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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

FINAL VERSION

Signed off during 22.09.2026 meeting

**PCIC CLINICAL BOARD
MINUTES OF THE QUALITY, SAFETY & EXPERIENCE GROUP
TUESDAY 21st JULY 2026 11:00 – 13:00
Venue: MS TEAMS**

Attendees:

- Abigail Bernard, AB, Lead Union Representative for PCIC
- Barbara Davies, BD, Interim Director of Nursing, PCIC
- Bethan Watkins, BW, Safeguarding Nurse Advisor, Corporate Safeguarding Team
- Christopher Martey, CM, Multi-Professional Primary and Community Care Education Lead, PCIC Academy
- Clare Clement, CC, Lead Pharmacist, PCIC
- Eleri Thomas, ET, Quality and Safety Officer, PCIC
- Dr Huw Brunt, HB, Consultant, Public Health
- Janice Aspinall, JA, Lead Representative for Health and Safety for Staffside
- Kate Roberts KR, Interim Deputy Director of Nursing, PCIC
- Lorraine Cullen, LC, Regional Director for LLAIS and Regional Lead for Patient Safety, Cardiff and Vale Region
- Lisa Dunsford, LDU, Director of Operations, PCIC
- Lloyd Waygood, LIW, Deputy Head of Operations, Cardiff Locality, PCIC
- Rachel Armitage, RAR, Quality and Safety Manager, PCIC
- Rebecca Stringer, RST, Lead Nurse for Health Inclusion and Health Protection, PCIC
- Rhian Smith, RSM, Interim Senior Nurse for Hospital Palliative Care Team
- Dr Richard Baxter, RB, Community Director Quality Improvement and Governance, PCIC
- Ruth Cann, RC, Consultant Nurse Older Vulnerable Adults, PCIC
- Sarah Griffiths, SaG, Head of Operations, Primary Care, PCIC
- Susan Eshel, SE, Senior Nurse, Community Hospitals, PCIC
- Summer Iwobi, Clinical Nurse Specialist for PCIC, Infection, Prevention and Control
- Tracy Valade, TW, Interim Lead Nurse for ICCS – Community
- Victoria Whitchurch, VW, Head of Operations for Health Protection and Health Inclusion, PCIC

Apologies:

- Gareth Baker, GB, Head of People and Culture
- Dr Helen Cordy, HC, Point of Care Testing Clinical Lead
- Dr Helen Kemp, HK, Clinical Director for Quality, Safety and Governance & Deputy Clinical Board Director
- Lisa Waters, LiW, Senior Nurse for Quality, Safety and Education, PCIC
- Dr Rachel Lee, RL, Clinical Board Director, PCIC
- Rebecca Gill, RG, Senior Nurse Primary Care, Primary Care
- Sarah Congreve, SC, Assistant Vale Locality Manager, ICCS, PCIC

Chair: Barbara Davies, BD, Director of Nursing (Interim), PCIC

Minutes: Eleri Thomas, ET, Quality and Safety Officer, PCIC

July Agenda: [00 PCIC QSE Agenda - 2026.07.21 - FINAL.docx](#)

New July Action Log: [05.1 - Action Log PCIC QSE July 2026.docx](#)

ITEM NO.	ITEMS FOR DISCUSSION	ACTION OWNER
Part 1		
2026/07/01	Welcome & Introductions The Chair welcomed members and introductions were noted as on page one.	
2026/07/02	Apologies for absence Apologies were noted as on page one.	
2026/07/03	Declarations of interest No declarations of interest were made.	
2026/07/04	Minutes and Matters Arising / PCIC QSE Terms of Reference The minutes of the meeting held on 26 May 2026 were reviewed and approved as an accurate record. The refreshed Terms of Reference were reviewed. Members agreed that the PCIC Medicines Safety and Governance Group should be included within the subgroup and reporting arrangements. The document has been updated to reflect this. Subject to any further comments by close of play on 28 July 2026, the Terms of Reference would be treated as approved. Papers: Item 04.1 Item 04.2 ACTION: All to send any comments regarding the Terms of Reference by 28 July 2026.	
2026/07/05	PCIC Quality & Safety Action Log The action log was reviewed. Updates included continued work on medicines-related SOP governance, closure of the safeguarding referral data action, development of the MCA improvement work, and direct liaison regarding outstanding patient-safety follow-up. Items without updates remained open and would be followed up outside the meeting. Papers: Item 05.1	
2026/07/06	Patient Story A Community Hospitals improvement story was presented on the post-falls pathway. The pathway uses structured assessment documentation, staff training and Consultant Connect to support clinical decision-making out of hours and reduce avoidable transfers to emergency departments. Members welcomed the patient-safety benefits, improved care in the appropriate setting and enhanced professional support. The need for Community Hospital-specific outcome data, including ambulance activity, was noted, together with opportunities to share the improvement more widely. Papers: Item 06.1 , Item 06.2 ACTION: Susan Eshel to work with relevant patient-safety and ambulance-service colleagues to obtain Community Hospital-specific activity and outcome data. ACTION: Ruth Cann to provide Susan Eshel with the relevant Welsh Ambulance Service falls contact. ACTION: Susan Eshel to send the published summary/link to Richard Baxter for discussion with Consultant Connect.	SE RC SE
2026/07/07	Risk Management Update The written report was received. A new PCIC risk relating to incomplete or unavailable discharge advice information was highlighted, with multidisciplinary improvement work underway. The risk is held by PCIC because the impact is experienced in primary care, while resolution requires cross-Clinical Board action.	

