

**Unconfirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
12 October 2023, 09:00
Held in Capital Quarter 2 and via Microsoft Teams**

Present:		
Kate Eden	(KE)	Chair of the meeting, Vice Chair of the Board, and Non-Executive Director
Nick Elliott	(NE)	Non-Executive Director and Chair of Audit and Corporate Governance Committee
Jan Williams	(JW)	Chair of Public Health Wales (<i>joined the meeting at 09:20am</i>)
In Attendance:		
Sumina Azam	(SA)	Executive Director of Policy and International Health, World Health Organisation Collaborating Centre on Investment for Health & Wellbeing (WHO CC) (for item 3.3)
Anne Beegan	(AB)	Audit Wales
Julie Bishop	(JBi)	Director of Health Improvement, on behalf of Jim McManus (left at 11:00).
Liz Blayney	(LB)	Deputy Board Secretary and Board Governance Manager
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru
Angela Cook	(AC)	Assistant Director of Quality and Nursing, Quality Nursing and Allied Health Professionals
Tracey Cooper	(TC)	Chief Executive (part of the meeting, left at 10:15)
Eleri Davies	(ED)	Deputy Medical Director and Head of HARP (for item 3.8.1)
Sharon Hillier	(SH)	Screening Director (for item 3.2)
Andrew Jones	(AJ)	Deputy Director of Health Protection and Screening Services
Jim McManus	(JM)	National Director of Health and Wellbeing (joined at 11:58)
Christopher Thomas	(CT)	Governance and General Manager
Ruth Tofton	(RT)	Business/Workforce Development Manager, Health Protection Programmes (Observing)
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Caroline Whittaker	(CW)	Professional Lead Nursing, Midwifery and Standards Manager (for item 3.8.2)
Verity Winn	(VW)	Audit Wales (for item 3.2)

Apologies		
Diane Crone	(DC)	Committee Chair and Non-Executive Director (University)
Claire Birchall	(CB)	Executive Director of Quality, Nursing and Allied Health Professionals (Interim)
Sian Griffiths	(SG)	Non-Executive Director (Public Health) and Chair of the Knowledge, Research and Information Committee
Meng Khaw	(MK)	National Director of Health Protection and Screening Services, Executive Medical Director
Olusola Okhiria	(OO)	Trade Union representative
<i>The meeting commenced at 09:00</i>		
QSIC 2023.10.12/1	Welcome, Introductions and Apologies	
<p>The Chair opened the meeting and welcomed all present.</p> <p>The Committee noted the apologies above.</p> <p>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.</p>		
QSIC 2023.10.12/2	Declaration of Interest	
<p>There were no declarations of interest in addition to those already declared on the Declarations of Interest Register.</p>		
QSIC 2023.10.12/3	Items for Assurance	
QSIC 2023.10.12/3.1	Tuberculosis (TB) Action Plan- Update on Implementation	
<p>AJ introduced the report, which outlined progress against seven recommendations made jointly to Public Health Wales and Hywel Dda University Health Board, following an independent review into the response to the outbreak of Tuberculosis (TB) centred on Llwynhendy, Carmarthenshire.</p> <p>AJ highlighted the system leadership role that the Organisation had undertaken and identification of improvements across the system at an All-Wales level, and the development of an action plan with identified leads to take forward the recommendations at a local level.</p> <p>LB noted the intention for Hywel Dda University Health Board to share their report regarding their actions against the recommendations, which may provide additional assurance to the Committee on the collaboration between the two Organisations to meet the joint recommendations.</p> <p>The Committee thanked AJ for his update, noting that this was the first iteration of the report.</p>		

The Committee suggested:

- That future iterations of the report clarify the varying roles, and split of recommendations and actions for Welsh Government, Public Health Wales and Hywel Dda University Health Board,
- Further clarity around timelines, and consideration of a potential RAG rating system,
- Consideration of the overall governance arrangements, including a potential joint Board session with Hywel Dda University Health Board to reflect on the system as a whole and to sign off the actions against the agreed recommendations.

The Committee took **assurance** on the progress of actions contained within the approved PHW TB Action Plan following the external review of the management of the TB outbreak in Llwynhendy, Carmarthenshire and looked forward to considering a further update that reflected the Committee’s suggestions at the February 2024 Committee meeting.

