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**Confirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
20 July 2022, 10:00
Held via Microsoft Teams**

| Present: | | |
|------------------------|-------|--|
| Kate Eden | (KE) | Committee Chair, Vice Chair of the Board, and Non-Executive Director |
| Nick Elliott | (NE) | Non-Executive Director (Data and Digital) |
| Sian Griffiths | (SG) | Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee |
| In Attendance: | | |
| Rhiannon Beaumont-Wood | (RBW) | Executive Director of Quality, Nursing and Allied Health Professionals |
| Liz Blayney | (LB) | Deputy Board Secretary and Board Governance Manager |
| Helen Bushell | (HB) | Board Secretary and Head of Board Business Unit |
| Tracey Cooper | (TC) | Chief Executive Officer (<i>left at 12:00pm</i>) |
| Angela Cook | (AC) | Deputy Director of Quality and Nursing |
| Sian Davies | (SD) | Audit Wales (<i>for item 4.1</i>) |
| Rebecca Fogarty | (RF) | Engagement & Collaboration Manager (<i>for item 3</i>) |
| Wayne Jepson | (WP) | Programme Lead / Improvement Advisor |
| Angela Jones | (AJ) | Acting Director of Health and Well-being |
| Huw Jones | (HJ) | Health Inspectorate Wales Representative |
| Junaid Iqbal | (JI) | Lead for User Experience (<i>for item 3</i>) |
| Simon Kimber | (SK) | CIVICA representative (<i>for item 3</i>) |
| Meng Khaw | (MK) | National Director of Health Protection and Screening Services, Executive Medical Director |
| Kate Mackenzie | (KM) | Head of Improvement Analytics on behalf of John Boulton |
| Olusola Okhiria | (OO) | Trade Union representative (<i>left at 12:00pm</i>) |
| Chris Orr | (CO) | Head of Estates and Health and Safety/ General Manager Operations and Finance (<i>for item 4.10</i>) |
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| Stuart Silcox | (SS) | Assistant Director of Integrated Governance |
| Jessica Taylor | (JT) | Quality Improvement and Clinical Audit Support Officer (<i>for item 5.2.2, 5.2.3 and 5.3</i>) |
| Francesca Thomas | (FT) | Head of Putting Things Right |
| Sarah Thomas | (ST) | Health Inspectorate Wales Representative |
| Stephanie Wilkins | (SW) | Trade Union representative |
| Verity Winn | (VW) | Audit Wales |

Apologies

| | | |
|--------------------|------|---|
| John Boulton | (JB) | National Director of NHS Quality Improvement and Patient Safety/ Director Improvement Cymru |
| Diane Crone | (DC) | Non-Executive Director (University) |
| Christopher Thomas | (CT) | Governance and General Manager |

The meeting commenced at 10:00

QSIK 1/2022.07.20 Welcome, Introductions and apologies

The Chair opened the meeting and welcomed all present, and noted that 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 when the minutes had been agreed at the following meeting.

QSIK 2/2022.07.20 Declarations of Interest

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

QSIK 3/2022.07.20 User Experience

RBW introduced the 'Our Approach to Engagement – update on progress of year 2', noting that the report had been considered by the Executive Team, with particular attention given to the Organisation's appetite for and around embedding user feedback and experience.

RF provided a presentation on the key areas, highlighting: the overarching approach for equitable effective public engagement; its strategic alignment; engagement activities currently underway; progress against drivers and key discussion points from the Strategic Business Executive Team session. RF went on to provide an overview of the work around Young Ambassadors and the proposed approach for future participation with the Board.

SK provided an overview of the CIVICA system, an experience and engagement insights platform.

The Committee considered:

- The Organisation's appetite for engagement, and whether there was a plan to ensure people were not overwhelmed with data. RBW commented that the team had engaged with other external organisations using the system to learn from them, and recognised that there was more work to do to understand and prioritise who we currently and wish to engage with,
- The methodology and distribution of multiplatform surveys through social media QR codes, mobiles and paper based systems.
- SG commented that she looked forward to future presentations that considered qualitative and quantitative data, and how they could be used across Directorates,
- That the system presented the opportunity to gauge organisational understanding from the people that we serve, which would be particularly helpful for the Health and Wellbeing and the Health Protection and Screening Services Directorates. The Committee noted the importance of having the correct hierarchy in place via alignment with Datix, and the ability to publicise the use of the system across internally and externally to the Organisation.
- That the People and Organisational Development Team were interested in future opportunities to use the system to garner staff views, i.e. via the use of the long term strategy pulse survey. It was noted that the Data, Knowledge and Research Directorate would give consideration to the use of surveys to try to mitigate survey fatigue.

On behalf of the Committee, KE thanked the team for the informative presentation and looked forward to future updates.

