

Terms of Reference

Joint Portsmouth Hospitals NHS Trust (PHT) Clinical Quality Review Meeting- a sub-group of the PHT Joint Contract Review Meeting

1.0 Constitution

- 1.1 The Portsmouth Hospitals NHS Trust (PHT) Joint Contract Review Meeting (JCRM) hereby resolves to establish a sub-group to be known as the PHT Clinical Quality Review Meeting (CQRM). The meeting is a sub-group of the PHT JCRM and has no executive powers, other than those specifically delegated by the PHT JCRM in these Terms of Reference.

2.0 Purpose

- 2.1 The primary purpose of the group is to jointly oversee the compliance of quality assurance from the PHT NHS Acute Contract, Schedule 2.2, Schedule 3 Parts 4, 4a, and Schedule 12 on behalf of the PHT JCRM.
- 2.2 It is the means through which the PHT JCRM is assured of the quality of services being delivered within the above stated schedules, to those who use services directly provided by PHT or those services commissioned by Hampshire PCT and Portsmouth City tPCT (Co-ordinating Commissioners) and other PCT's and Trusts (Associate Commissioners) on their behalf. It is also the means through which PHT and people using provided services feel confident that the PHT JCRM understands the issues and obstacles being encountered with regard to Schedules 2.2, Schedule 3 parts 4, 4a and Schedule 12.
- 2.3 It is the meeting at which all elements of the PHT delivery of services under the above stated Schedules will be brought together to examine the quality, responsiveness and patient experience of said provided services.
- 2.4 The PHT CQRM will work closely with the PHT JCRM for those aspects of Clinical Quality Review (as per Clause 33 of the Contract). The Clinical Quality Review Meeting shall consider and discuss, without limitation:
- The monthly Clinical Quality Performance Report;
 - Any Serious Untoward Incidents or reports or investigations of Serious Untoward Incidents;
 - Any Patient Safety Incidents or reports or investigations of Patient Safety Incidents;
 - Any Patient deaths;
 - Any information, notification or advice received from HCC/Monitor or any Regulator which relates to or has a bearing upon the Provider provision of the services;
 - Any JCI Report;
 - Any progress report relating to a Remedial Action Plan; and
 - Any RCA Report

3.0 Duties and objectives

3.1 The main functions of the group will be to:

- Review the Monthly Clinical Quality Performance Report
- Establish and maintain that Schedules 2.2, 3 parts 4 and 4a and Schedule 12 within the contract are a key organisational priority with PHT, and ensure that the Trust fulfills its legal duty to provide quality care to patients with regard to the above Schedules
- Agree with PHT the priorities and annual work plans for the assurance of quality services and ensure that these are in line with the requirements as set by Schedules 2.2, 3 parts 4 and 4a, Schedule 12
- provide the dashboard evidence of these work plans, within a report, monitoring the activities and providing support for their work
- monitor performance against planned work programmes, recommending remedial action as required
- Monitor that processes are in place to assess and monitor performance against the Schedules stated above; (i.e., document, monitor and report any improvement or significant lapses in compliance; support, challenge, monitor and report on the work of the meetings sub-groups)

4.0 Scope of authority and decision-making

4.1 The Group is authorised to undertake any actions within its Terms of Reference.

4.2 It may pursue any action that will facilitate or achieve the standards within the Contract relating to Schedules 2.2, 3 parts 4,4a and Schedule 12.

4.3 The Group may seek any information it requires as per Clause 33 of the Contract.

4.4 The Group has the power to co-opt others and may obtain outside independent professional advice and secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.

5.0 Membership and attendance

5.1 The Group will comprise of the following:

- Portsmouth City teaching PCT Commissioning Quality Leads
- Hampshire PCT Commissioning Quality Leads
- Portsmouth Hospitals NHS Trust Provider Quality Leads
- Appropriate Clinical Leads

One of these shall be the Chair of the Committee appointed as such by the PHT JCRM. All members are expected, if unable to attend, to provide a fully briefed deputy.

5.2 A member of the PPIF shall be invited to attend meetings of the Group.

5.3 Representatives from provider and commissioning organisations may be invited when relevant to the discussion.

5.4 Attendance will also be expected from key functions within the Trust (such as clinical audit, risk and complaints leads, etc).

5.5 A quorum will comprise at least 4 persons including the chair

6.0 Frequency

6.1 Meetings shall be held not less than 10 times per year with a 'Rolling Schedule' of Agenda Items as set out in Appendix 1.

7.0 Management

- 7.1 Portsmouth City teaching PCT shall provide business services and technical support to the Committee.
- 7.2 Agendas and papers will be distributed no less than 5 working days in advance of the meeting. Notes from the meeting shall be produced no later than 5 working days afterwards.
- 7.3 The minutes of the Group shall be formally recorded and submitted to the PHT JCRM. Any member of the Group may draw to the attention of the PHT JCRM any issues that require disclosure, or require executive action.
- 7.4 The Group will also:
- receive scheduled reports (set out as appendix 1) from those groups, agreed from time-to-time as being relevant to the Group or as notified by the PHT JCRM, PCTPCT Commissioning Clinical Standards and Clinical Governance Committee, Hampshire PCT Governance & Healthcare Assurance Committee
 - commission short-life 'Working Groups', to consider specific pieces of work identified as a consequence of discussion of reports; and
 - work to a specimen agenda containing:
 - a) outstanding business from previous meeting(s);
 - b) receipt of reports, on a 'rolling schedule' as set out in Appendix 1;
 - c) consideration and approval of activity relating to the Schedules 2.2, 3 parts 4,4a and Schedule 12 of the Contract (Assurance)
 - d) confirmation of (any other) activity associated with SUI performance monitoring
 - e) any other issues pertaining to effective quality provision of services relating to Schedules 2.2, 3 part 4, 4a and Schedule 12

8. Review

- 8.1. These Terms of Reference shall be reviewed by the Committee at its first meeting, with recommendations made to the PHT Joint Contract Review Meeting for any amendments. Thereafter, the Terms of Reference will be reviewed annually by the PHT Clinical Quality Review Meeting to ensure they are still appropriate.

Date Approved:

Date for Review:

Appendices: (1) Rolling Schedule of Reports

Appendix 1

'Rolling Schedule' of reports to the PHT CQRM

| Month | Agenda items | Author |
|-------|---|--------|
| | Quality Review Report | |
| | Patient Safety Clinical Outcomes Patient Experience Intelligence | |