



Clinical Specialist Services Care Group
Terms of Reference for
Quality & Governance Meeting
November 2023

Clinical Specialist Services Care Group

Quality & Governance Meeting

TERMS OF REFERENCE

1. Purpose and Scope

The purpose of the Quality & Governance Meeting is to provide a forum through which the care group reviews, and continuously improves, standards of care and clinical practice.

The aim of the meeting is to review the safety and experience of patients in our care, and the effectiveness and outcomes of their treatment, to assure ourselves that required standards of care are met and to learn and improve in line with the high standards we aspire to.

2. Chairperson and membership

The meeting will be chaired by the Associate Director of Governance and in their absence by designated officer such as Care Group Clinical Director or Associate Director of Operations.

All general managers are expected to attend. Allocated leads /champions for particular aspects of governance are also expected to attend where their area is being discussed. AHPs, pharmacists and scientists affiliated to the speciality / service are encouraged to do so; as is the Quality Manager. Other medical, nursing and support staff are welcome to attend and contribute.

Attendance at meetings will be monitored. Attendees or deputies from each service area are expected to attend a minimum of two thirds of the meetings held in any rolling 12 month period.

3. Frequency; Quorum and administration of meetings

The meetings will be held monthly and will be quorate when 4- 5 services are represented and the chair is in attendance

All meetings will have administrative support. Minutes will be required. However, certain items (see 4 below) will need to be noted and actions agreed during the meeting and logged for follow up.

4. Reporting

In keeping with the purpose of the meeting, the emphasis will be on encouraging active discussion and learning. As such, the group is not required to make formal reports; simply to ensure that the Care Group is aware of significant matters arising.

At the end of each meeting, consideration will be given to any matters that should be reported to the Care Group Management Meeting. These may include matters to be escalated on grounds of risk, or due to the requirement for Care Group support, significant achievements or improvements, or lessons learned with application beyond the specialty / service. The Chairperson should ensure that a note of such items is taken at the meeting and that they are communicated, in writing, to the Care Group Management Team.

In addition, there is a need to ensure that all staff within the Care Group are made aware of the key messages from the meeting, for example in respect of lessons learned or agreed changes in practice. Again, the Chairperson should ensure that a note of such items is taken at the meeting and a formal bulletin of key messages is produced and issued within one week of the meeting taking place.

5. Responsibilities

The group's core responsibilities are set out in the attached work plan (Annex 1). As noted under 1 above, the scope of the meetings can be extended at the group's discretion. Where agreed, wider responsibilities should be added to the work plan.

It is the responsibility of the attendees to ensure they have reviewed all agenda items prior to attendance and come to the meeting prepared.

6. Meeting arrangements

Standing information will be designed to be succinct and easy to digest, minimising the time required to prepare for meetings and allowing meetings to focus on dealing with issues arising, and on learning and improvement.

Approximately one week prior to the meeting, the meeting administrator will issue the final agenda and information in the form of documents to all attendees.

Adopted: 23 November 2023

Review Date: 23 November 2024

Annex 1 Work plan

Activity	Frequency
Approval of Clinical Audit forward plan	Annually
Monitoring of clinical audit progress and completion of action plans	Monthly (by exception)
Receipt and approval of clinical audit report and action plans	As and when finalised
Patient feedback and learning – survey results, Friends and Family, complaints, compliments	Monthly
Patient Safety Alerts – awareness and actions	Monthly
Learning from Incidents: <ul style="list-style-type: none"> • Serious Incidents in the specialty • Approval for sign prior to forwarding to Safety Committee • Other RCAs completed in the specialty • Learning from incidents elsewhere 	Monthly
Third party reviews including CQC <ul style="list-style-type: none"> • Readiness / issues (for those affecting the specialty) • Outcomes and learning • Action tracking 	Monthly
Monitoring and approval of compliance with NICE guidelines	Monthly
Benchmarking / clinical outcomes data	Consider at each meeting
Care Group/ speciality policies/ procedures/ guidance for approval	Consider at each meeting
Review Care Group level risks (risk register) and approval of new and closed risks.	Monthly
Monitoring of the completion of Internal Audit recommendations	Monthly
Care Group key messages communication	In closedown of each meeting
Key messages to wards and teams	In closedown of each meeting
Matters to be escalated to the Care Group	In closedown of each meeting