GIG CYMRU NHS WALES | Bwrdd Iechyd Hywel Dda Health Board

QUALITY SAFETY & EXPERIENCE COMMITTEE WORK SCHEDULE APRIL 2025 – MARCH 2026

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 2025 – March 2026

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2025	10 June 2025	15 August 2025	8 October 2025	5 December 2025	13 February 2026
Governance								
Welcome and Apologies	**Chair**	**All**	✓	✓	✓	✓	✓	✓
Declarations of Interests	**Chair**	**CSO**	✓	✓	✓	✓	✓	✓
Minutes from Previous Meeting and Matters Arising not on Agenda	**Chair**	**CSO**	✓	✓	✓	✓	✓	✓
Table of Actions (ToA)	**Chair**	**CSO**	✓	✓	✓	✓	✓	✓
Review of Terms of Reference (TORs)	**Chair**	**CSO**		✓				
Annual Review of Sub Committees TORs	**Chair**	**CSO**		✓				
Self-Assessment - Six month review of actions August 2026	**Chair**	**JW**			✓			
Patient/Staff Story	**LOC/ Service Leads**		✓ Urgent and Emergency Care	✓	✓	✓	✓	✓

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Policies for Approval (as required)	**All**	**All**		✓	✓	✓	✓	✓
Targeted Intervention Progress Report - TBC	**SA**	**Executive Leads**	✓	✓	✓	✓	✓	✓
Assurance								
Annual Report on Committee's Activity	**AL/SD**	**All**	✓					
Annual Report from Sub-Committees	**SD**	**SD LOC**		✓				
Fragile Service Update Report *(TI 32, 33, & 35)*	**SD**	**SG/CS**			✓			
Clinical Audit Outcome Reviews	**SD**	**TBC**						
Patient Experience Framework	**SD**	**LOC**		✓				
Learning Framework Report *(TI 48)*	**SD**	**CS**			✓			
Allied Health Services Deep Dive	**AC**	**SQ**		✓				
Getting it Right First Time Governance Review	**JW**	**JW**		✓				

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Duty of Quality Assurance Report incorporating: • External Inspection and peer reviews *(TI34 & 52)* • Nurse Staffing Act Assurance (every 6 months) • Walkrounds (a thematic review on 6 month basis) • Quality Improvement outcomes *(TI 53)* • Quality Impact Assessments *(TI 32, 33)* • Putting things right *(TI 51)* • HCAI *(TI 50)* • Duty of Candour *(TI 54)* • Learning from significant events • Speaking Up reports on quality themes (every 6 months) • Paediatrics Service Changes BGH • WHC's overview *(every other meeting) (TI 52)*	**SD**	**CS**	✓	✓	✓	✓	✓	✓
Unscheduled Emergency Care Deep Dive including GIRFT Reports and Action Plans	**AC**	**PS**	✓			✓		
Mental Health and Learning Disabilities Deep Dive	**AC**	**RTP**	✓					
Primary Care Quality and Safety and Experience Deep Dive	**JP**	**RB**	✓					
Auditor General Report on Cancer Services	**AC**	**LH**		✓				
Infection Prevention and Control in the Community	**AG**	**MH**	✓		✓			

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Update Report on the Quality Improvement Strategic Framework 2023- 2026	**SD**	**MD**	✓					
Duty of Candour Annual Report 2024/25	**SD**	**CS**		✓				
Duty of Quality Annual Report 2024/25					✓			
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2024/25 and Spring Calculation Cycle	**SD**	**HH**		✓		✓		
Nurse Staffing Levels Impact of Reduction of Agency and Bank Staff on quality, safety and patient experience annual review report	**SD**	**HH**			✓			
CHKS Report	**MH**	**MH**		✓				
Cleanliness Standards Audit report and Action Plan	**JS**	**SC/ EB**		D	✓			
Outcome from Maternity Business Care – Date tbc	**AC**	**CL**						
Occupational Therapies Paediatric Improvement action plan	**AC**	**PG**		D	✓			
Risks								
Corporate Risks Assigned to QSEC	**Executive leads**	**RW (report author)**		✓	✓		✓	

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Sub Committee Update Reports								
Quality, Safety and Experience	✓	✓	✓	✓	✓ TOR for Annual Review	✓	✓	✓
Listening and Learning:	✓	✓	✓	✓	✓	✓	✓ TOR for Annual Review	✓
For Information								
HIW Annual Report							✓	
JCC Quality Safety Outcomes Sub Committee			✓	✓	✓	✓	✓	✓
Work plan 2025/26			✓	✓	✓	✓	✓	✓
Patient Experience Report			✓	✓	✓	✓	✓	✓
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**	✓	✓	✓	✓	✓	✓
Draft agenda to go to Executive Team prior to being issued.	**CSO**	**CSO**	✓	✓	✓	✓	✓	✓
Call for papers (at least 4 weeks before the meeting to receive papers at least 14 days before the meeting)	**CSO**	**CSO**	✓	✓	✓	✓	✓	✓
Disseminate agenda and papers 7 days prior to the meeting	**CSO**	**CSO**	✓	✓	✓	✓	✓	✓
Type up minutes and TOA within 7	**CSO**	**CSO**	✓	✓	✓	✓	✓	✓

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days of the meeting								
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**	✓	✓	✓	✓	✓	✓
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**	✓	✓	✓	✓	✓	✓
Prepare schedule of meetings	**CSO**	**CSO**					✓	
QSEC Annual Work Programme	**CSO**	**CSO**	✓	✓	✓	✓	✓	✓

Initials

SD- Sharon Daniel	CSO-Katie Lewis	AL- Anna Lewis	LOC- Louise O'Connor	MH- Mark Henwood
AC- Andrew Carruthers	CL: Cerian Llewellyn	CS- Cathie Steele	SG- Subhamay Ghosh	JS- James Severs
HH- Helen Humphreys	CG- Ceri Griffiths	KJ- Keith Jones	RW- Rachel Williams	AG- Ardiana Gjini
KG- Kathy Greaves	GRD- Gail Roberts Davies	CL- Caroline Lewis	Ps: Peter Skitt	SC: Simon Chiffi
BL- Bethan Lewis	LC- Liz Carroll	SA- Shaun Ayres	MD- Mandy Davies	LH- Lisa Humphreys