

Quality, Safety and Improvement Committee Work Plan 2023 -24

Category	Item	Exec Lead	16-May	18-Jul	12-Oct	13-Dec	21-Feb	Purpose of the report	
Clinical Governance	Claims and Redress Report	Executive Director Quality, Nursing and Allied Health Professionals	✓	✓	✓		✓	For assurance that claims are being managed in line with the Claims Management Policy and Procedure.(ToR 1.7)	
	Alerts Quarterly Report		✓	✓		✓	✓	For assurance on the management of the incident, that all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the quality, safety and effectiveness of services, programmes and functions, and that there is evidence of a culture of reporting and learning lessons with an emphasis on continual improvement, arising from SIs. (ToR 1.7)	
	Putting Things Right Quarterly Update		✓	✓		✓	✓	For assurance that there are effective arrangements in place for Putting Things Right, in line with our statutory responsibilities. (ToR 1.8) / a review of the extent of commissioning / specification and requirements for quality assurance and relevant revision	
	Putting Things Right Annual Report 2022/23			✓				For assurance that there are effective arrangements in place for Putting Things Right, in line with our statutory responsibilities. (ToR 1.8)	
	Serious Incidents: new/update		✓	✓	✓	✓	✓	For assurance on the management of the incident, that all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the quality, safety and effectiveness of services, programmes and functions, and that there is evidence of a culture of reporting and learning lessons with an emphasis on continual improvement, arising from SIs. (ToR 1.7)	
	Clinical Governance Framework			✓				For assurance on the system in place to ensure detect and rectify irregularities or deficiencies in the quality, safety and effectiveness of services, programmes and functions. (ToR 1.7.1)	
	Quality and Clinical Audit Plan Annual Report 2022-23		✓					To provide the Committee with the Year End report on the 2022/23 Quality and Clinical Audit Plan, for assurance on the progress. (ToR 1.7.1)	
	Quality and Clinical Audit Work plan for 2023/24		✓					To Approve the content of the Quality and Clinical Audit Plan for 2023/24 and the planned approach to the audits for the year. (ToR 1.7)	
	Quality and Clinical Audit mid year update				✓			To provide the Committee with the in year progress with the Quality and Clinical Audit Plan, for assurance. (ToR 1.7.1)	
	Once for Wales Concerns Management System Implementation Update			✓				For assurance on the system in place to ensure detect and rectify irregularities or deficiencies in the quality, safety and effectiveness of services, programmes and functions. (ToR 1.7.1)	
	National Safeguarding Annual Report		✓					For assurance on how the organisation has discharged its Safeguarding responsibilities as a mid year update.(ToR 1.8, 2)(ToR 1.8, 2)	
	Safeguarding Maturity Matrix				✓			For assurance on how the organisation has discharged its Safeguarding responsibilities as a mid year update.(ToR 1.8, 2)(ToR 1.8, 2)	
	Arrangements for Medical Devices Management		National Director Health Protection and Screening Services, Executive Medical Director		✓			✓	For assurance that there are effective arrangements in place for medical devices. (ToR 1.8)
	Winter Planning				✓	?	?		For assurance on the arrangements in place for the management of winter planning, ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness. (ToR 1.1)
TB Action Plan - Update on Implementation		✓					Remitted from Board on 26 January 2023 for oversight of the action plan		
Quality, Impact & Improvement	Oral Public Health	Director Health and Wellbeing							
	Flu vaccination campaign Annual Report 2022-23	Executive Director Quality, Nursing and Allied Health Professionals		✓				the Internal Flu Vaccine Campaign end of year report for 2022/23 and for assurance regarding the uptake of influenza vaccinations. (ToR 1.1)	
	Flu Campagin 2023/24 Update			✓				For assurance on the plan for Flu Campaign delivery	
	Health and Social Care (Quality and Engagement) (Wales) Act Duty of Candour and Duty of Quality / Quality as an Organisational Strategy		✓	✓	✓	✓	✓	For oversight, scrutiny and assurance of compliance with the act (ToR 1.3, 1.4 and 1.5)	
	Quarterly repoting DCA on Duty of Quality	Director of NHS Quality Improvement and Patient Safety/Director Improvement						For oversight, scrutiny and assurance of compliance with the act (ToR 1.3, 1.4 and 1.5)	
	Screening Service Update	National Director Health Protection and Screening Services, Executive Medical Director	✓			✓		For assurance on the arrangements in place for the management of screening services ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness. (ToR 1.1)	
Emergency Planning	Emergency Planning and Business Continuity Planning / Annual Report 2023	National Director Health Protection and Screening Services, Executive Medical Director					✓	For assurance that the organisation is meeting its statutory requirements in relation to the management of Emergency planning. (ToR 1.8, 2)	
	Review of Emergency Response Plan		✓					For recommendation to Board for final approval.	
Job Families (link with PODC)	Audit of arrangements within Public Health Wales for verifying active professional registration with the Nursing and Midwifery Council (NMC) and Health and Care Professions Council (HCPC) for 2023/24	Executive Director Quality, Nursing and Allied Health Professionals		✓				The purpose of this paper is to provide assurance to the Quality, Safety and Improvement Committee that Public Health Wales has an efficient and functioning system in place to monitor and verify active professional registration with the Nursing Midwifery Council (NMC) for nurses and midwives, and with the Health and Care Professions Council (HCPC) for healthcare scientists and allied healthcare professionals.	
	Health Care Support Worker Framework	Executive Director Quality, Nursing and Allied Health Professionals			✓			For assurance on the progress of the implementation of the Healthcare Support Workers Framework within Public Health Wales	
	Medical revalidation and job Planning	National Director Health Protection and Screening Services, Executive Medical Director			✓			For assurance that processes are in place to support our medical and dental workforce to undertake job planning and appraisal as required by the Medical and Dental contract.	

