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ACTION LOG QUALITY & SAFETY COMMITTEE					
Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at January 2023)
6.1	19 July 2022	Response to 'Improving Care, Improving Lives' National Care Review for Inpatients with a Learning Disability Progress report to be presented to the Committee in six months.	Director of Primary, Community & Mental Health Services	January 2023	On agenda On agenda for the 24 January 2023 meeting.
6.3	19 July 2022	Quality Dashboard Committee Members to reflect on what areas they would like future Spotlight Reports to focus on.	Committee Members	September 2022 Now January 2023	In progress Members will be asked at the end of discussion on the Quality Dashboard report what area they would like to spotlight on the for the next meeting
6.1	15 November 2022	Maternity Services & Neonates Improvement Programme Abbreviations to be explained in the next iteration of the report. Updates in relation to the processes in place for women experiencing ectopic pregnancies and the	Director of Midwifery / Deputy Medical Director	November 2022 Now January 2023	On agenda Report on the agenda for the January 2023 meeting and includes the relevant updates.

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		Gynaecology Pathway to be shared at the next meeting.			
5.3	20 September 2022	Monitoring Continuing Healthcare and Funded Nursing Care Activity Further update to next meeting	Nurse Director, Bridgend Locality	November 2022 Now January 2023	On agenda On agenda for the January 2023 meeting
7.1	November 2021 January 2022	Quality Dashboard Future hot topics to be presented to the Committee via the Quality Dashboard in relation to Pressure Ulcers and the Deep Dive being undertaken on Thrombosis. Spotlight report to be presented to the July meeting in relation to Medication Errors	Assistant Director of Quality & Safety	Ongoing	Partially Complete - One action in Progress Spotlight report on Community Acquired Pressure Damage presented to the March 22 meeting. Completed. Spotlight report on Patient Falls presented to the May 22 meeting. Completed. Spotlight Report on Medication Errors included in the Quality Dashboard report to the July 22 meeting. Completed. Spotlight on Thrombosis to be agreed. In Progress
5.1	15 November 2022	Organisational Risk Register – Risks Assigned to the Quality & Safety Committee Medical Director to ensure interim timelines were put	Medical Director	January 2023	In progress In recognising similar themes with this risk and the Nursing Workforce risk the Medical Director is going to link in with the Director of

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		into place for the Task & Finish Groups referred to in relation to Risk 4080.			Nursing and Director for People to consider reframing this risk altogether and as part of that process will ensure that any mitigating actions are set out clearly with agreed timeframes.
5.1	15 November 2022	Organisational Risk Register – Risks Assigned to the Quality & Safety Committee Update to be sought from the Risk Lead in relation to Risk 4512, Care of Patients with Mental Health Needs on the Acute Wards as to how the scoring against this risk would be reduced and what had changed to reduce the scoring	Nurse Director – Mental Health Care Group	24 January 2023 Now 16 March 2023	In progress The Assistant Director for Governance & Risk will raise this action with the new Care Group Service Director at the end of January 2023 when they are planned to meet.
5.1	15 November 2022	Organisational Risk Register – Risks Assigned to the Quality & Safety Committee Report to be presented to a future meeting of the Committee in relation to progress being made to address the Learning From Events backlog.	Assistant Director of Concerns and Claims	24 January 2023	On agenda Report is on the agenda for the meeting taking place on 24 January 2023

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5.1	15 November 2022	Organisational Risk Register – Risks Assigned to the Quality & Safety Committee Update to be provided to a future meeting of the Committee in relation to progress being made in relation to the Welsh Community Care Information System.	Nurse Director – Mental Health Care Group	16 March 2023	In progress Report to be developed for the March 2023 meeting. Added to the forward work programme.
5.2	15 November 2022	Datix Cymru Assurance Report Update to be provided to a future meeting to determine whether issues being experienced were as a result of coding issues or staff training issues.	Head of Concerns and Business Intelligence	24 January 2023	In progress Report being prepared for the January 2023 meeting. Forward work programme updated
6.3	15 November 2022	Quality Dashboard Report to be provided to the next meeting outlining how the Health Board was further strengthening the quality and safety elements of how the A&E service operated on a day-to-day basis.	Assistant Director of Quality & Safety	24 January 2023	In progress Verbal update to be provided to the Committee in January 2023 as part of the Quality Dashboard report. Written report to be presented to the March 2023 meeting.
6.4	15 November 2022	Report from the Chief Operating Officer Further discussion to be undertaken outside the meeting on reporting to	Assistant Director of Governance & Risk	January 2023 Now March 2023	In Progress. Exploring with Executive Leads how we ensure reports retain the relevant Committee focus i.e. PPF Committee focusses upon

