GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales	**Name of Meeting** Quality, Safety and Improvement Committee **Date of Meeting** 10 September 2026 **Agenda item:** 8.1

NHS Wales Performance and Improvement – Quality, Safety and Improvement Committee (QSIC) Quarterly Assurance Report (1)

01 April 2026 – 31 July 2026

NHS Wales Performance and Improvement Director Lead :	Chris Clayton, Managing Director
Author:	Sophie Fuller, Chief of Staff
Approval/Scrutiny route:	Approval/scrutiny for NHS Wales Performance and Improvement is via the Senior Director Team (SDT). This report was approved at the Weekly SDT Meeting on 27 August 2026.

Purpose

The purpose of this report is to provide a quarterly assurance report to the Audit and Corporate Governance Committee, on the relevant governance compliance areas as outlined in the NHS Wales Performance and Improvement Assurance Schedule.

This report covers the period 01 April 2026 to 31 July 2026 and provides assurance on the following areas.

- Health and Safety Compliance
- National Reportable Incident Reporting compliance
- Complaints (including PTR if applicable) compliance
- Claims reporting
- DATIX compliance
- Safeguarding compliance

Recommendation:				
APPROVE ☐	CONSIDER ☐	RECOMMEND ☐	ADOPT ☐	ASSURANCE ☒

The Committee is asked to:

Health and Safety

- **Take assurance** that the NHS Wales Performance and Improvement has appropriate measures are in place to monitor compliance and to address areas identified for improvement.

National Reportable Incident Reporting compliance

- **Note** there have been no reportable incidents to report.

Complaints (including PTR if applicable) compliance

- **Note** there have been no complaints received for this period to report to Committee.

Claims reporting (staff and third-party claims)

- **Note** one Claim received this period and t**ake assurance** that Claims within the NHS Wales Performance and Improvement are being appropriate managed.

DATIX compliance

- **Note** five incidents reported on Datix for this period and t**ake assurance** that the appropriate process has been followed within the NHS Wales Performance and Improvement to manage these incidents.

Safeguarding compliance

- **Note** there have been no safeguarding issues reported for this period to report to Committee.

Link to Public Health Wales Strategic Plan

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives

Summary impact analysis	
Equality and Health Impact Assessment	A specific Equality and Health Impact Assessment (EHIA) is not required to support of this report.
Risk and Assurance	This report provides assurance on the implementation of the relevant policy and Procedures within the NHSE, ensuring good governance is maintained.
Health and Social Care (Quality and Engagement) (Wales) Act	This paper supports the Quality themes.

Financial implications	There are no financial implications as a result of this report.
People implications	There are no people implications as a result of this report.

1. Purpose / situation

The purpose of this report is to provide a quarterly assurance report to the Audit and Corporate Governance Committee, on the relevant governance compliance areas as outlined in the NHS Wales Performance and Improvement Assurance Map.

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- Safeguarding compliance

The sections below provide a summary of the current status for the areas listed above.

2. Health and Safety

In line with the NHS Wales Performance and Improvement Assurance Map, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis for assurance on the Health and Safety arrangements in place.

As a Hosted Unit, NHS Wales Performance and Improvement (NHSW P&I) operates within appropriate policies established by PHW in support of legislative compliance, and this includes legislation relating to health and safety.

The annual statement of compliance was completed for 2025-26 by the Responsible Officer (RO) for NHSW P&I and submitted to PHW at the end of April 2026, in support of the RO, all other SLT Directors completed individual compliance statements for their respective areas.

During the reporting period there were five health and safety matters recorded as incidents on Datix. Two were related to non-medical equipment. One related to Communication issues. One related to breach of patient/service user confidentiality (currently in investigation). One fire safety.

Compliance with statutory and mandatory training is reported monthly to the SLT, within a broader People and OD Report provided by PHW POD colleagues. As of **3 August 2026**, compliance for health and safety and related themes was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
Fire Safety - 2 Years	462	462	413	89.39
Health, Safety and Welfare - 3 Years	462	462	423	91.56
Moving and Handling - Level 1 - 2 Years	462	462	401	86.80

In addition to the health and safety modules accessed via ESR and reported via the monthly POD report (as above), arrangements were made to provide access for staff to the '*Health and Safety for Homeworkers*' training module. With the support of the PHW Health & Safety Advisor, this has been managed with individual divisions to validate staff details and to monitor compliance. The Induction Working Group has standardised the approach to new starters across the organisation and this will be launched shortly.

3. National Reportable Incident Reporting compliance

In line with the NHS Wales Performance and Improvement Assurance Map, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis for assurance on reporting of any National Reportable Incidents.

There have been no Nationally reportable incidents reported for this period.

4. Complaints (including PTR if applicable) compliance

In line with the NHS Wales Performance and Improvement Assurance Reporting Schedule, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis for assurance on the arrangements in place to manage complaints within the NHS Wales Performance and Improvement.

There have been no complaints reported for this period.

5. Claims reporting

In line with the NHS Wales Performance and Improvement Assurance Map, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis assurance on the arrangements in place to manage Claims within the NHS Wales Performance and Improvement.

There has been one Respect and Resolution claim during this period, which has been managed through the All Wales policy and procedure.

6. DATIX compliance

In line with the NHS Wales Performance and Improvement Assurance Reporting Schedule, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis for assurance on the arrangements in place to manage incidents within the NHS Wales Performance and Improvement.

There were 5 incidents reported through Datix this period.

Two of these related to Equipment/Devices, one of these related to Infrastructure (including staffing, facilities, environment, security), one of these related to Information Governance, Confidentiality and the other one related to Communication.

Four of the five incidents have been closed with one incident being actively processed (this detail was also recorded in section 2 of this report).

7. Safeguarding compliance

In line with the NHS Wales Performance and Improvement Assurance Map, the NHS Wales Performance and Improvement is required to report to the Committee on a quarterly basis for arrangements in place to manage any safeguarding concerns within the NHS Wales Performance and Improvement.

There have been no safeguarding matters reported for this period.

Compliance with statutory and mandatory training is reported monthly to the SLT, within a broader People and OD Report provided by PHW POD colleagues. As of **3 August 2026**, compliance for Safeguarding was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
Safeguarding Adults - Level 1 - 3 Years	462	462	406	87.88
Safeguarding Children - Level 1 - 3 Years	462	462	404	87.45

Any matter requiring safeguarding considerations are managed in line the PHW procedure (procedures are available here : Safeguarding Vulnerable Children and Adults Policies - Public Health Wales (nhs.wales).

8. Conclusion

The report provides assurance to the Committee that the NHS Wales Performance and Improvement is meeting the requirements for each of the areas reports.

There are no concerns to bring to the attention of the Committee in any of the areas listed.

9. Recommendation

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