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Category	Item	Exec Lead	16-May	18-Jul	12-Oct	13-Dec	21-Feb	Purpose of the report		
Reporting and Assuring Groups	Infection, Prevention and Control Annual Report 2022/23	Executive Director Quality, Nursing and Allied Health Professionals	✓					Public Health Wales have a responsibility to comply with the Code of Practice for the Prevention and Control of Healthcare Associated Infections 2014 (the 'Code'). A requirement of the Code is for the Board (Via QSIC) to receive an annual IPC report, for assurance that the organisation is meeting its statutory requirements in relation to the management of infection prevention and control. (ToR 1.8, 2)		
	Infection, Prevention and Control - Mid Year Update				✓					
	Infection, Prevention and Control Group Terms of Reference			✓					For assurance, that the that the terms of reference fulfil the requirements of the group, as a group providing assurance to the Committee. (ToR 1.8, 2)	
	Infection, Prevention and Control Workplan 2023/24			✓					For assurance and assurance, that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee. (ToR 2)	
	Safeguarding Annual Report 2022/23		✓						The annual report provides an overview of how the organisation discharges its Corporate Safeguarding responsibilities in relation to the Children Act 2004, The Social Services and Well-being (Wales) Act 2014 and the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015.For assurance on how the organisation has discharged its Safeguarding responsibilities during	
	Safeguarding Group - Mid Year Update				✓					
	Safeguarding Group Terms of Reference			✓					For assurance, that the that the terms of reference fulfil the requirements of the group, as a group providing assurance to the Committee. (ToR 1.8 and 2)	
	Safeguarding Group Work Plan 2023/24			✓					For assurance and assurance, that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee. (ToR 2)	
	Health and Safety Annual Report		Deputy Chief Executive, Executive Director Operations and Finance		✓					For assurance that appropriate measures are in place to monitor compliance with Health and Safety requirements, and to address areas identified for improvement. (ToR 2)
	Health and Safety Quarterly Report				✓		✓	✓		For assurance that appropriate measures are in place to monitor compliance with Health and Safety requirements, and to address areas identified for improvement. (ToR 2)
Health and Safety Terms of Reference		✓						For assurance that the terms of reference fulfil the requirements of the group, as a sub group of the Committee. (ToR 2)		
Health and Safety Work Plan 2023/24	✓							For assurance and assurance, that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee. (ToR 2)		
Audit and other Reviews	Audit Action Log	Board Secretary and Head of Board Business Unit	✓		✓			Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer Audit Protocol) The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee. (ToR 1.7.2)		
	Audit Report (as needed)	Relevant Executive Lead	✓	✓	✓	✓	✓	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer Audit Protocol) The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee. (ToR 1.7.2)		
Service User Experience	Our approach to engagement	Executive Director Quality, Nursing and Allied Health Professionals		✓	✓			For assurance on the arrangements in place to monitor the voice of the service user and/or the citizen as being central to improving the quality and effectiveness of services, functions and programmes. Demonstration of the CIVICA System. (ToR 1.10)		
	CIVCA			✓	✓					
	Engagement with Young People			✓	✓					
Managing Risk	Strategic Risk	Executive Director Quality, Nursing and Allied Health Professionals	✓	✓		✓	✓	For assurance that risks within the remit of the Committee are management appropriately. (ToR 1.1 and 1.11)		
	Corporate Risk Register		✓	✓		✓	✓			
Governance & Accountability	Summary of policies Bi-Annual Update	Board Secretary and Head of Board Business Unit	✓		✓			For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee. and to approve any policies and procedures proposed to be removed from the register. (ToR 1.12 and 1.13)		
	Committee Annual Report		✓					For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference. (ToR 7)		
	Review of Committee Effectiveness		✓					As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.		
	Committee Terms of Reference Review		✓					For recommendation to Board on any proposed changes to the Committee's Terms of reference. (As required under Standing Orders)		
	Committee Work Plan		✓	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.		
	Policies for approval (as required)		✓	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy. (ToR 1.12 and 1.13)		