Action: MK/LB

QSIC 2023.10.12/3.2

Audit Wales Report on Screening, and Management Response

VW presented a presentation in summary of the Audit Wales review of arrangements to recover screening services (The Wales Abdominal Aortic Aneurysm (AAA), Breast Test Wales and Diabetic Eye screening programmes) and the key findings and recommendations made, particularly in terms of the quality and safety of screening recovery during a challenging time. The Committee noted that report had previously been considered by the Audit and Corporate Governance Committee (ACGC).

SH added detail to the report, referencing the management response to address the recommendations around service demand/capacity, workforce and resource implications, and performance activity considered at Board and Committee.

The Committee offered support and thanks to the testament of SH’s leadership and her teams’ efforts to recover the screening programmes, and thanked VW for the helpful, balanced report.

The Committee discussed:

- And were in agreement that TC would send a letter to the Screening Recovery Team in thanks of their support,

Action: TC

- Referenced previous discussion at ACGC around societal issues and the wider context related to increasing demands for diabetic care,
- Consideration of the fit with broader workforce planning, and at an All-Wales level, recruitment of specialist posts to meet growth demand,
- The work underway to review aspects of the performance dashboard and workforce.

SH went on to request Committee feedback on future iterations of the screening update to Committee, which had previously focused on the recovery of the screening

services. The Committee were keen that future iterations consider both screening recovery and future developments, focused on quality.

The Committee discussed:

- Building operational research capability for modelling purposes across the Organisation; noting that TC would take forward discussion with JB and CB regarding support from Improvement Cymru,
- Reporting requirements considering the Duty of Quality Act, and taking a structured approach to introduce informative time series data that would display the trajectory vs plan,
- Amplification of the citizen voice and staff feedback via the inclusion of live and agile service user satisfaction / experience information.

The Committee requested that SH liaise with JB and Iain Bell, National Director for Knowledge, Research and Information in order to produce an options paper. The Committee agreed to hold a workshop at the next Committee meeting to consider these points in further detail.

Action: MK/SH

The Committee took **assurance** on the management response to the Audit Wales Report on screening service recovery within Public Health Wales.

QSIC 2023.10.12/3.3

Managing Risk (Strategic Risk Register)

AC introduced the Strategic Risk report, noting that future iterations would include explicit reference to the Public Inquiry within risks 5 and 6.

The Committee considered updates to each of the Strategic Risks (SR), noting:

- SR1: JB highlighted the opportunity to strengthen more clearly the Organisations' role in terms of ensuring data availability to the wider system around population risks, our role in mitigation, and improved articulation around screening and impact on population,
- SR2: JB noted the intention to clarify and update the risk to reflect changes at a system level and the need to review timescales related to the healthcare public health element. The Committee also suggested consideration of the prevalence of disease and prevention of diabetes within this,
- SR3: SA highlighted the work around Behavioural Science, referencing a future planned Board session that would look to maximise resources for impact, and the development of a strategic plan to build capacity and capability across the organisation. Referencing the 20 mile per hour change, the Committee discussed the Organisations' wider system role in relation to working across government to supply data intelligence, ensuring awareness of public health messages to support the population, and noted that the Organisation may look to undertake a piece of learning to better inform future efforts,
- SR5- AJ highlighted the work underway in terms of horizon scanning and the Health Protection response,
- SR6- AJ noted the positive updates in some of the challenging areas, such as microbiology and service delivery. The Board Secretary agreed to liaise with Meng Khaw, Lead Executive to review the risk rating, ensuring that the work

underway in terms of screening recovery was accurately reflected in the overall risk rating.

Action: PV/MK

- The Committee discussed the number of Strategic Risks within the remit of the Committee and the challenge this presented to discuss in depth within the time available at the meeting. It was agreed that the Committee approach to Strategic risk would be reviewed to consider allocation of Risks between the Committees, and opportunities for joint working.

Action: PV

The Committee considered the strategic risk register relevant to the Committee's remit and took **assurance** on the management of those strategic risks within the organisation.

QSIC 2023.10.12/3.4

Update on Implementation of Duty of Candour and Duty of Quality Act

AC introduced the report, which provided the Committee with an update on progress on implementation of the Duty of Quality and Candour since the last Committee meeting.

AC advised on progress to date to implement the Duty of Candour, highlighting the closure of one confirmed case of applicable Duty of Candour, and the work underway to begin reporting on compliance with the training package, and hosting and commissioning arrangements that were being progressed.

The Committee queried whether the one case was in line with expectation. AC confirmed that this was in line with expectation at this point, noting that 'moderate to severe' harm cases would likely be identified retrospectively from audits undertaken, and only applicable from the date of the implementation of the Act, 1 April 2023.

