

ANNEX 6

NHS Corby CCG and NHS Nene CCG

Joint Quality Committee

Terms of Reference

<p>Membership</p>	<p>Members:</p> <ul style="list-style-type: none"> • Joint Secondary Care Doctor (Chair) • Chief Nurse and Quality Officer (Deputy Chair)_ • GP Clinical Representation • Lay member for Patient and Public Involvement • Joint Accountable Officer • Deputy Director of Quality • Head of Nursing and Safeguarding • Director of Public Health, Northamptonshire County Council • HealthWatch Northamptonshire representative • Director of Outcomes Based Contracting
<p>Quorum</p>	<p>4 members one of whom must be the Chair or Deputy Chair and one an Executive member</p> <p>Deputies will only be permitted to attend with the approval of the Chair.</p>
<p>In Attendance</p>	<ul style="list-style-type: none"> • PA to the Chief Nurse and Quality Officer
<p>Frequency of Meetings</p>	<p>Bi-monthly</p>
<p>Accountability and Reporting</p>	<ul style="list-style-type: none"> • Accountable to NHS Corby and Nene CCGs Governing Bodies • Highlight Report t from Chair of the Committee to be presented both Governing Bodies • Approved minutes presented to both Governing Bodies
<p>Date of Approval Joint Quality Committee</p>	<p><i>August 2019</i></p>
<p>Date of Ratification by both Governing Bodies</p>	<p><i>August 2019</i></p>
<p>Effective Date</p>	<p><i>September 2019</i></p>
<p>Review Date</p>	<p><i>August 2020</i></p>

1. Constitution

The Governing Bodies of NHS Corby CCG and NHS Nene CCG (the CCGs) hereby resolve to establish a Joint Quality Committee (the Committee).

The Committee is established and powers are delegated to it by the Governing Bodies of NHS Corby and Nene CCGs in accordance with both CCGs Constitutions, Standing Orders and Scheme of Reservation and Delegation.

1.1 Joint Committees

These are permitted under the terms of the 2014 Legislative Reform Order but only for the purposes of CCGs exercising their commissioning functions. In the joint committees, both CCGs will nominate its representative member(s) and the committee will have delegated authority to make decisions on behalf of each of the CCGs. This will require each CCG to amend their Constitutions and review their governance arrangements to ensure clarity, consistency and accountability.

All joint committees will be regulated by a Memorandum of Understanding (MOU) between the constituent members, which sets out the rules under which they operate, including membership, quoracy, budgetary arrangements and dispute resolution.

These Terms of Reference set out the membership, remit, responsibilities and reporting arrangements of the Committee and shall have effect as if incorporated into each Clinical Commissioning Group's Constitution and Standing Orders.

The CCGs Governing Bodies must assure themselves that the services they commission meet appropriate levels of safety, quality and effectiveness, that safeguarding responsibilities are met and take relevant actions if that is not the case.

2. Purpose

The purpose of the Committee is to:

- Scrutinise quality and safeguarding policies and procedures and make recommendations to both CCGs Governing Bodies in order for them to be assured of the overall quality and safeguarding well-being of the CCGs and the supporting quality and safeguarding controls within the respective organisations.
- Commission any reports or surveys it deems necessary to help it fulfil its obligations.
- Receive and scrutinise independent investigation reports relating to patient safety issues and agree any further actions.
- Provide oversight of decision making processes for the various groups that monitor safety and quality.
- Ensure considerations relating to safeguarding children and adults are integral to commissioning services and robust processes are in place to deliver safeguarding duties.
- Ensure that commissioned services are delivered to the required standards of performance under the terms of the NHS Constitution, NHS Standard Contract and any other national / local performance metrics as may be stated within individual contracts and via regulators.
- Provide assurance in relation to patient equality and inclusion.
- Oversight and learning from litigation, complaints and serious incidents.

3. Membership

The Committee shall be appointed by both CCGs Governing bodies and membership will be comprised of the following:

Members:

- Joint Secondary Care Doctor (Chair)
- Chief Nurse and Quality Officer (Deputy Chair)_
- GP Clinical Representation
- Lay member for Patient and Public Involvement
- Joint Accountable Officer
- Deputy Director of Quality
- Head of Nursing and Safeguarding
- Director of Public Health, Northamptonshire County Council
- HealthWatch Northamptonshire representative
- Director of Outcomes Based Contracting

4. In attendance

- PA to the Chief Nurse and Quality Officer

Ad hoc invitations as required will be extended to individuals where they are not nominated or a member, to be in attendance at relevant meetings of the Joint Quality Committee and requested by the Chair of the Committee.

5. Quorum, Frequency of meetings and required frequency of attendance

Meeting quorum will be 4 members one of whom must be the Chair or Deputy and one an Executive member.

Members of the Committee are required to attend a minimum of 80% of the meetings held and not be absent for two consecutive meetings without prior permission of the Chair.

