**Unconfirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
19 August 2021, 10:00
Venue: Room 3/7, 2 Capital Quarter, Tyndall Street, Cardiff and
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)
Judi Rhys	(JR)	Non-Executive Director (Third Sector)
In Attendance:		
Philippa Bassett	(PB)	Screening Workforce Development Manager (for item 48/2021)
Rhiannon Beaumont-Wood	(RBW)	Executive Director of Quality, Nursing and Allied Health Professionals
Liz Blayney	(LB)	Acting Board Secretary and Head of Board Business Unit
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru
Richard Hayward	(RH)	Health Inspectorate Wales (HIW) Relationship Manager
Wayne Jepson	(WP)	Programme Lead / Improvement Advisor
Meng Khaw	(MK)	National Director of Health Protection and Screening Services, and Medical Director
John Lawson	(JL)	Chief Risk Officer and Head of Information Governance
Chris Orr	(CO)	Head of Estates and Health and Safety/ General Manager Operations and Finance (for item 52/2021)
Christopher Thomas	(CT)	Governance and General Manager
Claire Thomas	(ClT)	Designated Doctor, National Safeguarding Team *(observing the meeting)*
Stephanie Wilkins	(SW)	Staff side representative *(left the meeting at 11:30 am)*
Apologies		

Eleri Lloyd-Burns	(ELB)	Assistant Director of Quality, Nursing and Allied Health Professionals
Helen Bushell	(HB)	Board Secretary and Head of Board Business Unit
Eleri Davies	(ED)	Assistant Medical Director, Head of HCAI and AMR Programme
Sian Griffiths	(SG)	Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee
Andrew Jones	(AJ)	Deputy Director of Health Protection and Screening Services, Executive Team
Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Secretariat		
Reanne Reffell		Board Support Officer

| *The meeting commenced at 10:00* |
| **QSIC 43/2021**   **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 once the minutes had been agreed at the following meeting.

| **QSIC 44/2021** | **Declarations of Interest** |

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

| **Items for Assurance** |
| **QSIC 45/2021** | **Safeguarding Maturity Matrix** |

The Committee received a presentation from RBW explaining the current position of the Public Health Wales Safeguarding Maturity Matrix (SMM) (Ref 3.1.QSIC.190821).

RBW outlined the focus on internal safeguarding arrangements; the appointment of Donna Newell (DN) as safeguarding lead from a corporate aspect; the use of SMM as a self-assessment tool used to drive improvement. A peer review process is undertaken with other NHS organisations within the NHS Wales Safeguarding network, the SMM is expected to be refreshed as part of ongoing work of the network.

RBW went on to further outline the PHW position against the self-assessment for 2019/20; the challenges of being a national organisation in how we can proportionally and appropriately work with multiagency Regional Safeguarding Boards; areas identified for improvement action and next steps for 2020/21 onwards; along with the achievements and notable progress made during the COVID-19 response.

The Committee considered the following:
- the year-long lag in identifying areas for improvement due to the retrospective nature of the matrix, and how to be assured that they remained the right areas of future focus. JB also highlighted that due to the lag, issues may have changed and interventions could take longer than a year to assess whether they had worked/were the right ones. He went on to offer the support to the National Safeguarding Network in terms of improvement approaches.

Action: JB

it was agreed that the new Corporate Lead for Safeguarding and via the Service Lead for NST would consider the issues raised on the retrospective nature of the approach of the SMM, and take back concerns to the national team and the National NHS Safeguarding Network for consideration during the refresh of SMM.

 Action: DN/RBW

- RH noted the positive safeguarding VAWDASV (Violence against Women, Domestic Abuse and Sexual Violence) training progressed throughout 2020/21 despite the challenges of the pandemic.

KE thanked RBW on behalf of the Committee for the comprehensive presentation and noted her interest in the success and improvement in the ACE Informed element of the SMM, given Public Health Wales's involvement.

The Committee:
- **Took assurance** on the progress to date in taking forward the Safeguarding Maturity Matrix improvement plan, and that there were appropriate safeguarding arrangements in place within Public Health Wales;
- **Noted** the position as an organisation against the Safeguarding Maturity Matrix standards (2019/20) and next steps;
- **Agreed** to receive the next iteration in spring 2022, in addition to the end of year report, in order to gain a broader outlook.

