

QUALITY SAFETY & EXPERIENCE COMMITTEE WORK SCHEDULE APRIL 2024 – MARCH 2025

Currently, Quality Safety & Experience Committee (QSEC) meets bi-monthly. Based on this, the following table represents a proposal to incorporate the duties as outlined in the Committee's Terms of Reference into a basic work programme April 2024 – March 2025

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2024	11 June 2024	15 August 2024	8 October 2024	5 December 2025	13 February 2025
Governance								
Welcome and Apologies	Chair	All	~	✓	~	~	~	✓
Declarations of Interests	Chair	CSO	~	~	~	~	~	✓
Minutes from Previous Meeting and Matters Arising not on Agenda	Chair	CSO	~	\checkmark	~	~	~	✓
Table of Actions (ToA)	Chair	CSO	~	\checkmark	~	~	~	✓
Annual Review of Terms of Reference (TORs)	Chair	CSO		\checkmark				
Annual Review of Sub Committees TORs	Chair	CSO			✓			
Behaviours Framework	AL	SD	~					
Patient/Staff Story	LOC		✓ MD- Safer Care Collaborative Staff story	✓	V	~	~	~

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Policies for Approval (as required)	All	All	~	~	¥	×	~	~
Planning Objectives Update Report				✓		~		~
PO Deep Dive tbc								
Assurance								
Operational Group Updates – each group will present a report twice a year.	SD	SD/PK/SG	√ IP&C	√ SG	√ IPC	✓ ECPAP MM	√ SG	✓ MM ECPAP
Annual Report on Committee's Activity	AL/SD	All	✓					
Annual Report on Sub-Committee's activity for incorporating into QSEC's Annual Report	SD	SD LOC		√				
Presentation on revised operational governance arrangements	AC	JW		~				

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 Quality and Safety Assurance Report incorporating: External Monitoring Final Reports Nurse Staffing Levels (Wales) Act Updates (as required) Board to Floor Walkabouts EQliP outcomes IPC / C-Diff Updates C19 activity and Nosocomial Reviews Impact of industrial action Quality Engagement Act Speaking us Safely reports on quality themes WHC's overview (every other meeting) 	SD	CS	~	~	~	√	~	✓
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2023/24	SD	нн	√					
Therapies Services Referral to Treatment Time Action Plan Update	JS	LR	\checkmark					
Mental Health and Learning Disabilities and Public Health 1) Review of unexpected deaths / suicides to ascertain changes in patterns or trends	AG	BTP/CJ	✓					
Understanding the Quality and Experience Impact Realised to Date through Transforming UEC	KJ	CG	~					

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Quality Impact Assessment Process and Terms of Reference	SD	CS		\checkmark				
NHS Exec Review of Neurodevelopment Service, Pyschology and Psychological Intervention for Children and Young People	AC	LC/AL	√ Action Plan					
Upper GI Surgery (Quality Panel)	твс			\checkmark				
COVID 19 Review Action Plan- learning shared	Operational Leads/ CS			✓				
Obstetrics Sonography (Quality Panel)	GRD/KG				✓			
Compliance with ALN Act	JS		~					
GIRFT Report Orthopaedic Update (report and action plan)	AC		~					
GIRFT report General Surgery (Include report and action plan)	МН	AC	✓					
Oncology/Cancer/Palliative Care Deep Dive	AC/ JP							
Q&S impact of RAAC – metrics	AC	BA	~					
Risks								
Corporate Risks Assigned to QSEC	Executive leads	RW (report author)	√		√		~	

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Receive Sub-Committee Update Reports including Risk Register	SD	SD/LOC	√	✓	✓	✓	✓	✓
Assessing and Prioritising Fragile Services	SD/ SG			×				
Sub Committee Update Reports								
Operational Quality, Safety and Experience	✓	✓	√	~	~	~	~	~
Listening and Learning:	✓	✓	✓	√	√	✓	✓	~
 To include developments in response to the Communication themes presented in Dec 23 Reports on quality and safety matters (case studies if possible) on Speaking up Safely 				✓				
For Information								
HIW Annual Report							~	
WHSCC QPS Joint Chairs Report			~	✓	✓	~	✓	√

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IQPD Minutes			✓	~	✓	✓	✓	~
Work plan 2024/25			✓	~	~	~	~	~
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Agenda setting meeting with Chair and Exec Lead to include discussion on deep dives on new risks (at least 6 weeks before the meeting)	CSO	CSO	\checkmark	✓	✓	✓	✓	~
Draft agenda to go to Executive Team prior to being issued.	CSO	CSO	\checkmark	✓	✓	✓	~	~
Call for papers (at least 4 weeks before the meeting to receive papers at least 14 days before the meeting)	CSO	cso	\checkmark	✓	~	~	~	✓
Disseminate agenda and papers 7 days prior to the meeting	CSO	CSO	✓	~	~	~	~	~
Type up minutes and TOA within 7 days of the meeting	CSO	CSO	\checkmark	~	~	~	~	~
Circulate minutes and TOA to Committee for comments, points of accuracy and matters arising within 10 days of the meeting	CSO	CSO	√	~	~	~	~	✓
Check and send final version of minutes to the Committee Chair following comments received.	CSO	CSO	\checkmark	✓	~	~	~	~
Chase updates on TOA before the next meeting and RAG rate	CSO	CSO	~	~	~	✓	~	~
Record and track the TOA as part of the decision tracker	CSO	CSO	✓	~	~	~	~	√
Produce written update report for QSEC and Board	CSO	CSO	\checkmark	~	~	~	~	√
Prepare schedule of meetings	CSO	CSO					✓	
QSEC Annual Work Programme	CSO	CSO	\checkmark	✓	✓	✓	✓	\checkmark

Sub Committees:

- Operational Quality, Safety and Experience Sub-Committee
- Listening and Learning Sub-Committee

Sub Groups:

Effective Clinical Practice Advisory Panel (ECPAP) Medicines Management Operational Group (MMOG) Safeguarding Group (SG) Infection Prevention Strategic Steering Group (IPSSG)

Initials

SD- Sharon Daniel	CSO-Katie Lewis	AL- Anna Lewis	LOC- Louise O'Connor	MH- Mark Henwood
AC- Andrew Carruthers	BA- Bethan Andrews	CS- Cathie Steele	SG- Subhamay Ghosh	BTP- Rebecca Temple
				Purcell
HH- Helen Humphreys	CG- Ceri Griffiths	KJ- Keith Jones	RW- Rachel Williams	AG- Ardiana Gjini
KG- Kathy Greaves	GRD- Gail Roberts			
-	Davies			