Members of the Committee can nominate a deputy but not for more than two consecutive meetings without the prior permission of the Chair. Deputies will only be permitted to attend with the approval of the Chair. An attendance list will be kept and circulated to the membership with the minutes.

The Committee will meet bi-monthly. Meetings for the year will be set at the beginning of each year and distributed to all members. This should fit in with the reporting arrangements to Governing Bodies.

Full minutes will be kept of all meetings, and circulated by confidential means to group members only.

6. Authority

The Committee is authorised by NHS Corby and Nene CCGs Governing Bodies to investigate any activity within its terms of reference. The Committee shall make recommendations to both Governing Bodies through the Chair of the Committee as deemed appropriate on any area within its Terms of Reference where action or improvement is required. The Committee can also recommend the provision of expert advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.

Corby and Nene CCGs Governing Bodies have collective responsibility for its operation. Both members and attendees will participate in discussions, review, provide or seek objective input to the best of the knowledge and ability, and endeavour to support the Governing Bodies in reaching a collective view. The Committee will endeavour to make decisions by reaching a consensus. Should consensus not be reached The Committee Chair will make a recommendation to Governing Bodies for approval.

7. Duties

The role of the Joint Quality Committee is to:

- Secure continuous improvement to the quality of commissioned services and to contribute to the reduction in health inequalities.
- Escalate to the Governing Bodies any issues where the quality of care being provided by all commissioned services is not being robustly monitored.
- Ensure that a clearly defined escalation process is in place for safety and quality measures, taking action as required to ensure that improvements in quality are implemented where necessary.
- Consider and review all clinical standards, safety and safeguarding issues escalated to the attention of the group and make recommendations on the best way forward.
- The Committee will satisfy itself that children's and adult safeguarding duties are being met and that robust actions are taken to address concerns.
- Receive the Minutes of all relevant sub-committees.
- Ensure that performance against contractual and other Key Performance Indicators is reported effectively and that appropriate mitigations are in place where performance falls below expected levels.
- Ensure that appropriate arrangements, including support policies, to minimise clinical risk, maximise patient safety and equalities and to secure continuous improvement in quality and patient outcomes, are in place.
- Ensure that appropriate safeguarding arrangements, including ensuring services commissioned are safe for children and adults at risk of abuse or neglect, are in place.
- Ensure that appropriate arrangements are in place to approve medicines, including the controlled entry of new drugs.
- Ensure that appropriate arrangements, including support policies, are in place to manage Individual Funding Requests.

8. Accountability and Reporting Arrangements

The Committee is accountable to and will report to both CCGs Governing Bodies on its proceedings after each meeting through a highlight report from the Chair of the Committee.

9. Sub-Committees and Reporting Groups

The Committee will support both CCGs Governing Bodies in discharging their responsibilities by providing objective assurance that processes are in place across both organisations to ensure that alignment of financial management functions.

The Committee shall have the authority to establish sub-groups/task and finish groups for the purpose of addressing specific tasks and areas of responsibility. The Terms of Reference, including the reporting procedures of any subcommittees must be approved by the Committee and regularly reviewed.

10. Declaration of Interest

The chair, voting members with support from the committee secretary manage any conflict of interest ensuring the CCGs policies are followed, including a record of any deputies nominated for special purpose e.g. to provide cover arrangements or in order to manage a conflict of interest.

All declarations of interest shall be minuted and added to the Conflict of Interest Register.

11. Administration

The Committee shall be supported administratively by the Personal Assistant to the Chief Nurse and Quality Officer whose duties in this respect will include:

- Review of the Terms of Reference in line with requirements
- Maintain agenda against a work plan/cycle of business.
- Agreement of the agenda with the Chair and attendees and collation of papers.
 - Circulation of agendas and supporting papers to Committee members at least five working days prior to the meeting
 - Other members of the Committee should submit their agenda items to the Chair or Deputy Chair for consideration
 - Taking and issuing the minutes and preparing action lists in a timely way.
 - Keeping a record of matters arising and issues to be carried forward to both Governing Bodies.
 - Maintaining an on-going list of actions, specifying members responsible, timescales and keeping track of these actions
 - Drafting of minutes for approval by the Chair within five working days of the meeting and then distributed as outlined above within 10 working days
 - Keeping an accurate record of attendance.

12. Requirement for review

These terms of reference may be amended in consultation with both CCGs Governing Bodies, to reflect change in circumstances that may arise. The Terms of Reference should be reviewed annually.

13. FOI Reminder

The minutes (or sub-sections) of the Committee, unless deemed exempt under the Freedom of Information Act 2000, shall be made available to the public, through the meeting.

14. Equality Act

Each decision made/approved by the Joint Quality Committee should align to the CCGs commitment to equality and inclusion. And by doing so, the Joint Quality Committee must be satisfied that decisions made meet the requirements of equality law, including but not limited to the Equality Act 2010; s149 Public Sector Equality Duty (PSED).