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Quality, Safety and Improvement Committee Terms of Reference and Operating Arrangements

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1. Introduction

In line with Section B, 3 and 7 of the Standing Orders, the Board shall nominate annually a Committee(s), which covers Information Governance and Quality and Safety. This Committee will be known as the **Quality, Safety and Improvement Committee** and its terms of reference will extend to include information governance. It will also focus on all aspects aimed at ensuring the quality and safety of the services provided by Public Health Wales.

The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.

These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all committees.

2. Purpose

The purpose of the Quality, Safety and Improvement 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 public health services and programmes delivered to improve population health outcomes. This will include considering the Annual Quality Statement and if appropriate recommending it to the Board for approval.

- **assurance** to the Board in relation to the Trust's arrangements for safeguarding and improving the quality and safety of service user/person/population centred health provision in accordance with its stated objectives and the requirements and standards determined for the NHS in Wales and other relevant bodies
- **approve** on behalf of the Board policies, procedures and other written control documents in accordance with the Scheme of Delegation.

3. Delegated Powers

The Committee will, in respect of its provision of advice to the Board:

- Oversee the effectiveness of the Trust's Quality and Impact Framework or any subsequent quality related organisational frameworks, strategies and plans for the development and delivery of high quality and safe services/programmes and functions provided by Public Health Wales, consistent with the Board's overall strategic direction and any requirements and standards set for NHS bodies in Wales.
- Prepare for any implications arising from proposed Quality and Engagement Bill or other relevant legislation, guidance or initiatives.
- Consider the implications for quality and safety arising from the development of the Trust's corporate strategies and plans or those of its stakeholders and partners, including those arising from any Joint (sub) Committees of the Board.
- Ensure there are arrangements in place to monitor the voice of the service user and/or the citizen as being central to improving the quality and effectiveness of services, functions and programmes. Provided through a range of sources such as concerns, incidents and proactive arrangements to gain feedback.
- Oversee the development and effective implementation of a quality dash board.
- Monitor and, where appropriate, identify those risks which are relevant to the Quality, Safety and Improvement Committee and provide assurance to the Board and, where appropriate, the Audit and Corporate Governance Committee that the risks are being managed appropriately.
- monitor the implementation and effectiveness of the Public Health Wales Quality Improvement Hub in supporting organisational

capability and capacity leading to a culture of continuous quality improvement.

The Committee will, in respect of its assurance role:

- seek assurances that governance (including risk management) arrangements are appropriately designed and operating effectively to ensure the provision of high quality, safe public health services/programmes and functions across the whole of the Trust's activities
- provide assurance to the Board that there are robust systems and processes in place which can demonstrate quality, safety and effectiveness across all services/programmes and functions provided by Public Health Wales, which are consistently applied and underpinned by an appropriate evidence base and/or ongoing evaluation
- ensure the improvement in the standard of quality and safety across the whole organisation, as appropriate via the continuous monitoring of the Quality and Impact Framework, Health and Care Standards for Wales and other relevant standards
- ensure all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the quality, safety and effectiveness of services, programmes and functions, and in particular that:
 - sources of internal assurance are reliable, for example, internal audit and quality/clinical audit have the capacity and capability to deliver in divisions/teams;
 - recommendations made by internal and external reviewers are considered, acted upon on a timely basis and their implementation monitored;
 - there is evidence of a culture of reporting and learning lessons with an emphasis on continual improvement, arising from near misses, incidents, Serious Untoward Incidents, concerns, claims and feedback from service users and the public;
 - the Committee receives assurance that there are effective arrangements in place for areas of statutory responsibility, including Infection Prevention and Control, Safeguarding, and Service User Experience.

6.2 Attendees

In attendance:

Executive Director of Quality, Nursing and Allied Health Professionals (Lead Executive)
Executive Director of Public Health Services/Medical Director
Executive Director of Health and Wellbeing
Director of NHS Quality Improvement and Patient Safety/Director 1000 Lives
Governance and General Manager for Quality, Nursing and Allied Health Professionals Directorate
Chief Risk Officer and Head of Information Governance
Assistant Director of Quality and Nursing
Assistant Director of Integrated Governance
Board Secretary and Head of Board Business Unit

Other Directors should attend from time to time as required by the Committee Chair.

Up to two Trade Union Representatives and the Chief Executive will have a permanent invite to attend the Committee. In addition to this others from within or outside the organisation who the Committee considers should attend, will be invited taking account of the matters under consideration at each meeting.

6.3 Quorum

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair or Vice Chair (where appointed).

7. Frequency of Meetings

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary.

8. Relationships and accountabilities with the Board and its Committees/Groups:

The Quality, Safety and Improvement Committee must have an effective relationship with the Audit and Corporate Governance Committee, the People and Organisational Development Committee and any other Committees or sub-committees of the Board in order for it to fully understand the system of assurance for the Board as a whole. It is very important that the Quality, Safety and Improvement Committee

remains aware of its distinct role and does not seek to perform the role of other Committees.

9. Applicability of Standing Orders to Committee Business:

The requirements for the conduct of business as set out in the Trust's Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

- Quorum (*see paragraph 6.3*)