

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		✓				
Assurance On Governance Arrangements Report • Corporate Risks • Operational Risks • Internal and External Audit Reports • Monitoring of Ministerial Directions • Monitoring of Welsh Health Circulars (WHCs)	Executive Leads	RW	✓	✓	✓	✓	✓	✓

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Self-Assessment - Six month review of actions August 2026	Chair	JW			✓			
Patient/Staff Story	LOC/ Service Leads		✓ Urgent and Emergency Care	✓	✓	Staff Story Cadog Ward Frailty Unit	✓	✓
Policies for Approval (as required)	All	All		✓	✓	✓	✓	✓
Targeted Intervention Progress Report	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			✓			

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Getting it Right First Time Governance Review	JW	JW		✓				
Duty of Quality Assurance Report incorporating: <ul style="list-style-type: none"> 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 (MHL D) Deep Dive	AC	RTP	✓					
Epilepsy in Learning Disabilities Services	AC	LC/ KI			✓			
Sonography - The impact on patient experience and clinical outcomes due	AC				✓			

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to Risk 787: Workforce Pressures in Ultrasound Services								
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	✓					
Update Report on the Quality Improvement Strategic Framework 2023- 2026	SD	MD	✓					
Planned Care Review- Impact of Long Waits	AC	PG				✓		
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	✓			

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Outcome from Maternity Business Care – Date tbc	AC	CL						
Occupational Therapies Paediatric Improvement action plan	AC	PG		D		✓		
Patient Experience by Demographic	SD	LOC			✓			
Risks								
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	CSO	CSO	✓	✓	✓	✓	✓	✓

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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 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
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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