

Policy title	Approval date	Review date	Status (select from dropdown)	Approving body (from Annex within Policy for Policies)	Accountable Executive Lead (Select from dropdown)	Rag Status	Comments / Updates from quarterly reviews	Expected Date for issuing of revised policy
Prevent policy and referral process	27 May 2015	27 May 2018	Policy review date passed - awaiting national policy	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Currently being reviewed and will be ready for QSIC July 2022</p> <p>October 2021: Under review but delayed due to no Nationally agreed approach to training. Safeguarding lead will be taking this policy to the Safeguarding Network meeting (also already engaged with network training sub group). If agreed All Wales approach to training in line with ICD policy can potentially updated by Jan 2022.</p> <p>June 21: The All Wales Guidance is still under development and advice is be sought from the National Safeguarding Network to agree next steps</p> <p>Jan 2021: The All Wales guidance is still awaited, therefore the current policy will be updated as an interim measure.</p> <p>Dec 2019: All Wales Prevent Guidance to be produced by the All Wales Prevent Leads Group. This is on the All Wales Prevent Group work plan for 2020. The Guidance will be adopted once approved.</p>	Jul-22
Claims Management Procedure	06 April 2016	01 April 2019	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Due for consultation and review at QSIC in May/July 2022</p> <p>October 21: This remains under review following further delays to the delivery of the Once for Wales system, now scheduled for 31 October. The reviewed policy will be forwarded to QSIC in February 2022 for approval.</p> <p>June 21: The policy is under review and will be forwarded to QSIC in October for approval.</p> <p>Jan 2021 - under review pending final position of Once for Wales.</p> <p>Dec 2019: The procedure and policy will be updated by the end of January 2020 to reflect integrated governance changes.</p>	May-22
Consent to Examination, Screening or Intervention policy	16 May 2017	01 May 2020	Policy review date passed - awaiting national policy	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Currently being reviewed and will be ready for QSIC July 2022</p> <p>October 2021 - No further update at present due to ongoing work and timelines.</p> <p>June 2021 Update: The All Wales Consent Policy is in development and will be adopted once finalised. A consent procedure, which offers guidance to Public Health Wales Screening Division staff who have direct contact with members of the public during population based screening, is being piloted within Screening for 12 months. The Safeguarding Group will receive an update on the pilot progress in 6 months.</p> <p>Jan 2021: All Wales Policy to be adopted and procedure is in final draft. Superseded Black 92. Published with guidance for screening programmes and Stop Smoking Wales.</p>	Jul-22
Security procedure	25 May 2017	25 May 2020	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	<p>March 2022 update: See update in October 2021.</p> <p>October 2021: Due to the Covid-19 response, the review of the Security Policy remains outstanding however we are in the process of working with Information Governance colleagues to develop the CCTV procedure which we will link into the Security Policy, along with the bomb threat procedure as part of the review. We are aiming to undertake this work during 2021/22.</p> <p>June update: On 27 May 2021, the Board approved revision to QSIC ToR to remit Health and safety matters to QSIC from PODC. As such this policy now falls within the remit of QSIC.</p> <p>April 2021 update - The updated policy will incorporate and link to other policies such as Bomb Threat Procedure, CCTV Procedure. Procedure superseded Black 22 (Security Policy).</p>	Aug-22

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Managing allegations of abuse by staff procedure	04 October 2018	04 October 2021	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Director of People and Organisational Development	Overdue for review - Low risk presented	March 2022 update: Policy Workshop Schedule for 22/23 will be agreed by the beginning of May October 2021- This procedure is on the P&OD review schedule for 2022	TBC
Alerts, Safety Notices and Other Guidance policy	15 January 2019	15 January 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	March 2022 update: this is the in tprocess of being update and will be reviewed by the Exec lead in June. It is anticipated that it will be presented to QSIC in October for approval, following the necessary consultation. February 2022: update has been developed and will be submitted to QSIC in May 2022 for approval.	Oct-22
Alerts, Safety Notices and Other Guidance procedure	15 January 2019	15 January 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	March 2022 update: this is the in tprocess of being update and will be reviewed by the Exec lead in jJune. It is anticipated that it will be presented to QSIC in October for approval, following the necessary consultation. February 2022: update has been developed and will be submitted to QSIC in May 2022 for approval.	Oct-22
Fire safety policy	19 December 2017	01 April 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	March 2022 update: Policy to be reviewed in Aprill/ May 2022 and updated as required prior to being sent out for consultation. Included in Health and Safety workplan 2022/23. June update: On 27 May 2021, the Board approved revision to QSIC ToR to remit Health and safety matters to QSIC from PODC. As such this policy now falls within the remit of QSIC. 21 April 2021 – PODC approved temporary extension pending full review of the policy. April 2021 update - This policy is still applicable in its current form and a review will take place in 2022. Request temporary extension to the policy to April 2022.	Jul-22
Fire Safety Procedure	19 December 2017	01 April 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	March 2022 update: Procedure to be reviewed in Aprill/ May 2022 and updated as required prior to being sent out for consultation. Included in Health and Safety workplan 2022/23. June update: On 27 May 2021, the Board approved revision to QSIC ToR to remit Health and safety matters to QSIC from PODC. As such this policy now falls within the remit of QSIC. 21 April 2021 – PODC approved temporary extension pending full review of the policy. April 2021 update - This policy is still applicable in its current form and a review will take place in 2022. Request temporary extension to the policy to April 2022.	Jul-22

