

**TABLE OF ACTIONS FROM
QUALITY, SAFETY & EXPERIENCE COMMITTEE (QSEC) MEETING
HELD ON 16 DECEMBER 2022**

QSEC(22) 75	<ul style="list-style-type: none"> • Commissioning for Quality Outcomes: To discuss with Welsh Health Specialised Services Committee the possibility of capturing commissioning outcomes (PROMS/ PREMS) as part of the contract arrangements for Long Term Agreements similar to an exercise being undertaken with Swansea Bay University Health Board. 	SA	November 2022	WHSSC have advised that obtaining PROMS/PREMS information is a priority, however they are in the very early stages of this. They have initially started a piece of work to look at the Artificial Limb and Appliance Service (ALAS) in North and South Wales and Hywel Dda Health Board will be updated on the results.
QSEC (22) 101	<ul style="list-style-type: none"> • Health Board Managed Practices Update: To explore capturing patient feedback at the Managed Practices. 	RB	November 2022	Further work to be progressed.
QSEC (22) 111	<ul style="list-style-type: none"> • Patient Story: To provide information online and a means of contact for patients with complex needs who may wish to discuss any concerns they may have or to request reasonable adjustments prior to attendance at A&E or Primary Care Services. 	MD	February 2023	The Assistant Director of Nursing and Quality Improvement is exploring including this as part of the work underway with the Communications Hub and providing information on the Health Board's Website.
QSEC (22) 111	<ul style="list-style-type: none"> • Patient Story: To provide an update on the HIW report following the inspection at A&E on 5th December 2022 and the Community Health Council report and the associated actions to QSEC in February 2023 and share the update with the patient who provided their experience story following the meeting. 	AC/ MR/ LOC	February 2023	An update has been scheduled for the QSEC meeting on 14 February 2023 as part of the Quality Assurance Report.
QSEC (22) 112	<ul style="list-style-type: none"> • Corporate Risk Register: To clarify the detail and escalation position of the Risk associated with the patient presentation challenges at Minor Injury Unit in Prince Philip Hospital (PPH). 	AC/ JW/ CB	February 2023	PPH identified Risk 1293 Avoidable harm to patients at MIU (PPH) on Datix on 25 November 2021. This risk was reviewed and updated on 10 January 2023 with Directorate

				<p>Team. Despite a current risk score of 20 (extreme), this risk was previously at service level which meant that it was not included in the Operational Risk Report to the Operational Quality, Safety and Experience Sub Committee (OQSESC). As part of the review, this risk has now been escalated to Directorate level (no change to current risk score of 20) and now meets the criteria for reporting in the operational risk reports to Operational Quality, Safety and Experience Sub Committee (OQSESC).</p> <p>This risk was also discussed at the Executive Risk Group on 4 January 2023 where it was agreed to discuss this risk further at the PPH Directorate Improving Together session with Executives at the end of January.</p>
QSEC (22) 114	<ul style="list-style-type: none"> Quality Assurance Report: Provide a report on the themes that have emerged from recent HIW inspections to the Operational Quality, Safety and Experience Sub Committee. 	CS	March 2023	The update has been scheduled as part of the Operational Quality, Safety and Experience Sub Committee forward work programme.
QSEC (22) 114	<ul style="list-style-type: none"> To discuss the development of a sub-set Executive Team meeting with the Operational leads to discuss quality and safety matters in a more streamlined way. 	JW/ AC	February 2023	Initial conversations have commenced regarding restructuring the operational governance arrangements. Due to capacity issues within the governance team this has not progressed as quickly as planned. New arrangements will be in place for the start of the new financial year.

QSEC (22) 117	<ul style="list-style-type: none"> Infection Prevention and Control Update: To discuss incorporating the Infection Prevention and Control updates in to a standard report item to ensure that the Committee are regularly sighted on developments due to the enhanced monitoring status. 	MR/ SD	February 2023	Regular updates will be included in the Assurance Report from February 2023.
QSEC (22) 119	<ul style="list-style-type: none"> Cancer Services Update: To schedule a a deep dive in to the Cancer Information Support Services to get an insight in to the impact the delays have had on individual patients 	KJ	February 2023	Completed: Scheduled on the QSEC agenda for February 2023
QSEC (22) 123	<ul style="list-style-type: none"> Quality Management System: To a develop a light weight, accessible document for the Health Board's website which will include a diagram and hyperlinks to provide updates and work underway to develop the objectives by the end of the financial year 	SP/ CS	April 2023	Development is underway with completion expected by April 2023
QSEC (22) 125	<ul style="list-style-type: none"> OQSESC Update Report: To undertake a visit to the MIU in Prince Philip Hospital to discuss challenges with the team and develop an action plan to mitigate the risks. 	MR	January 2023	Completed
QSEC (22) 125	<ul style="list-style-type: none"> OQSESC Update Report: To address the inconsistency with Directorate Exception Reports being presented to OQSESC due to current challenges. 	SP/ MR	February 2023	The Chair of OQSESC will review the reporting arrangements for Exception Reports at the OQSESC meeting.
QSEC (22) 127	<ul style="list-style-type: none"> Strategic Safeguarding Working Group: To liaise with the Head of Safeguarding to ascertain the gap in demand and capacity and discuss whether the risks require corporate level escalation via the Risk Register and to raise the staffing capacity challenges with Executive Team. 	MR/ MND	February 2023	The Head of Safeguarding is preparing data/compliance data for the Director of Nursing, Quality and Patient Experience to share with Executive Team as soon as possible.

MR- Mandy Rayani

CSO- Katie Lewis

SP- Sian Passey

MND:Mandy Nichols Davies

AC: Andrew Carruthers

SD: Sharon Daniel

CS: Cathie Steele

LOC- Louise O'Connor

SA- Shaun Ayres