

### Quality Governance Integrated Action Plan

Audit	Recommendation	Lead	Timescale	Status
<b>Internal Governance Review</b>	Work with an external party to create and embed a quality management system including quality improvement goals and ownership at service group level to gain assurance that high quality patient care is the foremost focus at service, directorate and service group level	Director of Nursing and Patient Experience	March 2022	Workshops arranged for February and March 2023 led by an external facilitator to design and implement a quality management system.
<b>Internal Governance Review</b>	Analyse data collection and use of dashboards to ensure service groups are receiving the appropriate information to aid triangulation and decision making	Director of Digital	June 2022	Business intelligence strategy was approved by the Management Board in January 2022 and business analyst partners to be recruited for each service group to support data analysis.
<b>Internal Governance Review</b>	Review the role of the Quality and Safety Governance Group including a redesign of its reporting structure and assessment of how service groups are engaged and review the use of sub groups to scrutinise quality and safety and patient experience performance across the health board. Examples might include a learning from deaths group, mortality surveillance group or a patient experience operational group	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.
<b>Internal Governance Review</b>	Streamline reporting across all four service groups using corporate templates and implement minimum standards to align governance structures	Director of Corporate Governance	April 2022	Set of minimum standards to be agreed with service groups for implementation
<b>Internal Governance Review</b>	Review the role of the health board's independent members- how they seek assurance around quality and safety and patient experience priorities as well as holding the senior managers to account for delivery	Director of Corporate Governance	April 2022	Board away day around quality management and culture to take place with an external facilitator on 28 <sup>th</sup> April 2022

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<b>Audit Wales</b>	<p>a) Provide training to managers across the operational structure to enable them to clearly identify the risks for which they are responsible and update risk registers in line with corporate policy; and</p> <p>b) Ensure risks registers are receiving sufficient scrutiny at the operational level and the risk management group</p>	Director of Corporate Governance	September 2022	<p>a) A series of risk workshops for clinicians and managers, in specialty-related sessions, was completed within Neath Port Talbot and Singleton Service Group in the late summer. The sessions provided training on risk management principles, health board arrangements and opportunity to apply this to local risk register entries. Arrangements are being made to roll the training out to the other service groups during the next two quarters and progress will be reported to the Risk Management Group and Management Board. A review of service groups will also be undertaken and reported on. We anticipate completion by September 2022.</p> <p>b) A programme of service group risk register presentations for 2022 has been agreed at the December Risk Management Group meeting. Service groups will be asked to report on processes in place to manage and scrutinise registers at a local level, and present their registers with a focus on their top risks. This will commence from March 2022 and the programme will complete by the end of the calendar year.</p>
<b>Audit Wales</b>	Develop a clinical audit plan which focuses on compliance and key risks	Medical Director	March 2022	A revised clinical audit policy was agreed in 2021, with a new format for the structure of audits (national, organisation, service and directorate). The policy was approved by Audit Committee. The detail of the individual audit plans are being collated. Clinical audit plan to be submitted to the Audit Committee in May 2022 and monitored by the Quality and Safety Committee three times a year.

