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**Confirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
18 May 2022, 09:30
Held via Microsoft Teams**

Present:		
Kate Eden	(KE)	Committee Chair, Vice Chair of the Board, and Non-Executive Director
Diane Crone	(DC)	Non-Executive Director (University)
Sian Griffiths	(SG)	Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee
In Attendance:		
Rhiannon Beaumont-Wood	(RBW)	Executive Director of Quality, Nursing and Allied Health Professionals
Liz Blayney	(LB)	Deputy Board Secretary and Board Governance Manager
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru (<i>left the meeting 10:30 – 11am</i>)
Helen Bushell	(HB)	Board Secretary and Head of Board Business Unit
Beverly Gregory	(BG)	Consultant Nurse (for items 4.6 and 5.1)
Mark Griffiths	(MG)	Lead for Innovation, Improvement Cymru (for item 3)
Felicity Hamer	(FH)	Head of Strategy and Innovation, Improvement Cymru (for item 3)
Sharon Hillier		Director Screening Division (for item 4.7)
Wayne Jepson	(WP)	Programme Lead / Improvement Advisor
Andrew Jones	(AJ)	Deputy Director of Health Protection and Screening Services, Executive Team
Donna Newell	(DN)	Named Safeguarding Lead (for item 5.2)
Olusola Okhiria	(OO)	Trade Union representative
Chris Orr	(CO)	Head of Estates and Health and Safety/ General Manager Operations and Finance (for item 5.3)
Margaret Rennocks	(MR)	Academy Lead, Improvement Cymru (for item 3)

Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Christopher Thomas	(CT)	Governance and General Manager
Francesca Thomas	(FT)	Head of Putting Things Right (for item 4.2)
Sarah Thomas	(ST)	Health Inspectorate Wales Representative
Caroline Whittaker	(CW)	Lead Nurse and Corporate Standards (for item 4.4)
Stephanie Wilkins	(SW)	Trade Union representative

Apologies

Tracey Cooper	(TC)	Chief Executive Officer
Meng Khaw	(MK)	National Director of Health Protection and Screening Services, Executive Medical Director
Jan Williams	(JW)	Chair of the Board

The meeting commenced at 10:00

QSIK 1/2022.05.18 Welcome, Introductions and apologies

The Chair opened the meeting and welcomed all present, and noted that due to the ongoing response to the COVID-19 pandemic and in respect of the national guidance in place, meetings were being held electronically.

The Committee **noted** the apologies above.

The Committee **noted** that the meeting was being recorded to support the accuracy of the minutes, the recording would be deleted when the minutes had been agreed at the following meeting.

QSIK 2/2022.05.18 Declarations of Interest

There were no declarations of interest in addition to those already declared on the Declarations of Interest register.

QSIK 3/2022.05.18 Deep Dive - Public Health Wales' Innovation and Improvement Hub

The Committee received the report on the Public Health Wales' Innovation and Improvement Hub (I&I).

JB provided a presentation of the key areas, highlighting the following:

- I&I hub would support Public Health Wales with a defined and strategic approach to building capacity and capability for sustainable continuous improvement and innovation;
- Review of the available evidence and a review of literature had informed the development of the I&I hub;
- A key component was to support our staff to develop improvement and innovation capability and implement their ideas;

- Themes for the staff engagement: Culture, Sharing Learning, Upskilling staff and delivery of innovations and improvements in Public Health Wales;
- Current priorities focused on: recruiting, and building the capability, and agreeing the governance around the hub before the improvement work began.
- Ambitious objectives and aims for the first year. Quarterly updates for assurance on progress would be provided to the Quality, Safety and Improvement Committee.

The Committee considered:

- The challenge of improving public health outcomes in the longer term.
- Suggestion to consider external approaches to quality, for example International Association of National Public Health Institutes (IANPHI);
- Encouraged to consider engagement with our networks, particularly primary care;
- Discussion on the implementation, and the importance of embedding an improvement approach at all levels to be effective, at high level, middle managers and through the Champions. This included ensuring the appropriate support was provided, as well as helping front line staff;
- Links to the implementation of the new CIVICA digital feedback, and proactive feedback across all elements of Public Health Wales;
- The importance of ensuring that this included Service User feedback.
- Discussion on the timescales and how we would see improvements and the impact of the work.

