

## QUALITY SAFETY & EXPERIENCE COMMITTEE WORK SCHEDULE APRIL 2023 – MARCH 2024

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 2023 – March 2024.

AGENDA ITEM/ ISSUE	LEAD	RESPONSIBLE OFFICER	11 April 2023	13 June 2023	8 August 2023	5 October 2023	7 December 2023	13 February 2024
Governance								
Welcome and Apologies	Chair	All	~	~	~	~	~	~
Declarations of Interests	Chair	CSO	~	~	~	~	~	~
Minutes from Previous Meeting and Matters Arising not on Agenda	Chair	CSO	✓	~	~	✓	~	~
Table of Actions (ToA)	Chair	CSO	~	✓	~	~	✓	~
Annual Review of Terms of Reference (TORs)	Chair	CSO		$\checkmark$				
Annual Review of Sub Committees	Chair	CSO			~			
Approval of QSEC Self-Assessment Process	Chair	MR				$\checkmark$		
Outcome Report and Action Plan QSEC Self-Assessment Process	Chair	MR						~
Patient/Staff Story	MR		✓	~	~	~	~	~

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Policies for Approval (as required)	All	All		✓ 429 Management &Distribution of Safety Alerts and Notices Policy (CS)	<ul> <li>894 – PTR Policy (LOC) three yearly review minimal changes</li> <li>244 – Being Open/Duty of Candour Guideline full overdue review</li> </ul>	~	~	~
Planning Objectives Update Report				✓		✓		✓
3b – Healthcare Acquired Infection Delivery Plan Reporting frequency TBC								
Assurance								
Operational Group Updates – each group will present a report twice a year.	MR	SP/SD/PK/JPJ	√ IP&C	√ SG	✓ IPC include update on WHC airborne isolation requireme nt	✓ ECPAP MM	√ SG	✓ MM ECPAP

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Annual Report on Committee's Activity	AL/MR	All	~					
Annual Report on Sub-Committee's activity for incorporating into QSEC's Annual Report	MR	WO LOC		✓				
Presentation on revised governance arrangements	AC	JW		D	✓			
<ul> <li>Quality and Safety Assurance Report incorporating:</li> <li>External Monitoring Final Reports</li> <li>Nurse Staffing Levels (Wales) Act Updates (as required)</li> <li>Board to Floor Walkabouts</li> <li>EQliP outcomes</li> <li>IPC / C-Diff Updates</li> <li>C19 activity and Nosocomial Reviews</li> <li>Impact of industrial action</li> <li>Quality Engagement Act</li> </ul>	MR	SP/CS	√	*	V	V	~	✓
Nurse Staffing Levels (Wales) Act: Assurance Reports (as required) –Annual Report 2021/22	MR	СН			~			
Public Health Wales Plan and Operational Plan following Llwynhendy Tuberculosis Review	AG	AG		✓	Action plan review to be included on TOA		PHW Update on recommen dations	
Nursing Assurance Annual Audit	MR	MR				~		

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Staffing Position: Health Visiting Service	MR	BL	✓					
Epilepsy in Learning Disabilities Service Review	AC	ME		~				
Healthy Weight Health Wales Update	JM	CJ	~					
CAMHS Tier 4 Pathway Update	LC	AL			✓			
Therapies Services Waiting Times Improvement Trajectory	LR				✓			
Health And Social Care Quality Engagement Act Update	MR	CS/LOC	✓	~	~	~	~	✓
National Collaborative Commissioning Unit Quality Improvement Position	MR	MD	✓	✓				
National Collaborative update on national reviews	Shane Mills (Director of NCU)						✓	
Outcome of Self Assessment for Adult Inpatient Discharge Arrangements	AC	BTP		~		✓		
Evaluation Report Presentation on the Transperineal Biopsy Machine at Prince Philip Hospital	NLL				~			
Risks								
Corporate Risks Assigned to QSEC	MR	CW	~		✓		$\checkmark$	
Receive Sub-Committee Update Reports including Risk Register	MR	WO/LOC	~	✓	✓	~	×	✓
Cwm Seren : Impact of inpatient stay for people with Learning Disabilities	MR	LC/BTP			✓			

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Assessing and Prioritising Fragile Services	AC/MR			✓			~	
Report on Women's Rights Network report on rapes and sexual assaults in hospital	MR	MDN		~				
Deep Dive Reports as Required								
Clinical Audit Update	MR	MD/IB			✓			~
Commissioning for Quality Outcomes	AC	SA			*			
Update Report on Planning Objectives (PO)	EDs	MR/ DW		✓		~		✓
PO Deep Dive	MR	SD				✓		
For Information								
WHSCC QPS Joint Chairs Report			~	✓	✓	~	~	~
IQPD Minutes			~	✓	~	~	~	~
Work plan 2023/24			~	~	✓	~	~	~
Agenda setting meeting with Chair and Exec Lead to include discussion	CSO	CSO	~	✓	✓	~	~	✓

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on deep dives on new risks (at least 6 weeks before the meeting)								
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	~	~	~	~	~	$\checkmark$
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	~	✓	~	~	~	~
Prepare schedule of meetings QSEC Annual Work Programme	CSO CSO	CSO CSO	✓	✓	✓	✓	✓ ✓	✓

## <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 Edwards
AS – Alison Shakeshaft	PL – Phil Lloyd	JH – Jina Hawkes
PK – Philip Kloer	KJ – Keith Jones	JE – John Evans
JP – Jill Paterson	CS- Cathie Steele	DW- Daniel Warm
LG – Lisa Gostling	CH – Chris Hayes	BA- Bethan Andrews

## 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)