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	All PCIC risks had transferred to AMaT. Further work was required to support consistent review, moderation and dynamic adjustment of risk scores, with corporate risk colleagues due to support this work. Papers: Item 07.1	
2026/07/08	PCIC Quality & Safety Update The new Alert, Advise and Assure reporting format was presented and was positively received as clearer and more meaningful. Business Units will use this structure for future reporting into this forum. Key matters included patient-safety review activity, district nursing escalation associated with workforce pressures, vaccination programme delivery, inspection and assurance activity, wound-care review, pressure-damage scrutiny and concern-tracking arrangements. An exercise to align ESR requirements for manual handling and violence and aggression training with staff roles was noted as providing improved assurance over mandatory training compliance. Papers: Item 08.1 Item 08.2	
2026/07/09	Patient Safety Learning Review (PSLR) Feedback An update was provided on five open or near-completion PSLRs. Three reviews were nearing factual-accuracy review, one was awaiting closure, and one had completed its closure meeting subject to confirmation that learning and actions could be shared. The discussion focused on system learning regarding follow-up of diagnostic recommendations. The minutes intentionally exclude individual clinical details. ACTION: Kate Roberts to confirm whether the learning and actions from the completed review (ID 93297) can be shared at the next QSE meeting.	KR
2026/07/10	Information Governance (by exception) Members noted updated right-of-access guidance and the relevance of this guidance when managing subject access requests and requests for records. Information Governance will remain a standing item for reporting by exception. Papers: Item 10.1	
2026/07/11	Infection Prevention and Control (IP&C) The PCIC infection position, reduction expectations, audit observations and forthcoming changes to transmission-based precautions were presented. Themes from site visits included environmental constraints, clutter, shared cleaning responsibilities, storage below sinks and adherence to bare-below-the-elbows requirements. Members discussed the need to reconcile C. difficile RCA return data and to strengthen links between IPC and antimicrobial stewardship. The Chair proposed establishing a dedicated PCIC IPC forum to provide sufficient oversight and focus. Papers: Item 11.1 ACTION: Rachel Armitage to send the C. difficile RCA tracking spreadsheet to Summer Iwobi for reconciliation. ACTION: Barbara Davies and Summer Iwobi to progress establishment of a PCIC IPC forum. ACTION: Clare Clement to link Medicines Management antimicrobial-stewardship work with the IPC team.	RAr BD, SI CC
2026/07/12	Safeguarding Metrics Updated safeguarding activity, referral information and a Prevent briefing were received. Members were signposted to new Prevent learning resources and future quarterly communications. The revised Safeguarding Steering Group reporting arrangements were noted. PCIC safeguarding metrics, training compliance, referral activity and related quality	

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	indicators will be reported through this forum to reduce duplication and improve oversight. Papers: Item 12.1a Item 12.1b Item 12.2 Item 12.3 Item 12.4 Item 12.5 Item 12.6	
2026/07/13	<i>Mental Capacity Act (MCA) Audit Findings and PCIC Actions</i> The audit identified areas requiring improvement in MCA practice and training compliance, while members recognised that the sample and service scope were limited and did not represent the full breadth of PCIC. The Group approved establishment of a short-term task and finish group to identify priority risk areas, review practice and training, capture good practice and develop a targeted improvement plan. Each business unit, including Community Hospitals, will be represented. Papers: Item 13.1 ACTION: Business Unit leads to nominate a representative to the MCA Task and Finish Group and send the nomination to Ruth Cann by 31 July 2026. ACTION: Ruth Cann to establish the MCA Task and Finish Group and develop a targeted PCIC improvement plan.	Everyone RC
2026/07/14	<i>Letter to Practices regarding Hospital Correspondence</i> The all-Wales issue of misdirected clinical correspondence to GP practices was noted. Potential contributory factors include incorrect or outdated records and wider digital or system issues. Work with NHS Shared Services continues. Primary Care will undertake local fact-finding to understand the impact on Cardiff and Vale practices. Papers: Item 14.1 ACTION: Sarah Griffiths to establish the local impact on Cardiff and Vale practices and report back to the next QSE meeting.	SG
2026/07/15	<i>Discharge Advice Letters (DALs) Update</i> This item was deferred to a future meeting.	
2026/07/16	<i>Standard Operating Procedure for Heart Failure Patients in General Practice</i> The proposed service protocol and DPIA were presented by Dr Richard Baxter. The initiative supports identification and optimisation of heart-failure care in primary care and had progressed through relevant information-governance review. Members noted that appropriate prescribing may increase and should be tracked as a cost pressure. The Group also identified the need for a consistent PCIC process for considering commercial or externally funded approaches to practices. The Group ratified the protocol, with no objections raised, and requested that it also be referenced through Primary Care QSE. Papers: Item 16.1 Item 16.2 ACTION: Lisa Dunsford, Richard Baxter and Clare Clement to develop a consistent PCIC process for reviewing commercial or externally funded approaches to services and practices. ACTION: Richard Baxter / Sarah Griffiths to ensure the procedure is referenced through Primary Care QSE.	LD, RB, CC RB, SG
2026/07/17	<i>Compliments</i> One compliment relating to the Vale Community Resource Service was noted. Members were reminded to submit compliments so that positive feedback can be recorded, shared and used to recognise good practice. Papers: Item 17.1	