JB went on to provide an update against actions to implement the Duty of Quality, noting the work underway: within the Board Business Unit around the decision making process through the lens of the Duty of Quality, which was reflected in an adjusted milestone to March 2024; work around the Performance Assurance Dashboard; the structure of the Annual Quality Report and refresh of the Organisation's web presence, which was being led by Iain Bell.

The Committee noted that consideration of the web development work by the Knowledge, Research and Information Committee may be beneficial, and went on to request that LB look to facilitate joint work between all the Board Committees around workforce matters.

Action: LB

The Committee thanked AC and JB for their updates and took **assurance** on the progress underway to meet the requirements of the Duties of Candour and Quality in Public Health Wales.

QSIC 2023.10.12/3.6	Safeguarding Maturity Matrix Improvement Plan and Mid-Year Update
<p>AC introduced the report, summarising the Organisation’s annual self-assessment position against the 2023-24 Safeguarding Maturity Matrix tool, and a mid-year update on the work of the internal Safeguarding Group to demonstrate ongoing work and improvements to safeguard adults and children over the last six months. AC highlighted the need to focus on children’s rights, this was being threaded through Safeguarding as a key piece of work, as demonstrated by work planned with the Young Ambassadors in February 2024.</p> <p>The Committee were pleased to see the new iteration of the report, and the focus on Children’s rights, and took assurance that the Safeguarding Maturity Matrix Improvement Plan and associated work of the Safeguarding Group ensured that arrangements to safeguard and promote the welfare of children, young people and adults at risk were in place and monitored.</p>	
QSIC 2023.10.12/3.7	Infection, Prevention and Control Mid-Year Update
<p>AC introduced the mid-year report, summarising the progress made against the Infection Prevention and Control (IPC) workplan for 2023-24.</p> <p>AC highlighted the commencement of the annual flu vaccination programme, which was a mixed model of delivery, and the work underway to seek a resolution to an issue with the vaccination recording system, with support from Iain Bell and Digital Health Care Wales (DHCW). The Committee requested a verbal update on discussions with DHCW at the next meeting to ensure the Committee remained sighted on these issues. Action: AC</p> <p>AC concluded the summary of the report by highlighting the IPC audit programme planned for implementation January 2024, and reduced capacity to undertake reviews of outstanding policies due to reduced workforce capacity, though a number had been reviewed and were out for Organisation wide consultation.</p> <p>The Committee reflected on the number of milestones that had changed throughout the course of the Committee meeting and highlighted the pertinent issue of reviewing policies in a timely manner. Referencing the Bi-annual policy update later in the agenda, LB gave assurance of the large-scale work underway to review and update policies.</p> <p>The Committee took assurance from this mid-year report that the IPC Group and Lead Nurse for IPC (Corporate) ensured that the Organisation was meeting its Infection Prevention and Control responsibilities.</p>	
QSIC 2023.10.12/3.8	Job Families
QSIC 2023.10.12/3.8.1	Revalidation Progress Report 2022/23
<p>ED provided an overview of the report, which summarised the effective oversight of the revalidation process for medical colleagues during 2022/23, and the development of the Office of the Medical Directors’ team to support the processes required for</p>	

revalidation. This was supported by the revalidation report submitted to Health Education and Improvement Wales (HEIW), which provided greater detail on the process and success in overseeing the revalidation of medical colleagues.

The Committee:

- Noted that as there were multi professional consultants in employment, appraisers were not limited to those with a medical background,
- Noted that the Organisation was the responsible officer for medical and nursing staff within the NHS Executive; updates on this would be provided in future iterations of the annual report,
- Considered a verbal update from a recent HEIW visit, noting that a commendation had been made regarding the documented progress of the arrangements for revalidation and support for the consultant body. Areas of identified improvements centred around the need to have a systematic Internal Quality Assurance (IQA) process in place for the appraisal process.

The Committee thanked ED for the comprehensive update, and the commendable progress made in this area.

The Committee took **assurance** that there were processes in place to manage and support the revalidation of medically qualified colleagues across the organisation.

QSIC 2023.10.12/3.8.2

Audit of arrangements within Public Health Wales for verifying active professional registration for 2023/24 (HCPC/ MNC)

CW provided an overview of the report into the audit of arrangements within Public Health Wales for verifying active professional registration with the Health and Care Professions Council (HCPC), Nursing and Midwifery Council (NMC) and General Medical Council (GMC) for 2022/23.

