

 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p> Name of Meeting Quality, Safety and Improvement Committee Date of Meeting 29th September 2025 Agenda item: 8 </p>
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NHS Wales Performance and Improvement – Quality, Safety and Improvement Committee (QSIC) Quarterly Assurance Report (1)

<p>Report Sponsors:</p>	<p>Claire Green, National Director of Financial Planning & Delivery and Responsible Officer Iain Hardcastle, National Director of Networks and Planning</p>
<p>Report Author:</p>	<p>Louise Cooke, Corporate Governance Support Manager</p>
<p>Approval/Scrutiny route:</p>	<p>Approval/scrutiny for NHS Wales Performance and Improvement is via the Senior Leadership Team (SLT). This report was approved at the Monthly Business Meeting on 10/07/25. Business Executive Team – 20/08/25</p>

Purpose

The purpose of this report is to provide a quarterly assurance report to the Quality, Safety and Improvement Committee, on the relevant governance compliance areas as outlined in the NHS Wales Performance and Improvement Assurance Schedule 2025-26.

This report covers the period 1 April 2025 to 30 June 2025 and provides assurance on the following areas.

- Health and Safety Compliance
- National Reportable Incident Reporting compliance
- Complaints (including PTR if applicable) compliance
- Claims reporting
- DATIX compliance
- Safeguarding compliance



Recommendation:				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	ASSURANCE <input checked="" type="checkbox"/>
<p>The Committee is asked to:</p> <p>Health and Safety</p> <ul style="list-style-type: none"> • Take assurance that the NHS P&I has appropriate measures are in place to monitor compliance and to address areas identified for improvement. <p>National Reportable Incident Reporting compliance</p> <ul style="list-style-type: none"> • Note there have been no reportable incidents to report. <p>Complaints (including PTR if applicable) compliance</p> <ul style="list-style-type: none"> • There have been no complaints received for this period to report to Committee. <p>Claims reporting (staff and third-party claims)</p> <ul style="list-style-type: none"> • Note 1 claim received this period and take assurance that Claims within the NHS P&I are being appropriate managed. <p>DATIX compliance</p> <ul style="list-style-type: none"> • Note seven incidents reported on Datix for this period and take assurance that the appropriate process has been followed within NHS P&I to manage these incidents. <p>Safeguarding compliance</p> <ul style="list-style-type: none"> • Note there have been no safeguarding issues reported for this period to report to Committee. 				
<p>Link to Public Health Wales Strategic Plan</p> <p>Public Health Wales is the Host Organisation for the NHS Wales Performance and Improvement ('the Hosted Unit'). The <i>Hosting Agreement ('the Agreement')</i> between <i>Public Health Wales (PHW) NHS Trust and The Welsh Ministers</i> was approved by the PHW Board on 26th January 2023 and took effect from the launch of NHS Wales Performance and Improvement on 1st April 2023.</p> <p>The Agreement remains extant and, to take account of variations to the Agreement, an Addendum was approved by the PHW Board on 28th March 2024.</p> <p>Public Health Wales is not responsible or accountable for setting the direction for, or the work programme of, the Hosted Unit or for the delivery/quality or management of work undertaken by the Hosted Unit on behalf of Welsh Government.</p>				

Summary impact analysis	
Equality and Health Impact Assessment	A specific Equality and Health Impact Assessment (EHIA) is not required to support of this report.
Risk and Assurance	This report provides assurance on the implementation of the relevant policy and Procedures within the NHS Wales P&I, ensuring good governance is maintained.



Health and Social Care (Quality and Engagement) (Wales) Act	This paper supports the Quality themes.
Financial implications	There are no financial implications as a result of this report.
People implications	There are no people implications as a result of this report.

1. Purpose / situation

The purpose of this report is to provide a quarterly assurance report to the Audit and Corporate Governance Committee, on the relevant governance compliance areas as outlined in the NHS P&I Assurance Map.

This report covers the period 1 April 2025 to 30 June 2025 and provides assurance on the following areas.

- Health and Safety Compliance
- National Reportable Incident Reporting compliance
- Complaints (including PTR if applicable) compliance
- Claims reporting
- DATIX compliance
- Safeguarding compliance

The sections below provide a summary of the current status for the areas listed above.

