

Board of Directors – Meeting held in Public

9 March 2023

Paper title:	Quality & Safety Committee – Terms of Reference	Agenda Item 13.3
Presented by:	Fran Stead – Trust Board Secretary	
Prepared by:	Sue Grahamslaw – Corporate Business Manager	
Committees where content has been discussed previously	Quality & Safety Committee – December 2022 and January 2023	
Purpose of the paper Please check ONE box only:	<input checked="" type="checkbox"/> For approval <input type="checkbox"/> For information <input type="checkbox"/> For discussion	
Link to Trust Strategic Vision Please check ALL that apply	<input type="checkbox"/> Providing excellent quality services and seamless access <input type="checkbox"/> Creating the best place to work <input type="checkbox"/> Supporting people to live to their fullest potential <input type="checkbox"/> Financial sustainability, growth and innovation <input checked="" type="checkbox"/> Governance and well-led	
Care Quality Commission domains Please check ALL that apply	<input type="checkbox"/> Safe <input type="checkbox"/> Caring <input type="checkbox"/> Effective <input checked="" type="checkbox"/> Well-Led <input type="checkbox"/> Responsive	

Purpose of the report
The refreshed terms of reference for the Quality & Safety Committee were approved at the Quality & Safety Committee on 19 January 2023. These are presented to the Trust Board for ratification.

Executive Summary
<p>Good governance stipulates that there will be an annual review of the terms of reference that support groups & committees. In-line with this, the terms of reference for the Quality & Safety Committee has been reviewed by the Corporate Governance Team.</p> <p>The proposed amendments to the Committee terms of reference are:</p> <ul style="list-style-type: none"> • transferred to Care Trust Integrated Governance Guide template; • added Associate Non-Executive Director as a Committee Member;

- added Head of Psychological Therapies (Clinical Psychologist) and Allied Health Professions Lead as Committee attendees (as requested by Phil Hubbard in June 2022);
- change Director of Corporate Affairs to Trust Secretary in attendee list; &
- added Heads of Nursing to attendee list.

The suggested revisions to the Committee Terms of Reference were discussed and approved at the Quality & Safety Committee meeting on 19 January 2023. They are therefore presented to the Trust Board for ratification.

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?

Yes (please set out in your paper what action has been taken to address this)

No

Recommendation(s)

The Board of Directors is asked to consider & approve the revisions to the Committee’s terms of reference.

Relationship to the Board Assurance Framework (BAF)

The work contained with this report links to the following strategic risks as identified in the BAF:

- SO1:** Engaging with our patients, service users and wider community to ensure they are equal partners in care delivery (QSC)
- SO2:** Prioritising our people, ensuring they have the tools, skills and right environment to be effective leaders with a culture that is open, compassionate, improvement-focused and inclusive culture (WEC)
- SO3:** Maximising the potential of services to delivery outstanding care to our communities (QSC)
- SO4:** Collaborating to drive innovation and transformation, enabling us to deliver against local and national ambitions (Board)
- SO5:** To make effective use of our resources to ensure services are environmentally and financially sustainable and resilient (FBIC)
- SO6:** To make progress in implementing our digital strategy to support our ambition to become a digital leader in the NHS (FBIC)

Links to the Strategic Organisational Risk register (SORR)

The work contained with this report links to the following corporate risks as identified in the SORR:

- N/A
-

Compliance & regulatory implications

The following compliance and regulatory implications have been identified as a result of the work outlined in this report:

- Well-led

Quality & Safety Committee

Terms of Reference

Document details:	Terms of Reference for the Quality & Safety Committee
Version:	18
Approved by:	Quality & Safety Committee
Ratified by:	Trust Board
Date approved:	19 January 2023
Date ratified:	9 March 2023 – public Board of Directors meeting
Job title of author:	Corporate Governance
Job title of responsible Director:	Chair of the Quality & Safety Committee (Non-Executive Director)
Date issued:	
Review date:	January 2024
Frequency of review:	At least annual
Amendment Summary:	
<ol style="list-style-type: none"> 1. Transferred to Care Trust Integrated Governance Guide template 2. Added Associate Non-Executive Director as a Committee Member 3. Added Head of Psychological Therapies (Clinical Psychologist) and Allied Health Professions Lead as Committee attendees (as requested by Phil Hubbard in June 2022) 4. Change Director of Corporate Affairs to Trust Secretary in attendee list 5. Added Heads of Nursing to attendee list 	

1 Name of the Committee

Quality & Safety Committee.

2 Composition of the Committee

Members: full rights

Title	Role in the group / committee
Non-executive Director	Committee Chair
Non-executive Director	Committee Deputy Chair / Non-executive member
Non-executive Director Associate Non-executive Director	Additional non-executive member
Director of Nursing, Professions and Care Standards	Executive lead for the Committee. Assurance & escalation provider to the Quality & Safety Committee.
Medical Director	Executive lead with responsibility for clinical services. Assurance & escalation provider to the Quality & Safety Committee.
Chief Operating Officer	Executive lead with day-to-day responsibility for operational delivery of services. Assurance and escalation provider to the Quality & Safety Committee.

Any Executive and Non-executive Director can attend a Board sub-committee meeting because of the position that they hold. When carrying out this duty they will assume full member rights.

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.

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 Director; in such cases it should be made clear at the meeting who is undertaking the deputising role.