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Health and Safety Policy	27 March 2018	01 April 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	<p>March 2022 update: Policy has been updated and will be sent for consultation in April 2022.</p> <p>June update: On 27 May 2021, the Board approved revision to QSIC ToR to remit Health and safety matters to QSIC from PODC. As such this policy now falls within the remit of QSIC.</p> <p>21 April 2021 – PODC approved temporary extension pending full review of the policy. April 2021 update - This policy is still applicable in its current form and a review will take place in 2022. Request temporary extension to the policy to April 2022.</p>	Jun-22
Water management policy	19 December 2017	01 April 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	<p>March 2022 update: Policy to be reviewed in April/ May 2022 and updated as required prior to being sent out for consultation. Included in Health and Safety workplan 2022/23.</p> <p>June update: On 27 May 2021, the Board approved revision to QSIC ToR to remit Health and safety matters to QSIC from PODC. As such this policy now falls within the remit of QSIC.</p> <p>21 April 2021 – PODC approved temporary extension pending full review of the policy. April 2021 update - April 2021 update - This policy is still applicable in its current form and a review will take place in 2022. Request temporary extension to the policy to April 2022.</p> <p>19.12.17 Approved via Chair's action. Replaces Black 67 Waste Management Policy and Yellow 16 Legionella/Legionnaire.</p>	Mar-23
Water management procedure	19 December 2017	01 April 2022	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	Deputy Chief Executive / Executive Director of Operations and Finance	Overdue for review - Low risk presented	<p>March 2022 update: Procedure to be reviewed in April/ May 2022 and updated as required prior to being sent out for consultation. Included in Health and Safety workplan 2022/23.</p> <p>21 April 2021 – PODC approved temporary extension pending full review of the policy. April 2021 update - April 2021 update - This policy is still applicable in its current form and a review will take place in 2022. Request temporary extension to the policy to April 2022.</p>	Mar-23
Decontamination policy	16 April 2019	16 April 2022	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Due for review by July 2022. New lead for IPC. To be raised in IPC group meeting on 18th Jan 2022. To be reviewed and updated.</p>	Jul-22
Decontamination procedure	16 April 2019	16 April 2022	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Due for review by July 2022. New lead for IPC. To be raised in IPC group meeting on 18th Jan 2022. To be reviewed and updated.</p>	Jul-22
Infection Prevention and control policy	16 April 2019	16 April 2022	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Overdue for review - Low risk presented	<p>March 2022 update: Due for review by July 2022. New lead for IPC. To be raised in IPC group meeting on 18th Jan 2022. To be reviewed and updated.</p>	Jul-22

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Medicines management policy and code of practice	31 January 2013	31 January 2016	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	National Director Health Protection and Screening Services, Executive Medical Director	Overdue for review - Moderate risk presented	<p>April 2022: Mapping of scope of practice in PHW has been undertaken. No specialist capacity available to complete policy review.</p> <p>October 2021: The Medical Director has followed this up with the Cardiff and Vale team recently, with whom we have an SLA for pharmaceutical support and advice. We have a suggested way forward, which is to adopt the Cardiff and Vale policy. However, the scope of our business is very different, so this will need to be adapted for PHW and we will need to identify some resource to do this. This will take a bit more time as it is not just about changing references to different organisations.</p> <p>Jan 2020: A Specialist Pharmacist has now been transferred to the Health Protection Division from the Health and Well-being Directorate (October 2019). To help resource going forward, a formal Service Level Agreement (SLA) was agreed between Public Health Wales and Cardiff and Vale University Health Board (CVUHB) to pick up operational medicines management policy/ procedures that CVUHB undertake on Public Health Wales' behalf. Consultation has been undertaken with the Principal Pharmacist at CAVUHB and the Asst. Director of QNAHPS to determine whether the a separate policy/procedure is required.</p> <p>04.06.19 - Discussions are ongoing with regard to the securing of a Professional Lead for Pharmacy in Public Health Services. Once this resource is in place, work on the policy and code of practice will be undertaken.</p>	Not known
Medical Devices and Equipment Management Policy	27 November 2018	27 November 2021	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	National Director Health Protection and Screening Services, Executive Medical Director	Overdue - Risk assessment awaited	<p>April 2022: A Medical Devices Management Group was established recently and the review of the policy and procedure will be included on the workplan. Aim for completion in September 2022.</p> <p>October 2021 - PHS is in the process of identifying the capacity to take this forward and will work with Stuart Silcox to establish a working group</p> <p>Ratified for approval at QSI 15.01.19. Previously Black 94</p>	Sep-22
Medical Devices and Equipment Management Procedure	27 November 2018	27 November 2021	Policy review date passed - action underway/required	Quality, Safety and Improvement Committee	National Director Health Protection and Screening Services, Executive Medical Director	Overdue - Risk assessment awaited	<p>April 2022: A Medical Devices Management Group was established recently and the review of the policy and procedure will be included on the workplan. Aim for completion in September 2022.</p> <p>October 2021 - PHS is in the process of identifying the capacity to take this forward and will work with Stuart Silcox to establish a working group</p> <p>Ratified for approval at QSI 15.01.19. Previously Black 94</p>	Sep-22
Adults at Risk procedure	15 February 2022	15 February 2023	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Children at Risk procedure	15 February 2022	15 February 2023	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		

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Safeguarding policy	15 February 2022	15 February 2023	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Violence against Women, Domestic Abuse and sexual violence procedure	15 February 2022	15 February 2023	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Exposure Injury (including needle stick injury) and Safe Management of Sharps Policy	14 April 2021	14 April 2024	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Exposure Injury (including needle stick injury) and Safe Management of Sharps Procedure	14 April 2021	14 April 2024	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Outbreak Management Policy	10 November 2021	10 November 2024	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		
Outbreak Management Procedure	10 November 2021	10 November 2024	Policy in date	Quality, Safety and Improvement Committee	Executive Director of Quality, Nursing and Allied Health Professionals	Approved		