

## 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 <sup>th</sup> April 2022	22 <sup>nd</sup> June 2022	9 <sup>th</sup> August 2022	11 <sup>th</sup> October 2021	14 <sup>th</sup> December 2022	14 <sup>th</sup> February 2023
Governance								
Welcome and Apologies	<b>Chair</b>	<b>All</b>	✓	✓	✓	✓	✓	✓
Declarations of Interests	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Minutes from Previous Meeting and Matters Arising not on Agenda	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Table of Actions (ToA)	<b>Chair</b>	<b>CSO</b>	✓	✓	✓	✓	✓	✓
Annual Review of Terms of Reference (TORs)	<b>Chair</b>	<b>CSO</b>		✓				
Annual Review of Sub Committees TORs	<b>Chair</b>	<b>CSO</b>		✓				
Approval of QSEC Self-Assessment Process	<b>Chair</b>	<b>MR</b>				✓		
Outcome Report and Action Plan QSEC Self-Assessment Process	<b>Chair</b>	<b>MR</b>						✓
Workplan Review	<b>Chair/ MR</b>		✓					
Patient/Staff Story	<b>MR</b>		✓ Maternity Services	✓	✓	✓	✓	✓
Policies for Approval (as required)	<b>All</b>	<b>All</b>	✓	✓	✓	✓	✓	✓

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Assurance								
Quality and Safety Assurance Report incorporating: <ul style="list-style-type: none"> <li>External Monitoring Final Reports</li> <li>Nurse Staffing Levels (Wales) Act Updates (as required)</li> <li>Board to Floor Walkabouts</li> <li>Claims Management Report – High Value/Novel Claims</li> <li>EQuIP outcomes</li> </ul>	<b>MR</b>	<b>SP/CS/LOC</b>	✓	✓	✓	✓	✓	✓
Maternity Services Improvement Plan Update following the HIW maternity services inspections across Wales	<b>KG</b>		✓					
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2021/22	<b>MR</b>	<b>CH</b>	✓					
Progress Report on Quality Management System (QMS) Approach	<b>MR</b>	<b>SP/CS</b>			✓			
Nursing Assurance Annual Audit	<b>MR</b>	<b>MR</b>		✓				
Operational Group Updates – each group will present a report twice a year.	<b>MR</b>	<b>SP/SD/PK/JPJ</b>	✓ IP&C	✓ SG	✓ ECPAP MM		✓ SG IP&C	✓ MM ECPAP
Annual Report on Committee’s Activity	<b>AL/MR</b>	<b>All</b>	✓					
Annual Report on Sub-Committee’s activity for incorporating into QSEC’s Annual Report	<b>MR</b>	<b>SP/ LOC</b>	✓					

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<b>Risks</b>								
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: An update on the development of the operational groups	AC	AC	✓					
Risk Assessment for COVID-19 pathway and management changes	MR		D	✓				
WHSCC to provide an update on CAMHS Tier 4 Pathway				✓				
<b>Deep Dive Reports as Required</b>	AC	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			✓			
Stroke Services	AS	Bethan Andrews		✓				

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School Nursing Deep Dive	<b>MR</b>	<b>BL</b>	✓					
Safeguarding Services Deep Dive	<b>MND</b>	<b>MND</b>	✓					
Health Board Winter Plan 2021/22	<b>AC</b>	<b>KJ</b>				✓		
GIRFT Review of Cardiac Surgery at (SBUHB)	<b>PK</b>		✓					
GIRFT Outcome report for Orthopaedics Services and service/UHB response	<b>Owain Ennis (on annual leave)</b>			✓				
Clinical Audit Update	<b>MD</b>	<b>IB</b>		✓				✓
Update on COVID-19 Related Activity	<b>MR</b>	<b>MR/ RJ/ AS</b>	✓	✓	✓	✓	✓	✓
Update Report on Planning Objectives (PO)	<b>EDs</b>	<b>MR/ DW</b>		✓		✓		✓
Scheduled/ Board/ Committee Deep Dive on Specific PO's	<b>ED's</b>		✓	✓	✓	✓	✓	✓
Commissioning for Quality Outcomes	<b>AC</b>	<b>SA</b>		✓ Include an update on external providers for Cardiac				
Quality and Engagement Act Update 2022								

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HIW report on the Learning Disabilities Service Update including an update on the Dream Team Charter. <b>**requested at IC QSEC 02.22</b>	AC	AC		✓				
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	✓	✓	✓	✓	✓	✓
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	✓	✓	✓	✓	✓	✓

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Prepare schedule of meetings	CSO	CSO					✓	
QSEC Annual Work Programme	CSO	CSO	✓	✓	✓	✓	✓	✓

**Initials**

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