KE thanked the team for the informative presentation, and for the work undertaken, and noted the Committee would be considering quarterly progress updates throughout the year.

The Committee took **assurance** on the progress of the Innovation & Improvement hub.

KE noted the implications of the work on quality within the organisation and the role of the Committee. It was agreed that further discussion was required on the implications for the Committee, including how information would be received, and how assurance would be provided.

Action: HB/RB-W/JB

KE also noted that the Committee had a demonstration on the CIVICA system for Service User Engagement scheduled for the July Committee meeting.

QSIC 4/2022.05.18

Items for Assurance

QSIC 4.1/2022.05.18

Managing Risk

The Committee received a verbal update from RB-W in relation to the management of risk.

RBW commented that subject to Board approval of six strategic risks for Public Health Wales on 27 May 2022, it was proposed that the Committee would have oversight of the actions related to Strategic Risks 1 and 2.

RB-W advised that the Board had considered its risk appetite against the strategic themes of the IMTP at the last Board Development session, and next steps would be a review of the Corporate Risk Register upon approval of the updated Strategic Risks. RBW reflected that that the Committee would likely have oversight Corporate Risks related to Diabetic Eye Screening Wales and broader risks related to the Quality Act.

The Committee noted the verbal update provided.

QSIC 4.2/2022.05.18

Putting Things Right Report (Quarter 4, including National Reportable Incidents)

In introducing the report, FT presented the Quality Dashboard extract of the Performance Assurance Dashboard, highlighting the following:

- The increased number of concerns related to Cervical Screening. It was emphasised that the Board would consider the incident and next steps at the next Board meeting. AJ highlighted that lessons learnt around communication had been shared across the division and wider organisation;
- Two concerns related to the WHO Collaborating Centre weekly survey and Welsh language and how this was being taken forward. The Committee reflected on the discussion of risk appetite earlier on in the Committee in relation to greater engagement with the public and potential consequences;
- An update on the implementation of the new concerns management system Datix Cloud and efforts underway to refine the dashboard.

The Committee took **assurance** on the effective management of Putting Things Right.

QSIC 4.3/2022.05.18

Arrangements for Medical Devices Management

The Committee received a verbal update from SS on the arrangements for Medical Devices Management.

The Committee reflected on the arrangements in place that meant MK and his directorate would retain the management and governance of Medical Devices, whilst RB-W and directorate would be responsible for assessing compliance and procedures with impartiality. The Committee noted the Corporate Medical Device Register and the work-plan of the newly formed Medical Devices Management Group.

QSIC 4.4/2022.05.18 Health and Care Standards

In introducing the report, CW provided historical background on the Health and Care Standards, and went on to highlight the proposed future direction of Health and Care Standards.

The Committee thanked CW for the comprehensive update and noted the key pieces of improvement work and objectives for Directorates as necessary.

The Committee took **assurance** that the Health and Care Standards process had been completed for 2021-22 and that the overall organisational position was at level four.

SW reflected on the directorate title which focused on Health Protection and Screening Services. AJ noted that the new directorate title reflected MK's title as National Director, Health Protection and Screening Services but he would bring this observation to the attention of MK and colleagues.

QSIC 4.5/2022.05.18 Break**QSIC 4.6/2022.05.18 Internal Influenza Vaccination Campaign 2021-22**

In introducing the report, BG outlined the delivery of the flu vaccination, the challenges experienced and next delivery steps for 2022-23.

The Committee considered:

- The need for an early decision to understand the totality of the 2022-23 campaign plan and the potential for vaccination of the Covid-19 booster and Influenza vaccine at the same appointment ;
- The low uptake figures and low awareness of the flu vaccination respectively and explored ways to improve these during 2022-23, whilst recognising the balance between raising awareness and perception of harassment. It was noted that there was a need to maintain a specific focus on those staff that were actually direct patient contact/ facing - as patient safety was a prime purpose for staff vaccination.