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<b>Audit Wales</b>	Updates on progress to deliver the clinical audit plan and associated learning from mortality reviews to be reported to the Quality and Safety Committee more frequently	Medical Director	March 2022	More regular reports on mortality and clinical audit to be reported to Quality and Safety Committee (as a minimum three times per year).
<b>Audit Wales</b>	a) Refresh organisational awareness of the values and behaviours framework, so the values are at the forefront of everything staff do in the health board; and  b) Undertake work to understand why some staff feel that the health board does not encourage reporting of errors, near misses or incidents, and does not act in response to concerns	Director of Workforce and OD	December 2022	Health board culture programme underway which will include a culture audit. Audit recommendations (a and b) will be addressed as part of this work.
<b>Audit Wales</b>	Plan to achieve full compliance with PADRs	Director of Workforce and OD	September 2022	This is a priority for the health board, although workforce pressures remain high as staff shortages are a concern. Progress will be monitored via local service group meetings and Management Board and reported to the Workforce and OD Committee.
<b>Audit Wales</b>	Review resources to support quality governance	Director of Nursing and Patient Experience/Medical Director/Director of Therapies and Health Science	<b>April 2022</b>	Review of the current resources and requirements to support quality improvement at a corporate, service group and divisional level to be completed in March 2022. This will need to link in with the outcomes/output from of the quality and safety seminars, and taking the opportunity to develop and bring resources, teams and functions together.
<b>Audit Wales</b>	Ensure collective ownership of the quality and safety agenda	Director of Nursing and Patient Experience/Medical Director/Director of Therapies and Health Science	<b>June 2022</b>	This action links into the action for recommendation above in terms of reviewing roles, responsibilities and accountabilities for quality and safety. Focussed approach to ensuring the whole service group and directorate triumvirates have an equal responsibility in ensuring services are safe and effective

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<b>Audit Wales</b>	<p>Despite the development of a quality and safety framework in January 2021, it is yet to be rolled out across the health board. The framework sets out the process by which the health board assures itself that services are of a high quality and safe for all. The health board should:</p> <p>a) Refresh the framework in light of learning from the Covid-19 pandemic,</p> <p>b) Relaunch the framework, and provide clarity on the quality governance arrangements expected within the health board, and</p> <p>c) Monitor compliance with the implementation of the framework across the organisation</p>	Director of Nursing and Patient Experience/Medical Director/Director of Therapies and Health Science	<b>June 2022</b>	<p>The framework will be refreshed in light of learning from the Covid-19 pandemic, and the findings of this review/internal review of quality governance. These will also be used to design a series of externally facilitated quality and safety seminars with the aim of taking stock as well as:</p> <ol style="list-style-type: none"> <li>1. Sharing the reviews;</li> <li>2. Understanding the views of the senior leaders on quality and governance;</li> <li>3. Define what a quality improvement programme would cover (assurance, improvement etc);</li> <li>4. Design of the approach we wish to adopt in the health board, and plan/oversee its implementation – this includes re-launching the framework;</li> <li>5. Focus on roles, responsibilities, accountability, and outcomes;</li> <li>6. Link in with the requirements of the Health and Social Care (Quality and Engagement) (Wales) Act.</li> </ol> <p>These sessions will take place in February/March of 2022, with the aim of implementing the required changes from April 2022.</p>
<b>Internal Audit</b>	Incorporating the impact of Covid-19 into the quality and safety framework;	Director of Nursing and Patient Experience/Medical Director/Director of Therapies and Health Science	June 2022	This will form part of the quality workshops to design the quality management system
<b>Internal Audit</b>	Developing an action plan to support the implementation of the new framework, monitored by the QSGG and Quality and Safety Committee;	Director of Nursing and Patient Experience/Medical Director/Director of Therapies and Health Science	June 2022	This will form part of the quality workshops to design the quality management system
<b>Internal Audit</b>	Consideration be given to the purpose and focus of the QSGG in view of the number of objectives within its terms of reference;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.

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<b>Internal Audit</b>	Mapping of the QSGG sub-groups and reporting groups;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.
<b>Internal Audit</b>	QSSG exception report to include reporting on service group quality and safety group operation;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.
<b>Internal Audit</b>	QSGG membership and chairing arrangements to be reviewed;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.
<b>Internal Audit</b>	Key content of the QSGG terms of reference and quality and safety framework to be adopted within the quality and safety groups across the service groups for consistency;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.
<b>Internal Audit</b>	Consideration be given to self-assessments for the quality and safety groups;	Director of Nursing and Patient Experience	April 2022	Role of Quality and Safety Governance Group currently under review with proposals for the revised structure to be agreed by the Management Board in April 2022.