

<b>Composite Committee Report for Board</b>			
<b>Reporting Committee</b>	<b>Chair</b>	<b>Lead Executive Director</b>	<b>Meeting Date</b>
Quality, Safety and Improvement Committee	Clare Jenkins	Claire Birchall, Executive Director Nursing, Quality and Integrated Governance Meng Khaw, National Director Health Protection and Screening, Executive Medical Director	<a href="#">25 November 2025</a>
Knowledge, Research and Information Committee	Siân Griffiths	Iain Bell, National Director Public Health Data and Knowledge	<a href="#">9 December 2025</a>
Audit and Corporate Governance Committee	Kate Young	Angela Williams, Interim Executive Director Operations and Finance Paul Veysey, Board Secretary and Head of Board Business Unit	<a href="#">16 December 2025</a>
People and Organisational Development Committee	Tamsin Ramasut	Neil Lewis, Director of People and Organisational Development	<a href="#">20 January 2026*</a> A verbal update will be provided at the January Board meeting.

*Hyperlinks to the agenda and papers for these meetings are included on the dates above.*

## **Executive Summary**

This report covers the period since the Board last met on 27 November 2025.

A detailed summary of the matters considered at the Committee meeting is contained in Section 1 below.

## **Cross Committee Working**

As part of the development of the Cross Committee working, this report has been updated to include a summary of any issues raised within the work of the Committee where there is an impact on the other Committees. This has been included at Section 2.



## Section 1: Matters considered by the Board Committees:

### Summary of key matters considered by the Committee and any related decisions made:

#### Quality, Safety and Improvement Committee (25 November 2025)

The Committee:

- Took **assurance** on the progress of actions to strengthen governance around Medicines Management within the organisation.
- Took **assurance** on the implementation of winter planning / seasonal planning activities.
- **Noted** the performance standards being achieved within the Quality Governance Performance Report, took **assurance** that appropriate governance was in place to ensure safe, timely, effective, equitable, efficient, and person-centred services.
- **Noted** an amendment to the Safeguarding Policy
- Took **assurance** on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee
- **Noted** the Health and Safety Quarter 1 report, and took **assurance** that appropriate measures were in place to monitor compliance and to address areas identified for improvement.
- **Considered** a deep dive presentation on the Infection Division, and took **assurance** regarding the operations and development of the Infection Division.
- **Considered** the range of programmes being delivered by the Health and Wellbeing Directorate and their associated governance arrangements to inform the future work programme of the committee, and took **assurance** that the Directorate was actively working to embed the Duty of Quality
- Took **assurance** on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee.
- **Considered** a deep dive into innovation in Infection Services, and took **assurance** that innovation was embedded in the operations of the Infection Division, and was focused on all elements of delivering excellent Public Health Services.
- **Noted** the NHS Wales Performance and Improvement (P&I) Quarterly Governance Compliance Report, and took **assurance** that the NHS P&I has appropriate measures are in place to monitor compliance and to address areas identified for improvement

#### Knowledge, Research and Information Committee (9 December 2025)

The Committee:

- Took **assurance** on progress on the implementation of the organisational Research and Evaluation Strategy.
- Took **assurance** on progress to date and plans for future of the Our Approach to Health Inequalities programme.
- Took **assurance** that research, data, evidence and evaluation activity is continuing to support Strategic Priority 3: Promoting Healthy Behaviours.



- Took **assurance** that Public Health Wales was delivering its Digital and Data Strategy through the agreed Routemap and had robust governance in place for managing digital and data work.
- Took **assurance** progress with the Public Health Wales outcomes measurement system since June 2025.