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2026/07/18	Concerns / SOP and Process for PCIC Concerns The updated PCIC concerns SOP was received and noted. The SOP provides a clear process for monitoring, accountability and timely responses under the Listening to People arrangements. Performance against response times was reported as positive. Papers: Item 18.1	
2026/07/19	POCT Update The written POCT update was reviewed. Key matters included the draft INR self-testing policy, clarification of responsibilities and communication arrangements, funding and support for community INR testing, demand for expansion of community POCT, and equipment options for Healthy Lives events. The wider strategic need to align POCT growth with safe governance and sustainable resource was noted. Papers: Item 19.1 ACTION: Eleri Thomas to share relevant emails for Barbara Davies to review the named POCT policy queries and identify the appropriate leads for response.	
2026/07/20	SOP for Contacting GP Practices with Very Urgent Blood Results The item was deferred so that the appropriate leads could present the SOP and provide a full explanation at a future meeting.	
2026/07/21	Update to Referral Criteria for MHSOP The revised referral criteria for Mental Health Services for Older People were noted. Members recognised a potential impact on Community Hospitals and agreed that the operational effect should be monitored, particularly in relation to access to acute mental-health support. Papers: Item 21.1 ACTION: Susan Eshel to monitor and raise any Community Hospital impact arising from the revised MHSOP referral criteria.	SE
2026/07/22	PCIC Academy Updates The 2026/27 education and training calendar was shared and will be expanded as funding and programme arrangements are confirmed. Updates also covered Academy feedback and the EPP Cymru programme, which provides health and wellbeing education for people living with long-term conditions and their carers. Papers: Item 22.1 Item 22.2 Item 22.3 Item 22.4	
2026/07/23	Staff Training Resources Additional management and staff-development resources were circulated, including Managing Attendance at Work, flexible working, sexual-harassment awareness and Respect and Resolution sessions. Members were asked to promote the resources to managers. Papers: Item 23.1 Item 23.2	
2026/07/24	Public Health Team Newsletter June 2026 The newsletter was received and noted. Ongoing joint work across smoking cessation, vaccination, obesity and health-protection activity was highlighted. Dr Huw Brunt remained available as a point of contact for opportunities to work with the Public Health Team. Papers: Item 24.1	
2026/07/25	DATIX Incidents for Other Health Boards A changed process for sharing incidents with other organisations was highlighted. Responsibility now sits with Clinical Boards and Business Units, and the guidance	

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	indicates that transfer should be undertaken by appropriately senior staff. Formal communication and local governance arrangements were not yet clear. Members were advised to hold relevant cases pending agreement of the PCIC process. The continuing need to reduce outstanding incident records was also reinforced. Papers: Item 25.1 ACTION: Barbara Davies and Kate Roberts to clarify the PCIC governance and authorisation process for sharing incidents with other Health Boards and seek wider organisational communication.	BD, KR
2026/07/26	Business Unit Updates Primary Care: the submitted minutes and assurance report were noted. Positive improvement in diabetes care processes following practice-support visits was highlighted, with future reporting planned. Papers: Item 26.1 Item 26.2 Health Protection and Health Inclusion: the report highlighted a workforce-model risk affecting prison discharge and health-assessment standards. Strong uptake in blood-borne-virus testing and early progress with the Men B vaccination programme were noted. Papers: Item 26.3 Item 26.4 Item 26.5 ICCS: District Nursing remained at escalation level 4 due to workforce pressures, with visits being reprioritised. Continuing Healthcare teams were also managing increased complexity and transition demand. Papers: Item 26.6 Item 26.7 Medicines Management and Community Pharmacy: updates covered local-authority medicines governance, discharge advice information, and prescribing governance as ICCS services develop. Good practice by a community pharmacist in recognising a time-critical clinical presentation was commended. Papers: Item 26.8 Item 26.9 Item 26.10 Members were reminded that papers feeding into QSE governance may become publicly accessible and must therefore be appropriately anonymised and checked before wider publication.	
2026/07/27	Any Other Business The Chair thanked members and partners for their contributions to a full agenda and recorded particular thanks to Rachel Armitage for her contribution to quality and safety work. No further business was raised.	
PART 2	<u>PART 2: Items to be recorded as Received and Noted for Information by the sub-Committee</u>	
2026/07/28	Items Received and Noted for Information All Part 2 items previously circulated were recorded as received and noted. The PCIC Central Register for Communications and Alerts remains the reference source. Papers: Item 28	
Date and time of next meeting: Tuesday, 22nd September 2026, 11am		