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Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

**Name of Meeting**  
Quality, Safety and  
Improvement Committee  
**Date of Meeting**  
18 May 2022  
**Agenda item:**  
4.9

## Register of policies and written control documents

<b>Executive lead:</b>	Helen Bushell, Board Secretary and Head of Board Business Unit
<b>Author:</b>	Liz Blayney, Deputy Board Secretary and Board Governance Manager

<b>Approval/Scrutiny route:</b>	Helen Bushell, Board Secretary and Head of Board Business Unit
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### Purpose

The report provides the Quality, Safety and Improvement Committee with an update on the status of the policies, procedures and other written control documents for which it is the approving body.

**Appendix 1** is an extract taken from the central Policy and Control Document Register and shows the status of documents at end of quarter 1.

### Recommendation:

APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	Assurance <input checked="" type="checkbox"/>
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The Committee is asked to:

- Take **assurance** on the prioritisation and progress being made to review Quality, Safety and Improvement policies, procedures and other written control documents.

**Link to Public Health Wales [Strategic Plan](#)**

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to seven of the strategic priorities and well-being objectives.

**Summary impact analysis**

**Equality and Health Impact Assessment**

An Equality and Health Impact Assessment is not required in support of this report. An impact assessment should be undertaken for each of the respective policies when they are developed or reviewed.

**Risk and Assurance**

A risk assessment has been undertaken for each policy which has passed its review date. These are captured in the accompanying register (see Appendix 1) and a summary is detailed below.

**Health and Care Standards**

This report supports and/or takes into account the [Health and Care Standards for NHS Wales](#) Quality Themes  
  
Governance, Leadership and Accountability

**Financial implications**

Not applicable

**People implications**

Not applicable

## 1. Purpose / situation

The report provides the Quality, Safety and Improvement Committee with an update on the status of the policies, procedures and other written control documents (policies) for which it is the approving body.

**Appendix 1** is an extract taken from the central Policy and Control Document Register and shows the status of documents as at 2 November 2021.

## 2. Background

The Board approved a new organisation-wide [Policy and Written Control Documents Policy and Procedure](#) in September 2016. All new/revised documents are now developed and approved in accordance with the provisions and processes set out in these documents.

Section 4.2 of the procedure specifies that the Register will be reported annually to the Board, and the relevant sections reported to board committees twice yearly. This provides the Board and committees with assurance that required policies, procedures and other written control documents are being developed and maintained.

## 3. Description/Assessment

### 3.1 Status of policies and other written control documents

There are 26 policies on the policy register, which were approved by the Quality, Safety and Improvement Committee (QSIC) or have been delegated to the Committee by the Board.

As of 26 April 2022, 8 (31%) policies/procedures are in date, 18 (69%) policies are due for review. For all of the policies due for review, the decision updates are provided within **appendix 1**.

In summary the following table provides a list of the policies and procedures that are past their due date, along with the date that these are scheduled to be approved following review.

Title	Date of approval	Lead	Risk Assessment	Expected approval
Medical Devices and Equipment Management Policy	27 November 2018	National Director Health Protection and Screening Services, Executive Medical Director	<b>Overdue - Risk assessment awaited</b>	Sep-22
Medical Devices and Equipment Management Procedure	27 November 2018		<b>Overdue - Risk assessment awaited</b>	Sep-22
Medicines management policy and code of practice	31 January 2013		Overdue for review - Moderate risk presented	Not known
Security procedure	25 May 2017	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	Aug 22
Fire safety policy	19 December 2017			July 22
Fire Safety Procedure	19 December 2017			July 22
Health and Safety Policy	27 March 2018			June 22
Water management policy	19 December 2017			Mar 23
Water management procedure	19 December 2017			Mar 23
Managing allegations of abuse by staff procedure	04 October 2018	Director of People and Organisational Development	Overdue for review - Low risk presented	TBC
Prevent policy and referral process	27 May 2015	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	Jul-22
Claims Management Procedure	06 April 2016			May-22
Consent to Examination, Screening or Intervention policy	16 May 2017			Jul-22
Alerts, Safety Notices and Other Guidance policy	15 January 2019			May-22
Alerts, Safety Notices and Other Guidance procedure	15 January 2019			May-22
Decontamination policy	16 April 2019			Jul-22
Decontamination procedure	16 April 2019			Jul-22
Infection Prevention and control policy	16 April 2019			Jul-22

Table 1 provides information regarding the status of policies due for review and a summary of the outcome of the risk assessments undertaken. All Executive colleagues responsible for the policies due for review are aware and taking active steps to ensure policies/procedures are reviewed and appropriate approval sought.

Two policies are awaiting risk assessments but will be reviewed following the establishment of a Medical Devices Management Group.

Policy review status	Policy not yet approved but low risk presented	Policy not yet approved and moderate risk presented.	Policy not yet approved and high risk presented.	Risk assessment awaited	Number of Policies
Date passed - action underway	13	1		2	16
Date passed - awaiting national policy	2				2
Policies awaiting approval					

Table 1

### 3.3 Well-being of Future Generations (Wales) Act 2015



Organisational policies, procedures and written control documents provide the organisation with long-term controls for risks.



Organisational policies, procedures and written control documents provide staff within instruction and guidance, to prevent non-compliance.



A number of policies, procedures and written control documents are interdependent with one another. Content is cross-referenced and integrated as appropriate.



All policies, procedures and written control documents (and associated EHIA's) are developed on a collaborative basis.



During development and review policies and written control document are made available to Public Health Wales staff so that they can provide comment for consideration

#### 4. Recommendation

The Quality, Safety and Improvement Committee is asked to:

- Receive **assurance** on the prioritisation and progress being made to review policies, procedures and other written control document

