



NEW Community Care and Recovery 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.