The Committee took **assurance** that the Year 2 Implementation Plan for 'Our Approach to Engagement' was progressing and that the CIVICA Experience system had been implemented with ongoing work to embed its capability across the organisation.

QSIC 4/2022.07.20

Items for Assurance

QSIC 4.1/2022.07.20

Quality Governance Arrangements (Audit Wales)

VW presented the key findings of the review of the Quality Governance Arrangements at Public Health Wales, which provided context and background to the reported recommendations. The audit's overall conclusion was that the Trust was committed to improving its quality governance arrangements. The current arrangements were effective, but they could be better coordinated to ensure the consistency of the approach and share learning. VW concluded the presentation by commenting that it

was an overall positive picture in light of the pandemic and that the Trust had already begun addressing many of the recommendations.

RBW provided a summary and overview of the management responses to each of the audit recommendations and HB advised of the oversight arrangements for implementation of the recommendations.

The Committee considered:

- The reasons for the below target compliance on staff appraisals and training, noting the large influx of new staff and leaders during the pandemic. TC also noted that the Director of People and Organisational Development was reviewing the situation around appraisal and medics job planning in order to demonstrate a more accurate position.
- TC noted the development of a Risk Development Plan to strengthen the risk management arrangements in place,
- The work underway to improve the management of policies and procedures by the Board Business Unit, and the planned improvement work around Quality Impact Assessments. HB agreed to follow up discussion on the cross-organisational working group with SW outside of the meeting.

The Committee thanked VW and Audit Wales for their work, and noting the Organisation's areas of progression, took **assurance** on the management response and plan to address the recommendations identified in the Audit Wales *Review of Quality Governance Arrangements – Public Health Wales NHS Trust* report.

QSIC 4.4/2022.07.20

Managing Risk

In introducing the Strategic Risk Register, RBW highlighted the review of strategic priorities post pandemic, and Board consideration of the Organisation's risk appetite against the strategic priorities.

As Strategic Risk Officers, TC and MK provided an overview of Strategic Risk 1 and 2 respectively.

The Committee considered:

- Delivery confidence against the Strategic Risks and the approval of the Integrated Medium Term Plan,
- The management of risk to services by undertaking look back exercises during the pandemic. MG confirmed that the Emergency Planning Team were compiling lessons learnt, he would review the planned dissemination of the learning throughout the Organisation and seek assurance of the actions taken from the learning exercise.
- MG welcomed SG's offer of support in encouraging development of new ways of working with clinical staff, due to existing shortages within the clinical workforce.

The Committee took **assurance** on the effectiveness of the management of risk relating to the Committee's remit.

QSIC 4.3/2022.07.20

Break

QSIC 4.2/2022.07.20

Putting Things Right

QSIC 4.2a/2022.07.20

Putting Things Report (Quarter 1, 2022-23 including National Reportable Incidents)

In introducing the report, FT presented the Quality Dashboard extract of the Performance Assurance Dashboard, highlighting the work with colleagues to enhance the Nationally Reportable Incidents and No Surprises and Complaints Dashboard, and the intention to build in informal complaints.

The Committee took **assurance** on the effective management of Putting Things Right.

QSIC 4.2b/2022.07.20

Putting Things Right Annual Report 2021-22

In introducing the Annual Report, FT highlighted the significantly increased performance in acknowledging and responding to complaints, and the roll out of training which had led to improved reporting rates.

The Committee **accepted** the Putting Things Right Annual Report 2021-22 and thanked FT for her leadership in this area over the past year.

QSIC 4.5/2022.07.20

Alerts Report Q1 2022-23

FT introduced the report by highlighting the one alert relevant to the Organisation. FT advised of the Welsh Government intention to create a module to distribute alerts, which would help to streamline the Organisation's internal process.

The Committee considered and took **assurance** that an effective management system for distribution, monitoring and record keeping for alerts / safety notices received and welcomed a future update on the new development.

QSIC 4.6/2022.07.20

Once for Wales Concerns Management System Implementation Update

The Committee **agreed** to receive an email update on the implementation of the Once for Wales Concerns Management system.

Action: SS

QSIC 4.7/2022.07.20

Winter Planning (Health Protection)

The Committee considered a verbal update on the Health Protection Winter Plan from MK, which focused on the following:

- COVID response framework – WG 'Together for a safer future: Wales' long-term Covid-19 transition from pandemic to endemic'.
- Proposal for COVID testing submitted to Welsh Government Business case for integrated surveillance for respiratory infections submitted to Welsh Government, to include integrated community sentinel surveillance for respiratory infections including COVID-19, influenza and RSV.
- PHW led the revision of the National Outbreak Control Plan, to take on board key lessons identified during the COVID response. A full review of the plan was due in June 2023.
- Vaccine Preventable disease programme were continuing to support the integration of the COVID-19 and flu programmes into a single winter respiratory virus programme.
- Policy Team in the WHO CC Directorate were undertaking work to identify any key learning from pandemic response and recovery to inform future health and care system planning and support resilience during winter. The output would be a concise presentation / report that helps to share learning from across Wales, and would be published in late summer.

