

## QUALITY SAFETY & EXPERIENCE ASSURANCE COMMITTEE WORK SCHEDULE APRIL 2021 – MARCH 2022

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 2021 – March 2022.

| AGENDA ITEM/ ISSUE  | LEAD     | RESPONSIBLE OFFICER | 13<br>APR<br>2021          | 8<br>JUN<br>2021            | 10<br>AUG<br>2021 | 5<br>OCT<br>2021 | 7<br>DEC<br>2021           | 8<br>FEB<br>2022 |
|---|----------|---------------------|----------------------------|-----------------------------|-------------------|------------------|----------------------------|------------------|
| Welcome and Apologies   | Chair    | All                 | ✓                          | ✓                           | ✓                 | ✓                | ✓                          | ✓                |
| Declarations of Interests   | Chair    | CSO                 | ✓                          | ✓                           | ✓                 | ✓                | ✓                          | ✓                |
| Minutes from Previous Meeting<br>and Matters Arising not on<br>Agenda | Chair    | CSO                 | <b>✓</b>                   | <b>✓</b>                    | <b>√</b>          | <b>√</b>         | <b>√</b>                   | <b>√</b>         |
| Table of Actions (ToA)  | Chair    | CSO                 | ✓                          | ✓                           | ✓                 | ✓                | ✓                          | ✓                |
| Annual Review of Terms of Reference (TORs)                            | Chair    | CSO                 |                            |                             |                   |                  |                            | ✓                |
| Annual Review of Sub<br>Committees TORs                               | Chair    | CSO                 |                            |                             | ✓                 |                  |                            |                  |
| Approval of QSEAC Self-<br>Assessment Process                         | Chair    | MR                  |                            |                             | ✓                 |                  |                            |                  |
| Outcome of QSEAC Self-<br>Assessment Process                          | Chair    | MR                  |                            |                             |                   | <b>√</b>         |                            |                  |
| Workplan Review   | Chair/MR |                     | ✓                          |                             |                   |                  |                            |                  |
| Patient/Staff Story   | MR       |                     | √<br>Maternity<br>Services | ✓<br>MHLD<br>(Risk<br>1032) | <b>√</b>          | <b>√</b>         | √<br>Maternity<br>Services | <b>√</b>         |
| Policies for Approval (as required)                                   | All      | All                 | ✓                          | <b>V</b>                    | ✓                 | ✓                | ✓                          | ✓                |
| Quality and Safety Assurance  | MR       | SP/CS/LOC           | ✓                          | ✓                           | ✓                 | ✓                | ✓                          | ✓                |

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|--|-------|---------------------|----------------------------|------------------|-------------------|------------------|------------------|------------------|
| <ul> <li>Report incorporating:</li> <li>External Monitoring Final<br/>Reports</li> <li>Nurse Staffing Levels (Wales)<br/>Act Updates (as required)</li> <li>Board to Floor Walkabouts</li> <li>Claims Management Report –<br/>High Value/Novel Claims</li> <li>EQuIP outcomes</li> </ul> |       |                     |                            |                  | WHCs              |                  |                  |                  |
| Nurse Staffing Levels (Wales)<br>Act –Annual Report 2020/21  | MR    | SP/CS               | ✓                          |                  |                   |                  |                  |                  |
| Nurse Staffing Level (Wales) Act<br>Implementation– Draft 3 year<br>report 2018-21   | MR    | SP/CS               | ✓                          |                  |                   |                  |                  |                  |
| Quality Management System (QMS) Approach   | MR    | SP/CS               |                            |                  |                   |                  | ✓                |                  |
| Improving Together Update  | MR    | MD/CE               |                            | <b>✓</b>         |                   |                  |                  |                  |
| Receive Sub-Committee Update<br>Reports including Risk Register  | MR    | AS/PK/LOC           | <b>√</b>                   | <b>✓</b>         | ✓                 | <b>√</b>         | <b>√</b>         | <b>✓</b>         |
| Research & Development (R&D) Activity Report /Annual Reports 2020/21   | PK    |                     | <b>√</b>                   |                  |                   |                  |                  | <b>√</b>         |
| Operational Group Updates – each group will present a report twice a year.   | MR    | SP/SD/PK/JPJ        | √<br>IP&C                  | √<br>SG          | √<br>ECP<br>MM    |                  | √<br>SG<br>IP&C  | √<br>MM<br>ECP   |
| Annual Report on Committee's Activity  | AL/MR | SP/AII              | √(via<br>Chairs<br>Action) |                  |                   |                  |                  |                  |