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Category	Item	Exec Lead	16-May	18-Jul	12-Oct	13-Dec	21-Feb	Purpose of the report
Deep Dives (2022-2024)	Infection, Prevention and Control	Executive Director Quality, Nursing and Allied Health Professionals						Rolling programme of deep dives to cover each area within the Committees remit.
	Safeguarding							The purpose of the deep dive is to provide assurance on the robustness governance arrangements (including risk management) for the systems and processes in place that demonstrate quality, safety and effectiveness across all services/programmes and functions provided by Public Health Wales. This includes ensuring that the are appropriately designed, and operating effectively to ensure the provision of high quality, safe public health services/programmes and functions across the whole of the Organisation's activities. (ToR 1.1) These will usually cover: - Key achievements - Performance of Service/Function/Programme - Risks of Service/Function/Programme - Quality and Impact (as set out in the Quality and Impact Framework) - Any related complaints/ Serious Incidents (SI) and a healthy learning culture: claims, complaints and incidents - Service user/person/population centred health provision story - Workforce issues - Any improvements/ innovation - Any key audits and the outcome of the implementation of any changes as a result - Research Activity (Where applicable) - Benchmarking against other Public Health Institutes and bodies providing similar functions or services - Evidence Base: how review and utilise the best available evidence from national and international research and recognised external bodies such as NICE, UK Screening Committee etc. - Future Proofing
	Health and Safety	Deputy Chief Executive, Executive Director Operations and Finance						
	Welsh Network of Healthy Schools	Acting Director Health and Wellbeing						
	Health Protection	National Director Health Protection and Screening Services, Executive Medical Director						
	Abdominal Aortic Aneurysm Screening Programme							
	Breast Test Wales							
	Diabetic Eye Screening Wales							
	Bowel Screening							
	Cervical Screening Wales							
	Emergency Planning							
	Microbiology							

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Audit and Corporate Governance Committee Work Plan 2023 - 24