SG queried how best to take an integrated approach to the management of COVID in order to maximise the respiratory disease approach across the board, and requested to hear more about the implementation of programmes in Wales compared to England. MK advised that an integrated approach was planned, in which a single swab would test for a range of respiratory diseases. He touched upon the sentinel surveillance and work of the four nations and agreed to discuss it further with SG outside of the meeting.

The Committee thanked MK for the verbal update.

QSIC 4.8/2022.07.20

**Internal Influenza Vaccination Campaign
2022-23**

RBW provided a verbal update on the Organisation's influenza vaccination campaign for 2022-23, noting that:

- The draft plan submitted to the Executive Team had some elements of planning assumptions incorporated within the plan due to some unknowns at a national planning level.
- A recent Welsh Health Circular outlined the expectation of an Influenza and Covid co-vaccination – delivery methods would need to be worked through. Delivery would likely be through service level agreements with the Welsh Ambulance Service, some Health Boards occupational health departments and internal peer delivery,
- There were barriers and issues of data confidence due to numerous reporting systems in place across the NHS system that IB had highlighted to Digital Health Care Wales.

The Committee thanked RBW for the verbal update, and **asked** for the update on Flu planning 2022/23 be circulated to the Committee once finalised.

Action: RBW

QSIC 4.9/2022.07.20 | Office of the Medical Director

MK introduced the report on the Office of the Medical Director.

SW requested additional information on the benefits of establishing an Office of the Medical Director. MK provided an overview of the structure, noting that it ensured there was dedicated resource to carry out the role. MK and RBW offered to further discuss the setup of the Office with SW outside of the meeting.

Committee members offered their support of the new Office, noting that it would provide an opportunity to develop new ways of working, facilitate a greater knowledge repository and provided a forum for training in a multi-disciplinary world.

The Committee noted and took **assurance** on the roles and responsibilities of the Executive Medical Director and the overview of the functions of the Office of the Medical Director.

QSIC 4.10/2022.07.20 | Health and Safety Report Q1 2022-23

CO introduced the Health and Safety report for Quarter 1, 2022/23.

The Committee considered the improvements to Health and Safety statutory and mandatory training compliance and noted the work to improve water compliance across the Organisation's buildings.

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

QSIC 5/2022.07.20 | Items for Approval

QSIC 5.1/2022.07.20 | Minutes, Action Log and Matters Arising of the meeting

The Committee:

- **Approved** the minutes of the meeting held on 18 May 2022 as a true and accurate records of the meeting;
- **Approved** the closure of two actions on the action log;
- **Noted** no matters arising.

QSIC 5.2/2022.07.20 | Policies for Approval

QSIC 5.2.1/2022.07.20 | Health and Safety Policy

The Committee considered and **approved** the revised Health and Safety Policy.

QSIC 5.2.2/2022.07.20 Claims Management Policy and Procedure

The Committee **approved** the respective Claims Management Policy and Procedure.

The Committee noted that the concerns management would be reviewed as part of the cross-organisational working group that HB planned to convene to review the range of Impact Assessments in use.

QSIC 5.2.3/2022.07.20 Quality and Clinical Audit Procedure

The Committee **approved** the Quality and Clinical Audit procedure.

QSIC 5.3/2022.07.20 Quality and Clinical Audit

JT introduced the report, highlighting improved engagement across the Organisation to identify quality and clinical audits taking place, consideration of alignment with Internal Audit and a focus on initiative improvements.

Committee members commended JT on the Quality and Clinical Audit improvement works.

RBW and MK agreed to consider alignment of the audit plan with the Long Term Strategy objects or Integrated Medium Term Plan at their next joint meeting.

The Committee:

- Took **assurance** on the progress of the Quality and Clinical Audit Plan for 2021-22 and
- **Approved** the Quality and Clinical Audit Plan for 2022-23

QSIC 6/2022.07.20 Items to Note**QSIC 6.1/2022.07.20 Committee Work Plan 2022/23**

The Committee **noted** the Committee Work Plan for 2022/23.

QSIC 6.2/2022.07.20 Group Terms of Reference

The Committee **noted** the respective Infection Prevention and Control Group and Safeguarding Group Terms of References.

QSIC 7.6/2022.05.18 Committee Feedback

Committee members discussed the potential for both roving Committee meetings and in person meetings.

The Committee **noted** that additional feedback on the meeting would be sought via email.

The Committee **noted** that the next meeting would be held on 19 October 2022.

The open session closed at 13:10

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