

## TERMS OF REFERENCE QUALITY & GOVERNANCE COMMITTEE

### 1. ROLE OF THE COMMITTEE/GROUP

#### **Purpose:**

The overarching role of the Quality & Governance Committee is that it will have assurance and scrutiny on the quality and safety performance of the commissioning of elective hospital care, rehabilitation, urgent and emergency care (including out of hours services), community health services, services for children and younger persons, maternity services, mental health and learning disability services.

The Committee will also scrutinise and receive assurance regarding the CCG's corporate governance arrangements including risk management, information governance, equality & diversity and the organisational development strategy.

#### **Key Objectives:**

The Committee will:-

- Enable the Board to fulfil its statutory functions in relation to quality, patient safety and corporate governance.
- Ensure that the principles upheld in the NHS Constitution are reflected in the Committee's values.
- Actively promote the NHS Constitution in its engagement with patients, the public, providers of services and other key stakeholders.
- Ensure that its decisions are both taken and seen to be taken without any possibility of the influence of external or private interest.
- Provide assurance and advise the CCG Board on the performance of all commissioned services in relation to all quality indicators. This includes patient safety (including Healthcare Care Acquired Infections), patient experience and effectiveness of outcomes.
- Ensure continuous quality improvement and better outcomes are delivered in accordance with National Guidance, through robust contract monitoring and use of data and information.
- Provide assurance on performance and compliance with statutory duties.
- Provide scrutiny, assurance and oversight of patient safety and quality standards.
- Review and disseminate the learning from internal reports, local or national reviews and enquiries and other data and information that may be relevant for understanding quality and safety within the CCG.
- Provide assurance and advise the CCG Board in relation to action plans that are addressing any areas of significant underperformance.

- Provide scrutiny, assurance and oversight of serious incidents/incidents.
- Provide assurance and to advise the CCG Board on performance and compliance with statutory duties for example for safeguarding children and the Equality Act 2010.
- Advise the CCG Board on risk management issues including ensuring that there is a strategy for the continuing identification, evaluation, prioritisation and management of clinical and non-clinical risks and that a register of risks is maintained for the CCG.
- Review board assurance framework reporting in order to report to the CCG Board.
- Take a leadership role in shaping the corporate governance of the CCG.
- Seek assurance on implementation of Information Governance arrangements within the CCG to ensure the CCG maintains at least Level 2 compliance with the Information Governance Toolkit.
- Seek assurance on key Human Resources indicators, including recruitment and retention, sickness absence and mandatory training.

## **2. ACCOUNTABILITY**

### **Accountable to:**

The Quality & Governance Committee is accountable to the Mid Essex CCG Board.

### **Accountable for:**

The Sub-Committees/Groups which will report to the Quality & Governance Committee will be:-

- Equality and Diversity Sub-Committee
- Infection Prevention and Control Committee
- Quality Collaborative
- Maternity Services Liaison Committee (MSLC)
- NICE Quality Committee
- Medicines Management Sub-Committee

## **3. DECISION MAKING**

The Committee Chair will be a clinical MECCG Board Member. The Deputy Chair will be a Lay MECCG Board Member.

A mandated decision making deputy in the absence of a core decision-making member is welcome providing that the deputy is fully briefed on the agenda subject matters.

The Committee has the authority to approve minor amendments on behalf of the Board or endorse new and/or significant amendments for approval by the Board of policies and procedures for all work related to internal control, emergency planning and business continuity, and compliance with relevant regulatory, legal and code of conduct requirements.

#### **4. MANAGEMENT OF CONFLICTS OF INTEREST**

Members of the Committee will be required to declare any relevant interests to the CCG in accordance with the CCG's Conflicts of Interest Policy (MECCG003).

A register of Committee members' interests and those of CCG staff and representatives from other organisations who regularly attend Committee meetings will be produced for each meeting. Committee members will be required to declare interests relevant to agenda items as soon as they are aware of an actual or potential conflict so that the Committee Chair can decide on the necessary action to manage the interest in accordance with the Policy.

#### **5. MONITORING AND REPORTING**

##### **Monitoring Arrangements:**

These terms of reference were approved by the CCG Mid Essex Clinical Commissioning Board on 25 January 2018 and will be reviewed annually.

##### **Reporting arrangements:**

The minutes of the Committee will be formally recorded and action notes submitted to the MECCG Formal Board at regular intervals.

Agenda papers to be issued ten working days in advance of each meeting.

Servicing of the Committee will be undertaken by the office of the CCG Board's Director of Nursing and Quality.

#### **6. MEMBERSHIP**

##### **Core Decision-Making Members**

Clinical MECCG Board Member (Chair)  
Lay MECCG Board Member, Patient & Public Engagement (Deputy Chair)  
Director of Nursing and Quality  
Director of Primary Care and Resilience  
Director of Corporate Services  
Deputy Director of Nursing and Quality  
Chief Pharmacist  
Head of Corporate Governance

##### **Standing Members/Co-Opted Members**

Designated Nurse for Safeguarding Children  
Designated Nurse for Safeguarding Adults  
Infection Prevention and Control Lead Nurse  
Head of Nursing & Quality  
Continuing Health Care Team Leader – Adult  
Continuing Health Care Team Leader – Children  
Mental Health and Learning Disabilities Quality Lead  
Quality Manager  
Head of Communications and Engagement  
Human Resources Manager  
Patient Experience Manager  
Infection Prevention & Control Nurse Specialist

The Committee will co-opt additional standard members if required.

Meetings will be administered by the Personal Assistant to the Director of Nursing & Quality.

## **7. QUORUM**

This committee will be considered quorate when either the Chair or Deputy Chair is present, plus at least two other core decision-making members, one of which must be a clinician, are present.

## **8. MEETING FREQUENCY**

The meetings will be Quarterly and in line with the Clinical Commissioning Board Group Board meeting schedule.

## **9. REVIEW OF EFFECTIVENESS**

The Quality & Governance Committee will develop a workplan that prioritises and monitors the delivery of its objectives. This workplan will be monitored regularly and will be formally reviewed on an annual basis.

## **10. REVIEW OF TERMS OF REFERENCE**

To be reviewed annually and ratified by Mid Essex Clinical Commissioning Group Board.

**Date of Approval:** Quality & Governance Committee: 12 December 2017

**Date of Approval:** Mid Essex CCG Board, 25 January 2018