Category	Item	Exec Lead	Approval Route	10 May 23	6 June 23	19 September 23	16 January 24	19 March 24	Role of Committee
Annual Financial & Governance Statements	Accountability Report 2022/23	Board Secretary and Head of Board Business Unit	BET	✓					To consider the report in draft form in May, prior to submission to AW
		Board Secretary and Head of Board Business Unit	BET		✓				To recommend the final version to the Board for approval in June.
	Annual Financial Statements and Accounts 2022/23	Deputy Chief Executive, Executive Director Operations and Finance	Chief Exec / Exec Lead	✓					To consider the accounts in draft
		Deputy Chief Executive, Executive Director Operations and Finance	Chief Exec / Exec Lead		✓				To recommend the final version to the Board for approval in June.
	Annual Accounts & Accountability Report Timetable 2023/24	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead				✓		For assurance that the Trust has an appropriate plan in place for the production of the Financial Statements and Accountability Report for 202/24, in line with the statutory deadlines.
Governance & Accountability	Standing Orders / and Scheme of Delegation	Board Secretary and Head of Board Business Unit	BET	✓				✓	For recommendation to Board on any proposed changes to Sos/ SoD.
	Declarations of Interest, Gifts & Hospitality Register Bi-Annual Update	Board Secretary and Head of Board Business Unit	Exec Lead			✓		✓	For assurance on the implementation of the Standards of Behaviour Policy and the Declarations of Interest, Gifts, Hospitality and Sponsorship Procedure
	Welsh Health Circulate Bi-Annual Update	Board Secretary and Head of Board Business Unit	Exec Lead			✓		✓	For assurance on the process for recording and monitoring the organisations compliance with Welsh Health Circulars.
	Summary of policies Bi-Annual Update	Board Secretary and Head of Board Business Unit	LT			✓		✓	For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee. Also to approve any policies and procedures proposed to be removed from the register.
	Compliance with the Code of Governance Self Assessment	Board Secretary and Head of Board Business Unit	Exec Lead					✓	For assurance on Public Health Wales' compliance with Corporate Governance in Central Governance Departments: Code of Practice 2017.
	ACGC Committee Annual Report	Board Secretary and Head of Board Business Unit	Exec Lead					✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness	Board Secretary and Head of Board Business Unit	Exec Lead					✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review	Board Secretary and Head of Board Business Unit	Exec Lead					✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference. This is required annually under standing orders.
	Committee Work Plan	Board Secretary and Head of Board Business Unit	Exec Lead	✓		✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
Finance and Procurement	Losses and Special Payments Report	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead	✓		✓	✓	✓	For assurance that all losses and special payments have been made in accordance with the requirements of the Standing Financial Instructions. Reporting to Committee is required under the SFIs.
	Procurement Report	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead	✓		✓	✓	✓	For assurance that all procurement activity is in accordance with the requirements of the Standing Financial Instructions. Reporting to Committee is required under the SFIs
	Review of Potential Debt Write Offs	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead				✓		Annual item to request approval from the Committee for write off of debts
Counter Fraud	Counter Fraud Progress Report	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead	Q4		✓	✓	✓	Quarterly update on Counter Fraud activity for assurance.
	Counter Fraud Annual Report	Deputy Chief Executive, Executive Director Operations and Finance	BET	2023-24				2024-25	For assurance of an effective counter fraud service that meets the standards set for the provision of counter fraud, as set out in National Assembly for Wales Directions and as required by the Counter Fraud and Security Management Service arrangements
	Counter Fraud Work Plan	Deputy Chief Executive, Executive Director Operations and Finance	BET	2023-24				2024-25	to set out the planned work to be undertake by Counter Fraud for 2023/24
	PHW Counter Fraud Arrangements	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead	✓					
Cyber Security	Cyber Security Update	Deputy Chief Executive, Executive Director Operations and Finance	Exec Lead			✓		✓	For assurance on the safety and security of the information collected and used by the organisation, and an update on the cyber work plan.

