QUALITY & SAFETY COMMITTEE
TERMS OF REFERENCE

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<th>COMMITTEE</th>
<th>QUALITY &amp; SAFETY COMMITTEE</th>
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<td>PURPOSE</td>
<td>The purpose of the Quality &amp; Safety Committee “the Committee” is to provide: evidence based and timely advice to the Board to assist it in discharging its functions and meeting its responsibilities with regard to the quality and safety of healthcare; and assurance to the Board in relation to the LHB’s arrangements for safeguarding and improving the quality and safety of patient centred healthcare in accordance with its stated objectives and the requirements and standards determined for the NHS in Wales.</td>
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<td>MEMBERSHIP</td>
<td>A minimum of four (4) members, comprising:</td>
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<td>Chair</td>
<td>Independent member of the Board</td>
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<td>Vice Chair</td>
<td>Independent member of the Board</td>
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<td>Members</td>
<td>At least 2 other independent members of the Board, to include the Chair of the LHB Audit Committee and the Vice Chair of the LHB Board. The committee may also co-opt additional independent ‘external’ members from outside the organisation to provide specialist skills, knowledge and expertise.</td>
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<td>In attendance</td>
<td>The Chief Executive and all Executive Directors holding portfolios containing aspects of quality and safety of care. Other Executive Directors should attend from time to time as required by the Committee Chair</td>
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<td>By invitation</td>
<td>The Committee Chair may extend invitations to attend committee meetings as required to the following: Quality Improvement Support Unit and Technical Advisors, Heads of Services/Localities/Clinical Teams Representatives of Partnership organisations Public and Patient Involvement Representatives Trade Union Representatives as well as others from within or outside the organisation who the committee considers should</td>
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attend, taking account of the matters under consideration at each meeting.

**Secretary**

As determined by the Board Secretary.

**Member Appointments**
The membership of the Committee shall be determined by the Board, based on the recommendation of the LHB Chair - taking account of the balance of skills and expertise necessary to deliver the committee’s remit and subject to any specific requirements or directions made by the Assembly Government.

Members shall be appointed to hold office for a period of one year at a time, up to a maximum of 3 consecutive years. During this time a member may resign or be removed by the Board.

Terms and conditions of appointment, (including any remuneration and reimbursement) in respect of co-opted independent external members are determined by the Board, based upon the recommendation of the LHB Chair (and, where appropriate on the basis of advice from the LHB Remuneration and Terms of Service Committee).

**Support to Committee Members**
The Board Secretary, on behalf of the Committee Chair, shall:

Arrange the provision of advice and support to committee members on any aspect related to the conduct of their role; and

ensure the provision of a programme of organisational development for committee members as part of the LHB’s overall OD programme developed by the Director of Workforce & Organisational Development.

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<th><strong>DUTIES</strong></th>
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<td>The Committee will, in respect of its provision of advice to the Board:</td>
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<td>• oversee the initial development of the LHB’s strategies and plans for the development and delivery of high quality and safe services, consistent with the Board’s overall strategic direction and any requirements and standards set for NHS bodies in Wales;</td>
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<td>• consider the implications for quality and safety arising from the development of the LHB’s corporate strategies and plans or those of its stakeholders and partners, including those arising from any Joint (sub) Committees of the Board</td>
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<td>• consider the implications for the LHB’s quality and safety arrangements from review/investigation reports and actions arising from the work of external regulators.</td>
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<td>• The Committee will, in respect of its assurance role, seek assurances that governance (including risk management) arrangements are appropriately designed and operating effectively</td>
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to ensure the provision of high quality, safe healthcare and services across the whole of the LHB’s activities.

