

## QUALITY SAFETY & EXPERIENCE ASSURANCE COMMITTEE WORK SCHEDULE APRIL 2020 - MARCH 2021

Currently, Quality Safety & Experience Assurance Committee (QSEAC) 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 2020 – March 2021 (initials in brackets denotes leads).

| AGENDA ITEM/<br>ISSUE                               | LEAD  | RESPONSIBLE OFFICER | 7<br>APR<br>2020 | 7<br>May<br>2020 | 9<br>JUN<br>2020 | 7<br>JUL<br>2020 | 13<br>AUG<br>2020 | 6<br>OCT<br>2020 | 1<br>DEC<br>2020 | 11<br>FEB<br>2021 |
|---|-------|---------------------|------------------|------------------|------------------|------------------|-------------------|------------------|------------------|-------------------|
|   |       | GOVERNANCE          |                  |                  |                  |                  |                   |                  |                  |                   |
| Welcome and Apologies                               | Chair | All                 | ✓                | <b>✓</b>         | ✓                | <b>✓</b>         | <b>√</b>          | <b>✓</b>         | ✓                | <b>✓</b>          |
| Declarations of Interests                           | Chair | CSO                 | ✓                | <b>✓</b>         | <b>√</b>         | <b>~</b>         | <b>√</b>          | ✓                | ✓                | <b>√</b>          |
| Minutes from previous meeting                       | Chair | CSO                 | ✓                |                  | ✓                |                  | <b>√</b>          | ✓                | ✓                | <b>√</b>          |
| Table of Actions (ToAs)                             | Chair | CSO                 | ✓                |                  | ✓                |                  | ✓                 | <b>√</b>         | ✓                | ✓                 |
| Review of Terms<br>of Reference<br>(TORs)           | Chair | AG                  | ✓                |                  |                  |                  |                   |                  |                  | <b>√</b>          |
| Review of Sub<br>Committees<br>TORs                 | Chair | AG                  |                  |                  | ✓                |                  |                   | <b>√</b>         |                  |                   |
| Review of membership                                | Chair | AG                  |                  |                  |                  |                  |                   |                  |                  | ✓                 |
| Matters arising not on agenda                       | Chair | All                 | ✓                |                  | <b>√</b>         |                  | ✓                 | <b>√</b>         | ✓                | <b>√</b>          |
| Approval of<br>QSEAC Self-<br>Assessment<br>Process | Chair | MR                  | <b>√</b>         |                  |                  |                  |                   |                  |                  |                   |
| Outcome of  | Chair | MR                  |                  |                  | ✓                |                  |                   |                  |                  |                   |

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| QSEAC Self-<br>Assessment<br>Process   |          |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| Workplan Review  | Chair/MR |                     |                  |                  |                  |                  | <b>√</b>          |                  |                  |                   |
| Patient/Staff Story  | MR       |                     | √<br>(Deferred)  |                  |                  |                  | (LD)              | ✓<br>(Staff)     | <b>√</b>         | <b>√</b>          |
| Policies for<br>Approval (as<br>required)  | All      | All                 | <b>√</b>         |                  | <b>√</b>         |                  | <b>√</b>          | <b>√</b>         | <b>√</b>         | <b>√</b>          |
| Quality and Safety Assurance Report incorporating: • External Monitoring Final Reports • Nurse Staffing Levels (Wales) Act Updates (as required) • Board to Floor Walkabouts | MR       | SP                  |                  |                  | •                |                  | √<br>WHCs         | ✓                | <b>✓</b>         | <b>✓</b>          |
| Nurse Staffing<br>Levels (Wales)<br>Act –Annual<br>Report 2019/20  |          |                     | <b>√</b>         |                  |                  | <b>√</b>         | <b>√</b>          |                  |                  |                   |
| Receive Sub-   | MR       | AS/PK/LOC           |                  |                  | ✓                |                  | ✓                 | <b>✓</b>         | ✓                | ✓                 |

