

## Quality and Performance Committee

### Terms of Reference

#### 1. Purpose

The Quality and Performance Committee exists to scrutinise arrangements for ensuring the quality of CCG commissioned services and to oversee the development, implementation and monitoring of performance management arrangements. The Committee also monitors equality performance in relation to health outcomes, patient access and experience, and promotes a culture of continuous improvement and innovation with respect to:

- The safety of the treatment and care provided to patients.
- The clinical effectiveness of the treatment and care provided to patients.
- The experience patients have of the treatment and care they receive.

#### 2. Status

The Quality and Performance Committee is established in accordance with the Greater Nottingham Joint Commissioning Committee's Delegation Agreement and Standing Orders, and as such, it is a sub-committee of, and accountable to, the Greater Nottingham Joint Commissioning Committee.

The Committee is authorised to create task and finish sub-groups in order to take forward specific programmes of work as considered necessary by the Committee's membership.

#### 3. Duties

- a) Scrutinise arrangements for ensuring the quality of CCG commissioned services, including scrutiny of systems to identify early warning signs of provider quality issues or failing services. This will include monitoring serious incidents, complaints and patient experience data, national and local audit findings and infection prevention and control in order to identify areas of non-compliance, themes and trends.
- b) Oversee systems regarding the development of local CQUIN targets and local Quality Premium targets, including scrutiny of all such proposed targets in terms of their potential to deliver improvements in the safety, clinical effectiveness and patient experience of commissioned services and the extent to which the targets are challenging and realistic.
- c) Review the annual Quality Accounts of providers prior to final sign off.
- d) Oversee and scrutinise arrangements for identifying and addressing variations in clinical

practice, ensuring that clinical intervention is based upon best available evidence.

- e) Scrutinise the robustness of arrangements for clinical effectiveness and clinical audit.
- f) Seek assurance that local healthcare services are being delivered by staff with the appropriate level of skills and training in order to continuously improve and promote high standards of quality and care.
- g) Oversee arrangements for ensuring that patient feedback and patient and public engagement and consultation are integral in commissioning decisions.
- h) Monitor performance in relation to Goals 1 and 2 of the NHS Equality Delivery System (better health outcomes for all / improved patient access and experience), including progress against equality objectives and associated action plans.
- i) Oversee the development, implementation and monitoring of performance management arrangements, including scrutiny of identified action plans to address shortfalls in performance. This will include performance against NHS Constitutional Standards, CCG Improvement and Assessment Framework Clinical Indicators, and other national and locally agreed indicators.
- j) Consider specific areas of performance, focussing in detail on specific issues where provider performance is showing deterioration, or where there are quality concerns.
- k) Oversee arrangements for data quality to ensure confidence in the performance information being used for monitoring and reporting purposes.
- l) Oversee and scrutinise the organisational response to all relevant Directives, Regulations, policies, reports, reviews and approved codes of practice as issued by the Department of Health and Social Care, NHS England and other regulatory bodies / external agencies to gain assurance that the appropriate actions are being undertaken and are effective.
- m) Oversee the identification and management of risks relating to the Committee's remit.
- n) Approval and monitoring of policies within the Committee's remit.

#### **4. Membership**

The Quality and Performance Committee will have 12 members, comprised as follows:

##### Lay Members

- a) Three Lay Members, including at least one Lay Member of the Greater Nottingham Joint Commissioning Committee.

##### Clinical Members

- b) Independent Nurse

- c) Independent Secondary Care Doctor
- d) Two GP Leads
- e) Chief Nurse and Director of Quality
- f) Deputy Director of Nursing and Quality
- g) Chief Pharmacist

Managerial Members

- h) Director of Information and Performance
- i) Director of Contracting and Procurement (or nominated deputy)

Other officers may be invited to attend meetings when the Committee is discussing matters that fall within their areas of responsibility.

The Committee's members and attendees will be drawn from employees and appointees of the four Greater Nottingham CCGs.

## **5. Chair and Deputy**

A Lay Member of the Greater Nottingham Joint Commissioning Committee will Chair the Quality and Performance Committee, with one of the other Lay Members being nominated to deputise in the Chair's absence.

## **6. Quorum**

The Quality and Performance Committee will be quorate with a minimum of six members, to include at two lay members, three clinical members and one managerial member.

To ensure that the quorum can be maintained, Committee members are able nominate a suitable deputy to attend a meeting of the Committee that they are unable to attend. Committee members are responsible for fully briefing their nominated deputies and for informing the secretariat so that the quorum can be maintained.

If any Committee member has been disqualified from participating in the discussion and/or decision-making for an item on the agenda, by reason of a declaration of a conflict of interest, then that individual shall no longer count towards the quorum.

## **7. Frequency of Meetings**

The Quality and Performance Committee will meet no less than six times per year.

Meetings of the Quality and Performance Committee, other than those regularly scheduled above, shall be summoned by the secretary to the Committee at the request of the Chair.

## **8. Secretariat and Conduct of Business**

Secretariat support will be provided to the Committee to ensure the day to day work of the Committee is proceeding satisfactorily.

Agendas and supporting papers will be circulated no later than three working days in advance of meetings and will be distributed by the secretary to the Quality and Performance Committee.

Any items to be placed on the agenda are to be sent to the secretary no later than five working days in advance of the meeting. Items which miss the deadline for inclusion on the agenda may be added on receipt of permission from the Chair.

The Quality and Performance Committee agenda will be agreed with the Chair prior to the meeting.

## **9. Minutes of Meetings**

Minutes will be taken at all meetings, presented according the corporate style.

The minutes will be ratified by agreement of the Quality and Performance Committee at the following meeting.

The Chair of the Quality and Performance Committee will agree minutes if they are to be submitted to the Greater Nottingham Joint Commissioning Committee prior to formal ratification.

## **10. Conflicts of Interest Management**

In advance of any meeting of the Quality and Performance Committee, consideration will be given as to whether conflicts of interest are likely to arise in relation to any agenda item and how they should be managed. This may include steps to be taken prior to the meeting, such as ensuring that supporting papers for a particular agenda item are not sent to conflicted individuals.

At the beginning of each Committee meeting, members and attendees will be required to declare any interests that relate specifically to a particular issue under consideration. If the existence of an interest becomes apparent during a meeting, then this must be declared at the point at which it arises. Any such declaration will be formally recorded in the minutes for the meeting.

The Chair of the Committee will determine how declared interests should be managed, which is likely to involve one the following actions:

- a) Requiring the individual to withdraw from the meeting for that part of the discussion if the conflict could be seen as detrimental to the Committee’s decision-making arrangements.
- b) Allowing the individual to participate in the discussion, but not the decision-making process.
- c) Allowing full participation in discussion and the decision-making process, as the potential conflict is not perceived to be material or detrimental to the Committee’s decision-making arrangements.

<b>11. Reporting Responsibilities and Review of Committee Effectiveness</b>
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The Quality and Performance Committee will report to the Greater Nottingham Joint Commissioning Committee through regular submission of minutes from its meetings. Any items of specific concern, or which require Greater Nottingham Joint Commissioning Committee approval, will be the subject of a separate report.

The Committee will provide an annual report to the Greater Nottingham Joint Commissioning Committee to provide assurance that it is effectively discharging its delegated responsibilities, as set out in these terms of reference. The Committee will conduct an annual review of its effectiveness to inform this report.

<b>12. Review of Terms of Reference</b>
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These Terms of Reference will be formally reviewed on an annual basis, but may be amended at any time in order to adapt to any national guidance as and when issued.

Any proposed amendments to the Terms of Reference will be submitted to the Greater Nottingham Joint Commissioning Committee for approval.

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