

 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p> Name of Meeting Quality, Safety and Improvement Committee </p> <p> Date of Meeting 25 November 2024 </p> <p> Agenda item: 4.6 </p>
--	--

<h2 style="text-align: center;">Bi-annual Corporate Policies and Procedures Update</h2>	
Executive lead:	Paul Veysey, Board Secretary and Head of Board Business Unit
Author:	Liz Blayney, Deputy Board Secretary and Deputy Head of Board Business Unit

Approval/Scrutiny route:	Liz Blayney, Deputy Board Secretary and Deputy Head of Board Business Unit
---------------------------------	--

<p>Purpose</p> <p>The report provides the Quality, Safety and Improvement Committee with an update on the status of the policies, procedures and other written control documents for which it is the approving body.</p> <p>Appendix 1 is an extract taken from the Corporate Policy, Procedures and Other Written Control Documents register and shows the status of documents as of 13 November 2024.</p>

Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Quality, Safety and Improvement Committee is asked to:</p> <ul style="list-style-type: none"> Take assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee. 				
<p>Link to Public Health Wales Strategic Plan</p> <p>Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.</p>				



This report contributes to the following:	
Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives
Strategic Priority/Well-being Objective	Choose an item.
Strategic Priority/Well-being Objective	Choose an item.

Summary impact analysis	
Equality and Health Impact Assessment	An Equality and Health Impact Assessment is not required in support of this report. An impact assessment should be undertaken for each of the respective policies when they are developed or reviewed.
Risk and Assurance	A risk assessment has been undertaken for each policy which has passed its review date. These are captured in the accompanying register (see Appendix 1) and a summary is detailed below.
Health and Social Care (Quality and Engagement) (Wales) Act	Corporate Policies and Procedures support the implementation of the act ensuring its embedded into our processes.
Financial implications	N/A
People implications	N/A

1. Purpose / situation

The report provides the Quality, Safety and Improvement Committee with an update on the status of the policies, procedures and other written control documents for which it is the approving body. The Committee last considered an update at its meeting on 20 May 2024.

Appendix 1 is an extract taken from the Corporate Policy, Procedures and Other Written Control Documents register and shows the status of documents as of 13 November 2024.

2. Background

The Board approved a new organisation-wide Policy and Written Control Documents Policy and Procedure in July 2022. All new/revised documents are now developed and approved in accordance with the provisions and processes set out in these documents.

The procedure specifies that the Register will be reported annually to the Board, and the relevant sections reported to Board committees Bi-Annually. This report provides the Committee with assurance that required policies, procedures and other written control documents are being developed and maintained and that progress is being made to review and update policies that have passed their review date.

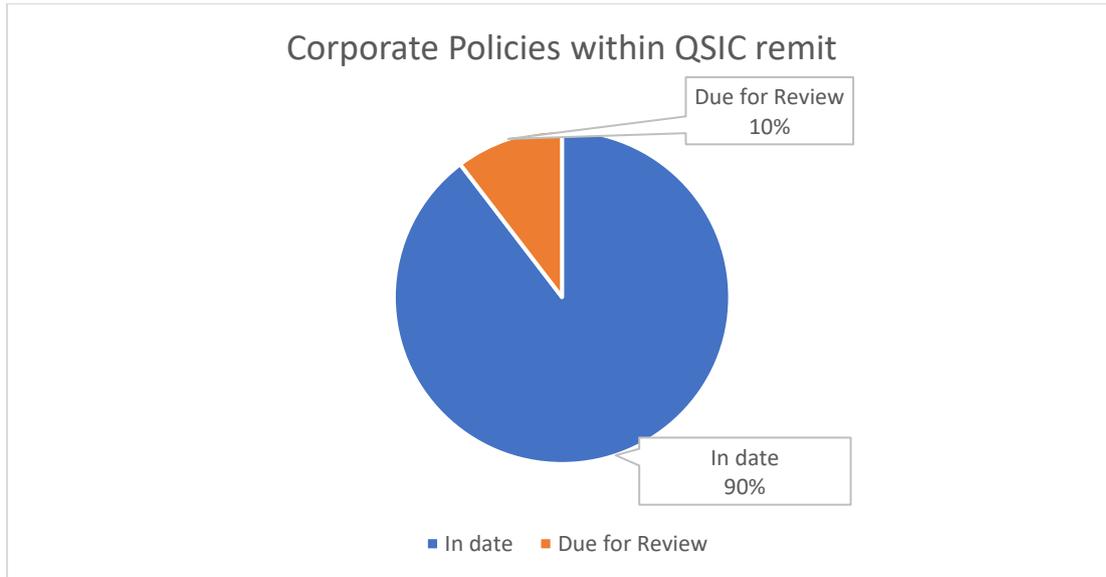
The Leadership Team considers a compliance report on a quarterly basis for ongoing monitoring and management of the main policy register. The Leadership Team last considered an update at its meeting on 17 October 2024.

3. Description/Assessment

3.1 Status of policies and other written control documents

There are 29 policies on the policy register, which were approved by the Quality, Safety and Improvement Committee (QSIC) or have been delegated to the Committee by the Board.

As of 13 November 2024, 26 (90%) policies/procedures are in date and 3 policies are overdue for review (10%). Of the 3 policies that are currently out of date, 2 are expected to be issued for the Committee's approval at its next meeting and 1 is pending a review on an All Wales basis.



The Committee is asked to note that all of the overdue policies are rated as ‘low risk’ to the organisation. All of the existing policies will remain current pending development of the documents.

Executive colleagues responsible for the policies due for review are aware and taking active steps to ensure policies/procedures are reviewed and appropriate approval sought.

Work is ongoing to review the overall policy list with each lead to review the number of policies on the register and look to reduce and combine where possible.

In summary the following table provides a list of the policies and procedures that are past their due date, along with the date that these are scheduled to be approved following review. A full update on the review underway is given in **appendix 1**.

Title	Lead	Risk Assessment (Low/Medium/High)	Expected date of Committee approval
Outbreak Management Policy <i>(Became due for review 11.11.24)</i>	Executive Director Quality and Nursing	Low risk presented	04 February 2025
Uniform / Dress Code Policy		Low risk presented	10 June 2025 (Depending on release date of the All Wales Policy)
Waste Management Policy	Deputy Chief Executive and	Low risk presented	04 February 2025

	Executive Director of Finance and Operations		
--	--	--	--

3.3 Well-being of Future Generations (Wales) Act 2015



Organisational policies, procedures and written control documents provide the organisation with long-term controls for risks.



Organisational policies, procedures and written control documents provide staff within instruction and guidance, to prevent non-compliance.



A number of policies, procedures and written control documents are interdependent with one another. Content is cross-referenced and integrated as appropriate.



All policies, procedures and written control documents (and associated EHIA's) are developed on a collaborative basis.



During development and review policies and written control documents are made available to Public Health Wales staff so that they can provide comment for consideration

4. Recommendation

The Quality, Safety and Improvement Committee is asked to:

- Take **assurance** on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee.