

Quality and Patient Safety Sub-Committee of Trust Board

Terms of Reference

1. Authority

- 1.1 The Quality and Patient Safety Committee is constituted as a standing Committee of the Trust Board. Its constitution and terms of reference shall be as set out below, subject to amendment at future Trust Board meetings.
- 1.2 The Committee is authorised by Trust Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff, and all members of staff are directed to co-operate with any request made by the committee.
- 1.3 The Committee is authorised by the Trust Board to obtain outside legal or other independent professional advice and to secure the attendance of individuals and authorities from outside the trust with relevant experience and expertise if it considers this necessary.

2. Purpose:

The purpose of the Committee will be to focus on service Quality and Improvement for patients and users of the Trust's Services and will provide assurance on the three components of NHS defined Quality –

- Safety,
- Effectiveness and
- Patient Experience.

2.1 Quality

2.1.1 Patient Safety

- To provide assurance to Trust Board that the Trust has adequate systems and processes in place to ensure and continuously improve patient safety and management of risk from 'Ward to Board'.

2.1.2 Effectiveness

- To provide assurance to Trust Board that the Trust has effective structures to measure and continuously improve the effectiveness of care.

2.1.3 Patient Experience

- To provide assurance to the Trust Board that the Trust is listening to patients about their experience and taking action to improve the experience of those using its services.

2.2 **Structure**

The Committee will be structured around the four pillars of Quality as defined by the NHS:

2.2.1 Strategy

- The Committee will review, approve and monitor implementation of the Trust's Quality Strategy and Quality Account.

2.2.2 Capability and Culture

- The Committee will receive regular reports from the Trust's Workforce and Development Group and will monitor capability and organisational cultural issues insofar as they impact on quality and patient safety and agree strategies for improvement.

2.2.3 Processes and Structures

- The Committee will receive twice yearly reports from Divisions outlining their structures and processes for managing and monitoring Quality, Governance and Patient Experience and to assure itself and the Trust Board that Divisions are giving appropriate priority to continuous improvement in quality and patient safety.

2.2.4 Measurement

- The Committee will receive monthly quality dashboard reports for each division around an agreed set of Key Performance Indicators for Quality, patient safety and Patient Experience to be determined by the Committee. (Appendix 3 outlines a KPI Dash Board).
- Where performance in respect of quality and patient safety has fallen short of agreed standards the Committee will request evidence of assurance that the concerns have been investigated, corrective action has been taken and lessons have been learnt.

2.3 **Reporting Structure:**

2.3.1 The following feeder committees will report to the Quality and Safety Sub-Committee

- Patient Safety Committee

- Patient Experience Steering Group
- Effective Care Committee
- Workforce and Development Group
- Research Governance Committee
- Divisional Boards

Appendices 1 and 1a outline the Trust Committee Structure

3. Membership

- 3.1 The Quality and Safety Committee will comprise of at least three non-executive members of the Trust Board, including the Chairman of the Audit Committee but excluding the Chairman of the Trust Board.
- 3.2 The Chairman of the Quality and Patient Safety Committee shall be appointed by the Chairman of the Trust Board and shall have recent and relevant experience of NHS Quality and Safety.

Appendix 2 outlines membership as of September 2011.

4. Meetings

- 4.1 The committee will meet monthly except August as follows
- Day: 3rd Wednesday of each month
Time: 3pm
Duration: 2 Hours
- 4.2 The Committee will receive a number of reports from feeder committees and divisions as per an agreed work programme.
- 4.3 The Committee will be quorate if a minimum of 2 members are present, one of whom must be the chair or nominated vice chair and one of whom must be an executive director with a clinical background.
- 4.4 The Committee will be serviced by the Trust's Corporate Secretary.
- 4.5 The Chief Executive and other Executive Directors will be invited to attend the Committee as required.

