



NEW Acute Clinical Governance Committee

TERMS OF REFERENCE

June 2016

The purpose of the Clinical Governance Committee is to support and co-ordinate effective clinical governance arrangements across the Programme ensuring that the Programme is able to demonstrate high standards and a commitment to service improvement.

It is a multi-disciplinary committee which receives feedback from sub-groups, sets priorities and agrees plans for clinical governance activities within programme. It monitors all aspects of clinical governance.

It is a forum to share ideas, good practices and learning, Clinical Governance issues and ensure a consistent approach across the Programme.

The Clinical Governance Committee will meet monthly and at least 10 times during a calendar year.

MEMBERSHIP

Membership will be from all clinical areas within the zone and the meetings will be chaired by the Clinical Director.

Representation from the multi disciplinary team:

- ◆ Nursing
- ◆ Medical staff
- ◆ Psychology
- ◆ Occupational therapy
- ◆ Physiotherapy
- ◆ User Voice
- ◆ Clinical Governance Facilitator
- ◆ Dietician
- ◆ Pharmacy
- ◆ Co-opted members will be invited dependant on the issues to be discussed.

Representation from programme Clinical Governance Committee sub-groups.

A quorum shall be the minimum attendance of at least 6 members covering 3 professional groups. For this purpose all AHP's will count as one group.



RESPONSIBILITY OF MEMBERS

- ◆ To represent their clinical area / discipline
- ◆ To attend and participate fully in the meetings
- ◆ To read the papers for the meeting beforehand
- ◆ To communicate outcomes/information from their meeting to their team.
- ◆ To take responsibility to action points identified for them or indicate if they are unable to implement actions in the timescale agreed.
- ◆ To send apologies in advance of the meeting if they are unable to attend.
- ◆ If unable to attend, the member should try to arrange a substitute representative.
- ◆ The Clinical Director has lead responsibility for the co-ordination of clinical governance within the service area.

AGENDA OF THE MEETING

- ◆ The agenda of the meeting will be formulated and circulated at least 2 working days in advance of the meeting.
- ◆ All papers required will be forwarded with the agenda.
- ◆ Items / papers tabled at the meeting will be kept to a minimum and need to be noted to the Chair prior to the meeting
- ◆ Presentations at the meeting need to be agreed with the Chair via the Clinical Governance Facilitator.
- ◆ The agenda will be prepared in line with an agreed programme of work which includes some standing items.
- ◆ The agenda will ensure the following are discussed on a regular basis:
 - ◆ Effectiveness – clinical audit, KPIs, staffing, training, information governance
 - ◆ Safety – incidents, health & safety, risk register, learning from serious incidents
 - ◆ Experience – user voice feedback, carer feedback, PALS and complaints data

REPORTING MECHANISMS

Reports will be provided to the Trust Clinical Governance Committee monthly in line with the reporting schedule.

The Programme will hold a Clinical Governance Health check review annually.