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		Planning, Performance & Finance Committee and the Quality and Safety Committee as whilst duplication should be avoided between Committees this should be balanced with Members being provided with sufficient information/evidence to allow for detailed scrutiny and gaining of assurance			activity and Performance & Q&S Committee focusses upon the quality/harm aspects etc to avoid duplication – understanding that there is a balance around the right information and the right time.
7	15 November 2022	Any Other Business Report to be presented to the next meeting in relation to the position regarding the use of controlled drugs.	Medical Director	March 2023	In progress Added to the forward work programme for March 2023
9	15 November 2022	How Did we do in this meeting today? Discussion to be held outside the meeting in relation to duplication of reports to Committee meetings	Assistant Director of Governance & Risk	January 2023 Now March 2023	In Progress. Exploring with Executive Leads how we ensure reports retain the relevant Committee focus i.e. PPF Committee focusses upon activity and Performance & Q&S Committee focusses upon the quality/harm aspects etc to avoid duplication – understanding that there is a balance around the right information and the right time.

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PREVIOUSLY REPORTED Completed Actions					
Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at January 2023)
7.8	November 2021	Maternity & Neonates Services Improvement Programme Report Discussion to be held with P Roseblade outside the meeting regarding the assurance chain that was currently in place.	Committee Chair	January 2022	Completed We are now transitioning from MNIB into business as usual processes for improvement
5.1	24 May 2022	Organisational Risk Register Health, Safety & Fire Sub Committee Annual Report to be presented to a future meeting of the Committee. Annual Report to include a summary of all the fire risks contained within the risk register	Director for People	November 2022	Completed - HS&F sub Committee Annual Report on Q & S agenda for meeting on 15 th November 2022.
5.1	24 May 2022	Organisational Risk Register Review to be undertaken outside the meeting regarding risks 816 and 3698 which had both been on the risk register for some time.	Director of Corporate Governance	July 2022	Completed The September Organisational Risk Register noted the following updates in relation to these risks: <ul style="list-style-type: none"> 816 - this risk was approved for removal from the from the ORR (but will remain on the service risk register) as

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					<p>it is captured in the overarched planned care recovery risk 4491. COO Reviewed 7.9.2022.</p> <ul style="list-style-type: none"> • 3698 – to close as duplicate risk of 3788. • 3788 - Update 4.11.21: CNS post has been appointed to, awaiting start date. A meeting to be held on 17th November to discuss further options of support to the waiting list. <p>Update: CNS now in post. Plans to recommence around repatriation of the SLA with SB UHB for April 23. Risk has been reduced to a 12.</p>
6.1.4	24 May 2022	Maternity Metrics Report Focus to be placed at the next meeting on progress being made in relation to pace of change and improvements being made within Neonatal Services.	Deputy Medical Director	July 2022	Completed Report discussed at the July 2022 meeting
6.7	24 May 2022	Response to 'Improving Care, Improving Lives' National Care Review for	Director Primary, Community & for	July 2022	Completed Report discussed at the July meeting

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		Inpatients with a Learning Disability The report to be deferred to the July meeting for further discussion.	Mental Health Services		
3.2.11	19 July 2022	Individual Patient Funding Request Panel (IPFR) Annual Report Update to be provided as to whether a clinical representative had now been secured for the IPFR panel	Director of Public Health	September 2022	Completed Confirmation provided that the Locality Director for Nursing at Merthyr & Cynon ILG has agreed to attend the All Wales IPFR Panel
6.2	19 July 2022	Maternity & Neonates Improvement Programme Highlight Report Revised target dates to be identified against actions where target dates have slipped.	Director of Midwifery	September 2022	Completed Revised target dates included within this report
6.3	19 July 2022	Quality Dashboard Delivery Unit Dashboards to be appended to the Quality Dashboard moving forwards	Assistant Director of Quality & Safety	September 2022	Completed Dashboards have now been included as appendices to the Quality Dashboard Report.
6.5	19 July 2022	Chief Operating Officer's Report Spotlight Report to be presented to the next meeting of the Committee on the pressures being experienced within the Emergency Departments.	Assistant Director of Quality & Safety	September 2022	Completed – Included as an appendix to the Quality Dashboard Report for Sept 2022 meeting
6.5	19 July 2022	Chief Operating Officer's Report	Chief Operating Officer	September 2022	Completed Action Plan shared with Committee Members by email on 23 November 2022.

