

These are unconfirmed minutes of the meeting. Please note these are subject to being confirmed by the Committee at the following meeting



**Unconfirmed Minutes of the Public Health Wales
Quality, Safety and Improvement Committee Meeting
15 February 2023, 10:00
Held in Capital Quarter 2 and via Microsoft Teams**

Present:		
Kate Eden	(KE)	Committee Chair, Vice Chair of the Board, and Non-Executive Director
Diane Crone	(DC)	Non-Executive Director (University)
Nick Elliott	(NE)	Non-Executive Director (Data and Digital)
In Attendance:		
Rhiannon Beaumont-Wood	(RBW)	Executive Director of Quality, Nursing and Allied Health Professionals
Liz Blayney	(LB)	Acting Board Secretary and Head of Board Business Unit
John Boulton	(JB)	National Director of NHS Quality Improvement and Patient Safety/Director Improvement Cymru
Angela Cook	(AC)	Deputy Director of Quality and Nursing, Quality Nursing and Allied Health Professionals
Robin Howe	(RH)	National Clinical Lead for Microbiology Services, Microbiology (For item 4.3.1)
Wayne Jepson	(WP)	Programme Lead / Improvement Advisor (left at 11:33)
Andrew Jones	(AJ)	Deputy Director of Health Protection and Screening Services, Executive Team
Angela Jones	(AJo)	Acting Director of Health and Well-Being
Chris Orr	(CO)	Head of Estates and Health and Safety/ General Manager Operations and Finance (For Item 4.7)
Reanne Reffell	(RR)	Acting Board Governance Manager
Stuart Silcox	(SS)	Assistant Director Integrated Governance, Quality Safety and Allied Nursing Health Professional
Christopher Thomas	(CT)	Governance and General Manager

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Francesca Thomas	(FT)	Head of Putting Things Right (For Item 4.4)
Jan Williams	(JW)	Chair of the Board (Joined at 11:05)
Stephanie Wilkins	(SW)	Trade Union Representative (Left the meeting at 12:00)

Apologies

Tracey Cooper	(TC)	Chief Executive Officer
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

Secretariat

Andrew Morton	(AM)	Board Support Officer
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The meeting commenced at 10:00

QSIK 15/02/2023/1 Welcome, Introductions and Apologies

The Chair opened the meeting and welcomed all present.

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 15/02/2023/2 Declaration of Interest

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

QSIK 15/02/2023/3 Deep Dive: Health Improvement

AJo provided a presentation to the Committee summarising the work of the Health and Well Being Directorate:

- She introduced the Dahlgren and Whitehead model which explained the Wider Determinants of Health and Well-Being and noted how this impacted on individuals, and showed aspects of health that the Organisation would focus on as part of its service provision;
- She went on to provide an overview of the programmes delivered under the three divisions within Health and Well-Being: Wider Determinants of Health; Primary Care; and Health Improvement., noting the gradual restart of programmes that were paused during the Covid-19 pandemic.
- She also gave an overview of Key Work streams, which included:
- Influencing how work and education could improve health and equity;

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- Strengthening the public health system to influence wider determinants of health;
- Transformation of primary and community care programmes, delivering a strategic programme, embedding a Primary Care model for Wales and developing Greener Primary Care Wales;
- Providing advice and support to key organisations; to national strategic committees and groups; supporting evidence and data driven primary care; system leadership; Once for Wales guidance; and building the primary care workforce.
- AJo concluded the presentation by highlighting two possible risks aligned to the Long Term Strategy, which related to the potential failure to deliver effective health improvement and the potential failure to support the NHS focus on prevention and early intervention resulting in further inequality.

The Committee discussed:

- The interconnectivity of the projects and how they communicated with each other. AJo explained that in restarting the programmes, reviews had been undertaken which had identified areas where training would be provided to cohorts to allow full system working, such as the whole school approach to mental and emotional well-being;
- The development of healthcare Public Health Function;
- The long term effect on programmes due to the Covid-19 pandemic had. AJo commented that it was too early to determine what effect pausing programmes had on the population though there was likely to be an impact;
- A systems approach to prevention programmes – including measurement, impact and outcomes, noting the cross-committee focus with the Knowledge, Research and Information Committee regarding data.
- Cross-Committee work on workforce data with the People and Organisational Development Committee;
- The consistency of data collection and publication. AJo was working with IB to develop a streamlined process to allow faster turn round of data analysis, to facilitate improvements across the programmes;
- The Committee considered the potential for future deep dives into directly delivered services such as Healthy Working Wales, Help me Quit, Just B.
- Committee members emphasised the need to again consider developing / identifying outcome measures and the impact the programmes had on population health when considering these deep dives;
- The effect of the Local Public Health Team transfer out of the Organisation. The individual relationships were believed to be working well due to the memorandum of understandings in place but systems development was still a work in progress.

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The Committee thanked AJo for the comprehensive presentation, and her team for their development of the programmes.