Audit and Corporate Governance Committee Work Plan 2023/24

Category	Item	Exec Lead	Approval Route	10 May 23	6 June 23	19 September 23	16 January 24	19 March 24	Role of Committee
Managing Risk	Strategic Risk	Executive Director Quality, Nursing and Allied Health Professionals	BET	✓		✓	✓	✓	For assurance that risks of organisation are management appropriately
	Corporate Risk Register	Executive Director Quality, Nursing and Allied Health Professionals	LT	✓			✓		For assurance that risks of organisation are management appropriately
	Risk Development Plan Update	Executive Director Quality, Nursing and Allied Health Professionals	LT			✓			For assurance that risks of organisation are management appropriately For assurance on the effectiveness of the overall system for risk management (system for internal control) and the management of Strategic and Corporate risks within the organisation.
	Annual Review of Risk Framework	Executive Director Quality, Nursing and Allied Health Professionals	BET	✓					For assurance on the effectiveness of the overall system for risk management (system for internal control) and the management of Strategic and Corporate risks within the organisation.
Joint Working Arrangements	Joint Working Framework	Board Secretary and Head of Board Business Unit	BET			✓			For assurance on the progress being made to ensure that all memoranda and agreements are being developed in line with the Joint Working Framework.
	NHS Executive Annual Assurance Statement	Deputy Chief Executive, Executive Director Operations and Finance	Lead Exec					✓	For assurance on compliance with the hosting agreement (required within the hosting agreement)
	Finance Delivery Unit Annual Assurance Statement	Deputy Chief Executive, Executive Director Operations and Finance	Lead Exec	✓					
Information Governance	Information Governance Quarterly Reports	Executive Director Quality, Nursing and Allied Health Professionals	BET			Q4 Q1	Q2	Q3	For assurance that the Information Governance Management System is working effectively.
	Data Breaches -Update on Action Plan	Executive Director Quality, Nursing and Allied Health Professionals	BET			✓			For assurance and oversight of the learning from data breaches being taken forward within the organisation. (Remitted from Board 26 May 2022)_
Audit	Audit Action Log	Board Secretary and Head of Board Business Unit	LT			✓		✓	Oversight of the internal and external audit log, for assurance on progress and timeliness of the implementation of actions identified through audit activity.
	Head of Internal Audit Opinion and Annual Report 2022/23	Head of Internal Audit / Board Secretary and Head of Board Business Unit	Chief Exec / Exec Lead	✓	✓				An annual assurance opinion, to contribute to the assurances available to the Chief Executive as Accountable Officer and the Board which underpin the Board's own assessment of the effectiveness of the system of internal control.
	Internal Audit Progress Report	Head of Internal Audit / Board Secretary and Head of Board Business Unit	Exec Lead	✓		✓	✓	✓	To provide the Committee with an update with the current and planned internal Audit work, and relevant progress with the Internal Audit Work Plan.
	Audit Wales Progress Report	Head of Internal Audit / Board Secretary and Head of Board Business Unit	Exec Lead	✓		✓	✓	✓	To provide the Committee with an update on current and planned Audit Wales work
	Internal Audit Reports	Head of Internal Audit / Board Secretary and Head of Board Business Unit	Exec Lead (Circulated to BET)	✓	✓	✓	✓	✓	ACGC receives all final reports following audit reviews, including the results of internal and external audit, for assurance on the adequacy of executive and managements response to issues identified by audit, inspection and other assurance activity, and to have oversight of the implementation of actions resulting from such reviews. Refer Audit Activity Plan for full details of planned activity for 2023/24.
	Internal Audit Work Plan 2024/25	Head of Internal Audit / Board Secretary and Head of Board Business Unit	BET				✓	✓	For approval of the Internal audit planned activity for 2023/24. The report details the audits to be undertaken and an analysis of the corresponding resources, and the Internal Audit Charter which defines the over-arching purpose, authority and responsibility of Internal Audit and the Key Performance Indicators for the service.
	Audit Wales: Annual Audit Report 2024/25	Audit Wales	BET				✓	✓	For assurance as part of the Committee's consideration of the Annual Financial Statements and Accounts, and accountability Report.
	Annual Opinion (ISA 260)	Audit Wales	Chief Exec / Exec Lead		✓				For assurance as part of the Committee's consideration of the Annual Financial Statements and Accounts, and accountability Report.
	Audit Wales Progress Report	Audit Wales	Exec Lead	✓		✓	✓	✓	To provide the Committee with an update on current and planned Audit Wales work
	Audit Wales Work Plan 2024/25	Audit Wales	BET					✓	To set out the planned work to be undertake by Audit Wales during 2024 to discharge statutory responsibilities as PHW's external auditor and to fulfil AW's obligations under the Code of Audit Practice.
	External Audit Reports	Audit Wales	Exec Lead (Circulated to BET)	✓	✓	✓	✓	✓	ACGC receives all final reports following audit reviews, including the results of internal and external audit, for assurance on the adequacy of executive and managements response to issues identified by audit, inspection and other assurance activity, and to have oversight of the implementation of actions resulting from such reviews. Refer Audit Activity Plan for full details of planned activity for 2023/24.

