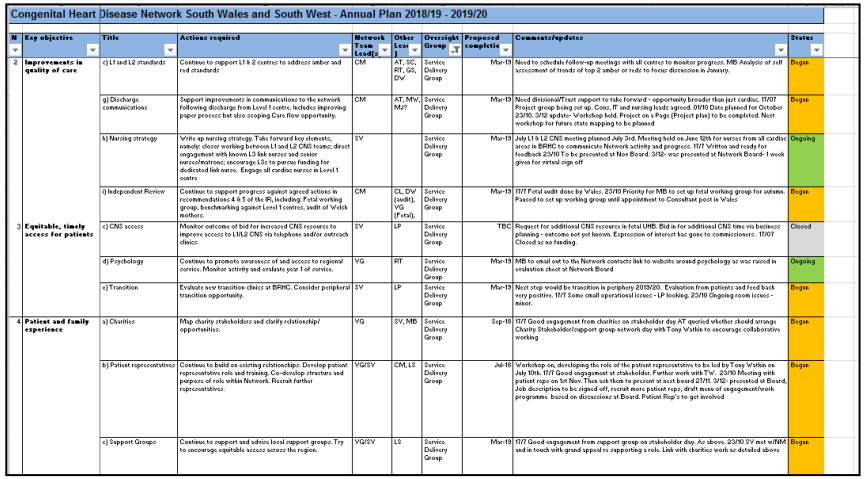
Remit of each group

Network Board	Network Clinical Governance Group	Network Service Delivery Group	Task & Finish Groups
Overall responsibility	Education and training programme	Standards & self-assessments	Specific tasks or projects
Escalation of concerns	Incident management and learning	Performance and capacity	Defined lifespan
Risks	Annual M&M	Workforce issues	For example:
Strategic direction	Audit programme	The website and other technology projects	Paediatric protocols group?
Performance assurance	Clinical pathways, protocols, guidance	Patient engagement and support groups	Discharge communications reference group?
Centres', commissioners, charity etc. updates	Patient leaflets and pathways	Finance/Tariffs etc	

Clinical Governance Group – roles and responsibilities

Delivery of work plan for CGG;

- Developing, signing-off and implementing high quality clinical guidance for CHD care
- Ensuring incidents are managed effectively and learning is shared
- Delivery of an annual network M&M
- Delivery of the network audit programme and ensuring learning is shared
- Supporting improvements in image sharing
- Understanding and monitoring lost to follow-up rates
- Delivery of the training and education strategy
- Building relationships with research partners and developing a network programme of research



Congenital Heart Disease Network South Wales and South West - Annual Plan 2018/19 - 2019/20

N	Key objective	Title	Actions required	Network Team Lead(s)	Other Lead(s)	Oversight Group	Proposed completio	Comments/updates	Status
2	**Improvements in quality of care**	c) L1 and L2 standards	Continue to support L1 & 2 centres to address amber and red standards	CM	AT, SC, RT, GS, DV	Service Delivery Group	Mar-19	Need to schedule follow-up meetings with all centres to monitor progress. MB Analysis of self assessment of trends of top 2 amber or reds to focus discussion in January.	Begun
		g) Discharge communications	Support improvements in communications to the network following discharge from Level 1 centre. Includes improving paper process but also scoping Care flow opportunity.	CM	AT, MW, MJ?	Service Delivery Group	Mar-19	Need divisional/Trust support to take forward - opportunity broader than just cardiac. 17/07 Project group being set up. Cons, IT and nursing leads agreed. 01/10 Date planned for October 23/10. 3/12 update- Workshop held. Project on A Page (Project plan) to be completed. Next workshop for future state mapping to be planned	Begun
		h) Nursing strategy	Write up nursing strategy. Take forward key elements, namely: closer working between L1 and L2 CNS teams; direct engagement with known L1 link nurses' and senior nurse/matrons; encourage L3s to pursue funding for dedicated link nurse. Engage all cardiac nurses in Level 1 centre	SV		Service Delivery Group	Mar-19	July L1 & L2 CNS meeting planned July 3rd. Meeting held on June 12th for nurses from all cardiac areas in BRHC to communicate Network activity and progress. 17/7 Written and ready for feedback 23/10 To be presented at Nov Board. 3/12- was presented at Network Board- 1 week given for virtual sign off	Ongoing
		i) Independent Review	Continue to support progress against agreed actions in recommendations 4 & 5 of the IR, including: Fetal working group, benchmarking against Level 1 centres, audit of Welsh mothers.	CM	CL, DV (neBH), VG (Fetal),	Service Delivery Group	Mar-19	17/7 Fetal audit done by Wales. 23/10 Priority for MB to set up fetal working group for autumn. Passed to set up working group until appointment to Consultant post in Wales	Begun
3	**Equitable, timely access for patients**	c) CNS access	Monitor outcome of bid for increased CNS resource to improve access to L1/L2 CNS via telephone and/or outreach clinics.	SV	LP	Service Delivery Group	TBC	Request for additional CNS resource in fetal UHB. Bid in for additional CNS time via business planning - outcome not yet known. Expression of interest has gone to commissioners. 17/07 Closed as no funding.	Closed
		d) Psychology	Continue to promote awareness of and access to regional service. Monitor activity and evaluate year 1 of service.	VG	RT	Service Delivery Group	Mar-19	MB to email out to the Network contacts/ link to website around psychology as was raised in evaluation sheet at Network Board	Ongoing
		e) Transition	Evaluate new transition clinics at BRHC. Consider peripheral transition opportunity.	SV	LP	Service Delivery Group	Mar-19	Next step would be transition in periphery 2019/20. Evaluation from patients and feed back very positive. 17/7 Some small operational issues - LP looking. 23/10 Ongoing room issue - minor.	Begun
4	**Patient and family experience**	a) Charities	Map charity stakeholders and clarify relationship/ opportunities.	VG	SV, MB	Service Delivery Group	Sep-18	17/7 Good engagement from charities on stakeholder day AT queried whether should arrange Charity Stakeholder/support group network day with Tony Watkin to encourage collaborative working	Begun
		b) Patient representative	Continue to build on existing relationships. Develop patient representative role and training. Co-develop structure and purpose of role within Network. Recruit Further representatives.	VG/SV	CM, LS	Service Delivery Group	Jul-18	Workshop on, developing the role of the patient representative to be led by Tony Watkin on July 10th. 17/7 Good engagement at stakeholder. Further work with TW. 23/10 Meeting with patient reps on 1st Nov. Then will then to present at next board 27/11. 3/12- presented at Board. Job description to be signed off, recruit more patient reps, draft mode of engagement/work programme based on discussions at Board. Patient Rep's to get involved	Begun
		c) Support Groups	Continue to support and advise local support groups. Try to encourage equitable access across the region.	VG/SV	LS	Service Delivery Group	Mar-19	17/7 Good engagement from support group on stakeholder day. As above. 23/10 SV met w/MM and in touch with grand appeal re supporting a role. Link with charities work as detailed above	Begun

Membership of the Clinical Governance Group

Have we got the right people in the room?

- Doctor & Nurse lead from Level 1, 2 and 3 Centres
- Network Audit Lead
- Network Team

Clinical Governance Group – Chairperson & Reporting

1. Chairperson for the group
2. Bi-annual progress report to Network Board
    - Progress to date/key achievements against work plan
    - Plan for next 6 months
    - Issues/Risks to escalate

Peer Review

Headlines

- 3 day review
- 10th- 12th of June
- Detailed Session this afternoon

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Thank you & Questions

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