

**QUALITY COMMITTEE**

**TERMS OF REFERENCE**

<b>Policy</b>	√
<b>Review of Policy</b>	√
<b>Review of Trust Area of Activity</b>	√
<b>Operations</b>	<b>X</b>
<b>Resource Management</b>	<b>X</b>

The Quality Committee is responsible to the Trust Main Board for the following main functions:

1. To provide leadership and assurance to the Board on the effectiveness of the Trust's arrangements for quality, ensuring there is a consistent approach throughout the Trust, specifically in the areas of:
  - Safety (Patient & Health & Safety)
  - Effectiveness
  - Patient Experience
2. To oversee the development and publication of an annual Quality Account, that identifies the improvement priorities for the coming year appropriately influenced by key stakeholders
3. To scrutinise the Divisions on their performance against the Quality Framework that includes the relevant Strategic Objectives, and the priorities set out in the Quality Account.
4. To examine in-depth key quality issues and thereby contribute to the development of a quality culture
5. To receive regular reports from specialist committees providing assurance of compliance to specialist systems as set down in the Quality Framework through the process of annual reports.
6. To initiate and monitor investigation of areas of serious concern as necessary and ensure resulting action plans are implemented.

**Membership & Responsibilities**

**Chair**  
Non-Executive Director

**Vice Chair**  
Non-Executive Director

**Members**  
One further Non-Executive Director  
Chief Executive  
Nursing Director  
Medical Director  
Director of Clinical Strategy  
Governors representatives (4)  
CCG representative  
Director of Safety  
Head of Patient Experience  
Invited representatives as appropriate

**Officer**  
Trust Secretary

**Quorum**  
The Committee shall be quorate when at least 1 Non-Executive Director (which could be the Chair of the Trust), 2 Executive Directors (one of whom should have a clinical background) attend.

**Frequency of Meetings**  
Eight times per year

**Reporting Line**  
Trust Main Board

7. Through the quarterly summary reports receive assurance reports from the Quality Standards Review Group of compliance with CQC's standards
8. To review reports from external bodies to assure itself, and the Board, that the necessary steps are being taken to deal with any issues raised and that action plans are being implemented and reviewed.
9. To monitor the key performance indicators relevant to areas of quality.

**Sub-Committees**

Patient Safety Forum  
Health & Safety Committee  
Patient Experience Strategic Group  
Hospital Medicines Management  
Committee  
Other Specialist Committees  
Quality Standards Review Group

**Submission/Availability of Minutes**

Minutes reported to the next Board meeting