- To achieve this, the Committee’s programme of work will be designed to ensure that, in relation to all aspects of quality and safety:
  - there is clear, consistent strategic direction, strong leadership and transparent lines of accountability;
  - the organisation, at all levels (Service/Locality/Clinical Team) has a citizen centred approach, putting patients, patient safety and safeguarding above all other considerations;
  - the care planned or provided across the breadth of the organisation’s functions (Service/Locality/Clinical Team) and those provided by the independent or third sector) is consistently applied, based on sound evidence, clinically effective and meeting agreed standards;
  - the organisation, at all levels (Service/Locality/Clinical Team) has the right systems and processes in place to deliver, from a patients perspective - efficient, effective, timely and safe services;
  - the workforce is appropriately selected, trained, supported and responsive to the needs of the service, ensuring that professional standards and registration/revalidation requirements are maintained;
  - there is an ethos of continual quality improvement and regular methods of updating the workforce in the skills needed to demonstrate quality improvement throughout the organisation;
  - there is good team working, collaboration and partnership working to provide the best possible outcomes for its citizens;
  - risks are actively identified and robustly managed at all levels of the organisation;
  - decisions are based upon valid, accurate, complete and timely data and information;
  - there is continuous improvement in the standard of quality and safety across the whole organisation – continuously monitored through the Healthcare Standards for Wales;
  - all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the quality and safety of care provided, and in particular that:
    - Sources of internal assurance are reliable, e.g., internal audit and clinical audit teams have the capacity and capability to deliver;
    - Recommendations made by internal and external reviewers are considered and acted upon on a timely basis; and
    - Lessons are learned from patient safety incidents, complaints and claims.
- The Committee will advise the Board on the adoption of a set of key indicators of quality of care against which the LHB’s performance will be regularly assessed and reported on through Annual Reports.

**AUTHORITY**

The Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the LHB relevant to the Committee’s remit and ensuring patient/client and staff confidentiality, as appropriate. It may seek any relevant information from any: employee (and all employees are directed to cooperate with any reasonable request made by the Committee); and other committee, sub committee or group set up by the Board to assist it in the delivery of its functions.

The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board’s procurement, budgetary and other requirements.

**ACCESS**

The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Quality & Safety Committee.

The Committee will meet with Internal Audit [and, as appropriate, nominated representatives of Healthcare Inspectorate Wales] without the presence of officials on at least one occasion each year.

The Chair of the Quality & Safety Committee shall have reasonable access to Executive Directors and other relevant senior staff.

**MEETINGS**

**Quorum**

At least three members must be present to ensure the quorum of the Committee, one of whom should be the committee Chair or Vice Chair.

**Frequency of Meetings**

Meetings shall be held no less than bi-monthly, and otherwise as the Chair of the Committee deems necessary – consistent with the LHB’s annual plan of Board Business.

**Withdrawal of individuals in attendance**

The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

**FEEDER GROUPS**

The Committee may, subject to the approval of the LHB Board, establish sub committees or task and finish groups to carry out on its behalf specific aspects of Committee business. The following sub committees/task and finish groups have been established on an Interim
REPORTING

Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens.

The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.

The Committee, through its Chair and members, shall work closely with the Board’s other committees, including joint (sub) committees and groups to provide advice and assurance to the Board through the:

- joint planning and co-ordination of Board and Committee business;
- and sharing of information
  in doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board’s overall risk and assurance framework.
  This will achieved primarily through the work of the Safety Committee and Quality Assurance Group.

The Committee shall embed the LHB’s corporate standards, priorities and requirements, e.g., equality and human rights through the conduct of its business.

The Committee Chair shall:

- report formally, regularly and on a timely basis to the Board on the Committee’s activities. This includes verbal updates on activity, the submission of committee minutes and written reports, as well as the presentation of an annual report;
- bring to the Board’s specific attention any significant matters under consideration by the Committee;
- ensure appropriate escalation arrangements are in place to alert the LHB Chair, Chief Executive or Chairs of other relevant committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the LHB.

The Board may also require the Committee Chair to report upon the committee’s activities at public meetings, e.g., AGM, or to community partners and other stakeholders, where this is considered appropriate, e.g., where the committee’s assurance role relates to a joint or shared responsibility.

The Board Secretary, on behalf of the Board, shall oversee a process |
| **APPLICABILITY OF STANDING ORDERS** | The requirements for the conduct of business as set out in the LHB’s Standing Orders are equally applicable to the operation of the Committee. |
| **REVIEW** | These terms of reference and operating arrangements shall be reviewed annually by the Committee with reference to the Board. |

of regular and rigorous self assessment and evaluation of the Committee’s performance and operation including that of any sub committees established. In doing so, account will be taken of the requirements set out in the NHS Wales Quality & Safety Committee Handbook.