Knowledge, Research and Information Committee - Forward Look 2023 - 2024

Terms of Reference Category	Item	Role of Committee	Exec Lead	13 June 2023	13 September 2023	6 December 2023	5 March 2024
Knowledge, Research and Impact / Research and Evaluation	Research and Evaluation Strategy	Update on the progress of the development of the Strategy. Once approved, update on the Implementation of the Strategy for assurance.	National Executive Director of Public Health Knowledge and Research	✓	✓	✓	✓
Knowledge, Research and Impact	Behavioural Change	One year update on Behavioural Change for assurance	National Executive Director of Public Health Knowledge and Research			✓	
Knowledge, Research and Impact	Monitoring and assurance of delivery against the Strategic Priorities	Assurance update, maximising the use of digital data and evidence to improve public health	National Executive Director of Public Health Knowledge and Research	✓	✓	✓	✓
Knowledge, Research and Impact	PHW Monitoring Impact	Annual Report on Impact for assurance	National Executive Director of Public Health Knowledge				✓
Research and Evaluation	Genomics	A strategic look at the investment and research elements of the programme, including any future developments in within this context.	National Director Health Protection and Screening Services, Executive Medical	✓			
Analysis and Data Science / Digital	Digital and Data Strategy	Update on the progress of the development of the Strategy. Once approved, update on the Implementation of the Strategy for assurance.	National Executive Director of Public Health Knowledge and Research	✓	✓	✓	✓
Digital	Artificial Intelligence	Update on developments of the opportunities for AI within the organisation	National Executive Director of Public Health Knowledge			✓	
Digital	Discovery / Alpha Update	To include an update on web estates, screening, registers and architecture review, and update of digital transformation within Diabetic Eye Screening Wales	National Executive Director of Public Health Knowledge and Research	✓			
Strategic Relationships with Academic Institutions	Universities	Update on the previous discussion with the Open University, exploring how PHW could develop a strategic partnership with OU and other Universities to develop proposals.	National Director HPSS / National Executive Director PHKR		✓		
Strategic Relationships with Academic Institutions	Universities	Overview of work to provide a vision for academic public health in Wales	National Executive Director of Public Health Knowledge and Research		✓		
Strategic Relationships with Academic Institutions	Health Care Research Wales (TBC)	TBC	National Executive Director of Public Health Knowledge and Research				
Governance and Accountability	Strategic Risk	For assurance that risks of within the remit of the Committee are managed appropriately	Executive Director Quality, Nursing and Allied Health	✓	✓	✓	✓
Governance and Accountability	Corporate Risk Register	For assurance that risks of within the remit of the Committee are managed appropriately	Executive Director Quality, Nursing and Allied Health	✓		✓	

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Knowledge, Research and Information Committee - Forward Look 2023 - 2024

Governance and Accountability	Summary of policies Bi-Annual Update	For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee. and to approve any policies and procedures proposed to be removed from the register.	Board Secretary and Head of Board Business Unit	✓		✓		
Governance and Accountability	Committee Annual Report 2023/24	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.	Board Secretary and Head of Board Business Unit				✓	
Governance and Accountability	Review of Committee Effectiveness	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.	Board Secretary and Head of Board Business Unit				✓	
Governance and Accountability	Committee Terms of Reference Review	For recommendation to Board on any proposed changes to the Committee's Terms of reference. This is required annually under standing orders.	Board Secretary and Head of Board Business Unit				✓	
Governance and Accountability	Committee Work Plan	For information, and for assurance that the Committee is fulfilling its terms of reference.	Board Secretary and Head of Board Business Unit	✓	✓	✓	✓	
Governance and Accountability	Audit Report (as required)	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer Audit Protocol) The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee.	Board Secretary and Head of Board Business Unit	✓	✓	✓	✓	
Governance and Accountability	Policies for approval (as required)	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.	Board Secretary and Head of Board Business Unit	✓	✓	✓	✓	
Deep Dives (Linked to Priorities)	Lifestyle factors (separate from inequalities) (Priority 3, Promoting Healthy Behaviours)	Areas of focus for deep dives to include: - Systems in place for data collection - Capacity to collect / gaps in data information - Mechanisms and measures of outcomes and how they are being used to inform decision making - Role of research and evaluation (and how it feeds into outcomes and measurement? How we monitor the impact of our research in the short and long term) - Digital enablement (what changes do we need to do)		✓				
Deep Dives (Linked to Priorities)	Secondary Prevention (Priority 4, Securing a Health Future for the next generation)				✓			
Deep Dives (Linked to Priorities)	Addictions (to include alcohol, gambling and drugs) (Priority 3, Promoting Healthy Behaviours)						✓	
Deep Dives (Linked to Priorities)	Climate Change and Environmental Public Health (Priority 5, Protecting Public from infection and environmental threats to health)						✓	
Deep Dives (Linked to Priorities)	Indicators for Mental Health (Priority 2, improving mental well-being and resilience)							✓
Deep Dives (Linked to Priorities)	Screening (Priority 6, Supporting the developments of an excellent health and care system)							✓

