

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 July 2022)
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	Ongoing Spotlight report on Community Acquired Pressure Damage presented to the March meeting. Agreed that a spotlight report on Patient Falls would be presented to the May meeting. Spotlight on Thrombosis to be agreed.
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	Ongoing
2.1.3 In Committee	November 2021	Nosocomial Progress Report Progress report to be presented to the January meeting of the Quality & Safety Committee.	RTE ILG Nurse Director	January 2022 Now February 2022/March 2022/May 2022	Completed Report presented to the May 2022 meeting

Agenda Item 3.2.1

2.5 Committee	In	9 February 2022	Nosocomial Review Committee to be sighted at a future meeting on the detail of the Public Enquiry that will be undertaken in relation to the Nosocomial Review			
2.2 Committee	In	9 February 2022	Child Safeguarding Update to be presented to a future meeting of the Committee in relation to the strengthened action plan	Executive Director of Nursing	July 2022	In progress Progress report to be presented to the July Quality & Safety In Committee
2.3 Committee	In	9 February 2022	Homicide Review Committee's concerns to be fed back to Welsh Government in relation to the delays experienced in undertaking a public facing external review of the incident which had created difficulties in the Health Board gaining any learning from the event	Executive Director of Nursing	February 2022 March 2022 June 2022	In progress The CTM Safeguarding Board have agreed to undertake a multi-agency safeguarding review of the case and the HB have commissioned an independent chair to support the process. The review commenced in March and it is anticipated that this will take approximately 6 months to complete. Once approved by the Safeguarding Board and Welsh Government the report will be published. There are regular HB meetings to track the status of the safeguarding board review and to receive and act upon any early learning for our services. Our Comms team are fully engaged and there will be appropriate preparation for the planned publication of the findings.

Agenda Item 3.2.1

6.2	22 March 2022	Quality Dashboard Discussion to be held at the next agenda setting meeting as to whether a report on avoidable/unavoidable pressure damage in the community needed to be presented to the Committee.	Executive Director of Nursing/Committee Chair	April 2022	Completed Report presented to the May 2022 meeting
6.2.1	22 March 2022	Community Acquired Pressure Ulcer Improvement Plan Briefing Update to be provided to the next meeting in relation to the Community Acquired Pressure Ulcer Improvement Plan alongside the Measurement Strategy.	Assistant Director of Quality & Safety	May 2022	Completed Report presented to the May 2022 meeting
6.10	22 March 2022	Internal Audit Review into Concerns Report to be presented at the next meeting on progress being made against the actions identified in the Internal Audit Review and Welsh Risk Pool Review.	Director of Corporate Governance	May 2022	Completed Report presented to the May 2022 meeting
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	In progress Will be presented to the Health, Safety & Fire Sub Committee in October 2022 and then to Quality & Safety Committee in November 2022

Agenda Item 3.2.1

5.1	24 May 2022	<p>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.</p>	Director of Corporate Governance	July 2022	<p>Part Completed Review undertaken and responses shared with Committee Members</p> <p>In response to the update received in relation to Risk ID 3788, the Chair of the Committee has asked the Chief Operating Officer to revisit this risk to ensure that the risk score appropriately reflects the current performance in terms of Waiting Lists for ND Services. An update report has also been added to the Forward Work Plan to be received by the Committee in the autumn.</p>
6.1.4	24 May 2022	<p>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.</p>	Deputy Medical Director	July 2022	<p>On agenda Report on agenda for discussion at the July meeting</p>
6.7	24 May 2022	<p>Response to 'Improving Care, Improving Lives' National Care Review for Inpatients with a Learning Disability The report to be deferred to the July meeting for further discussion.</p>	Director for Primary, Community & Mental Health Services	July 2022	<p>On agenda Report on agenda for discussion at the July meeting</p>