Quality and Safety Committee Work Programme 2021/22

| Topic | Lead | January | February | March | April | May | June | July | August | September | October | November | December | January | February | March | April |
|--|---|--------------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|---------|----------|--------------|-------|
| Patient Story | Service Directors | | | | | | | | | | | | | | | | |
| Preliminary | | | | | | | | | | | | | | | | | |
| Minutes of the Previous Meeting | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Action Log | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Work Programme | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Quali | ty | | | | | | | | | | | | | | | | |
| Annual Quality Statement | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Benchmarking, Learning an | d Quality Improvement | | | | | | | | | | | | | | | | |
| Infection Control Report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Safeguarding Report (IC Quarterly) | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Substance Misuse | Director of Public Health | | | | | | 1 | | | | _ | | | | | | |
| Suicide Update | Director of Public Health | 1 | | | | | | | | | | | | | | | |
| Clinical and Service Quality Co | | | | | | | | | | | | | | | | | |
| Quality and Safety Performance Report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Patient Experience | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Healthcare Inspectorate Wales Annual Report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Mortality Review | Medical Director | | | | | | | | | | | | | | | | |
| Ophthalmology | Deputy Chief Operating Officer | + + | | | | | | | | | | | | | | | |
| Clinical Audit and Effectiveness Update | | | | | | | | | | | | | | | | | |
| | Medical Director | | | | | | | | | | | | | | | | |
| Controlled Drugs Framework | Clinical Director Pharmacy | | | | | | | | | | | | | | | | |
| Cleft, Lip and Palate Service | Service Director, Morriston Hospital | \downarrow | | | | | | | | | | | | | | | |
| Progress against the Ombudsmun reccomendations | Medical Director | | | | | | | | | | | | | | | | |
| Cardiac Services (IC) | Medical Director | | | | | | | | | | | | | | | | |
| Approach to Nosocomial Transmissions (IC) | Medical Director | | | | | | | | | | | | | | | | |
| Governance and Ris | | | | | | | | | | | | | | | | | |
| Terms of Reference | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Committee Annual Report | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Committee Self-Assessment | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Board Assurance Framework/ Q&S Risk Register | Director of Corporate Governance | | | | | | | | | | | | | | | | |
| Quality and Safety Governance Group key issues report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| 100-day plans for five quality priorities | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Clinical Ethics Group Terms of Reference | Medical Director | | | | | | | | | | | | | | | | |
| Clinical Ethics Group Key Issues Report | Medical Director | | | | | | | | | | | | | | | | |
| Ombudsman's Annual Report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Welsh Risk Pool Annual Report | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| EMRTS Clinical Governance | Medical Director | | | | | | | | | | | | | | | | |
| External Inspections | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Ward to Board Dashboard | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Primary Care Metrics | Interim Director of Finance | | | | | | | | | | | | | | | | |
| WHC Quality and Safety Framework | Head of Quality and Safety | | | | | | | | | | | | | | | | |
| Recommendations from external review of the children's | | 1 | | | | | | | | | | | | | | | |
| community nursing service (monthly) | Head of Patient Experience | | | | | | | | | | | | | | | | |
| Holistic review of CAMHS - inhouse improvements, step | | 1 | | | | | | | | | | | | | | | |
| up/step down, link with community paediatrics | Assistant Director of Strategy & Partnerships | | | | | | | | | | | | | | | | |
| Potential next steps for pharmacies in context of pop | 1 | 1 1 | | | | | | | | | | | | | | | |
| health health/prevention/wellbeing | Primary Care, Service Director | | | | | | | | | | | | | | | | |
| Duty of Candor and Quality Bill training | Director of Corporate Governance | | | | | | | | | | | | | | | | + |
| Update on the position of the screening for foetal growth | | | | | | | | | | | | | | | | | |
| assessment in line with gap-grow | Director of Nursing and Patient Experience | | | | | | | | | | | | | | | | |
| Update report on the Welsh Health Circular quality and safety framework | Head of Quality and Safety | | | | | | | | | | | | | | | | |