

QUALITY SAFETY & EXPERIENCE COMMITTEE WORK SCHEDULE APRIL 2022 – MARCH 2023

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 2022 – March 2023.

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	12 th April 2022	22nd June 2022	9 th August 2022	11th October 2021	14 th December 2022	14 th February 2023
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	✓	✓	✓	✓	✓	✓
Annual Review of Terms of Reference (TORs)	Chair	cso		✓				
Annual Review of Sub Committees TORs	Chair	cso			✓			
Approval of QSEC Self-Assessment Process	Chair	MR				✓		
Outcome Report and Action Plan QSEC Self-Assessment Process	Chair	MR						✓
Workplan Review	Chair/ MR		✓					
Patient/Staff Story	MR		√ Maternity Services	✓ Paediatric Services	✓	√	✓	√
Policies for Approval (as required)	All	All	✓	✓	✓	✓	✓	✓

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Assurance								
 Quality and Safety Assurance Report incorporating: External Monitoring Final Reports Nurse Staffing Levels (Wales) Act Updates (as required) Board to Floor Walkabouts Claims Management Report – High Value/Novel Claims EQuIP outcomes 	MR	SP/CS/LOC	✓	✓	√	√	√	√
Maternity Services Improvement Plan Update following the HIW maternity services inspections across Wales	MR	KG	✓					
Development of a Health Board Falls Strategy		MD		√				
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2021/22	MR	СН	√					
Maternity Services Action Plan update	MR	KG		✓				
Nursing Assurance Annual Audit	MR	MR		D	✓			
Operational Group Updates – each group will present a report twice a year.	MR	SP/SD/PK/JPJ	√ IP&C	√ SG	√ ECPAP MM		√ SG IP&C	√ MM ECPAP
Annual Report on Committee's Activity	AL/MR	All	√					
Annual Report on Sub-Committee's	MR	SP/	✓					

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activity for incorporating into QSEC's Annual Report		LOC						
Risks								
Corporate Risks Assigned to QSEC (including new corporate risks assigned to QSEC in light of COVID-19	MR	ChB		✓	✓		√	
Receive Sub-Committee Update Reports including Risk Register	MR	SP/LOC	✓	√	√	√	✓	✓
Audit Wales Governance Arrangements Recommendations and Review	AC	AC	√		✓			
De-escalation of Health Board COVID- 19 IPC Measures	MR		D	✓				
WHSCC to provide an update on CAMHS Tier 4 Pathway				√				
Deep Dive Reports as Required		ALL	✓	✓	✓	✓	✓	✓
Deep Dive Report – Epilepsy and Neurology	AC	AC	✓					
Health Visiting Service Staffing Levels	MR	BL			✓			
Llwynhendy TB Review- external review	RJ	JM			✓			
Long COVID-19 Patient Pathway	AS	LR			✓			

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Stroke Services	AS	ВА		✓				
School Nursing Deep Dive	MR	BL	✓					
Safeguarding Services Deep Dive	MND	MND	✓					
Paediatric Services	AC	AC		✓				
Health Board Winter Plan 2021/22	AC	KJ				✓		
GIRFT Review of Cardiac Surgery at (SBUHB)	PK		√					
GIRFT Outcome report for Orthopaedics Services and service/UHB response	AC	КЈ		✓				
Clinical Audit Update	MD	IB			√			√
Update on COVID-19 Related Activity	MR	MR/ RJ/ AS	✓					
Update Report on Planning Objectives (PO)	EDs	MR/ DW		√		✓		✓
Scheduled/ Board/ Committee Deep Dive on Specific PO's	ED's				√ 3C	√ 5X	√ 1E	√ 5W

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Commissioning for Quality Outcomes	AC	SA		Include an update on external providers for Cardiac				
HIW report on the Learning Disabilities Service Update including an update on the Dream Team Charter. **requested at IC QSEC 02.22	AC	AC		✓ (Update agreed for Board Seminar)				
Initial feedback form HIW review (Stroke Services)	AS	ВА		D	✓			
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	√	~	✓	✓	✓	√

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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	✓	✓	✓	✓	✓	✓

<u>Initials</u>

CSO – Committee Services Officer	LC – Liz Carroll	IB – Ian Bebb
AL –Anna Lewis/Chair	LOC – Louise O'Connor	ChB-Charlotte Beare
MR – Mandy Rayani	JPJ – Jenny Pugh Jones	SG - Subhamay Ghosh
JW – Jo Wilson	MD – Mandy Davies	CE – Catherine Evans
RJ – Ros Jervis	AG – Alison Gittins	SA – Shaun Ayres
AC- Andrew Carruthers	SP – Sian Passey	AE – Annette Edwards
AS – Alison Shakeshaft	PL – Phil Lloyd	JH – Jina Hawkes
PK – Philip Kloer	KJ – Keith Jones	JE – John Evans
JP – Jill Paterson	CS- Cathie Steele	DW- Daniel Warm
LG – Lisa Gostling	CH – Chris Hayes	BA- Bethan Andrews

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)