

## 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	✓	✓	✓	✓	<b>✓</b>	✓
Table of Actions (ToA)	Chair	cso	✓	✓	✓	✓	✓	✓
Annual Review of Terms of Reference (TORs)	Chair	cso		✓				
Annual Review of Sub Committees TORs	Chair	cso			<b>√</b>			
Approval of QSEC Self-Assessment Process	Chair	MR				<b>√</b>		
Outcome Report and Action Plan QSEC Self-Assessment Process	Chair	MR						<b>✓</b>
Patient/Staff Story	MR		<b>✓</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>√</b>

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Policies for Approval (as required)	AII	AII	244 – Being Open/Duty of Candour Guideline full overdue review	894 – PTR Policy (Cathie Steele) three yearly review minimal changes    429  Management &Distribution of Safety Alerts and Notices Policy (CS)	<b>√</b>	<b>√</b>	✓	<b>√</b>
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		<b>√</b>				
<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>EQuIP outcomes</li> <li>IPC / C-Diff Updates</li> <li>C19 activity and Nosocomial Reviews</li> <li>Impact of industrial action</li> </ul>	MR	SP/CS	<b>√</b>	✓	<b>✓</b>	<b>√</b>	✓	✓
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	JM	JM		<b>✓</b>				
Nursing Assurance Annual Audit	MR	MR			✓			
Staffing Position: Health Visiting Service	MR	BL	✓					

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Epilepsy in Learning Disabilities Service Review	AC	ME		✓				
Healthy Weight Health Wales Update	JM	CJ	✓					
CAMHS Tier 4 Pathway Update	LC	AL			<b>✓</b>			
Therapies Services Waiting Times Improvement Trajectory	LR				✓			
Health And Social Care Quality Engagement Act Update			<b>√</b>	<b>√</b>	<b>√</b>	✓	<b>√</b>	✓
National Collaborative Commissioning Unit Quality Improvement Position	MR		✓	<b>✓</b>				
Outcome of Self Assessment for Adult Inpatient Discharge Arrangements	ВТР			<b>√</b>				
Risks								
Corporate Risks Assigned to QSEC	MR	cw	<b>√</b>		<b>√</b>		<b>√</b>	
Receive Sub-Committee Update Reports including Risk Register	MR	WO/LOC	<b>√</b>	<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>
Cwm Seren : Impact of inpatient stay for people with Learning Disabilities	MR	LC/BTP			<b>√</b>			
Assessing and Prioritising Fragile Services	AC/MR			<b>√</b>				
Report on Women's Rights Network report on rapes and sexual assaults in hospital	MR	MDN						
Deep Dive Reports as Required								

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Clinical Audit Update	MD	IB			<b>✓</b>			✓
Commissioning for Quality Outcomes	AC	SA			<b>✓</b>			
Update Report on Planning Objectives (PO)	EDs	MR/ DW		<b>✓</b>		✓		✓
PO Deep Dive	MR	SD				✓		
For Information								
WHSCC QPS Joint Chairs Report			✓	✓	✓	✓	✓	✓
Work plan 2023/24			✓	✓	✓	✓	✓	✓
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	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>✓</b>	✓
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	<b>√</b>	✓	✓	<b>√</b>	<b>✓</b>	<b>√</b>
Disseminate agenda and papers 7 days prior to the meeting	cso	cso	✓	✓	✓	✓	✓	✓
Type up minutes and TOA within 7	CSO	CSO	✓	✓	✓	✓	✓	✓

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days of the meeting								
Circulate minutes and TOA to Committee for comments, points of accuracy and matters arising within 10 days of the meeting	cso	cso	<b>√</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>√</b>
Check and send final version of minutes to the Committee Chair following comments received.	cso	cso	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>✓</b>
Chase updates on TOA before the next meeting and RAG rate	cso	cso	<b>✓</b>	✓	✓	✓	✓	✓
Record and track the TOA as part of the decision tracker	cso	cso	<b>✓</b>	✓	✓	✓	✓	✓
Produce written update report for QSEC and Board	cso	cso	✓	✓	✓	✓	✓	✓
Prepare schedule of meetings	CSO	CSO					✓	
QSEC Annual Work Programme	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-CommitteeListening 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)