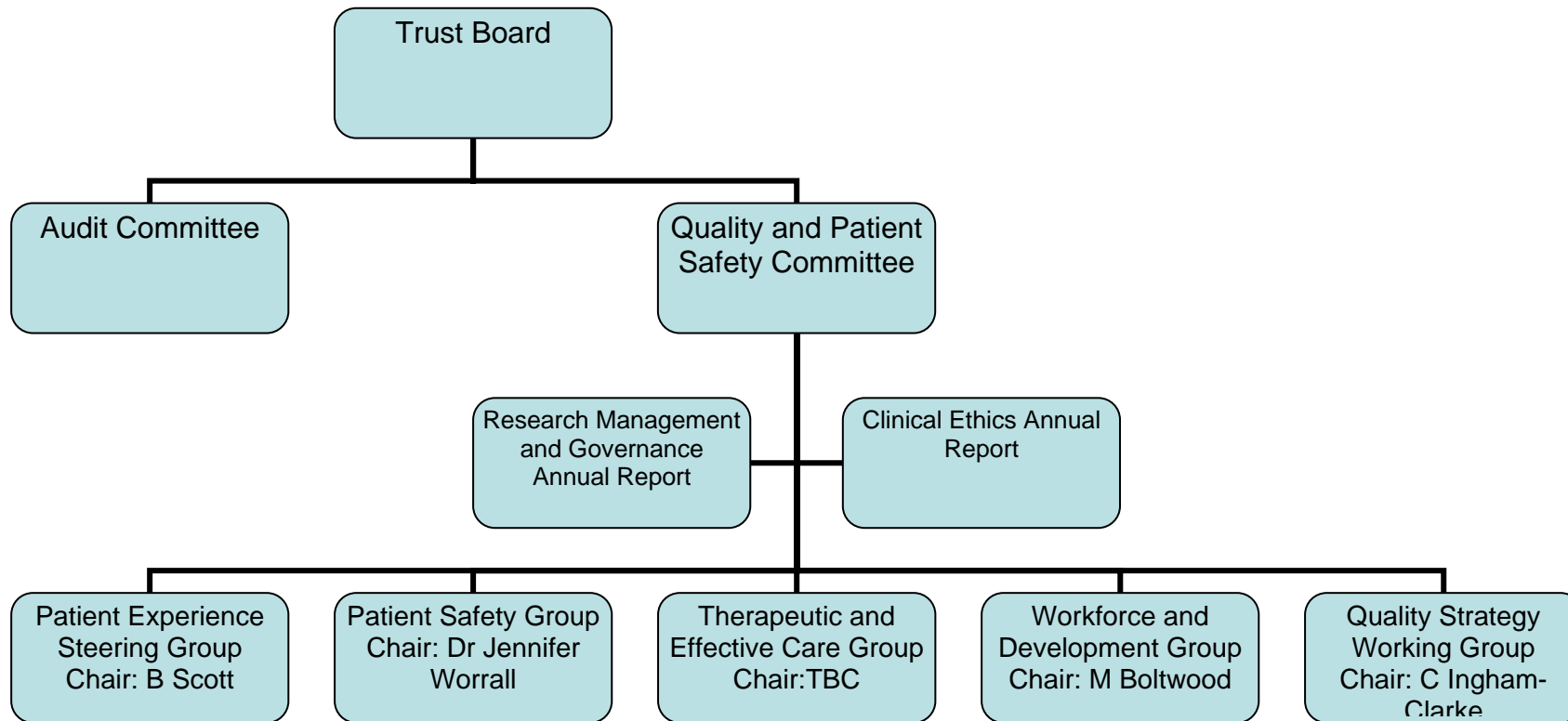
5. Reporting

- 5.1 The minutes of all meetings shall be formally recorded and approved at the next meeting. A summary in the form of action notes shall be submitted together with a formal report to Trust Board monthly.
- 5.2 The Committee will present an annual report to the Trust Board which will "which will be reflected in the Trust's annual report and annual Quality Account".

