

Solent NHS Trust

Quality Assurance Committee - Terms of Reference

1 Constitution

1.1 Solent NHS Trust Board resolves to establish a Committee of the Board to be known as the Quality Assurance Committee (the Committee). As a Committee of the Board, the Standing Orders of the Trust shall apply to the conduct of the working of the Committee.

1.2 The Committee will work closely with the Audit & Risk Committee for those aspects of governance associated with assurance and internal control and will report to the Audit & Risk Committee on matters as requested by that Committee.

2 Purpose

2.1 The Committee is responsible for providing the Trust Board with assurance on all aspects of quality, clinical governance and regulatory compliance.

3 Duties

3.1 Objectives:

To seek assurance that

- processes are in place to assess and monitor clinical governance performance concerning all aspects of service quality
- effective processes are in place to achieve all areas of regulatory compliance including registration and recommendations of the CQC
- the development of all clinical governance activities within the service lines improve the quality of care throughout the Trust
- learning from relevant events is disseminated and embedded
- quality and safety matters within partnership governance arrangements are considered

3.2 The Committee will seek assurance on all aspects of quality via:

- Exception reports from
 - The Chief Nurse and Chief Operating Officers' Reports which will highlight items to escalate to the Committee from the Quality Improvement and Risk (QIR) Group including key clinical service risks (providing assurance of the application of Trust risk appetite and tolerance, agreeing proposals to tolerate risks scoring 15 or above and assurance of the management and action plans of risks scoring 15 or above) and key escalations from sub-groups
- Scheduled reports from the various annual programmes including:
 - Regulatory Compliance and CQC oversight
 - Safe Staffing
 - Experience of Care, including community engagement and complaints
 - Research & Development including Clinical Audit & Effectiveness and Quality Improvement
 - Learning from Deaths, SIs and Incidents
 - Safeguarding
 - Learning Disabilities Strategy updates
 - Operational Risks and the BAF
 - Freedom to Speak Up
- Via the QIR Group, the Committee also seeks assurance regarding Medicines Management, Infection Prevention & Control and Safeguarding. The annual reports for these agendas are also noted at the Committee prior to presentation to Board.
- Quarterly reports on achievement against the Trust's Quality Priorities
- Escalations of Deprivation of Liberty Safeguards (DOLs)

- 3.3 The Committee will approve the QIR Group Terms of Reference
- 3.4 The Committee will also seek assurance from other functions concerning Trust business where there are regulatory compliance issues and will require the relevant management lead to provide regular assurance reports.
- 3.5 The Committee will conduct an annual appraisal of its effectiveness.

4 Membership

- 4.1 The Committee is appointed by the Trust Board and comprises:
- Non Executive Director (Chair) or nominated deputy
 - Two Non- Executive Directors
 - Executive Directors
 - Chief Executive
 - Deputy Chief Executive and Chief Finance Officer
 - Chief Operating Officers (accompanied by CDs as invited)
 - Chief Nurse
 - Chief Medical Officer
 - Chief of Staff and Corporate Affairs
 - Head of Compliance
 - Associate Director of Quality and Governance

5 Attendees

- 5.1 If Executive Directors are unable to attend a meeting they should agree a deputy who is authorised to act on their behalf, with the CEO in consultation with the Committee Chair.
- 5.2 Agreed representatives from CQC and Clinical Commissioning Groups have a standing invite to attend meetings and papers will be shared in advance of meetings.

6 Quorum

- 6.1 The quorum necessary for the transaction of business shall be
- The Chair or a nominated deputy being a Non-Executive Director
 - a minimum of one other Non-Executive Director
 - a minimum of two Executive Directors

7 Frequency

- 7.1 Meetings will be held six times a year, scheduled to support the business cycle of the Trust and additional meetings can be called by the Chair of the Committee if it is deemed necessary.

8 Secretary and administration

- 8.1 The Corporate Affairs Administrator shall act as the secretary of the committee. Papers will be circulated in accordance with the Trusts' Standing Orders and minutes will be circulated promptly to all members, following agreement by the Chair.

9 Authority

- 9.1 The Committee has no powers, other than those specifically delegated in these Terms of Reference. The Committee is authorised:
- to seek any information it requires from any employee of the Trust in order to perform its duties
 - to call any employee to be questioned at a meeting of the committee as and when required.

10 Reporting

- 10.1 An exception report will be provided to the Board via the Committee chair – highlighting business transacted and making any recommendations as deemed appropriate within the remit of the Committee.

Version
Agreed Quality Assurance Committee
Date of Next Review

18
Date: March 2021 (amendments noted at July 2021)
Date: March 2022