The Chair thanked BG for her efforts during the Influenza Vaccination Campaign and requested that plan for 2022-23 be brought back for consideration prior to the start of the next Campaign.

Action: RB-W/LB

The Committee took **assurance** on the internal uptake of influenza vaccinations.

QSIC 4.7/2022.05.18 Update on recovery of the screening programmes due to impact of the pandemic

SH introduced the report by advising that Bowel Screening Wales and the Cervical Screening Wales Programme had been recovered as planned. SH went on to outline the overall planned approach to recover Breast Test Wales, Wales Abdominal Aortic Aneurysm Screening and Diabetic Eye Screening Wales. These included increasing staffing, screening venues and replacement of equipment. SH noted the transformational programme being put in place to try to recover Diabetic Eye Screening Wales.

The Committee considered:

- The work underway of the Optometry review;
- SW queried the work underway to ensure staff wellbeing, that there were appropriate public transport links for the new facility in Mountain Ash, and a suggestion to update the equality impact assessment. SH thanked SW for the above points and went on to outline the approach to staff wellbeing such as increased staffing, confirmed that there were appropriate transport links for the new facility in Mountain Ash, and that they were updating the inequalities strategy;
- RB-W was pleased to note the availability of weekend appointments, which had been highlighted by the Chief Nursing Officer during Joint Executive Team Meeting reviews in previous years;
- That Iain Bell, National Director Knowledge, Research and Information aimed to improve organisational work around the capture of data sets and metrics of people with particular protected characteristics in order to identify any inequalities.

The Committee thanked SH and the Screening Services team for their efforts to fully recover Bowel Screening Wales and Cervical Screening Wales programmes, and noted the optimisation of the Bowel screening service.

The Committee:

- Took **assurance** that the recovery of the screening programmes was progressing as promptly as possible.
- **Supported** the approach outlined to recover the remaining programmes.

QSIC 4.8/2022.05.18

**Emergency Planning and Business
Continuity Welsh Government Emergency
Planning Report 2021**

AJ presented the Emergency Planning and Business Continuity Welsh Government Emergency Planning Report for 2021.

The Committee were pleased to note the additional resources that would enable improvement works to be taken forward.

The Committee thanked AJ for his presentation, and took **assurance** in relation to the organisations compliance with the requirements of the Civil Contingencies Act [2004] and the NHS Wales Emergency Planning Core Guidance [2015].

QSIC 4.9/2022.05.18	Policies and Procedures: Bi-annual Policy Update
<p>LB introduced the report on Bi-annual Register of Policies and Written Control Documents Updates.</p> <p>The Committee considered the plan to update the 18 policies and procedures under the Committee's remit there were due for review, noting that the majority presented low risks.</p> <p>The Committee took assurance on the prioritisation and progress being made to review Quality, Safety and Improvement policies, procedures and other written control documents.</p>	
QSIC 5/2022.05.18	Items for Approval
QSIC 5.1/2022.05.18	Infection, Prevention and Control (IPC) : Annual Report 2021/2022
<p>BG presented the Infection, Prevention and Control (IP&C): Annual Report 2021/2022.</p> <p>The Committee considered:</p> <ul style="list-style-type: none"> - The highlighted the key achievements for 2021/22 and priorities for 2022/23; - And welcomed the start of a new IP&C Corporate Lead in July 2022; - That a paper was being drawn up to ensure a process was in place to address nosocomial transmission. <p>The Committee thanked BG for the presentation and took assurance on the Infection Prevention and Control Annual report 2021/22.</p>	
QSIC 5.2/2022.05.18	Safeguarding: Annual Report 2021/2022
<p>DP presented the Safeguarding Annual Report 2021/2022.</p> <p>The Committee considered:</p> <ul style="list-style-type: none"> - The key achievements throughout 2021/22 and planned improvements to safeguarding across the organisation; - The identification of DC as Lead Non-Executive Director for Children and young persons' services and her invitation to join the safeguarding group. DC expressed her willingness to join the group and RBW agreed to arrange. <p>Action: DP/RB-W</p> <p>The Committee thanked DP for the presentation and took assurance on the Safeguarding Annual Report 2021/2022.</p>	
QSIC 5.3/2022.05.18	Health and Safety