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| Committee Update Reports including Risk Register  |       |                                    |                            |                  |                             |                  |                   |                  |                  |                   |
| Research & Development (R&D) Activity Report /Annual Reports 2018/19 and 2019/20            | PK    |                                    |                            |                  | •                           |                  |                   |                  |                  |                   |
| Operational Group Updates – each group will present a report 2 times per year.              | MR    | SP/SD/PK/JPJ                       |                            |                  | √<br>(Safeguarding<br>IP&C) |                  | √<br>ECP          | (SS & IP)        | <b>√</b>         | <b>✓</b>          |
| Reflective<br>Summary   | AL    | MR                                 | <b>√</b>                   |                  | <b>√</b>                    |                  | <b>√</b>          | ✓                | <b>√</b>         | <b>√</b>          |
| Annual Report on Committee's Activity   | AL/MR | SP/AII                             | √(via<br>Chairs<br>Action) |                  |                             |                  |                   |                  |                  |                   |
| Annual Report on<br>Sub-Committee's<br>activity for<br>incorporating into<br>QSEAC's Annual | MR    | AS/JPJ/ SD/<br>LC/SP/<br>LOC/LG/PK | <b>~</b>                   |                  |                             |                  |                   |                  |                  |                   |
| Report Approval of Annual Quality Statement (AQS)   | MR    | cs                                 | √<br>Final                 |                  |                             |                  |                   |                  |                  | √<br>Draft        |
| Corporate Risks<br>Assigned to  | MR    | ChB                                | √<br>(Deferred)            |                  | <b>√</b>                    |                  |                   | <b>√</b>         |                  | <b>√</b>          |

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| QSEAC   |       |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| New Corporate Risks Assigned to QSEAC in light of COVID 19        | MR    | ChB                 |                  | √<br>(Deferred)  | ✓                |                  |                   |                  |                  |                   |
| Deep Dive Report<br>on Risk 855                                   | AC/KJ |                     |                  |                  |                  | √<br>(Deferred)  | <b>✓</b>          |                  |                  |                   |
| Risk 129  | JP/ND |                     |                  |                  |                  |                  | √<br>(Deferred)   |                  |                  |                   |
| Staffing Update   | MR    | MR                  |                  | ✓                |                  |                  |                   |                  |                  |                   |
| Personal Protective Equipment Update                              | MR    | MR                  |                  | <b>✓</b>         |                  | √<br>(Verbal)    |                   |                  |                  |                   |
| Critical Care<br>Medicines  | JP    | JPJ                 |                  | ✓                |                  |                  | √<br>(Risk 848)   |                  |                  |                   |
| Clinical Audit Position Statement                                 | MD    | IB                  |                  |                  | ✓                |                  |                   |                  |                  |                   |
| COVID-19<br>Response Update                                       | AC    | AC                  |                  |                  | ✓                |                  |                   |                  |                  |                   |
| Cancer<br>Treatments<br>During COVID-19                           | AC    | KJ                  |                  |                  | ✓                |                  |                   |                  |                  |                   |
| Health & Care<br>Standards<br>Fundamentals of<br>Care Audit 2019: | MR    |                     |                  |                  |                  | <b>√</b>         |                   |                  | <b>√</b>         |                   |
| Field Hospitals   | AC    |                     |                  |                  |                  | ✓                |                   |                  |                  |                   |

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| Update  |       |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| Impact of Delayed<br>Treatment During<br>COVID-19 report                    | AC    | KJ                  |                  |                  |                  |                  |                   | <b>✓</b>         |                  |                   |
| Risk 628  | AS    |                     |                  |                  |                  |                  |                   | ✓                |                  |                   |
| Assurance<br>Reports Winter<br>Planning on Risks<br>129 & 810               | AC/JP | KJ/ND               |                  |                  |                  |                  |                   | <b>*</b>         |                  |                   |
| Risk 635  | RJ    |                     |                  |                  |                  |                  |                   |                  | <b>√</b>         |                   |
| Risk 684  | AC    |                     |                  |                  |                  |                  |                   | <b>√</b>         |                  |                   |
| Director of Public<br>Health Report   | RJ    |                     | ✓<br>(Verbal)    |                  |                  |                  |                   |                  | <b>✓</b>         |                   |
| Enabling Quality Improvement In Practice (EQIiP) - Outcome from 1st cohort  | MR    | MD                  | (Deferred)       |                  |                  |                  |                   |                  |                  |                   |
|   |       |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| Single Cancer Pathway (taking into consideration the impact to patients and | AC    | AS                  | √<br>(verbal)    |                  |                  |                  |                   |                  |                  |                   |