QSIC 46/2021	**Quality Indicators- Dashboard**

The Committee received a verbal update from RBW and JL on the Quality Indicators Dashboard.

The Committee considered:

- the need for a refresh of the overarching long term strategy, the building of outcome measures and quality indicators in conjunction with Nathan Jones and Iain Bell.
- that quality indicators would be subsumed into the performance dashboard, with the next iterations focused on directoare level dashboards.
- the use of the Performance Assurance Dashboard by the Committee and how that would translate up to Board.

It was agreed that a discussion take place prior to the next meeting on developing the use of the quality and performance indicators and the dashboard, and that Nathan Jones be invited to join the discussion.
Action: LB

The Committee noted the update provided and took **assurance** on the development of quality indicators as part of the ongoing work with the Performance Assurance Dashboard.

QSIC 47/2021	Corporate Risk Register

The Committee received the Corporate Risk Register (Ref 3.3.QSIC.190821).

The Committee considered:
- the work underway to review the risk agenda (corporate, directorate and strategic risks), following significant discussion at the Business Executive Team meeting on Monday. The Committee noted that due to these discussions the paper did not reflect the current position but took assurance that no additional risks had been added in addition to those within the received paper.
- the helpfulness of including the Non-Executive Directors in risk workshops, and noted that strategic risks would be signed off at the September Board.

The Committee took **assurance** on the management of risks.

QSIC 48/2021	Implementation of the Healthcare Support Workers Framework in Public Health Wales

The Committee received an update on the implementation of the Healthcare Support Workers Framework in Public Health Wales from PB (Ref 3.4.QSIC.190821).

The Committee considered:
- that the Level 3 Fundamentals of Screening qualification provided staff with the ability to move across the different screening programmes and progress through career pathways with some additional specific screening skills and knowledge training;
- SW's request for an update on the excellent work to staff side, and an offer of joint partnership working;

- clarification on the proportionality of the figures and assurance that staff were being offered opportunities. PB highlighted that more than 50% of the whole cohort of establishment was in some form of training, despite staff movement and the impact of COVID.
- clarification on the reliance of higher education / external bodies for validation. PB confirmed the delivery of courses in house, thereby ensuring sustainability.

The Committee thanked the team for delivering a brilliant programme of work and for achieving impressive numbers of training throughout the pandemic.

PB left at 11:12

The Committee took **assurance** on the progress of the implementation of the Healthcare Support Workers Framework within Public Health Wales

QSIC 49/2021	**Alerts Report**

The Committee received the Alerts report for Quarter 1, 2021-22 (ref 3.5.QSIC.190821).

The Committee considered the report, noting all alerts had been dealt with within the appropriate time.

The Committee took **assurance** on the management of alerts received by Public Health Wales.

QSIC 50/2021	**Putting Things Right Report**

The Committee received the Putting Things Right Report: Quarter 1, 2021-22 (Ref 3.6.QSIC.190821).

The Committee considered the update and noted:
- that of the three incidents, two would be discussed in the private meeting, that the remaining incident, along with an additional incident that had occurred since the time of the report related to supply chain issues;
- changes in reporting timeframes;
- change of the term and WG process for Serious Incident reporting, to Nationally Reportable Incidents,
- that the performance figure was likely higher than reported but subject to Welsh Government reporting quarters.

The Committee took **assurance** of the effectiveness of the management of concerns (incidents, complaints and claims).

QSIC 51/2021	**Arrangements for Medical Devices Management**

The Committee received an update on the arrangements for Medical Devices Management (ref 3.9.QSIC.190821).

The Committee considered the update, noting:
- the recommendations set out in the new MHRA guidance;
- that MK would undertake the role of Executive Lead for the future management of medical devices and QNAPS Directorate would support in respect of reviewing governance arrangements are effective against identified standards.

The Committee thanked in her absence, Sharon Twine, Integrated Governance Manager for her efforts.

The Committee took **assurance** on the work that had been undertaken to strengthen the governance of medical devices.

SW left the meeting at 11:30 am

QSIC 52/2021	**Health and Safety Report**

The Committee received the Health and Safety Report for Quarter 1, 2021-22 (Ref 3.7.QSIC.190821).