QSIC 5.3.1/2022.05.18	Health and Safety Report Quarter 4, 2021-22	
<p>CO introduced the Health and Safety report for Quarter 4, 2021/22.</p> <p>The Committee considered:</p> <ul style="list-style-type: none"> - That due to the focus on reducing the risk of COVID-19 throughout the year, an annual report had not been produced this year but one would be produced for 2022/23; - The static figure of mandatory training across the organisation. <p>The Committee took assurance that appropriate measures were in place to monitor compliance and to address areas identified for improvement.</p>		
QSIC 5.3.2/2022.05.18	Health and Safety Group Terms of Reference	
<p>The Committee received and approved the Health and Safety Group Terms of Reference (ref 5.3b QSIC 2022_05_18).</p>		
QSIC5.3.3/2022.05.18	Health and Safety Group Work-plan 2022/23	
<p>The Committee received and approved the Health and Safety Group Workplan 2022-23 (ref 5.3c QSIC 2022_05_18).</p>		
QSIC 5.4/2022.05.18	Minutes, Action Log and Matters Arising of the meeting	
<p>The Committee:</p> <ul style="list-style-type: none"> - Approved the minutes of the meeting held on 15 February 2022 as a true and accurate records of the meeting; - Approved the closure of four actions on the action log; - Noted no matters arising. 		
QSIC 6/2022.05.18	For Recommendation to Board	
QSIC 6.1/2022.05.18	Committee Annual Report 2021/22	
<p>The Committee considered the Quality, Safety and Improvement Committee Annual Report for 2021/22, which summarised the key areas of business activity undertaken.</p> <p>The Committee approved the draft report for submission to Board at its meeting on 26 May 2022, for assurance that the Quality, Safety and Improvement Committee was fit for purpose and operating effectively in fulfilling its terms of reference.</p>		
QSIC 6.2/2022.05.18	Annual Review of Committee Effectiveness	
<p>In introducing the presentation, LB commented on the recently completed, comprehensive Committee Performance and effectiveness review for 2021/22. LB outlined key themes that arose from the workshop across the broad range of the Committees, along with specific elements from the Quality,</p>		
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Safety and Improvement Committee. LB concluded the presentation by defining the next steps and the plan to reflect the Committee's feedback in the workplan for 2022/23.

The Committee considered the importance of including service user engagement and experience, including how we capture the voice of young people and engage with the Public Health Wales Young Ambassadors. The Committee considered the importance of maintaining a flexible and nimble approach in the way the Committee continued to operate in response to the quality strategy and the service user engagement work, in addition to the Organisational Strategy and Plan.

QSIC 6.3/2022.05.18	Committee Terms of Reference
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The Committee recommended for approval to Board, the Quality, Safety and Improvement Committee Terms of Reference, noting that these would likely be reviewed again in-year.

QSIC 7/2022.05.18	Items to Note
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QSIC 7.1/2022.05.18	Committee Work Plan 2022/23
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The Committee **noted** the Committees' Work Plan for 2022/23.

QSIC 7.2/2022.05.18	Internal Audit Report- Stock Management
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The Committee noted the Internal Audit Report- Stock management.

QSIC 7.3/2022.05.18	Annual Quality Statement - approach to Annual Report 2021/2022
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The Committee noted the Annual Quality Statement - approach to Annual Report 2021/2022.

QSIC 7.4/2022.05.18	Alerts Report Quarter 4
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The Committee noted the Alerts Report Quarter 4.

QSIC 7.5/2022.05.18	Governance and Committee Oversight of audit 2022/23
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The Committee noted the Governance and Committee Oversight of audit 2022/23.

QSIC 7.6/2022.05.18	Committee Feedback
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Committee members discussed the potential for roving Committee meetings and in person meetings.

The Committee noted that additional feedback on the meeting would be sought via email.

The Committee noted that the next meeting would be held on 20 July 2022.

The open session closed at 12:45

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