**Audit and Corporate Governance Committee (30 September 2025)**

The Committee (Part A):

- **Noted** the Internal Audit Progress report.
- **Considered** three Final Internal Audit Reports for Workforce Mental Health Support (Reasonable Assurance), NHS Wales Hosting Arrangements (Substantial Assurance) and Corporate Risk Register Effectiveness (Reasonable Assurance).
- **Noted** the Audit Wales Update.
- **Noted** the Public Health Wales Structured Assessment Report.
- **Considered** the amendments to the Audit Tracker as approved by Leadership Team on 20 November 2025 and took assurance on the progress with the implementation of actions resulting from Internal and External Audits within Public Health Wales.
- **Considered** the Corporate Risk Register.
- **Considered** the Information Governance Quarterly Report and took assurance that the Records Management SharePoint Implementation Programme was complete along with the planned approach to benefits realisation.
- Took **assurance** that the Trust has an appropriate plan in place for the production of the Financial Statements and Accountability Report for 2025/26 in line with the statutory deadlines.
- **Considered** and **noted** the Committee Work Plan.

The Committee (Part B):

- **Noted** the NHS Performance and Improvement Audit and Corporate Governance Quarterly Assurance Report.
- **Noted** the NHS Performance and Improvement's Internal Audit Progress Report.

**Delegated action taken by Committees:**

**Quality, Safety and Improvement Committee (25 November 2025)**

The Committee

- **Approved** the Clinical Audit Policy.

**Knowledge, Research and Information Committee (9 December 2025)**

None

**Audit and Corporate Governance Committee (30 September 2025)**

None

**Key risks and issues/matters of concern of which the Board needs to be made aware:**



GIG  
CYMRU  
NHS  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

<b>Quality, Safety and Improvement Committee (25 November 2025)</b>
---

None
------

<b>Knowledge, Research and Information Committee (9 December 2025)</b>
--

None.
-------




<b>Audit and Corporate Governance Committee (30 September 2025)</b>
---

None.
-------



## Section 2: Cross Committee Working Summary

Summarise any considerations by Committees relating the identified cross cutting areas, such as dealing with those remitted items between committee, any escalation of the cross Committee working criteria.

Cross Committee Issues	
Information Governance	None.
Internal and External Audit	<p>The following Internal Audits were considered at ACGC in December :</p> <p><b>Internal Audit</b>  <i>The following Internal Audits were presented to the ACGC on 16 December:</i></p> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: 30%;"> <p><b>Workforce – Mental Health Support</b></p>  <p>Reasonable Assurance</p> <p>Management Actions:</p> <p>Low, 0      High, 0</p> <div style="border: 2px solid blue; border-radius: 50%; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <span><b>Total: 3</b></span> </div> <p>Medium, 3</p> </div> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: 30%;"> <p><b>Corporate Risk Register Effectiveness</b></p>  <p>Reasonable Assurance</p> <p>Management Actions:</p> <p>Low, 0      High, 0</p> <div style="border: 2px solid blue; border-radius: 50%; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <span><b>Total: 2</b></span> </div> <p>Medium, 2</p> </div> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: 30%;"> <p><b>NHS Performance and Improvement – Hosting Arrangements</b></p>  <p>Substantial Assurance</p> <p>Management Actions:</p> <p><b>This Report did not contain any recommendations</b></p> <p><b>Total: 0</b></p> </div> </div> <p><b>External Audit</b>  <i>The following External Audits were presented to the ACGC on 16 December:</i>  <b>Structured Assessment</b>      <b>Management Actions: None</b>  <i>(Assurance Ratings not included on External Audit Reports)</i></p> <p>These have will also be circulated to the relevant Committees.</p>
Workforce	PODC are due to consider a deep dive on Sickness that was a request from the Board.
Risk	None.
Data and Digital	None.
Service Delivery	None.
Clinical audit	None.



### Section 3: Dates of next Committee Meetings

Date of next Committee meetings	
The next scheduled Committee meetings are as follows: (please note these are subject to change):	
Quality, Safety and Improvement Committee	<a href="#">24 February 2026</a>
Knowledge, Research and Information Committee	<a href="#">17 March 2026</a>
Audit and Corporate Governance Committee	<a href="#">23 March 2026</a>
People and Organisational Development Committee	<a href="#">16 April 2026</a>