QSIC 15/02/2023/4	Items for Assurance
QSIC 15/02/2023/4.1	Health and Social Care (Quality and Engagement, Wales) Act
QSIC 15/02/2023/4.1.1	Duty of Quality / Quality as an Organisational Strategy

JB gave the Committee an update on the Organisation's plans to implement the Duty of Quality Act, which was due to come into effect on the 1 April 2023. JB highlighted:

- The importance of Leadership and Culture, and commented on engagement with the Board Business Unit and Integrated Governance Team around the potential impact on decision making across the Organisation;
- Reporting requirements, including an annual report which would include elements from individual Directorates. Quality Standards would be replaced with new evolving standards on 1 April 2023 and would be fully developed and implemented within 18 months;
- Roll out of training and education, including an e-learning module;
- Development and implementation of the Quality Management System. The Improvement hub is up and running and working on projects including Diabetic Eye Screening Wales and data breaches;
- A number of challenges were identified, including outstanding final guidance, and the alignment of the guidance with Commissioning and Hosting Organisations.

The Committee considered the update and took **assurance** on the progress of implementation of the Duty of Quality within Public Health Wales, however the Committee **noted** strong concern around system preparedness for April 2023 due to delays to the publication of final guidance, and the Organisation's ability thereafter to enter an implementation period to fulfil the legal duty.

The Committee asked for a full review and an update on the implementation of the Duty of Quality at the next Committee meeting in May, and at subsequent Committee meetings to ensure the Organisation's compliance with the new legislation.

Action: JB

QSIC 15/02/2023/4.1.2	Duty of Candour Update
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AC gave the Committee an update on progress to implement the Duty of Candour Act which would come into effect on 1 April 2023, noting that the Act linked directly to Risk 207 on the Corporate Risk Register (that Public Health Wales will fail to meet the requirements of the Act).

AC highlighted:

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- Planned communication methods (including letters, educational videos, training modules and workshops) to raise awareness of the new Act with both staff and the public;
- Changes to training requirements, DATIX, Internal Reporting and Governance mechanisms (incorporation with existing Putting Thing Right mechanisms, informing internal audit and Quality Improvement Reporting), and the requirement for an Annual Report;
- Risks and concerns around knowledge and skills, capacity and resources.

The Committee requested that bespoke training modules be made available to the Non-Executives.

Action: AC/LB

The Committee commented on a potential modelling piece of work to understand the impact on programmes following implementation of the Act. AC informed the Committee that a calculation based on the previous 12 months' data had commenced recently to determine the likely impact.

RBW informed the Committee that the Organisation was linking in with the successor body to the Community Health Councils, the Citizens Voice body which has been named Llais (the Welsh word for voice).

The Committee asked for a full review and an update on the implementation of the Duty of Candour at the next Committee meeting in May, and at subsequent Committee meetings to ensure the Organisation's compliance with the new legislation.

Action: RBW

QSI 15/02/2023/4.2

Break

QSI 15/02/2023/4.3

Managing Risk

QSI 15/02/2023/4.3.1

Corporate and Strategic Risk Register

RBW introduced the Strategic and Corporate Risk Registers within the Committees remit.

Referencing Strategic Risk 1, TC had advised RBW that her assessment of Risk 1 remained the same as the Committee's update in December 2022 and that it continued to be managed as part of the Organisation's longer term strategy development.

Referencing Strategic Risk 2, AJ advised that the risk assessment remained stable, with a continued focus on improvement and transformation.

In referencing the Corporate Risks, AJ advised the Committee that the original risks remain unchanged. A new risk (303) had been included in the Register. This was escalated from a Directorate Risk to a Corporate Risk.

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RH gave the Committee a comprehensive update on Corporate Risk 208, which related to challenges facing the delivery of clinical infection services in North Wales, which included difficulties in medical staffing resource and a reliance upon the use of agency medical staff to cover vacancies. RH went on to outline the various approaches that had been considered to meet the needs of the service.

The Committee considered:

- The effect on the work of the clinicians in North Wales, given the prolonged use of agency staff. RH assured the Committee there had not been any discernible effect, further, one of the agency staff employed had been continually employed by the Organisation for five years and was established in the team;
- Progress on discussions with Betsi Cadwaladr Health Board regarding medical training posts. Discussion continued around the possibility of collaboration with Liverpool University Medical School, it was noted that discussions had taken place previously around similar capacity challenges, and noted it may result in a loss of focus towards retaining staff in Wales. The Chair asked that this issue be cross referred to the People and Organisational Development Committee when they considered workforce planning and clinical governance issues;

Action: LB

- The potential development of a new specialist infectious diseases service that would attract consultants to the area, perhaps in collaboration with the newly established Bangor University Medical School. It was noted that this approach would require additional funding and further discussions were needed. RH and AJ noted ongoing discussion with Bangor Medical School regarding opportunities to shape their new curriculum from 2024 onwards.

The Committee thanked RH for his comprehensive update on risk 208.

RBW advised the Committee of a new Corporate Risk relating to LIMS software, noting that it would be available for consideration on the next iteration of the Corporate Risk Register.