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

People and Organisational Development Committee - Annual Work Plan 2023-24

Category	Item	18 Apr 23	4 Jul 23	8 Nov 23	6 Feb 24	Purpose of the report
Deep Dives / Focused Discussion	People and Organisational Development Priorities (the Big 3)	✓	✓	✓	✓	The provide assurance on the priorities for the POD Directorate for 2023/24. - April- People Promise- For Assurance
	Workforce Planning (Deep Dive)	✓	✓			Also expecting Audit Wales Worforce Planning Audit Report Workforce planning Update- April 2023
Workforce	Performance Assurance Dashboard	✓	✓	✓	✓	Presentation of the dashboard for assurance , and highlight any emerging themes. To cover in particular recruitment, sickness absence.
Equality, Diversity and Inclusion	Gender Pay Gap Annual Report (2023)				✓	For approval of the annual report.
	Equalities Annual Report (2022-23)				✓	For approval of the annual report.
	Equality, Diversity and Inclusion - Update on Priorities		✓		✓	For discussion/assurance : Focus on the equality objectives and action plan. Note objectives relating to service user engagement and wider population health are reported to QSIC.
	Workforce Annual Report (2022-23)				✓	For approval of the annual report.
Welsh Language	Welsh Language Annual Report (2022-23)		✓		✓	For assurances that there is the appropriate culture and arrangements to allow the Trust to discharge its statutory and mandatory responsibilities with regard to Welsh language provision. Annual Report- Verbal July, Approved Sept via Chairs Action?
	Welsh Language Update		✓		✓	
Staff Engagement and Partnerships and working with Trade Unions	Trade Union Partnership Working Forums - Update	✓	✓	✓	✓	Update on the work of the various TU forums for assurance.
	Staff Engagement Plan and Outcomes			✓		To include: Staff Networks- Engagement with Multi Professional Consultants Ways of engaging with staff outside of the Network machinery and importance of engagement with Trade Unions
	Work How it works best' Pilot Evaluation	✓				Assurance on the progress with the pilot of work how it works best, including summary of the evaluation and next steps.
	Local Partnership Forum Annual Report	✓				Annual report from the Local Partnership Forum to Board/People and OD Committee.
	Local Partnership Forum Terms of Reference				✓	For recommendation to Board
	People Strategy			✓		Progress update on implementation for assurance To include items remitted from Board in the context of People Strategy review: A Societal Approach to Understanding, Preventing and Supporting the Impact of Trauma and Adversity
	Cost of Living (actions in place to support staff)	✓				Remitted from Board in January for PODC to follow through on actions in place to support staff. Closure report for assurance
Change Programme and Organisational Design	Organisational Change Management Update		✓		✓	(Links to SRR 3). To be held in July to align with capacity work that Strategic Planning are delivering June 2023 (IMTP)
Managing Risk	Strategic Risk	✓	✓	✓	✓	For assurance that risks within the remit of the Committee are management

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

People and Organisational Development Committee - Annual Work Plan 2023-24

	Corporate Risk Register	✓		✓		appropriately.
Governance & Accountability	Summary of policies Bi-Annual Update	✓		✓		For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee and to approve any policies and procedures proposed to be removed from the register.
	Committee Annual Report	✓				For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness	✓				As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review	✓				For recommendation to Board on any proposed changes to the Committee's Terms of reference. (As required under Standing Orders)
	Committee Work Plan	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
	Policies for approval (as required)	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy. (May be collated and thus Policies compose a single item agenda falling between normal Committee meetings to free up normal Committee time.)
	Raising Concerns Annual Report			✓		For assurance on the management of any concerns / grievance are in line with the policy.
	Disciplinary Case Report : Update (if required)	✓	✓	✓	✓	For assurance on the management of any disciplinary are in line with the policy. Standard agenda item - as needed.
Audit and other Reviews	Audit Action Log Progress Update (within the remit of the Committee)	✓		✓		Update on the implementation of the mangement response to the audit, for assurance.
	Audit Report (as needed)	✓	✓	✓	✓	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer Audit Protocol) The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.