

**TABLE OF ACTIONS FROM
QUALITY, SAFETY & EXPERIENCE COMMITTEE (QSEC) MEETING
HELD ON 5th OCTOBER 2021**

MINUTE REF	ACTION	LEAD	TIME SCALE	PROGRESS
QSEC (21)107	<p>Minutes and Matters Arising from the Meeting Held on 10th August 2021:</p> <p>Issues Impacting upon Radiology Services To provide further detail regarding the demand for the service - particularly out-of-hours demand – in the deep dive review of Radiology services which will be presented at the next QSEC meeting on 7th December 2021.</p>	AC/ KJ	23.11.2021	To be included as part of the deep dive review of Radiology services at the next QSEC meeting.
QSEC (21)108	<p>Table of Actions from QSEC Meeting held 10th August 2021 QSEC(21)84: Matters Arising: Timescales for the implementation of plans to manage Mental Health and Learning Disability (MHL) waiting lists – to share an update relating to planned timescales with Members</p> <p>To provide further detail regarding planned timescales and actions to address the patient backlog within MHL services and next stages in the development of solutions to enable demand and capacity analysis to be undertaken within the Directorate.</p>	AC	23.11.2021	To be included as part of the MH&LD Update Report on the next QSEC agenda
QSEC (21)110	<p>Strategic Log – Paediatric Risks To provide further detail to Members relating to high-cost maternity claims.</p>	LH	23.11.2021	Due to system challenges, the information will not be available for QSEC on 6 th December. The information will be prepared for QSEC, February 2022.

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QSEC (21)111	<p>Corporate Risks Assigned to QSEC</p> <p>To discuss a possible amendment to the Corporate Risk SBAR to incorporate some of the detail relating to risk mitigations which is included in the main report.</p>	MR/ JW	23.11.2021	Complete: Full details on controls in place and planned actions are included in the individual risks in the appendix attached to the SBAR, therefore it would be duplication to include it in the SBAR. The 'rationale for the current risk score', which is included in the SBAR, is extracted from Datix and this will generally not change unless the risk score has changed and it has been amended by the risk owner.
QSEC (21)112	<p>Ability to Deliver an Urgent Primary Care OOH Service</p> <p>To provide clarity with regard to the alignment of OOH planning with both QSEC and the Strategic Development & Operational Delivery Committee (SDODC).</p>	JW	23.11.2021	SDODC would consider the service aspects of OOH planning and QSEC the impact on quality and safety of any issues arising from OOH planning.
QSEC (21)114	<p>Quality and Safety Assurance Report</p> <p>To provide further detail relating to inpatient falls and to falls management measures in future Quality and Safety Assurance Reports.</p>	SPa	23.11.2021	Complete: included within the Quality and Safety Assurance Report to QSEC on 7 th December 2021.
QSEC (21)114	<p>Quality and Safety Assurance Report</p> <p>To include a deep dive review of inpatient falls on the Committee's work programme.</p>	SW		Complete: A deep dive of inpatient falls has been added to the Committee work programme – date to be confirmed.
QSEC (21)114	<p>Quality and Safety Assurance Report</p> <p>To obtain further data regarding the impact of the Hospital Acquired Thrombosis improvement plan.</p>	CS	23.11.2021	Complete: included within the Quality and Safety Assurance Report to QSEC on 7 th December 2021.

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QSEC (21)116	<p>OQSESC Update Report</p> <p>To work with the Assistant Director, Legal Services/ Patient Experience to arrange Listening and Learning Sub-Committee meeting dates for the remainder of 2021/22.</p>	MR/ LoC	23.11.2021	Complete: The meetings have been scheduled from December 2021 to the end of 2022.
QSEC (21)117	<p>Planning Objectives Update</p> <p>To follow up on the level of detail provided with regard to PO slippage in delivery, and the terminology relating to status included within the PO Update Report with the Director of Strategic Development and Operational Planning, and the Head of Planning.</p>	MR	23.11.2021	This has now been addressed with further detail in terms of the terminology relating to status included within the PO Update Report presented to QSEC on 7 th December 2021.
QSEC (21)117	<p>Planning Objectives Update</p> <p>To provide further clarity to Ms Anna Lewis relating to the process of aligning Objectives with Board Committees.</p>	JW	23.11.2021	<p>In terms of the newer assurance Committees of the Board, the People, Organisational Development & Culture Committee has been established to receive an assurance on, in general, all Planning Objectives falling under Strategic Objectives 1 (<i>Putting people at the heart of everything we do</i>), 2 (<i>Working together to be the best we can be</i>) and 3 (<i>Striving to deliver and develop excellent services</i>) as set out in HDdUHB's Annual Recovery Plan 2021/22.</p> <p>The Strategic Development and Operational Delivery Committee has</p>

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				<p>been established to receive an assurance on, in general, all Planning Objectives falling under Strategic Objective 4 (<i>The best health and wellbeing for our individuals, families and our communities</i>) and Strategic Objective 5 (<i>Safe, sustainable, accessible and kind care</i>), as set out in HDdUHB's Annual Recovery Plan 2021/22.</p> <p>The Sustainable Resources Committee has been established to receive an assurance on all Planning Objectives, in general, under Strategic Objective 6 (<i>Sustainable use of resources</i>), as set out in HDdUHB's Annual Recovery Plan 2021/22.</p> <p>Specific and measurable Planning Objectives to support these Strategic Objectives, with the aim of moving the organisation towards the horizon that HDdUHB is driving towards over the longer term, have been aligned to individual Committees of the Health Board to receive an assurance on the progress made in the development and delivery of these Planning Objectives.</p>