# Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD QUALITY, SAFETY AND EXPERIENCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	14 February 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Request for extension to written control documentation
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Executive Director of Nursing, Quality & Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Louise O'Connor, Assistant Director, Legal & Patient Experience

Pwrpas yr Adroddiad (dewiswch fel yn addas) Purpose of the Report (select as appropriate)	
Ar Gyfer Penderfyniad/For Decision	

## ADRODDIAD SCAA SBAR REPORT

### Sefyllfa / Situation

The Quality, Safety and Experience Committee (QSEC) is asked to approve extensions to the review dates of the following documents for three months, whilst awaiting further guidance/undertaking a review.

- 244 Being Open/Duty of Candour Guideline
- 018 Staff Attending Inquests/Court and Assisting Policy Investigation Guideline
- 063 Use of Patient and Carers Stories Guideline
- 307 Production of Patient and Carer Information Policy
- 004 Claims Management Policy

The QSEC is asked to approve extensions to the review dates of the following documents for six months, whilst a full review is undertaken of the process and authorisation for surveys:

568 – Production and Use of Surveys Guideline

### Cefndir / Background

It is imperative that Hywel Dda University Health Board (HDdUHB) has up to date and accurate written control documentation in order to comply with relevant legislation/regulations and minimise any associated risk.

#### Asesiad / Assessment

The extension date to each written control document has been determined by the lead officers and assurance has been provided by the lead authors that the documents remain fit for purpose during the extension period.

### **Argymhelliad / Recommendation**

For QSEC to approve the extension to the review dates for 6 months on the following documentation:

- 244 Being Open/Duty of Candour Guideline
- 018 Staff Attending Inquests/Court and Assisting Policy Investigation Guideline
- 063 Use of Patient and Carers Stories Guideline
- 307 Production of Patient and Carer Information Policy
- 004 Claims Management Policy

These policies have been updated in relation to recent guidance and will be presented to the Listening and Learning Sub-Committee in March 2023.

Amcanion: (rhaid cwblhau)	
Objectives: (must be completed) Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	QSEC - 3.22
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable.
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:		
Ar sail tystiolaeth: Evidence Base:	As detailed in each written control document	
Rhestr Termau: Glossary of Terms:	As detailed in each written control document	
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofiod: Parties / Committees consulted prior to Quality, Safety and Experience Committee:	Not applicable	

Effaith: (rhaid cwblhau)	
Impact: (must be completed) Ariannol / Gwerth am Arian:	
Financial / Service:	
Ansawdd / Gofal Claf:	
Quality / Patient Care:	
Quanty / I attent oare.	
Gweithlu:	
Workforce:	
Risg:	
Risk:	
TXISK:	
Cyfreithiol:	
Legal:	
· ·	
F Day	
Enw Da: Reputational:	
Reputational.	
Gyfrinachedd:	
Privacy:	
Cydraddoldeb:	Each written control document has its own EqIA. This will
Equality:	be fully reviewed was part of the process