



AGENDA ITEM

2.2.2

QUALITY & SAFETY COMMITTEE

**POLICY MANAGEMENT IMPROVEMENT PLAN
(CLINICAL AND NON-CLINICAL POLICIES)**

Date of meeting

19/01/2021

FOI Status

Open/Public

If closed please indicate reason

Not Applicable - Public Report

Prepared by

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Presented by

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Approving Executive Sponsor

Director of Corporate Governance

Report purpose

FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals

Date

Outcome

ACRONYMS

Not Applicable

1. SITUATION/BACKGROUND

- 1.1 The Cwm Taf Morgannwg University Health Board has a statutory duty to ensure that appropriate policies are in place. Policies ensure that the Health Board complies with legislation, meets mandatory requirements, and enable staff to fulfil their roles safely and competently.
- 1.2 A robust and clear governance framework for the management of policies is essential to minimise risk to patients, employees and the organisation itself; therefore, the Health Board must maintain a system to support the development or review, approval, dissemination and management of policies.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

"Review of the Policy on Policies"

- 2.1 The "Policy on Policies" is under review and organisational wide consultation has been sought. The revised policy was submitted to the Management Board in December to endorse for Board approval in January 2021.

Non-Clinical Policies

- 2.2 The Management Board previously supported a Policy Risk Assessment approach to support the timely review of policies and procedures that were passed their review date and this is currently underway in relation to non-clinical policies. **The progress on this stage of the improvement plan has been limited and it has been proposed that the Policy Risk Assessment process be placed on hold as a result of the impact the Covid-19 response is having on the Health Board. This pause will support colleagues to appropriately focus on managing the pandemic and prioritising the operational and clinical demand facing the Health Board at this time.**
- 2.3 A Master Policy Register which includes the non-clinical policies has been developed and as and when risk assessments are completed the Management Board are asked to support the revised review dates, the priority review plan and the removal of policies and/or procedures that have been assessed as no longer required.



Clinical Policies

- 2.4 The "Policy on Policies" is under review with closer alignment with Clinical Policies to ensure a consistent approach in relation to templates, master libraries and referencing with the development of a central location on SharePoint for ease of accessing policies and key policy related documents, support and guidance.

Policy Approval Routes

- 2.5 The review of the "Policy on Policies" will include defined routes of approval for clinical and non-clinical policies ensuring that where approval has been delegated to Committees and/or the Clinical Policy Sub Group the relevant Terms of Reference are clear in relation to their delegated authority for approval.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 The impact of Covid-19 has significantly impacted the pace on the completion of the risk assessments in relation to non-clinical policies. The position will be reviewed at the end of January 2021 to consider if the process can be reinstated.

4 IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	A robust and clear governance framework for the management of policies is essential to minimise risk to patients, employees and the organisation.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	All Health and Care Standards are included
Equality impact assessment completed	Not required.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5 RECOMMENDATION

- 5.2 The Committee is asked to **NOTE** the progress being made in relation to the Policy Management Improvement Plan.