

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	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 and Risk 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			✓ update on actions			✓ outcome report
Patient/Staff Story	SD	LOC/ Service Leads	✓	✓	✓	✓	✓	✓
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	LOC		✓				
A report on the impact of revised governance arrangements	SD/ AC/ JS/ MH		✓					
Clinical Audit Programme for Approval	MH	IB		✓ outcome from reviews				

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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) • WHC's overview (every other meeting) (TI 52) 	SD	CS	✓	✓	✓	✓	✓	✓
Safeguarding Assurance Report	SD	CW			✓			✓
Infection Prevention Control Report	SD	RR	✓			✓		
Duty of Candour Annual Report 2025/26	SD	CS		✓				

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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			✓			
Fuller Inquiry assurance of progress of recommendations	JS	CB	✓					
First Contact Physiotherapist Report	JS	JB	✓					
Epilepsy in Learning Disabilities Update	AC	DS			✓			
Ceredigion Community Mental Health Referral Pathway	AC	LC			✓			
Quality Assurance Report for Commissioned Services	LD	AS		✓				
Clinical Care Group Updates								
Mental Health and Learning Disabilities	AC	RTP		✓		✓		✓
Community and Integrated Medicine	AC	ACh		✓	✓		✓	
Allied Health Services	AC	SQ			✓		✓	
Planned and Specialist Care	AC	PG	✓		✓		✓	

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Estates and Facilities	JS	EB/ SC		✓		✓		✓
Public Health	AG	BL		✓		✓		✓
Listening and Learning Sub Committee Update Report	MH	LOC	✓	✓	✓	✓	✓	✓ TOR for review
POLICIES			EXPIRY DATE					
1133 Service User Access Policy - Psychological Therapies	AC	Andrew Homfray	5-Mar-26 Extended whilst full review is finalised					
429 Management and Distribution of Safety Alerts and Notices Policy	SD	Cathie Steele	13-Jun-26					
004 Claims Management Policy	SD	Louise O'Connor	5-Oct-26					
894 Putting Things Right Management and Resolution of Concerns Policy (Incidents, Complaints and Claims)	SD	Louise O'Connor	5-Oct-26					
63 Use of Patient and Carers Stories Guideline	SD	Louise O'Connor	13-Feb-27					
307 Production of Patient and Carer Information Policy	SD	Louise O'Connor	21-Mar-27					
892 Incidents Near Miss and Hazard Reporting procedure	SD	Cathie Steele	31-Jul-27					
18 Inquest guidance	SD	Louise O'Connor	15-Aug-27					
309 - Continuing NHS Healthcare Operational Policy to Support Framework for Implementation	AC	Tracy Devantier	15-Aug-27					
568 Production and Use of Surveys	SD	Louise O'Connor	4-Dec-28					

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Guideline								
1097 Corporate Safeguarding Policy	SD	Charlotte Westacott	11-Aug-26					
Listening and Learning Sub Committee Update Report	✓	✓	✓	✓	✓	✓	✓	✓ TOR for review
For Information								
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 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	CSO	CSO	✓	✓	✓	✓	✓	✓

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Committee for comments, points of accuracy and matters arising within 10 days of the meeting								
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				