

NHS NORTH CUMBRIA CLINICAL COMMISSIONING GROUP
OUTCOMES & QUALITY ASSURANCE COMMITTEE
Terms of Reference
October 2018

1. Introduction

The Outcomes & Quality Assurance Committee is established in accordance with NHS North Cumbria Clinical Commissioning Group's (CCG) Constitution, Standing Orders and Scheme of Delegation and is a Committee of the Governing Body. These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the committee and shall have effect as if incorporated into the CCG's Constitution and Standing Orders.

The Committee is a non-executive committee of the Governing Body and has no executive powers, other than those specifically delegated in these Terms of Reference.

2. Membership

Core Membership of the Committee will be:

Lay Member for Quality & Performance	NHS North Cumbria CCG
Lay Member for Public Engagement	NHS North Cumbria CCG
Governing Body Secondary Care Doctor	NHS North Cumbria CCG
Medical Director / or nominated Deputy	NHS North Cumbria CCG
Director of Nursing & Quality (Governing Body Registered Nurse)/ or nominated Deputy	NHS North Cumbria CCG
Primary Care Development Lead	NHS North Cumbria CCG
Deputy Director of Commissioning	NHS North Cumbria CCG
Patient Safety Lead	NHS North Cumbria CCG
Senior Nurse Quality and Safety	NHS North Cumbria CCG

Meetings will be chaired by a Lay Member. In the absence of the Chair a deputy will be nominated prior to the commencement of the meeting. Other officers of the CCG will attend as appropriate.

3. Committee Support

The management lead for the Committee will be the Director of Nursing & Quality / or a nominated Deputy. The CCG will provide committee support through its Nursing & Quality Administrators. Items for the agenda are to be submitted to the administrator assigned to the Committee not later than two weeks before the date of meeting.

The Director of Nursing & Quality / or nominated Deputy will work with the administrator to:

- agree the agenda with Chair;
- collate and distribute the agenda and supporting documents;
- take minutes and keep a record of matters arising and issues to be carried forward.

4. Quorum

At least one third of the membership must be present, including one Lay/Clinical Member and one Officer Member which must be either the Director of Nursing and Quality or the Medical Director to be quorate.

5. Frequency of the meetings

Meetings shall be held monthly on such dates and times as to be decided by the Committee. Written notice specifying the business to be transacted shall be circulated at least five clear days prior to the date of the meeting. However subject to the agreement of the Chair a member of the Committee may give written notice of an emergency motion after the issue of the notice of meeting and agenda, up to one clear day before the time fixed for the meeting. The notice shall state the grounds of urgency. If in order, it shall be declared to the Committee at the commencement of the business of the meeting as an additional item to be included in the agenda. The Chair's decision to include the item or not shall be final.

6. Remit and responsibility of the Committee

This Committee will support a focus on measurement of the three dimensions of the outcome framework, patient safety, clinical effectiveness and patient experience providing a benchmark for the quality of services and supporting the NHS for the future.

Responsibilities will include:

- Providing assurance that all commissioned services are assured for patient safety, clinical effectiveness and quality and the compassion, dignity and respect that are reflected through the best patient and family experience.
- Identifying opportunities to improve outcomes in line with needs of our population and taking steps to identify all opportunities for continuous improvement in local healthcare through service performance and relevant parts of the CCG risk register.
- Approving a Quality Strategy and the Improvement Plan that supports commissioning to integrate all aspects of patient safety and quality (including safeguarding children and adults)

Event Policy & Frameworks (Both 2015) by having oversight of all incidents and Never Monitor quality, performance and patient safety across our commissioned services to improve outcomes.

- Developing innovative ways of seeking quality assurance to enable improvement in delivery of care to the local population, aligned to national strategies and changing NHS structures; this may involve working in new ways with partner organisations.
- Seeking assurance that clear escalation processes, including appropriate trigger points, are in place to enable appropriate engagement of external bodies (e.g. NHS England, NHS Improvement, the Care Quality Commission) for areas of concern across our commissioned services.
- Ensuring that the voice of the patient and their carers / families are heard and their perception of services is acknowledged , understood and facilitated to influence planning and commissioning of services, with particular regard to the safety and quality of services.
- Receiving, consider and approve a comprehensive Quality Report which identifies best practice as well as shortfalls in all health services commissioned by North Cumbria CCG for the local population and taking this report to the Governing Body through the Chair of the Outcomes and Quality Assessment Committee.
- Explore how the CCG may look at new organisational forms and how this may impact on safety and quality.

7. Reporting Structure

The Committee reports to the CCG Governing Body. The approved minutes of Outcomes and Quality Assurance Committee meetings shall be submitted to the Governing Body at which time the Chair of the committee by means of a quality report, shall draw to its attention any issues that require disclosure to Governing Body, or require executive action.

8. Policy and best practice

The Committee will apply best practice in decision making processes and shall have full authority to commission any reports or surveys it deems necessary to help it fulfil its obligations.

9. Standards of Business Conduct and Conflicts of Interest

Members of the Committee shall at all times comply with the standards of business conduct and managing conflicts of interest as laid down in the CCG's Constitution and the Business Code of Conduct Policy.

Declarations of interest will be a standing item on all meeting agendas.

Members and attendees who have any direct/indirect financial or personal interest in a specific agenda item will declare their interest. The Chair of the meeting will decide the course of action required, which may include exclusion from participation in the discussion and/or the meeting for the duration of the discussion dealing with the item for which a declaration has been made.

All declarations of interest and actions taken in mitigation will be recorded in the minutes.

9. Conduct of the committee

The Committee shall conduct its business in accordance with national guidance and relevant codes of conduct / good governance practice.

At least annually the committee will review its own performance, membership and terms of reference. Any resulting changes to the terms of reference or membership shall be approved by the Governing Body.

10. Terms of reference review date

Date reviewed: March 2018

Date approved by Committee: March 18

Date approved by Governing Body: October 2018

Date to be reviewed: March 2019