Quality, Safety and Improvement Committee
Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/ Public	June	Sept	Nov	Feb	Purpose of the report
Deep Dives	Learning from Claims	Executive Director Nursing, Quality, and Information Governance National Director of Health Protection and Screening Services, Executive Medical Director	BET	Private	✓				Deep dive for assurance. Deep dives provide an holistic overview and a detailed look into a particular area or service covering the following themes : - Performance - Governance Arrangements - Key risks - Improvement approach / Quality Links with Strategic Objectives Forward Look / next steps for the programme of work. Refer to Deep Dive Guidance for content requirements.
	Population Health Programme related	National Director Health and Wellbeing	BET	Public		✓			
	Risk Based Issue in Year (to be determined)		BET	Public			✓		
	Lung Cancer Screening	National Director of Health Protection and Screening Services, Executive Medical Director	BET	Public				✓	
Clinical Governance	Claims and Redress Report (Private Session)	Executive Director Nursing, Quality, and Information Governance	BET	Private	✓	✓	✓	✓	For assurance that claims are being managed in line with the Claims Management Policy and Procedure.
	Quarterly Quality Governance Performance Report		BET	Private/ Public	✓	✓	✓	✓	For assurance on how the organisation has discharged its responsibilities Relating to: IPC Safeguarding Quality and Candor Putting Things Right Quality and Clinical Audit Clinical Governance Framework Implementation
	Quality Annual Report 2025-26		BET	Public		✓			For oversight, scrutiny and assurance of compliance with the act.
	Putting Things Right and Duty of Candour Annual Report 2025-26		BET	Private/ Public	✓				For assurance that there are effective arrangements in place for Putting Things Right, in line with our statutory responsibilities and oversight, assurance of compliance with duty of Quality and Candour Act.
	Quality and Clinical Audit Plan Annual Report 2025-26 and Forward Look 2026-27		LT	Public	✓				To provide the Committee with the Year End report on the Quality and Clinical Audit Plan, for assurance on the progress. And to approve the content of the Quality and Clinical Audit Plan for the following year, and the planned approach to the audits.
	Staff Flu vaccination campaign Annual Report 2025-26 and Forward Look 2026-27		BET	Public		✓			The Internal Flu Vaccine Campaign end of year report and for assurance regarding the uptake of influenza vaccinations.
	National Safeguarding Service Annual Report 2025-26 and Forward Look 2026-27		BET	Public		✓			For assurance on how the organisation has discharged its National Safeguarding responsibilities on an annual basis
Engagement/ Equality	Engagement of our Services	Executive Director Nursing, Quality, and Information Governance	BET	Public	✓	✓			For assurance on the arrangements in place to monitor the voice of the service user and/or the citizen as being central to improving the quality and effectiveness of services, functions and programmes. Demonstration of the CIVICA System. (ToR 1.10)
Health Protection and Screening Services	Winter Planning / Seasonal Planning	National Director of Health Protection and Screening Services, Executive Medical Director	Exec Lead	Public		✓	✓	✓	For assurance on the arrangements in place for the management of screening services ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.
	Emergency Preparedness, Resilience and Response Annual Report 2025		BET	Public	✓				For assurance that the organisation is meeting its statutory requirements in relation to the management of Emergency preparedness, resilience and response.
	Medicines Management		Exec Lead	Public			✓		For assurance that there are effective arrangements in place for Medicine Management.
	Screening Service Update		BET	Public		✓	✓	✓	For assurance on the arrangements in place for the management of screening services ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Quality, Safety and Improvement Committee
Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/ Public	June	Sept	Nov	Feb	Purpose of the report
Population Health	Population Health Programmes	National Director Health and Wellbeing	Exec Lead	Public			✓		For assurance on the arrangements in place for the management of population health programmes, ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.
	Update from one of the Programmes (Action: determine how we get routine assurance from these programmes)		Exec Lead	Public	✓	✓	✓	✓	
Health and Safety	Health and Safety Annual Report	Executive Director Operations and Finance	BET	Public	✓				For assurance that appropriate measures are in place to monitor compliance with Health and Safety requirements, and to address areas identified for improvement.
	Health and Safety Quarterly Report		BET	Public	✓	✓	✓	✓	
	Health and Safety Terms of Reference		BET	Public	✓	✓			For assurance that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee.
	Health and Safety Work Plan 2026-27		BET	Public	✓	✓			For assurance and assurance, that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee.
Managing Risk	Strategic Risk	Executive Director Nursing, Quality, and Information Governance	BET	Public	✓	✓	✓	✓	For assurance that risks within the remit of the Committee are management appropriately.
	Corporate Risk Register		LT	Public	✓	✓	✓	✓	
Governance & Accountability	Summary of policies Bi-Annual Update	Board Secretary and Head of Board Business Unit	LT	Public	✓		✓		For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee and to approve any policies and procedures proposed to be removed from the register.
	Policies for approval (as required)		LT / BET	Public	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.
	Committee Annual Report 2026-27		Exec Lead	Public				✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness		Exec Lead	Public	✓			✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review		BET	Public	✓			✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference (As required under Standing Orders).
	Committee Work Plan		Exec Lead	Public	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
Audit and other Reviews	Audit Action Log Progress Update (within the remit of the Committee) (as needed)	Board Secretary and Head of Board Business Unit	Exec Lead	Public	✓	✓	✓	✓	Update on the implementation of the management response to the audit, for assurance.
	Audit Report (as needed)	Relevant Executive Lead	Exec Lead	Public	✓	✓	✓	✓	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer to Audit Protocol). The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee.
NHS Wales Performance and Improvement Unit (P&I)	NHS Performance and Improvement Quarterly Quality Governance Report	NHS Wales Performance and Improvement	BET	Public	✓	✓	✓	✓	To provide the Committee with assurance on the NHSE Compliance with the following areas: Health and Safety, National Reportable Incident Reporting , Complaints (including PTR if applicable), Claims reporting, DATIX, Safeguarding
	NHS Performance and Improvement Unit Annual Compliance Statement		BET	Public	✓	✓			To provide the Committee with: Duty of Quality compliance, Duty of Candor compliance, Socio Economic Duty compliance, Wellbeing of Future Generations Act Compliance, Emergency Planning, Clinical Governance
Issues Raised in Year	Screening Assurance	National Director of Health Protection and Screening Services, Executive Medical Director	Exec Lead	Public	✓				

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.

Quality, Safety and Improvement Committee
Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/ Public	June	Sept	Nov	Feb	Purpose of the report
Changes to the Committee since it was last presented to the Committee are shown in red: *Screening Services Update (standard update) moved from September to November to avoid duplication with the extended Strategic Risk Review session in September. *Lung Cancer Screening Assurance will remain with the Board while the programme is being established. Therefore, the deep dive scheduled for January has been removed from the workplan. Once the programme has been established, routine reporting will be transferred to the QSIC									

(Note – this is an indicative work plan, final agenda content will be agreed following discussion with the Chair and the Executive Leads.