

**Quality & Safety Committee
 Terms of Reference**

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April 2022 - Annual update, refresh of sub-groups, refresh of job titles, removal of duplicates from attendee list as already in member list who are required to attend.	

Terms of Reference for the Quality & Safety Committee

A. Overall aim or purpose:

The overall aim of the Committee is to seek and obtain evidence of assurance on the effectiveness of the Trust's quality and safety systems and processes and the quality and safety of the services provided. This includes identifying and seeking assurance on the management of quality and safety related risks at operational and strategic level.

The Committee will monitor and report to the board on the effectiveness of these systems and processes.

B. Key objectives:

The Quality & Safety Committee's key objectives are to:

- Seek assurance that:
 - Systems and processes are effective;
 - The quality of services is good and continuously improving; and
 - The quality of the experience of people using our service is good and continuously improving.
- monitor, review and report to the Trust Board on all the above; highlighting assurances received and identifying any threats to assurance
- support the range of quality and safety initiatives in place within the Trust, providing advice where appropriate
- support and promote a risk awareness culture and positive approach to investigating and learning from adverse events and
- receive relevant strategies for information and assurance

C. Specific areas of responsibility:

The Quality & Safety Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

In particular the Committee shall review the adequacy of:

- the management of BAF risks which the QSC has responsibility for overseeing,
- assurance against CQC inspection action plans and routine CQC related activity,
- systems and processes to ensure monitoring and assessment of the quality and improvements in services
- mechanisms to involve service users, carers, the public and partner organisations in improving services,
- arrangements for implementation and monitoring of clinical audit, clinical guidelines and protocols, NICE guidelines,
- systems for identifying, reporting, mitigating and managing quality and safety related risks including the monitoring of incidents and complaints, and any risks within the Operational Risk Register that have been allocated to the Committee,
- research governance structures and proposals and work programme for Research and Development,
- structures and processes for developing and assuring clinical effectiveness,
- performance monitoring relating to key quality and safety indicators, and
- the Trust's response to key external reports

In addition, the Committee shall receive regular reports (including issues to escalate and assurances and, where applicable, key performance indicators) on activity within operational services and the work of the sub groups of the Committee that contribute to the understanding and improvement of quality and safety.

D. Chair:

The Quality & Safety Committee shall be chaired by a Non-Executive Director appointed by the Trust Board. A Non-Executive Director shall be identified to act as Deputy to the Chair.

E. Members:

The membership of the Committee will consist of:

- Medical Director
- Director of Nursing, Professions and Clinical Standards
- Chief Operating Officer; and
- Three Non-Executive Directors. One NED will be Chair and one will be Deputy Chair.

There may be occasions where the Executive and Non-Executive Director posts have been filled on an interim basis. Where this arrangement is in place, the interim post holder will be considered a member of this group for the period they hold the interim position.

The Chief Executive and Chair are invited / reserve the right to attend any meeting.

In addition, the following attendance is expected:

In attendance for the whole meeting

- Director of Corporate Affairs
- Deputy Director of Patient Safety, Compliance and Risk
- Deputy Director of Nursing and Professions
- Service user / carer representative
- A member of the Corporate Governance Team as Committee Secretariat
- ~~Medical Director~~
- ~~Director of Nursing and Professions~~
- ~~Chief Operating Officer~~

In attendance for other reports:

- General Manager(s) of Care Groups
- Assistant General Manager(s) relevant to subject of paper
- Head(s) of Profession / clinical staff relevant to subject of paper
- Service user / carer representatives as relevant to subject of paper
- Representative from any department as relevant to subject of paper

Where an Executive Director is unable to attend, they may delegate to a Deputy Director / General Manager; in such cases it should be made clear at the meeting who is undertaking the deputising role.

Where a Non-Executive Director is unable to attend, they may delegate to another Non-Executive; in such cases it should be made clear at the meeting who is undertaking the deputising role.

F. Accountable to:

The Quality & Safety Committee is accountable to the Board. The minutes of the Quality & Safety Committee shall be formally recorded and submitted to the Trust Board.

G. Accountable for:

There are no formal lines of accountability between the Quality & Safety Committee and other Trust Committees. The Quality & Safety Committee interacts with other Trust Committees through cross attendance and the use of joint Committee meetings.

H. Roles

The role of the Chair is undertaken via a nominated Non-Executive Director. Minutes and administration of the meeting are undertaken through the Corporate Governance Team and the Trust Secretary.

I. Frequency of Meetings:

Meetings will be held every month. There will be separate meetings if required by the Trust Board.

J. Frequency of Attendance:

All Committee members will be expected to attend at least six meetings a year. Attendance will be monitored by the ~~Director of Corporate Affairs~~ Corporate Governance Team.

K. Quorum:

The Committee will be considered quorate where at least two Non-Executive Directors and one ~~Executive~~ Director are in attendance.

In exceptional circumstances an Executive Director can temporarily delegate their responsibility at Committee through a formal written letter of delegation.

L. Record Keeping:

Archives of minutes and papers relating to the Quality & Safety Committee are maintained by an identified corporate governance team member and stored in the Quality & Safety Committee folder.

M. Lifespan of meeting:

The Quality & Safety Committee is a standing committee of the Trust Board. It will continue to meet in accordance with these Terms of Reference until the Trust Board determines otherwise.

N. Other matters: attendance

Deputy Directors, Heads of Service, Medical and Professional Leads will be required to attend Committee meetings to present regular agenda items as requested by the Committee. Other Trust Directors, managers and clinicians will be required to attend to address specific issues as they arise. The Committee may choose to invite external organisations and individuals including service users and carers to present or attend for specific issues and reports from time to time.

O. Monitoring arrangements

All elements of the Quality & Safety Committee's Terms of Reference will be monitored annually by the Deputy Director of Patient Safety, Compliance and Risk and reported in the Annual Quality & Safety Report.

The following tactical level groups will receive delegated actions from, and report into the Quality & Safety Committee:

- **Together We Improve, Create and Sustain (TWICS) Programme Board**
- Clinical Board
- Compliance and Risk Group
- Patient Safety and Learning Group
- Participation and Involvement Strategic Group