CW commented on the inclusion of medical practitioners in the audit for the first time, showcasing an excellent integrative approach that would be refined going forward. CW went on to confirm that during 1 April 2022 and 31 March 2023, all registered health practitioners that required registration for their role had active registration and that there had been no fitness to practice referrals during this period. CW concluded the update by noting the intention of CB and MK to progress the recruitment vacancy of the Professional Lead for Healthcare Scientists and Allied Healthcare Practitioners.

The Committee discussed:

- A sustained issue around accurate recording of biomedical scientists and trainees on Electronic Staff Record (ESR). CW advised of the intention to work with key managers over the next 12 months to improve ESR recording and would update on progress at the next iteration of the report.

The Committee:

- Took **assurance** that arrangements were in place within Public Health Wales to ensure all Nursing and Midwifery Council, Health and Care Professions Council

<p>and General Medical Council Registrants were registered with the appropriate statutory regulating body,</p> <ul style="list-style-type: none"> • Took assurance that a similar system was in place for all Consultant Public Health Practitioners. 	
QSIC 2023.10.12/4	Items for Approval
QSIC 2023.10.12/4.1	Policies and Procedures for Approval
<p>The Committee considered and:</p> <ul style="list-style-type: none"> • Approved the Safeguarding Policy • Approved the Adults at Risk Procedure • Approved the Child at Risk Procedure • Approved the Violence Against Women, Domestic Abuse and Sexual Violence Procedure 	
QSIC 2023.10.12/4.2	Minutes, Action Log and Matters Arising of Meeting
<p>The Committee noted that the minutes of the meeting from 18 July 2023 would be considered at the December 2023 Committee meeting to ensure that members who were in attendance at the July Committee meeting were able to confirm their accuracy.</p> <p>The Committee considered the updates to the open actions, requesting that an update to the two Strategic Risk Register related actions be considered at the next meeting, following the update to the Board in November, and approved the closure of the completed actions on the Action Log.</p> <p>Matters Arising: Arrangements for Medical Devices</p> <p>AJ provided an update on progress with arrangements for medical devices management, noting that the revised policy was with the Leadership Team for prior endorsement. The policy was due to be submitted for approval at the December Committee meeting.</p> <p>AJ went on to confirm that MK had made an appointment in relation to an Assistant Medical Director for 2 sessions per week and was due to interview for the Medical Devices Lead position later that day.</p> <p>The Committee queried any relevant tie into Iain Bell's directorate in terms of data structure. AJ confirmed that MK would work closely with Iain Bell on this, and that the policy referenced the need to ensure data and IT issues were included as medical devices, with the identification of required assessments made.</p>	
QSIC 2023.10.12/5	Items to Note
QSIC 2023.10.12/5.1	Health and Care Standards 2022-23
<p>The Committee noted the report and took assurance that a revised Health and Care Standards process had been completed for 2022-23. The Committee noted that future reporting requirements would be taken forward as Health and Care Quality Standards.</p>	

QSIC 2023.10.12/5.2	Register of Policies and Written Control Documents
<p>The Committee noted the report and took assurance on the prioritisation and progress being made to review Corporate policies, procedures and other written control documents within the remit of the Committee.</p>	
QSIC 2023.10.12/5.3	Seasonal Planning Update (Health Protection)
<p>The Committee noted the report and took assurance from the update on planning, preparation and progress for Health Protection and Microbiology Services for Winter 2023/24.</p> <p>Reflecting on the usefulness of the report, the Committee requested that the report be shared with peer groups such as Chairs and Chief Executives across NHS Wales.</p> <p>Action: AJ/MK</p>	
QSIC 2023.10.12/5.4	Frameworks
<p>The Committee noted the Clinical Governance Framework, Clinical Supervision Framework and Career Frameworks that had been approved by the Business and Executive Team.</p>	
QSIC 2023.10.12/5.5	Committee Workplan 2023-24
<p>The Committee noted the updates to the Committee workplan for 2023-24.</p>	
QSIC 2023.10.12/6	Closing Administration
QSIC 2023.10.12/6.1	Close of Public Meeting
<p>Members were asked to e-mail LB with any feedback on the Committee meeting.</p> <p>Date of next meeting: 13 December 2023.</p> <p>The Chair closed the meeting.</p>	
<p><i>The open session closed at 11:15</i></p>	