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| other services<br>due to a lack of<br>Cellular<br>Pathologists)   |      |                     |                  |                  |                  |                  |                   |                  |                  |                   |
|   |      |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| Mortality Data  | PK   | JE                  |                  |                  |                  |                  | ✓                 |                  |                  | ✓                 |
| Claims Management Report – High Value/Novel Claims  | MR   | LOC                 | <b>√</b>         |                  |                  |                  | <b>√</b>          |                  | <b>✓</b>         |                   |
| Trans-Catheter<br>Aortic Valve<br>Insertion (TAVI)<br>Progress Report   | PK   |                     |                  |                  | √<br>(verbal)    |                  |                   | <b>√</b>         |                  |                   |
| Risk 633 Cancer<br>Pathway  | AC   | KJ/DB               |                  |                  |                  |                  |                   |                  |                  | ✓                 |
| Deep dive on<br>Falls<br>Management   | MR   |                     |                  |                  |                  |                  |                   |                  |                  | <b>√</b>          |
|   |      | ADMINISTRATIO       | )N               |                  |                  |                  |                   |                  |                  |                   |
| Agenda setting meeting with Chair & Exec Lead to include discussion on deep dives on new risks (at least 6 weeks before | CSO  | KR                  | <b>√</b>         |                  | ~                |                  | •                 | •                | ~                | <b>√</b>          |

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| the meeting) Draft agenda to go to Executive Team prior to being issued.   | CSO  | KR                  | <b>√</b>         |                  | <b>✓</b>         |                  | <b>√</b>          | <b>✓</b>         | <b>√</b>         | <b>✓</b>          |
| Call for papers (at least 4 weeks before the meeting to receive papers at least 14 days before the meeting)                                | CSO  | KR                  | <b>√</b>         |                  | <b>✓</b>         |                  | <b>✓</b>          | <b>✓</b>         | <b>√</b>         | <b>✓</b>          |
| Disseminate agenda & papers 7 days prior to the meeting  | CSO  | KR                  | <b>√</b>         |                  | <b>√</b>         |                  | <b>√</b>          | <b>√</b>         | <b>√</b>         | <b>√</b>          |
| Type up minutes and TOA within 7 days of the meeting   | CSO  | KR                  | <b>√</b>         |                  | ✓                |                  | ✓                 | <b>√</b>         | <b>√</b>         | <b>√</b>          |
| Circulate minutes<br>& TOA to<br>Committee for<br>comments, points<br>of accuracy &<br>matters arising<br>within 10 days of<br>the meeting | CSO  | KR                  | <b>√</b>         |                  | <b>√</b>         |                  | <b>√</b>          | <b>√</b>         | <b>√</b>         | <b>✓</b>          |
| Check & send final version of minutes to the   | CSO  | KR                  | ✓                |                  | ✓                |                  | ✓                 | <b>√</b>         | ✓                | <b>√</b>          |

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| Committee Chair following comments received.                       |      |                     |                  |                  |                  |                  |                   |                  |                  |                   |
| Chase updates<br>on TOA before<br>the next meeting<br>and RAG rate | CSO  | KR                  | <b>√</b>         |                  | <b>√</b>         |                  | <b>✓</b>          | <b>✓</b>         | <b>√</b>         | <b>✓</b>          |
| Record and track<br>the TOA as part<br>of the decision<br>tracker  | CSO  | KR                  | <b>√</b>         |                  | <b>√</b>         |                  | <b>√</b>          | <b>✓</b>         | <b>√</b>         | <b>✓</b>          |
| Produce written update report for QSEAC & Board                    | CSO  | KR                  | <b>√</b>         |                  | <b>√</b>         |                  | ✓                 | <b>✓</b>         | ✓                | <b>√</b>          |
| Prepare schedule of meetings                                       | CSO  | KR                  |                  |                  |                  |                  |                   |                  | ✓                |                   |
| QSEAC Annual<br>Work Programme                                     | CSO  | KR                  | ✓                |                  | <b>√</b>         |                  | ✓                 | ✓                | ✓                | ✓                 |

## <u>Initials</u>

| CSO – Committee Services Officer | LG – Lisa Gostling     | KJ – Keith Jones    |
|----------------------------------|------------------------|---------------------|
| KR –Karen Richardson             | KM – Karen Miles       | CS- Cathie Steele   |
| AL –Anna Lewis                   | SJ – Sarah Jennings    | JB – John Bennett   |
| MR – Mandy Rayani                | LC – Liz Carroll       | CH – Chris Hayes    |
| JW – Jo Wilson                   | LOC – Louise O'Connor  | ND- Nick Davies     |
| RJ – Ros Jervis                  | JPJ – Jenny Pugh Jones | IB – Ian Bebb       |
| AC- Andrew Carruthers            | MD – Mandy Davies      | ChB-Charlotte Beare |
| AS – Alison Shakeshaft           | AG – Alison Gittins    | AS – Andrea Stiens  |
| PK – Philip Kloer                | SP – Sian Passey       | SG - Subhamay Ghosh |
| JP – Jill Paterson               | GR – Gareth Rees       | ·                   |