

RAG Rating/Status

At risk	Red - Action date passed or revised date needed
On track	Yellow - Action on target to be completed by agreed/revised date
Complete	Green- Action complete
No longer needed	Blue - Action to be removed and/or replaced by new action

QUALITY, SAFETY AND IMPROVEMENT COMMITTEE								
Meeting Item Reference	Action Reference	Lead	Meeting Item Title	Details of action	Update on progress	Original target date	Revised target date	RAG rating/Status
OPEN ACTIONS FOR REVIEW								
None								
OPEN ACTIONS - IN PROGRESS BUT NOT YET DUE								
QSIC 20220-120-16/4.6	QSIC 2022/17	MK	Screening Service Update	Noting Communication risks following the change to the DESW screening intervals... the Directorate would work with the Communications department to try to mitigate any risk. SH agreed to reflect this in the existing Corporate risk on DESW	15/02/2023: This is in progress and will be considered as part of the review of Risk.	16/05/2023		On track
QSIC 20220-120-15/4.2	QSIC 2022/16	RBW/MK	Managing Risk	Noting ongoing recruitment issues related to the Microbiology Services in North Wales, KE referenced the recruitment cross over with this Committee, and asked that thought be given to how this Committee was sighted on relevant matters within the remit of the People and Organisational Development Committee.	15/02/2023: A meeting will be been arranged between the Chairs of the Committees to discuss cross over workforce issues and will be considered as part of the development of the workplans for next year. There is a paper providing more information on the risk (CRR 208) included in the meeting papers for February.	16/05/2023		On track
QSIC 20220-120-14/4.1	QSIC 2022/14	RBW/MK	Putting Things right report (q2)	FT expanded on a planned piece of work to improve Cervical Screening Incidents, particularly in areas where services were not provided by Public Health Wales. This would include engagement with Health Boards to identify issues and a review of current processes, practices and training for quality improvement. JW suggested a review of the extent of commissioning/specification and requirements for quality assurance and relevant revision at a future meeting.	15/02/2023: Work is underway to review the arrangements CSW has with commissioned services . This includes a review of contractual agreements between CSW and health boards considering Long Term Agreements (LTA's)	16/05/2023		On track
ACTIONS RECOMMENDED TO BE CLOSED AT (16 February 2023) MEETING								
QSIC 20220-120-14/3	QSIC 2022/13	RBW/LB	Quality & Clinical Audit	The Committee took assurance on the management of Quality and Clinical Audit within the Organisation and agreed to consider further progress in a year's time.	15/02/2023: A Quality and Clinical Audit Annual Plan has been scheduled to be received at the May 2023 Committee meeting and a Mid-year update has been scheduled for October 2023. Suggestion action closed on this basis.			Complete
QSIC 20220-120-17/4.8	QSIC 2022/18	RBW	Corporate IP&C Mid year Update	MK sought assurance on the process for logging injuries sustained by Public Health Wales staff whilst working within a health board. AC and RB-W confirmed that it should be attributed to Public Health Wales but they would follow the process up and confirm with MK.	15/02/2023: Any incident involving PHW staff needs to be entered onto the PHW Datix system within 24 hours of the incident occurring, no matter where the location. Depending on the nature of the incident, the HB will need to be informed too as they have a responsibility to investigate incidents occurring on their sites. Microbiology laboratory staff complete a Datix on both PHW and HB systems and cross-reference them. Other staff incidents will be reviewed on an individual basis. Any onward referral to the HSE would be decided on receipt of the completed Datix form. Detailed information can be found in the PHW Health & Safety policy. Action to be closed	15/02/2023		Complete
QSIC 20220-120-14/4.1	QSIC 2022/15	RBW	Putting Things right report (q2)	OS raised points around the need to ensure healthcare professional staff were trained in communication, dignity and privacy matters. Committee members agreed on these important points, and RB-W agreed to follow up the support of staff with the Director of People and Organisational Development.	15/02/2023: This will be part of the implementation of Duty of Candour and in the updating of Putting Things Right policy, together with the work being led by POD on our organisaitonal values and culture underpinned by Being our Best (behaviorable framework.) Action to be closed	15/02/2023		Complete