CO confirmed that no RIDDOR's had been reported, and highlighted the ongoing work related to COVID-19 and ensuring the safety of staff. CO advised that staff had been informed of the move to level 0, however there were no changes to the mitigations already in place.

The Committee took **assurance** that appropriate measures were in place to monitor compliance and to address areas identified for improvement.

QSIC 53/2021	**Once for Wales Concerns Management System Update**

The Committee received the Once for Wales Concerns Management System (OFWCMS) Update (Ref 3.10.QSIC.190821).

The Committee **noted** that Public Health Wales was awaiting confirmation from Digital Health and Care Wales of the delivery date of the cyber security controls prior to being in a positon to progress the rescheduled OFWCMS implementation plan (a nationally procured Datix system to be modified where possible for the needs of the organisation). This was to ensure the safe release of data. The Committee requested an update on the timeline at the next Committee meeting.
Action: RBW

The Committee took **assurance** that Public Health Wales had implemented effective project management and control over the implementation of the Once for Wales Concerns Management System (Datix).

QSIC 54/2021	**Health Inspectorate Wales (HIW) Annual Report**

The Committee received the Health Inspectorate Wales (HIW) Annual Findings 2020-2021 report from Richard Hayward, of Health Inspectorate Wales (Ref 3.11.QSIC.190821).

The Committee reflected positively on the local review of Breast Test Wales, and the effort to reactivate screening services. They noted that the Committee had been assured of mitigating actions to combat screening challenges and delays throughout the pandemic.

RH commented that the report provided assurance that Public Health Wales was seen as a low risk organisation that had good governance arrangements in place.

The Committee took **assurance** on the annual reports findings.

Items for Approval

QSIC 55/2021	**Minutes, Action Log and Matters Arising of meeting**

The Committee received the minutes of the Committee meeting on 16 June 2021 and Action Log (Ref 4.1.QSIC.190821).

The Committee:
- **Approved** the minutes of the meeting held on 16 June 2021 as a true and accurate records of the meeting.
- **Approved** the closure of the two actions on the action log.
- **Noted** no matters arising.

QSIC 56/2021	**Quality Governance Self- Assessment Update**

The Committee received an update on the Self-Assessment of Quality Governance Arrangements (Ref 4.2.QSIC.190821).

RBW explained that they had monitored progress against the self-assessment through the Committee, noted the new work-streams and programmes of work and went on to recommend a transfer approach of some areas e.g. Integrated Governance and Quality and Improvement Strategy implementation plan, with no ongoing requirement to monitor this specific framework.

The Committee considered the following:
- the vast amount of work seen via the completed actions within the report;
- previous Committee discussions around quality improvement and the need for a tracker to ensure that various elements were not lost during integration. RBW and the Board Business Unit agreed to ensure that these elements would be tracked and cross referenced from a governance perspective going forward.

Action: RBW / LB

The Committee took **assurance** that the action plan had been progressed, and **agreed** that any outstanding actions would be absorbed into other relevant work streams monitored by the Business Executive Team and Committees.

QSIC 57/2021	**Putting Things Right Annual Report 2020/21**

The Committee received the Putting Things Right Annual Report 2020/21 (Ref 4.3.QSIC.190821).

RBW thanked JL for his hard work within the Putting Things Right (PTR) setting, noting that Stuart Silcox would be taking over, and that a dedicated PTR lead manager would be recruited. RBW commented on the challenge to ensure the right level of attention is given across the across the whole of the PTR agenda, and the need to ensure appropriate staff capacity and resources.

The Committee were assured that all items within the annual report had previously been considered at Committee level.

The Committee **approved** the Putting Things Right Annual Report 2020/21.

Items for Note	
QSIC 58/2021	**Registration Audit**

The Committee **noted** the Registration Audit (Ref 5.1.QSIC.190821).

QSIC 59/2021	**Closing Administration**
QSIC 59.1/2021	**Any Other Business**

None

QSIC 59.2/2021	**Committee Feedback**

It was agreed that feedback from the meeting would be sought via email following the meeting.

QSIC 59.3/2021	**Date of Next Meeting**

Wednesday 10th November 2021

The open session closed at 12:05pm