

## QUALITY SAFETY & EXPERIENCE COMMITTEE WORK SCHEDULE APRIL 2026– MARCH 2027

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 2026 – March 2027.

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
Governance								
Welcome and Apologies	<b>Chair</b>	<b>All</b>	✓	✓	✓	✓	✓	✓
Declarations of Interests	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Minutes from Previous Meeting and Matters Arising not on Agenda	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Table of Actions (ToA)	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Review of Terms of Reference (TORs)	<b>Chair</b>	<b>CSO</b>						✓
Annual Review of Sub Committees TORs	<b>Chair</b>	<b>CSO</b>						✓
Assurance and Risk Report • Corporate Risks • Operational Risks • Internal and External Audit Reports • Monitoring of Ministerial Directions • Monitoring of Welsh Health Circulars (WHCs)	<b>Executive Leads</b>	<b>RW</b>	✓	✓	✓	✓	✓	✓

<b>AGENDA ITEM/ ISSUE</b>	<b>LEAD</b>	<b>RESPONSIBLE OFFICER</b>	<b>9 April 2026</b>	<b>11 June 2026</b>	<b>11 August 2026</b>	<b>9 October 2026</b>	<b>3 December 2026</b>	<b>9 February 2027</b>
Self-Assessment - Six month review of actions August 2026	<b>Chair</b>	<b>JW</b>			✓ update on actions			✓ outcome report
Patient/Staff Story	<b>SD</b>	<b>LOC/ Service Leads</b>	✓	✓	✓	✓	✓	✓
Policies for Approval (as required)	<b>All</b>	<b>All</b>		✓	✓	✓	✓	✓
Targeted Intervention Progress Report	<b>SA</b>	<b>Executive Leads</b>	✓	TBC				
<b>Assurance</b>								
Annual Report on Committee's Activity	<b>AL/SD</b>	<b>All</b>	✓					
Annual Report from Sub-Committees	<b>SD</b>	<b>LOC</b>		✓				
A report on the impact of revised governance arrangements	<b>SD/ AC/ JS/ MH</b>		✓					
Clinical Audit Programme for Approval	<b>MH</b>	<b>IB</b>		✓				

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
Duty of Quality Assurance Report incorporating: <ul style="list-style-type: none"> <li>• External Inspection and peer reviews (TI34 &amp; 52)</li> <li>• Nurse Staffing Act Assurance (every 6 months)</li> <li>• Walkrounds (a thematic review on 6 month basis)</li> <li>• Quality Improvement outcomes (TI 53)</li> <li>• Quality Impact Assessments (TI 32, 33)</li> <li>• Putting things right (TI 51)</li> <li>• HCAI (TI 50)</li> <li>• Duty of Candour (TI 54)</li> <li>• Learning from significant events</li> <li>• Speaking Up reports on quality themes (every 6 months)</li> <li>• WHC's overview (every other meeting) (TI 52)</li> </ul>	SD	CS	✓	✓	✓	✓	✓	✓
Safeguarding Assurance Report	SD	CW			✓			✓
Infection Prevention Control Report	SD	RR	✓			✓		
Duty of Candour Annual Report 2025/26	SD	CS		✓				

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
Duty of Quality Annual Report 2025/26	SD	CS			✓			
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report and Spring Calculation Cycle	SD	HH		✓				
Cleanliness Standards Audit report and Action Plan	JS	SC/ EB			✓			
A review of the implementation of the community Mental Health referral pathway	AC	AD		TBC				
Fuller Inquiry assurance of progress of recommendations	JS	CB	✓					
First Contact Physiotherapist Report	JS	JB	✓				Learning from investigation to be shared via LLSC report	
Sleep Apnea- Action from Board on patients who have not been followed up correctly	JS				✓			
Epilepsy in Learning Disabilities Update	AC	DS			✓			
Ceredigion Community Mental Health Referral Pathway	AC	LC			✓			
Quality Assurance Report for Commissioned Services	LD	AS		✓				
Listening to People Initiative	SD	LOC		✓				
<b>Deep Dives</b>								
Ophthalmology	AC					✓		

