

Quality Governance Performance Report

Quality Safety & Improvement Committee Nov 2025

Introduction

The Quality Governance report is a quarterly report provided to the Quality safety & Improvement Committee to review and take assurance on clinical quality and safety through the provision of data and summary highlights from Public Health Wales's assurance groups. It covers the following areas:

- Putting things Right
- Compliments
- Safety Alerts and Notices
- Clinical Audit
- Corporate Safeguarding
- Corporate Infection Prevention & Control



Putting Things Right (PTR) Section

Key Points



- There were 1 National Reportable Incident and 2 Early Warning Report were submitted in Quarter 2
- 502 incidents were reported this quarter.
- 2 Duty of Candour cases were reported
- There was 2 moderate harm IPC incidents reported following investigation and were also reported as a RIDDOR post investigation.
- 'Failure to follow protocol/SOP' remains the highest reported sub-category with 56 incidents categorised as this and Mislabeled specimens being the second highest (31).
- 213 incidents have an open status currently with **48** having an overdue status.
- Diabetic Eye Screening Wales having the highest number of open incidents (20).

Patient /Service user Experience (PTR) cont.



Complaints

- **20** Early resolution complaints were received in Q2 a slight increase (5) compared to the previous quarter.
- **17** were resolved within 2 days and **3** as soon as practicable . Concern themes continue to relate to appointments and communication
- **10** Formal complaints were received this quarter and mean of 90% acknowledged within 5 days over this period. Common themes recorded are Investigation results and access .

Compliments

- 96 compliments received this quarter - with the common theme being beyond the level of expected care (30%)
- Highest Responses received by Screening Division
- Most popular method of leaving compliment is the website or email

Safety Notices

- 6 out of the 42 alerts received this quarter were applicable to PHW . Main theme of alerts were for seasonal illness & medication

Safeguarding



Safeguarding Concerns

- **15** Safeguarding queries were reported this quarter
- Higher number of concerns reported in Screening and Health Protection as the largest Directorate with the most public contact.
- Highest reported category – Mental Health concerns (5) and Domestic Abuse (4)

Training Compliance

- Adult Level 1 safeguarding training at 90.5%
- Child Level 1 safeguarding training at 90%
- Level 2 Adult safeguarding training at 89%
- Level 2 Children safeguarding training at 88%

Safety

- Risk 1541 - DBS (Disclosure and Barring Service) checks for established staff and the risk they may pose to vulnerable people .
Remains on the corporate risk register .
- DBS checks are now a key area for improvement work with an associated work plan .

Infection Prevention and Control



IP&C Incidents

- **19** incidents – with **1** reported initially as moderate harm and confirmed post investigation.
- **9** incidents were for contact with, or hazardous substance remains under investigation, and all were low or no harm incidents.
- **IPC Risks and Issues**
- Water Safety within the BTW mobile units and the lack of sufficient controls to minimise the risk of Legionella on the units and an ongoing SMT is in place . Legionella has not been detected on any of the mobile screening units.
- Compliance with IPC Environmental Auditing at some screening sites remains a concern Kimberley House
- Decontamination facilities at Glan Clwyd endoscopy unit reprocessing facilities remains an issue and BSW are working closely with BCUHB support by an internal decontamination subgroup.

Infection Prevention and Control



Training Compliance

- Compliance for the IPC Level 1 & 2 has improved and continues to be above the Welsh Government target of 85%
- ANTT eLearning compliance has improved at 95% but assessment has fallen this quarter as Screening Division has reviewed the required competency for their staff roles., which has led to a drop in compliance with assessments which must be repeated every 3 years.

IPC Audit Activity

- IPC Audits are now competed and reported via the AMaT system and included within this report.
- The 2 lowest scoring areas were Kimberley House and St David's Park. The concerns in Kimberley House related mainly to the standard of environmental cleanliness which facilities are managing with the contracted cleaners, whereas in St David's Park the non-compliances were associated with the condition of the building which is beyond the control of Public Health Wales.



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