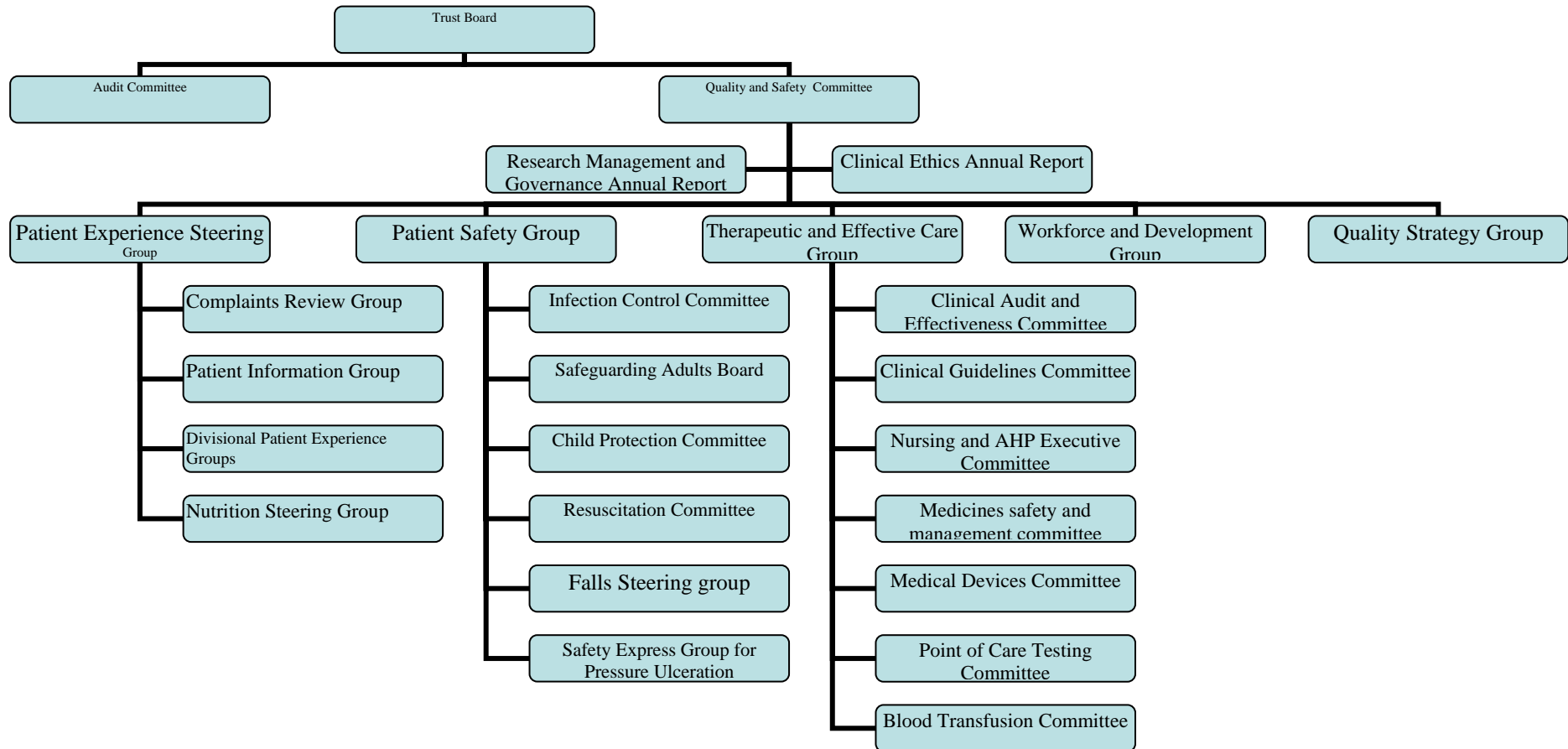
6. Review

- 6.1 The terms of reference of the Committee shall be reviewed by the Board of Directors at least annually and will be amended to reflect any change in organisational structure or legal status.
- 6.2 Next review date July 2012 or earlier in the event of change as above.

Appendix 1 – Governance Structure



Appendix 1a – Detailed Committee Structure



Appendix 2 – Quality and Patient Safety Committee Membership

- Sue Rubenstein Non Executive Director (Chair)
- Peter freedman Non Executive Director
- Anita Charlesworth Non Executive Director
- Jane Dacre Non Executive Director
- Marisha Ray Non Executive Director
- Bronagh Scott Director of Nursing and Patient Experience
- Celia Ingham-Clark Medical Director
- Greg Battle Medical Director
- Maria DaSilva Chief Operating Officer
- Helena Kania Haringey LINks (in attendance)
- David Emmett Islington LINks (in attendance)
- Mary Slow Governor

In Attendance

- TBC Assistant Director of Governance
- TBC Chair of Patient Safety Committee
- Bronagh Scott Chair of Patient Experience Group
- Clarissa Murdock Chair of Clinical Ethics Committee
- Margaret Boltwood Chair of Workforce and Development Group
- TBC Chair of Research Governance Group
- Divisional Boards twice yearly as per programme