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

In attendance: in an advisory capacity

Job Title
Trust Secretary
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 (Committee Secretariat)
General Manager(s) of Care Groups
Head of Psychological Therapies (Clinical Psychologist)
Allied Health Professions Lead
Head of Nursing – Mental Health Care Services
Head of Nursing – Adults and Children’s Physical Health

In addition to anyone listed above as a member or attendee, at the discretion of the Chair of the Committee, the Committee may also request individuals to attend on an ad-hoc basis to provide advice and support for specific items from its work plan when these are discussed in the meetings.

2.1 Governor Observers

The Committee welcomes and encourages governors to attend its meetings. The role of a Governor at Board sub-committee meetings is to observe the work of the Committee. The Governor observes Board sub-committee meetings in order to get a better understanding of the work of the Trust and to observe Non-executive Directors appropriately challenging the Executive Directors for the operational performance of the Trust. At the meeting the Governor observer(s) will be required to declare any interest they may have in respect of any of the items to be discussed.

3 Quoracy

Number: The minimum number of members for a meeting to be quorate three, comprising at least two Non-executive Directors and one Executive Director. Attendees do not count towards quoracy. If the Chair of the Committee is unable to attend the meeting, and if otherwise quorate, the meeting will be chaired by one of the other Non-executive Directors.

Deputies: Where appropriate members may nominate deputies to represent them at a meeting. Deputies do not count towards the calculation of whether the meeting is quorate except if the deputy is representing the member under formal “acting up” arrangements. In this case the deputy will be deemed a full member of the committee.

It may also be appropriate for attendees to nominate a deputy to attend in their absence.

A schedule of deputies, attached at Appendix 1a, should be reviewed at least annually to ensure adequate cover exists.

Non-quorate meeting: Non-quorate meetings may go ahead unless the chair decides not to proceed. Any decisions made by the non-quorate meeting must be reviewed at the next quorate meeting.

4 **Meetings of the Committee**

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

Urgent meeting: Any member of the Committee may request an urgent meeting. The Chair of the Committee will normally agree to call an urgent meeting to discuss the specific matter, unless the opportunity exists to discuss the matter in a more expedient manner.

Minutes: The Committee Secretariat will be provided by the Corporate Governance Team.

Alert, Advice, Assure Escalation Reporting: The Chair of the Committee will provide an update of key issues arising from the meeting to the next Public Board of Directors meeting.

Voting: It is at the discretion of the Chair of the meeting to call a vote during a meeting. When voting, decisions at meetings shall be determined by a majority of the votes of the Executive and Non-executive Directors present and voting. In the case of any equality of votes, the person presiding shall have a second or casting vote.

5 **Authority**

Establishment: The Committee is a sub-committee of the Board of Directors and has been formally established by the Board.

Powers: Its powers, in addition to the powers vested in the executive members in their own right, are detailed in the Trust's Scheme of Delegation.

Cessation: The Committee is a standing Board sub-committee in that its responsibilities and purpose are not time limited. However, the Committee has a responsibility to review its effectiveness annually.

6 Role of the Committee

6.1 Purpose of the Committee

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.

6.2 Guiding principles for members (and attendees) when carrying out the duties of the group / committee

In carrying out their duties members of the Committee and any attendees of the Committee must ensure that they act in accordance with the values of the Trust, which are:

- we care
- we listen
- we deliver.

6.3 Duties of the Committee

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

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.

7 Relationships with other groups and committees



8 Duties of the Chair

The Chair of the Committee shall be responsible for:

- agreeing the agenda in partnership with the Director of Nursing, Professions and Care Standards;
- directing the meeting ensuring it operates in accordance with the Trust's values whilst ensuring all attendees have an opportunity to contribute to the discussion;
- giving direction to the secretariat and checking the draft minutes;
- ensuring the agenda is balanced and discussion is productive; and
- ensuring sufficient information is presented to the Board of Directors in respect of the work of the Committee.

9 Reviews of the terms of reference and effectiveness

The terms of reference shall be reviewed by the Committee at least annually and be presented to the Board of Directors for ratification.

It will be the responsibility of the Chair of the Committee to ensure that it carries out an assessment of effectiveness annually, and ensure the outcome is reported to the Board of Directors along with any remedial action to address weaknesses. The Chair of the Committee will also be responsible for ensuring that the actions to address any areas of weakness are completed.

Appendix 1a: Schedule of deputies

It may not be necessary or appropriate for all members (or attendees) to have a deputy attend in their absence. If this is the case, please state below “no deputy required”.

Full member (by job title)	Deputy (by job title)
Non-Executive Director Chair	Non-executive Director Deputy Chair, OR Another Non-Executive Director
Non-Executive Director	Another Non-Executive Director
Associate Non-Executive Director	Another Non-Executive Director
Director of Nursing, Professions and Care Standards	Deputy Director of Patient Safety, Compliance and Risk, OR Deputy Director of Nursing and Professions
Chief Operating Officer	General Manager
Medical Director	Associate Medical Director

Attendee (by job title)	Deputy (by job title)
Trust Secretary	Deputy Trust Secretary
Deputy Director of Patient Safety, Compliance & Risk	Head of Patient Safety, Compliance & Risk
Deputy Director of Nursing and Professions	No deputy required
Service user / carer representative	No deputy required
A member of the Corporate Governance Team (Committee Secretariat)	No deputy required
General Manager(s) of Care Groups	Assistant General Manager(s) of Care Groups
Head of Psychological Therapies (Clinical Psychologist)	No deputy required
Allied Health Professions Lead	No deputy required
Head of Nursing – Mental Health Care Services	No deputy required
Head of Nursing – Adults and Children’s Physical Health	No deputy required