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
Urology	AC					✓		
<b>Clinical Care Group Updates</b>								
Mental Health and Learning Disabilities	AC	RTP		✓		✓		✓
Community and Integrated Medicine	AC	ACh		✓	✓		✓	
Allied Health Services	AC	SQ			✓			✓
Planned and Specialist Care	AC	PG	✓			✓		
Estates and Facilities	JS	EB/ SC			✓			✓
Public Health	AG	BL		✓			✓	
Listening and Learning Sub Committee Update Report	MH	LOC	✓	✓	✓	✓	✓	✓ TOR for review
<b>POLICIES</b>			<b>EXPIRY DATE</b>					
1133 <a href="#">Service User Access Policy - Psychological Therapies</a>	AC	Andrew Homfray	5-Mar-26 Extended whilst full review is finalised	✓				
429 <a href="#">Management and Distribution of Safety Alerts and Notices Policy</a>	SD	Cathie Steele	13-Jun-26					
004 <a href="#">Claims Management Policy</a>	SD	Louise O'Connor	5-Oct-26					
894 <a href="#">Putting Things Right Management</a>	SD	Louise O'Connor						

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
<a href="#">and Resolution of Concerns Policy (Incidents, Complaints and Claims)</a>			5-Oct-26					
63 <a href="#">Use of Patient and Carers Stories Guideline</a>	SD	Louise O'Connor	13-Feb-27					
307 <a href="#">Production of Patient and Carer Information Policy</a>	SD	Louise O'Connor	21-Mar-27					
892 <a href="#">Incidents Near Miss and Hazard Reporting procedure</a>	SD	Cathie Steele	31-Jul-27					
18 <a href="#">Inquest guidance</a>	SD	Louise O'Connor	15-Aug-27					
309 - <a href="#">Continuing NHS Healthcare Operational Policy to Support Framework for Implementation</a>	AC	Tracy Devantier	15-Aug-27					
568 <a href="#">Production and Use of Surveys Guideline</a>	SD	Louise O'Connor	4-Dec-28					
1097 Corporate Safeguarding Policy	SD	Charlotte Westacott	11-Aug-26					
Listening and Learning Sub Committee Update Report	✓	✓	✓	✓	✓	✓	✓	✓ TOR for review
<b>For Information</b>								
HIW Annual Report	N/A	N/A					✓	
JCC Quality Safety Outcomes Sub Committee	N/A	N/A	✓	✓	✓	✓	✓	✓
Work plan 2026/27	N/A	N/A	✓	✓	✓	✓	✓	✓
Patient Experience Report	N/A	N/A	✓	✓	✓	✓	✓	✓
Agenda setting meeting with Chair and Exec Lead to include discussion	CSO	CSO	✓	✓	✓	✓	✓	✓

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	9 April 2026	11 June 2026	11 August 2026	9 October 2026	3 December 2026	9 February 2027
on deep dives on new risks (at least 6 weeks before the meeting)								
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 days of the meeting	CSO	CSO	✓	✓	✓	✓	✓	✓
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 Board	CSO	CSO	✓	✓	✓	✓	✓	✓
Prepare schedule of meetings	CSO	CSO					✓	
QSEC Annual Work Programme	CSO	CSO	✓	✓	✓	✓	✓	✓

Initials

SD- Sharon Daniel	CSO-Katie Lewis	MP- Marilize Preez	LOC- Louise O'Connor	MH- Mark Henwood
-------------------	-----------------	--------------------	----------------------	------------------

AC- Andrew Carruthers	BL- Bethan Lewis	CS- Cathie Steele	AG- Ardiana Gjini	JS- James Severs
HH- Helen Humphreys	SA- Shaun Ayres	MD- Mandy Davies	RW- Rachel Williams	IB- Ian Bebb
RTP- Rebecca Temple Purcell	ACh- Anna Chiffi	SC- Simon Chiffi	AS- Ann Simpson	LD- Lee Davies
EB- Elin Brocke				