

## 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	<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>	✓	✓	✓	✓	✓	✓
Annual Review of Terms of Reference (TORs)	<b>Chair</b>	<b>CSO</b>		✓				
Annual Review of Sub Committees TORs	<b>Chair</b>	<b>CSO</b>			✓			
Self Assessment Update and outcome of actions	<b>Chair</b>	<b>JW</b>			✓			✓
Behaviours Framework	<b>AL</b>	<b>SD</b>	✓					
Patient/Staff Story	<b>LOC</b>		✓ MD- Safer Care Collaborative Staff story	✓	✓ Oncology	✓ Integrated Care Centre / Micro faecal microbiota transplant	✓	✓

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Policies for Approval (as required)	<b>All</b>	<b>All</b>	✓	✓	✓	✓ Incident Reporting Procedure	✓	✓
Targeted Intervention Update	<b>Shaun Ayres</b>	<b>Executive Leads</b>				✓	✓	✓
Assurance								
Operational Group Updates – each group will present a report twice a year.	<b>SD</b>	<b>SD/PK/SG</b>	✓ IP&C	✓ SG	✓ IP&C	✓ ECPAP MM	✓ SG	✓ MM ECPAP
Annual Report on Committee’s Activity	<b>AL/SD</b>	<b>All</b>	✓					
Annual Report on Sub-Committee’s activity for incorporating into QSEC’s Annual Report	<b>SD</b>	<b>SD LOC</b>		✓				
Presentation on revised operational	<b>AC</b>			✓				

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governance arrangements								
Quality and Safety Assurance Report incorporating: <ul style="list-style-type: none"> <li>• External Monitoring Final Reports</li> <li>• Nurse Staffing Levels (Wales) Act Updates (as required)</li> <li>• Board to Floor Walkabouts (a thematic review on six month basis)</li> <li>• EQliP outcomes</li> <li>• IPC / C-Diff Updates</li> <li>• C19 activity and Nosocomial Reviews</li> <li>• Impact of industrial action</li> <li>• Quality Engagement Act</li> <li>• Speaking us Safely reports on quality themes</li> <li>• WHC's overview (<i>every other meeting</i>)</li> </ul>	SD	CS	✓	✓	✓	✓	✓	
Duty of Quality and Candour Annual Report 2024	SD	CS			✓			
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2023/24	SD	HH				✓		
Patient Acuity i- Welsh Levels of Care Impact on Nurse Staffing Levels	SD	HH				✓		

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Quality Engagement Act	<b>SD</b>	<b>CS</b>				✓		
Urgent and Emergency Care Discharge Management Internal Audit	<b>AC</b>	<b>CG/MD</b>			✓			
Therapies Services Referral to Treatment Time Action Plan Update	<b>JS</b>	<b>LR</b>	✓		✓			
Mental Health and Learning Disabilities and Public Health  1) Review of unexpected deaths / suicides to ascertain changes in patterns or trends.	<b>AG</b>	<b>BTP/CJ</b>	✓					
Understanding the Quality and Experience Impact Realised to Date through Transforming UEC	<b>KJ</b>	<b>CG</b>	✓					
Thematic Report on care home fragilities and closures including the impact on length of stay at hospitals for patients and quality assurance for out of area referrals	<b>JP</b>				✓			
Primary Care Quality and Safety Governance and HIW Inspection reports.	<b>JP</b>	<b>RB</b>			✓			
Withybush Creche Care Inspectorate Wales Inspection and action plan	<b>AC</b>	<b>RE</b>		✓		✓		

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Rheumatology Deep Dive	AC						✓	
Cleanliness Standards Audit report and Action Plan	AC	RE		✓			✓	
Integrated Quality Impact Assessment Process and Terms of Reference	SD	CS		✓				
NHS Exec Review of Neurodevelopment Service, Psychology and Psychological Intervention for Children and Young People	AC	LC/AL	✓ Action Plan			✓		
Upper GI Surgery (Quality Panel)	MH	CL			✓			
Community Nursing	SD	Tracey Evans/ Sarah Cameron				✓		
Nosocomial Review COVID 19 Review Action Plan- learning shared	Operational Leads					✓ opportunity for shared learning across organisation to be embedded as part of new operational structure		
Obstetrics Sonography (Quality Panel)	GRD/KG				✓			
Compliance with ALN Act	JS	LJ	✓			✓		

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Allergies Testing Service	AC					✓		
ASD Assessments	AC	AL			✓			
GIRFT Report Orthopaedic Update (report and action plan)	AC		✓					
Infected Blood Inquiry findings	SD					✓		
The Fuller Inquiry	AC/MH					✓		
GIRFT report General Surgery (Include report and action plan)	MH	AC	✓					
Veteran Health	SD/AC	LH/ BL				✓		
Oncology Deep Dive	AC/ JP	GB/LH		D	✓			
Stroke Services Access Times	JS			✓		✓		
Q&S impact of RAAC – metrics	AC	BA	✓					
'Grow 2- low gestational age' presentation	SD	KG				✓		
<b>Risks</b>								
Corporate Risks Assigned to QSEC	Executive	RW (report author)	✓		✓		✓	

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	leads							
Assessing and Prioritising Fragile Services	<b>SD/ SG</b>			✓				
<b>Sub Committee Update Reports</b>								
Operational Quality, Safety and Experience	✓	✓	✓	✓	✓	✓	✓	✓
Listening and Learning:	✓	✓	✓	D	✓	✓	✓	✓
<ul style="list-style-type: none"> <li>To include developments in response to the Communication themes presented in Dec 23</li> <li>Reports on quality and safety matters (case studies if possible) on Speaking up Safely</li> </ul>				D	✓			
<b>For Information</b>								
HIW Annual Report							✓	
WHSCC QPS Joint Chairs Report			✓	✓	✓	✓	✓	✓
IQPD Minutes			✓	✓	✓	✓	✓	✓

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Work plan 2024/25			✓	✓	✓	✓	✓	✓
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 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	✓	✓	✓	✓	✓	✓

**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	CL- Caroline Lewis		