The Committee noted that the Knowledge, Research and Improvement Committee would consider a Deep Dive into Equality at their next meeting, which would include reference to Diabetic Eye Screening Service Wales. KE suggested that DC meet with the Chair of the Knowledge, Information and Research Committee to ensure any relevant lessons learnt were considered in follow up at this Committee.

Action: DC

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The Committee **considered** the Strategic and Corporate Risk Register that had relevance to the Committee's remit and **took assurance** that the organisation's Strategic and Corporate risks were being managed appropriately.

QSIC 15/02/2023/4.4

Putting Things Right Q3 including National Reportable Incidents.

FT presented the Putting Things Right Quarter 3 report, highlighting that there were no Nationally Reportable incidents, and three No Surprises incidents, which were within the Health Protection and Screening Services Directorate. FT assured the Committee that full investigations had taken place in each case. FT also provided an overview of the complaints and compliments received.

FT went on to present the Quality Dashboard to the Committee, which included incidents; categories and sub categories of incidents; and complaints (formal and informal) for quarter 3, 2022-23.

Committee members asked that further consideration be given to a narrative for context where there were small numbers. FT agreed to highlight this observation with the development team for further consideration.

The Committee thanked FT for her presentation and took **assurance** on the effective management of Putting Things Right.

QSIC 15/02/2023/4.5

Medical Devices Management

AJ provided an update on the arrangements for Medical Devices Management, noting that the Medical Devices Management Group had continued their work in transferring responsibility to the Office of the Medical Director, and of progress to update the existing policy and procedure. SS added further detail to the update, advising the Committee of arrangements to ensure an accurate, up to date and robust process in place for Medical Devices Management across the Organisation.

The Committee:

- Reflected on the training and resources available to staff, noting that relevant individuals were identified and given training to effectively discharge their role
- Noted the cross-organisation expertise in this area and collaboration with the All-Wales Medical Devices Group to ensure compliance with the Medicines and Healthcare products Regulatory Agency's policies and consultations, and that the Organisation (along with all other NHS-Wales Organisations) were contributing to a process to develop new UK legislation following EU Transition.

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The Committee took assurance on the progress to clarify the arrangements for the management of Medical Devices and noted the proposed immediate priorities and workplan.	
QSIC 15/02/2023/4.6	Health Emergency Planning Annual Report 2022
<p>AJ presented the Health Emergency Planning Annual Report to the Committee, noting the work undertaken to ensure the Organisation's level of emergency preparedness remained high.</p> <p>The Committee thanked AJ for the presentation of the Health Emergency Annual Report, noting that it would be submitted to Welsh Government.</p> <p>The Committee then took assurance in relation to the Organisation's compliance with the requirements of the Civil Contingencies Act [2004] and the NHS Wales Emergency Planning Core Guidance [2015], and the Organisation's level of emergency preparedness.</p>	
QSIC 15/02/2023/4.7	Health and Safety Report Q.3
<p>CO presented the Health and Safety Report for Quarter 3, highlighting three RIDDORs that were reported during Quarter 3, 2022-23, and one during January 2023. He went on to provide an update on the Health and Safety Executive visit to Microbiology, Cardiff on 17 January 2023.</p> <p>CO advised that an Internal Audit for Health and Safety had received a finding of reasonable assurance. The three findings reported had been addressed and actioned.</p> <p>The Committee took assurance that appropriate measures are in place to monitor compliance and to address areas identified for improvement.</p>	
QSIC 15/02/2023/5	Items for Approval
QSIC 15/02/2023/5.1	Minutes, Action Log and Matters Arising of Meeting
<p>The Committee considered and approved the minutes of the meeting held on 14 December 2022 as a true and accurate record of the meeting.</p> <p>The Committee approved the closure of the three completed actions on the Action Log.</p>	
QSIC 15/02/2023/5.2	5.2 Policies and Procedures for Approval
<p>The Committee considered and:</p> <ul style="list-style-type: none"> • approved the Alerts, Safety Notices and Other Guidance Policy; • adopted the All Wales Consent to Examination and Treatment Policy. 	
QSIC 15/02/2023/6	Items to Note

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QSIC 15/02/2023/6.1	Alerts Report (Quarter 3)
The Committee noted the Alerts and Safety Notices Report for Q3, 22-23.	
QSIC 15/02/2023/7	Closing Administration
QSIC 15/02/2023/7.1	Close of Public Meeting
Members were asked to e-mail LB with any feedback on the Committee meeting. KE also reminded Members of the upcoming 1 March 2023 Committee Effectiveness Meeting.	
Date of next meeting: 16 May 2023.	
KE closed her final Quality, Safety and Improvement Committee Meeting as Chair by thanking everyone for their support over the years. She confirmed that Diane Crone would become Chair of the Committee from 1 April 2023.	
JW thanked KE for her work and support to both the Committee and the Organisation. Committee members echoed their thanks and best wishes to KE.	
<i>The open session closed at 13:10</i>	

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