

**TABLE OF ACTIONS FROM
QUALITY, SAFETY & EXPERIENCE COMMITTEE (QSEC) MEETING
HELD ON 5 OCTOBER 2023**

MINUTE REF	ACTION	LEAD	TIMESCALE	PROGRESS
QSEC (23) 62	Critical Care Prince Philip Hospital: To liaise with the Executive Director of Strategy and Planning regarding providing an update to Public Board on the longer term critical care plan as part of the Clinical Strategy.	AC	October 2023	An update has been forward planned for Public Board in January 2023.
QSEC (23) 63	Withybush On Call Surgery Rota: To include within the Quality Assurance Report patient experience feedback relating to the temporary changes to the pathway.	CS/ SH	December 2023	The on-call rota for WGH has been re-established and the pathways to Bronglais Hospital and Glangwili Hospital are no longer in use and to capture concurrent feedback is no longer possible.
QSEC (23)80	QSEC Self Assessment Process: To share with the Committee the revised survey for feedback	JW	October 2023	Complete
QSEC (23) 81	Patient Story: To share the patient story with the heads of nursing and clinical teams, Listening and Learning Experience Sub Committee (LLSC) and Operational Quality, Safety and Experience Sub Committee (QQSESC)	JB/ LOC	October 2023	Complete: The patient story that was shared at QSEC in October 2023 has been forward planned for QQSESC and LLSC for January 2024.
QSEC (23) 82	Quality Assurance Report: To remove the slide relating to maternity services as duplicated with maternity services update on the agenda.	CSO	October 2023	Complete
QSEC (23) 82	Quality Assurance Report: To develop an action plan to address the backlog of letters outstanding for families are part of the COVID 19 review process.	LOC/ CS	December 2023	Complete: An action plan has been developed.

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QSEC (23) 82	Quality Assurance Report: To request an overview of what training and education is provided to staff for Do Not Attempt Cardio Pulmonary Resuscitation as part of the RADAR update report to Operational, Quality Safety and Experience Sub Committee (QQSESC).	WO/CSO	December 2023	Complete: Outcome included in item 2.3 QQSESC Update Report.
QSEC (23) 82	Quality Assurance Report: Top 4 Patient Safety Incidents: To explore options to clarify level of harm and whether incidents are due to action/ inaction by HB staff for the top 4 reported patient safety incidents.	CS	December 2023	Complete: Update included on slide 4 in item 2.2 Quality Assurance Report.
QSEC (23) 83	Quality Assurance Report: To remind directorate leads to report any outstanding governing body (including HIW) recommendations via their Quality and Safety Group meetings more consistently.	WO		Complete
QSEC (23) 84	Quality Impact Assessment (QIA) RAAC: To discuss developing a simplistic mechanism which captures anticipated outcomes and also tracks/ monitors these outcomes in light of the financial challenges and pressures being faced across the organisation.	JW/ MR	December 2023	Complete: Discussion undertaken between the Director and Assistant Director of Nursing, Quality and Patient Experience and Assistant Director of Assurance and Risk regarding the development of a process for QIA approval and review/monitoring which is being progressed. Proposal to be presented to Executive Team and Quality, Safety and Experience Committee for agreement with a view to testing during Quarter 4 this Financial Year.
QSEC (23) 85	Financial Recovery Quality Impact Assessment: To ensure that QSEC are sighted on the quality impact of any decisions made between October and December 2023 in light of the financial position and possibly	JW	November 2023	The development of a process for quality impact assessment approval and review/monitoring is being progressed.

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	convene an extra ordinary QSEC meeting if deemed necessary			
QSEC (22) 87	Initial Response to the Thirwall Inquiry: To schedule an update on the WHC Speaking up Safely Consultation and Health Board response.	CS	December 2023	Complete: Scheduled as part of the forward work programme
QSEC (23)89	Effective Clinical Practice Advisory Panel: To share the the Health Technology Wales Adoption Audit Report 2022/2023 which should have been appended to item 5.1 Effective Clinical Practice Advisory Panel update.	LD/ CSO	October 2023	Complete
QSEC (23) 90	Medicines Management Operational Group Update: To check the review date for The Medicines Policy.	JW	December 2023	Complete: The review date is 25 August 2024
QSEC (23) 91	Operational Quality, Safety and Experience Sub Committee: To ensure Estates and Hotel Services representation at future OQSESC meetings.	WO/ CSO	January 2024	Complete: A Directorate Update Report from Estates and Hotel Services has been forward planned for the meeting due to be held on 9 January 2024.
QSEC (23) 91	Operational Quality, Safety and Experience Sub Committee: To raise with their respective teams that Directorate representation at the Sub Committee requires prioritisation.	AC/ MR	October 2023	Complete

AC: Andrew Carruthers	CSO: Katie Lewis	JW- Joanne Wilson	MR- Mandy Rayani
JB- Jeff Bowen	LOC: Louise O'Connor	WO: Will Oliver	CS: Cathie Steele
SH: Stephanie Hire	LC: Liz Carroll	JP: Jill Paterson	