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|---|-------|---------------------|-------------------|------------------|-------------------|------------------|------------------|------------------|
| Annual Report on Sub-<br>Committee's activity for   |       | AS/JPJ/ SD/         |                   |                  |                   |                  |                  |                  |
| incorporating into QSEAC's Annual Report  | MR    | LC/SP/              | ✓                 |                  |                   |                  |                  |                  |
| ·   |       | LOC/LG/PK           |                   |                  |                   |                  |                  |                  |
| Corporate Risks Assigned to QSEAC (including new corporate risks assigned to QSEAC in light of COVID-19 | MR    | ChB                 |                   | <b>√</b>         |                   | <b>√</b>         |                  | <b>√</b>         |
| Update on Single Point of Contact   | MR    | MD                  | ✓                 |                  |                   |                  |                  |                  |
| Update on Risk 129  | JP/AC | AC                  | ✓                 |                  |                   | ✓                |                  |                  |
| Update on Risk 1032   | AC    |                     |                   | <b>√</b>         |                   |                  |                  |                  |
| Deep Dive Report on Cancer<br>(Risk 633)  | AC    | KJ                  |                   |                  | <b>√</b>          |                  |                  |                  |
| Deep Dive Report on Stroke  | AC    | AS                  |                   |                  | ✓                 |                  |                  |                  |
| Deep Dive on Falls<br>Management  | MR    | MD                  |                   |                  |                   |                  |                  |                  |
| Health Board Winter Plan<br>2021/22 (including DTOC)  | AC    | KJ                  |                   |                  |                   | ✓                |                  |                  |
| Accessing Emergency Specialist Spinal Services  | MR    | SP                  |                   |                  | ✓                 |                  |                  |                  |
| Clinical Audit Update   | MD    | IB                  |                   |                  | ✓                 |                  |                  | ✓                |
| Health & Care Standards Fundamentals of Care Audit 2019   | MR    | MR                  |                   |                  | ✓                 |                  |                  |                  |
| Scheduled Care Update   | PK    | JE                  |                   |                  |                   | ✓                |                  |                  |

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|--|-------|---------------------|---------------------------|------------------|-------------------|------------------|------------------|------------------|
| Field Hospitals Evaluation   | AC    |                     |                           |                  |                   | ✓                |                  |                  |
| Update on COVID-19 Related Activity  | MR    | MR/RJ/AS            |                           | ✓                |                   |                  |                  |                  |
| Director of Public Health Report   | RJ    | RJ                  |                           |                  |                   | ✓                |                  |                  |
| Welsh Ambulance NHS Trust (WAST)   | AC/MR |                     |                           |                  |                   | ✓                |                  |                  |
| Children's Services 3 Year Plan  | AC    | AC                  |                           | ✓                |                   |                  |                  |                  |
| Nurse Staffing Levels (Wales) Act 2016 - Draft Annual Report 2020/21 - Draft 3 Year Report 2018-21 - Extension to Paediatric Inpatient Wards Internal Audit Report - Q&S Governance - Health and Care Standards - Closure of Actions | MR    | MR                  | ✓<br>✓<br>✓<br>(For Info) |                  |                   |                  |                  |                  |
| Commissioning for Quality Outcomes   | AC    | SA                  |                           | <b>√</b>         |                   |                  |                  |                  |
| Response to the National Audit of Care at the End of Life (NACEL)  | JP    | AE/JH               |                           | <b>√</b>         |                   |                  |                  |                  |
| 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                 | <b>√</b>                  | <b>✓</b>         | <b>√</b>          | <b>✓</b>         | <b>✓</b>         | <b>✓</b>         |
| Draft agenda to go to Executive Team prior to being issued.  | CSO   | CSO                 | ✓                         | ✓                | ✓                 | ✓                | ✓                | <b>√</b>         |

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|--|------|---------------------|-------------------|------------------|-------------------|------------------|------------------|------------------|
| Call for papers (at least 4 weeks before the meeting to receive papers at least 14 days before the meeting)                        | CSO  | CSO                 | ✓                 | <b>✓</b>         | <b>√</b>          | <b>√</b>         | <b>✓</b>         | <b>✓</b>         |
| Disseminate agenda and papers 7 days prior to the meeting  | CSO  | CSO                 | ✓                 | <b>✓</b>         | ✓                 | ✓                | ✓                | <b>✓</b>         |
| Type up minutes and TOA within 7 days of the meeting   | CSO  | CSO                 | ✓                 | <b>√</b>         | ✓                 | ✓                | ✓                | <b>✓</b>         |
| Circulate minutes and TOA to<br>Committee for comments, points<br>of accuracy and matters arising<br>within 10 days of the meeting | CSO  | CSO                 | <b>√</b>          | <b>√</b>         | <b>√</b>          | <b>√</b>         | <b>√</b>         | <b>√</b>         |
| Check and send final version of minutes to the Committee Chair following comments received.  | CSO  | CSO                 | ✓                 | <b>√</b>         | <b>√</b>          | <b>√</b>         | <b>√</b>         | <b>√</b>         |
| Chase updates on TOA before the next meeting and RAG rate  | CSO  | CSO                 | ✓                 | <b>√</b>         | ✓                 | ✓                | ✓                | <b>✓</b>         |
| Record and track the TOA as part of the decision tracker   | CSO  | CSO                 | ✓                 | <b>√</b>         | <b>√</b>          | ✓                | ✓                | <b>√</b>         |
| Produce written update report for QSEAC and Board  | CSO  | CSO                 | ✓                 | <b>√</b>         | ✓                 | ✓                | ✓                | <b>√</b>         |
| Prepare schedule of meetings   | CSO  | CSO                 |                   |                  |                   |                  | ✓                |                  |
| QSEAC Annual Work Programme  | CSO  | CSO                 | ✓                 | <b>✓</b>         | ✓                 | ✓                | ✓                | <b>√</b>         |

## <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 Édwards |
| AS – Alison Shakeshaft           | PL – Phil Lloyd        | JH – Jina Hawkes     |

| PK – Philip Kloer  | KJ – Keith Jones  |  |
|--------------------|-------------------|--|
| JP – Jill Paterson | CS- Cathie Steele |  |
| LG – Lisa Gostling | CH – Chris Hayes  |  |