

## 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 scrutinise and provide assurance to the CCG Board on the quality and safety of the services directly commissioned by the CCG, i.e. rehabilitation services, community health services, services for children and younger persons, community mental health and learning disability services.

The Committee will also scrutinise and provide assurance to the CCG Board regarding the CCG's corporate governance arrangements including risk management, information governance, equality & diversity, health and safety, and CCG workforce management.

#### **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.
- Approve the CCG's annual Equality & Diversity Report, Workforce Race Equality Standard (WRES) and Equality & Diversity System (EDS2) submissions to NHS England.
- Advise the CCG Board on quality and governance risks, 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.
- Take a leadership role in shaping the corporate governance of the CCG.
- Provide 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.
- Provide 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
- NICE Quality Committee
- Medicines Management Sub-Committee

## **3. DECISION MAKING**

The Committee Chair will be a lay MECCG Board Member. The Deputy Chair will be a Clinical 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 relevant clinical and corporate policies and procedures for all matters within its remit.

Decisions will be made on the basis of consensus and where consensus cannot be reached they will be made on the basis of a simple majority vote, with the Chair holding the casting vote.

Where decisions are required outside of the meeting, these can be taken virtually following agreement of the Chair.

#### **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 CCG staff and staff 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 Conflicts of Interest Policy.

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

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

These terms of reference will be approved by the CCG Mid Essex Clinical Commissioning Board 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.

#### **6. MEMBERSHIP**

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

Lay MECCG Board Member, Patient & Public Engagement (Chair)  
Clinical MECCG Board Member (Deputy Chair)  
Director of Nursing and Quality  
Director of Governance & Performance  
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  
Continuing Health Care Team Leader – Adult  
Continuing Health Care Team Leader – Children  
Head of Communications and Engagement  
Human Resources Manager

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

Administrative support for the committee, including the taking of minutes, will be undertaken by the office of the CCG's Director of Nursing and 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 CCG 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: 11 March 2019  
Board: 28 March 2019