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		Updated Ophthalmology Action Plan to be shared with Members			
6.5	19 July 2022	Chief Operating Officer's Report Communication and listening issues with staff working in the Emergency Departments to be discussed with the Integrated Locality Group	Chief Operating Officer	September 2022	Completed Weekly informal catch up sessions held with the Emergency Department Senior Consultants and Deputy Chief Operating Officer. Weekly Task & Finish Groups are also held with ED as part of the 6 Goals programme of work. The newly appointed Clinical Director will also contribute to senior communication into all Emergency Departments across the Health Board.
6.6.4	19 July 2022	Primary Care Quality & Safety Report Confirmation to be provided outside the meeting regarding the position with Church Street Dental Practice in Merthyr Tydfil and whether they are accepting any NHS patients.	Primary Care Clinical Director	September 2022	Completed Confirmation provided outside the meeting that Church Street in Merthyr Tydfil have handed back their NHS contract and letters have been issued to the patients. On further investigation, this was one of the practices that the Health Board were aware of and the Primary Care Quality & Safety report should have stated Merthyr instead of Aberdare.

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					For assurance this is a small practice and all the NHS patients will be able to be taken on by neighbouring NHS dental practices.
5.1	19 July 2022	Organisational Risk Register Response to be provided to Committee Members outside the meeting regarding the queries raised against some of the risks.	Director of Corporate Governance	September 2022	Completed: Response shared with Committee Members on 9 September 2022 regarding Risks 4887, 4721, 1133 and 5014
2.1	20 September 2022	Update on implementation of the CIVICA system to be added to committee forward work plan.	Assistant Director of Quality & Safety	November 2022	Completed: On agenda for November 2022.
2.1	20 September 2022	Letter on behalf of the Committee Chair to be sent to those involved in the Patient Story to formally thank them for sharing their patient experience with the Committee	Assistant Director of Nursing & Peoples Experience	November 2022	Completed Verbal thank you extended to those involved in sharing their patient experience with Committee members.
5.1	20 September 2022	Organisational Risk Register - Q & S Committee risks : <ul style="list-style-type: none"> Update on risk status of the CTMUHB laundry service 	Chief Operating Officer / Deputy Chief Operating Officer	November 2022	Completed: Update on risks shared (with Committee Members and attendees) via email on 3 rd November 2022

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		<ul style="list-style-type: none"> Risk 4149 – update required on the impact from the mitigating actions in relation to waiting lists and additional clinics Risk 4512 - update on the current status and further detail as to the mitigations that were working well. 			
6.6	20 September 2022	Primary Care Quality & Safety Report Confirmation to be provided as to whether dental patients had been contacted to confirm their revised dental practice allocation following their previous practice no longer accepting NHS patients.	Deputy COO (Primary Care, Community, Mental Health and Learning Disabilities)	November 2022	Completed Confirmation received that all patients have been written to informing them of alternative access to dental service.
6.6	20 September 2022	Primary Care Quality & Safety Report Deputy COO (Primary Care, Community, Mental Health and Learning Disabilities) to write on behalf of the Committee Chair to the Out of Hours service manager to acknowledge their work following national IT outages	Deputy COO (Primary Care, Community, Mental Health and Learning Disabilities)	November 2022	Completed Letter drafted and sent to the Head of Urgent Primary Care.
6.7	20 September 2022	Stroke Services Progress Report Update due in six months	Executive Director, Therapies and Health Sciences	March 2023	Completed Report to be presented to the March 2023 meeting. Added to the Cycle of Business

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5.1	15 November 2022	Organisational Risk Register – Risks Assigned to the Quality & Safety Committee Risk Score allocated to Risk 5267 to be reviewed against the risk score allocated against the medical workforce risk.	Deputy Director of Nursing	24 January 2023	Completed Review undertaken and risk score has been amended to 20 and the risk narrative has been updated within the risk register
5.4	15 November 2022	Infection, Prevention & Control Committee Highlight Report Confirmation to be provided outside the meeting as to whether reduction of capacity issues being experienced within the Laundry Service was having an impact on Infection, Prevention and Control.	Deputy Director of Nursing	January 2023	Completed Confirmation provided to Members outside the meeting on 3 January 2023 by email that the Lead Infection, Prevention & Control Nurse has confirmed that she was not aware of any issues related to the report of reduced capacity at the laundry.