

**Unconfirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
26 August 2025, 15:30 – 16:00
Held in Capital Quarter 2 and via Microsoft Teams**

Present:		
Clare Jenkins	(CJ)	Chair of Committee, Vice-Chair of Board and Non-Executive Director
Nick Elliott	(NE)	Non-Executive Director
In Attendance:		
Claire Birchall	(CB)	Executive Director of Nursing, Quality and Integrated Governance
Liz Blayney	(LB)	Deputy Board Secretary and Deputy Head of the Board Business Unit
Tracey Cooper	(TC)	Chief Executive
Angela Cook	(AC)	Assistant Director of Quality and Nursing
Tom Fowler	(TF)	Deputy National Director of Health Protection and Screening Services
Meng Khaw	(MK)	National Director of Health Protection and Screening Services, Executive Medical Director
Jim McManus	(JM)	National Director of Health and Wellbeing
Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Apologies		
Pippa Britton	(PB)	Chair of Board
Olusola Okhiria	(OO)	Trade Union representative
Sophie Fuller	(SF)	Assistant Director Corporate Governance and Business Support, NHS Executive
Sian Griffiths	(SG)	Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee
Angela Williams	(AW)	Interim Executive Director of Operations and Finance
<i>The meeting commenced at 15:30</i>		

Part A	
QSIC 2025.08.26/1	Welcome, Introductions and Apologies
<p>The Chair welcomed all to the public session of the Quality, Safety and Improvement Committee meeting.</p> <p>Noting recent changes to the Committee membership, CJ welcomed NE to the meeting and acknowledged and thanked Kate Young in her absence for her previous support and contributions to the Committee.</p> <p>The apologies for absence were noted.</p>	

QSIC 2025.08.26/2	Declaration of Interest
<p>There were no declarations of interest in addition to those already declared on the Declarations of Interest Register.</p>	
QSIC 2025.08.26/3	Items for Approval
QSIC 2025.08.26/3.1	Duty of Quality Annual Report 2024/25
<p>CB introduced the Duty of Quality annual report, thanking everyone across the Organisation for their commitment and contribution to the development of the report, which was developed to meet Duty of Quality requirements. The report aimed to celebrate the Organisation’s achievements within healthcare standards and identify areas requiring further work and improvement. CB concluded the introduction by thanking AC, her team and Hilary Wilderspin for their support in assembling the report.</p> <p>AC went on to provide an overview of the reports structure, which centred around the 12 quality standards, and outlined background information, the current situation, service contributions, and next steps. The report aimed to showcase both ongoing work from last year and new initiatives started this year, with ambitions and achievements summarised for the past 12 months.</p> <p>CB went on to request the Committee’s feedback and approval of the report, noting the intention to translate and publish the annual report as a patient and public facing document which would be presented to the Board at its September meeting.</p> <p>The Committee:</p> <ul style="list-style-type: none"> • Thanked CB and AC for the presentation of the report. • NE welcomed the opportunity to return to the Committee and praised the quality of the report. • NE queried why the Performance and Improvement (P&I) Unit were mentioned in isolation and not referenced elsewhere. CB advised that the P&I Unit were formerly the NHS Executive and agreed to reference this throughout the report. CB also clarified that there was no requirement for the P&I Unit to produce their own report. • NE provided a number of detailed observations about the report, including: the visual layout of the workforce section; the need for consistent measurement of improvements and the contextualisation of statistics within the areas of risk and the Health Protection and Screening Service areas; the wording around waiting times; the context for digital image sharing and Artificial Intelligence (AI); the evidence for the 1st 1000 days return; and the need for population context in MMR vaccine numbers. • CB thanked NE for his feedback on the reports layout and data presentation and agreed to review and strengthen the improvement data, clarify the wording around waiting times and add in further detail around AI and appropriate sharing/Information Governance. • Addressing the other points raised, CB agreed to follow up with MK around the Health Protection and Screening Service areas raised, and with JM to address the evidence base for 1000 days. 	

- Responding specifically to NE’s question on whether there was a measurable impact of reducing the fail safe netting system to 11 days within the Newborn blood spot screening, MK advised that the rational was clear within the background section and that actual impact may not be demonstratable due to the small numbers involved.
- TC thanked NE for his helpful comments and feedback, and expressed appreciation to CB, AC and the team, as well as everyone involved, highlighting that the report felt even more personal for people this year as they captured the Organisations history and narrative and that the report highlighted the strong display of the breadth and quality of the work of the Organisation.

The Chair expressed strong support for the report, emphasising that the report served as a “front window” to the organisation, showcasing both achievements and a robust level of assurance of how quality is managed and measured.

The committee **approved** the draft annual quality report, subject to CB reviewing and addressing the specific feedback and suggestions raised during the meeting with the relevant wider teams.

QSIC 2025.08.26/4	Closing Administration
QSIC 2025.08.26/4.1	Close of Public Meeting
Date of next meeting: 29 September 2025.	
The Chair closed the meeting.	
<i>The open session closed at 15:50</i>	

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