2. Health and Safety

As a Hosted Unit, NHS Wales Performance and Improvement (NHS P&I) operates within appropriate policies established by PHW in support of legislative compliance, and this includes legislation relating to health and safety.

The annual statement of compliance was completed for 2024-25 by the Responsible Officer (RO) for NHS P&I and submitted to PHW at the end of April, in support of the RO, all other SLT Directors complete individual compliance statements for their respective areas. Also, all SLT Directors receive an annual accountability letter from the Deputy Chief Executive of NHS Wales, which includes the requirement to discharge respective responsibilities under the hosting agreement.

During the reporting period there were three health and safety matters recorded as incidents on Datix. Two were related to accident and injury with one reported by PHW under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) and one requiring no further action. One related to fire alarm testing and remedial action is in hand.

PHW provided advice on the new tenant operating out of the ground floor at River House and the related structural changes. There was an outstanding issue with the fire alarm that has been remedied.



Compliance with statutory and mandatory training is reported monthly to the SLT, within a broader People and OD Report provided by PHW POD colleagues. As of **2 July 2025**, compliance for health and safety and related themes was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
Fire Safety - 2 Years	480	480	445	92.71%
Health, Safety and Welfare - 3 Years	480	480	459	95.63%
Moving and Handling - Level 1 - 2 Years	480	480	445	92.71%

In addition to the health and safety modules accessed via ESR and reported via the monthly POD report (as above), arrangements have been made to provide access for staff to the '*Health and Safety for Homeworkers*' training module. With the support of the PHW Health & Safety Advisor, this is being managed with individual divisions to validate staff details and to monitor compliance. A new Induction Working Group will be standardising the approach to new starters across the division which will include this module.

3. National Reportable Incident Reporting compliance

The reporting arrangements outlined in Section 2, apply.

There have been no Nationally reportable incidents reported for this period.

4. Complaints (including PTR if applicable) compliance

The reporting arrangements outlined in Section 2, apply.

There have been no complaints reported for this period.

5. Claims reporting

The reporting arrangements outlined in Section 2, apply. There was one claim submitted during this period to an Employment Tribunal. The claim is being managed in accordance with PHW processes via People and OD and in line with advice from Legal and Risk Services.

6. DATIX compliance

The reporting arrangements outlined in Section 2 apply.

There were seven incidents reported through Datix during this period.

Three were related to Health and Safety as detailed in Section 2, one being related to a breach of confidentiality, one related to loss of equipment and two to cyber security. Support from PHW teams including legal and Digital Health and Care Wales (Cyber) was sought in reviewing the response.



7. Safeguarding compliance

The reporting arrangements outlined in Section 2 apply.

There have been no safeguarding matters reported for this period

Compliance with statutory and mandatory training is reported monthly to the SLT, within a broader People and OD Report provided by PHW POD colleagues. As of **2 July 2025**, compliance for Safeguarding was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
Safeguarding Adults - Level 1 - 3 Years	480	480	444	92.50%
Safeguarding Children - Level 1 - 3 Years	480	480	442	92.08%

There have been no safeguarding concerns raised for this period.

8. Conclusion

The report provides assurance to the Committee that the NHS P&I is meeting the requirements for each of the areas reports.

There are no concerns to bring to the attention of the Committee in any of the areas listed.

9. Recommendation

The Quality, Safety and Improvement Committee is asked to:

Health and Safety

- **Take assurance** that the NHS P&I has appropriate measures that are in place to monitor compliance and to address areas identified for improvement.

National Reportable Incident Reporting compliance

- **Note there** have been no reportable incidents to report.

Complaints (including PTR if applicable) compliance

- **Note** there have been no complaints received for this period to report to Committee.

Claims reporting

- **Note 1 Claim** received this period and **take assurance** that Claims within the NHS P&I are being appropriately managed.

DATIX compliance

- **Note 7 Incidents** reported on Datix for this period and **take assurance** that the appropriate process has been followed within the NHS P&I, to manage these incidents.



Safeguarding compliance

- **Note** there have been no safeguarding issues reported for this period to report to Committee.